

On account of the immunity from sickness of the stomach it gives this anæsthetic is much used in ovariectomy; and on account of the rapidity with which persons can be brought under its influence it is preferred in some English ophthalmic institutions where many operations are performed.

Sir Spencer Wells said, at the meeting of the British Medical Association in 1877, that he had, five years previously, made known his opinion that all the advantages of complete anæsthesia, with fewer drawbacks, could be obtained by the use of bichloride of methylene than by any other known anæsthetic. He had based that opinion on an experience of five years and three hundred and fifty serious operations. During the next five years, from 1872 to 1877, he had employed it in over six hundred cases of ovariectomy and many other cases of surgical operations, and that his former opinion had been fully confirmed. Given properly diluted with air, this anæsthetic had, in his experience of ten years—with more than a thousand operations of a nature unusually severe as tests of an anæsthetic proved to be, without a single exception, applicable to every patient, perfectly certain to produce complete anæsthesia, relieving the surgeon from all alarm and even anxiety; and its use had never been followed by any dangerous symptoms which could be fairly attributed to it.

With regard to the mode of administration, Junker's apparatus is certainly the best, as by this means the patient cannot possibly breathe the anæsthetic vapor without air, a current of which is pumped through the liquid to be inhaled, and with which it is charged to the extent of three and a half or four per cent. But as this apparatus necessitates the entire attention of some one to work it, it is more suitable for hospital practice where the services of a chloroformist can be retained. I use an inhaler consisting of a tin box made to fit accurately to the face by means of an air-cushion around its edges, which can be re-inflated whenever the inhaler ceases to make a perfect fit. There is a wire cage containing a sponge upon which the anæsthetic is dropped or poured, and through which all air must pass to get to the patient. But any ordinary inhaler would do, and indeed in obstetric practice I prefer a handkerchief, which is less apt to alarm the patient whom I tell to moisten it with the A. C. E. mixture from time to time. In the intervals between

the pains I tell her to keep it folded up tight in her hands. I do not consider it necessary nor advisable to render the patient completely unconscious. I prefer to content myself with merely dulling the pain until the head is coming through the vulva, when I allow her to take enough to put her completely under its influence. It must be remembered that the barometric pressure and the hygrometricity or moisture of the atmosphere makes a great difference in the amount of vapor given off from any volatile liquid. So that it is necessary to give the patient more air on a fine dry day than in dull wet weather. In fact, air is a thing that no anæsthetic or other vapor can for more than a minute or two replace with safety, and I can see no reason or right in crowding the anæsthetic into a struggling patient. If we want to produce anæsthesia by asphyxia we need not use ether or chloroform; simple nitrogen will do equally well.

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To sum up : 1. It is an effective general anæsthetic, producing as deep insensibility as chloroform.

2. Its action is rather more rapid than chloroform, but to develop its effects more of it is required, the proportion being about as 6 is to 4.

3. It produces a less prolonged second degree of narcotism than other anæsthetics.

4. When its effects are fully developed the narcotism is very prolonged and is reproduced with great ease.

5. Its influence on the nervous centres is more uniform, and it creates little if any disturbances or break of action between the respiratory and circulatory functions.

6. The final escape from the organism is rapid, so that the symptoms of recovery are sudden.

7. In some cases, but very rarely, it produces vomiting.

8. When it kills it destroys by equally paralyzing the respiratory and circulatory mechanism.

I feel sure that if any of you who have not tried it will give the A. C. E. mixture a fair trial you will not fail to be pleased with it. All those who have tried it have expressed their complete satisfaction with it, while for my own part, especially in my obstetric practice, I am simply enthusiastic.