

minor cases on the outskirts of the settlements, and is quite an unassuming person) had been in attendance nearly three days, and was very desirous of my assistance. On reaching the house I found the patient apparently suffering tolerably strong and regular labour pains—very large abdomen, though a small slightly formed woman. I asked how long she had been in labour and was told three days, and that the pains had been tolerably regular and at times very strong. As soon as I had warmed myself, therefore, I proceeded to make a vaginal examination, but neither with the index finger of my right hand, or with the two forefingers of my left, could I reach the os uteri. I therefore proceeded to make an examination of the abdomen, which was very large and evidently contained a large amount of fluid. This roused my suspicions, and I proceeded to examine the breasts: they contained milk which I drew from them in small quantity. There was also a perfect areola with the glandular follicles quite prominent; and the patient, who had borne a child about two years before, positively declared she had felt the motions of the child for the last four or five months, though on questioning her closely she acknowledged the motion was different to that in her former pregnancy. I now determined to find the os uteri, though it was rendered very difficult owing to the dry and rigid state of the vagina—though Dr. ——— assured me this passage had been in a state of relaxation the day before. This probably was the case, but owing to his numerous attempts to examine the mouth of the womb, it had become hot and dry. I therefore injected a little warm oil, and directed the patient to be taken out of bed and supported in an erect posture for a few minutes, and then proceeded to make another vaginal examination with the index and middle fingers of my left hand, when by using considerable exertion I succeeded in reaching the os uteri, but with every contrivance short of introducing my whole hand, which the state of the parts forbade, I was unable to trace the neck of the uterus above a quarter or half an inch from the mouth. The state of the latter was however sufficient to indicate clearly that if pregnant at all the patient was not more than four or five months advanced at furthest. I therefore directed her to be placed in bed again, and assured her she was not in labour. This statement was evidently discredited by the whole party, patient, nurses, &c. I then questioned her more closely, and learned she had ceased to menstruate nine months previously, and from soon after that time had gradually increased in size, and that some four or five months since she had first felt what she considered to be the motions of the child, and that she had continued to feel them occasionally ever since. (This must either have been the rolling of the sac or the fluctuation in it, or altogether imaginary.) Now, therefore, taking into consideration that she had ceased to menstruate for nine months, and