

and Preacher, in both of which capacities he busied himself when there was a dearth of business in his regular line; this little digression appears the more necessary, as explanatory of the reason why I had not been called in at an earlier period, as for several years I had been the physician to the lady's family. I was certainly surprised when I received a note from the husband requesting my immediate presence, and also to bring forceps and craniotomy instruments.

On my arrival I was informed that, three days before, the patient had been taken in labour with her first child, and that the husband, unwilling to take the sole—if any—charge of the case, had called upon the other physician to officiate, as among a certain class he enjoyed some reputation as a “woman and baby doctor.” He came in the evening of the first day and, with occasional short remissions, had been since nearly constantly in attendance at her bed side.

The following particulars were communicated to me:—

The labour had appeared to progress favourably so far as the *quility* and regularity of the expulsive efforts were concerned, but no advance had been made in the descent of the child's head, the proper presentation had not been made out, though it appeared satisfactory that the head and nothing else presented; at a very early period of the labour—during the first night—when the os was but partially dilated, he had ruptured the membranes (!) and had “helped” the patient since by the constant introduction of the finger in the vagina, thereby keeping up a never-ceasing irritation of the soft parts. This condition of things continued through that night and the day following, when, no progress having been made, in one of the numerous examinations he accidentally discovered some sort of tumour or bag directly behind the symphysis pubis, which, becoming more tense and prominent during the play of uterine action, he wisely concluded that it could be nothing else save the membranous bag of another child, and that filling up the vagina it most probably interfered with the exit of the first one so long expected; he set to work to rupture the bag, and a tough job he found it to be; however he persevered, and after nearly half an hour's toil he worked the finger through, a few ounces of water were immediately evacuated, and necessarily the tumour disappeared. He informed me, and I verily believe him, that it was the toughest and strongest “bag of waters” he had ever ruptured in a practice of over thirty years! And well he might fearlessly express that opinion as the sequel will show. Nothing, however, was gained by this procedure; and in spite of bleeding, tartarized antimony, and, I believe, the warm bath, not forgetting alternate and repeated doses of *secale cornutum* and McMunn's Elixir of Opium, the patient became more and more exhausted, highly nervous, and things appearing so very unpromising that the mother of the patient urged my attendance.

Having been made acquainted with the foregoing particulars, I proceeded to make an examination, to which the patient objected solely upon the ground that she was so sore, and that she could not be touched; I poured a small quantity of sweet oil in my right hand which was introduced with the utmost gentleness and as far as could be done without increasing her sufferings, and the oil carefully and freely applied to every portion of the vaginal canal, which was found to be very dry, extremely hot and sensitive, and exhaling the strong and unplea-