

may persist notwithstanding all the causes of irritation existing at a level with the diseased uterus and its appendages.

PUERPERAL CONVULSIONS TREATED
BY VENESECTON AND OLEUM
TIGLII.

BY J. B. HOWELL, M.D., JARVIS, ONT.

Not having seen anything in the *Canada Lancet* lately on puerperal convulsions, and at the same time having had several cases this summer, and one recently, I will briefly give the symptoms as I found them in the last case, and the *modus operandi* of treatment adopted.

Mrs. S. æt. 21, above the medium height, stout and well built, primipara, complained of slight headache previous to confinement. I was called to attend her on the night of the 15th of January, 1879, at 8 p.m. I made an examination and found the os dilated to about the size of an American dollar. I made another examination at 9 p.m. and found the os well dilated, and before I made an attempt to examine again a convulsion came on, lasting about five minutes. Then followed profound coma with stertorous breathing. I immediately examined the os again and found that the second stage of labor had fairly commenced. Fearing that another convulsion might soon come on, I immediately delivered with instruments, tied and severed the cord, and partially separated the placenta with the view of encouraging hæmorrhage, but to no purpose. I then removed it. By this time she was breathing better; coma and stertor were disappearing, and in fifteen minutes more she was able to speak; said she felt well, and asked what was the matter. I gave her twenty grains of bromide of potassium. I tested the urine and found it loaded with albumen.

In about an hour and a half from the first fit she became restless and tossed about for a few minutes when another convulsion came on, apparently more severe than the first, but lasting about the same length of time. Consciousness did not return after this fit, and the patient fell into a state of profound coma. The convulsions became more frequent and apparently more severe until 5 a.m. when they were nearly constant. I tried the administration of chloroform during a fit, but as the patient did not breathe freely it was a failure. At this time, 5

a.m., I made an opening in the median basilic vein and extracted ̄xxxi. of blood, after which the convulsions ceased until 2 p.m. when they again returned, and at 3 p.m. she had had three more when I arrived. I then immediately bled her again from the other arm, taking double the amount of the first bleeding; gave three drops of croton oil combined with ten grains of calomel, and left a small dose of opium to give after it had operated freely. I also ordered five grains of chlorate of potash in solution every hour until my return.

11th. 2 p.m. Visited patient; she has had no fits since; coma nearly gone; pulse rapid; tongue dry; she was able to converse a little. Continued the chlorate of potash, with chicken broth and milk, hourly.

17th. Visited again; found her a little heavy though easily roused. She talked freely, and said that she remembered nothing that had passed since the night she was taken sick. Continued the chlorate of potash, broth, milk and like articles of food.

19th. Saw patient and found her comparatively well. I prescribed iron and quinine, and left the patient in care of the nurse with instructions to send me word if she did not appear to gain. She is now in her usual health.

Correspondence.

To the Editor of the CANADA LANCET.

STR.—In the *Lancet* of last month is a communication from Dr. Ling, complaining that in my published paper on "Medical Evidence," I did not mention the fact of his having pronounced Wright insane before his trial at St. Thomas. No names were mentioned by me, for it was not my intention to give a history of the trial, but only my own connection with it. The Dr. did not state to me, nor did he in his evidence, as a witness, that he had discovered in Wright the delusions I had mentioned. Had such been the case, it is not likely a witness for the defence would have been so forgetful or negligent as to have omitted the fact, especially seeing that otherwise his evidence was of such a vague nature, that the Court would not accept it as proof of insanity.

His complaint of my not communicating my objections to the defence, is based upon the assump-