

OBSTETRICS.

CÆSAREAN SECTION.

Dr. Gürtler (*in Arch. fur Gyn.*) gives the particulars of a case where the Cæsarean section was successful for both mother and child. The conjugate diameter of the pelvis was only 48 millimètres (1.88 inch). The child presented in the second position. The operation was performed in the usual way. The hæmorrhage was severe, and was only arrested after three silk sutures had been applied, and the edges of the uterus brought together. The child was living and healthy. The mother made a good recovery and left the hospital on the nineteenth day.

ON THE TREATMENT OF PUERPERAL SEPTICÆMIA BY ELIMINATION.

Dr. Morton (*Obstetrical Journal*, September, 1873), gives the results of his experience in the treatment of puerperal septicæmia by elimination. Six cases are given in detail, and others are more briefly referred to. The cases present the following general features. One or more rigors occur at the outset. The pulse is rapid and irregular, seldom below 120, sometimes 140. The breathing is often relatively quicker than the pulse. The temperature ranges from 101° to 104°, and sometimes to 105° or even 106°. There are diminutions and complete suppressions of the milk, and lochia, the latter having a peculiar offensive odour. Vomiting often occurs at the commencement, and sometimes later; and diarrhoea, if not spontaneous, is easily induced, the motions having the peculiar odour of the fetid lochia. The patient has abdominal pain and tenderness, not constant or persistent; often intense headache; sometimes delirium. The tongue is generally moist and tolerably clean, but with prolonged fever, dry and brown, or dry, red, and glazed; there is much thirst, little appetite, but food is usually well taken. Tympanites is met with in severe cases, in some there was general peritonitis, in one pericarditis, and in another pneumonia. Lastly, in some cases abscesses occurred. Dr. Morton believes that the slighter as well as the more severe cases are of septic origin, "that they depend upon the absorption into the general circulation of decomposing fluids, and disintegrating deposits from the interior of the uterus."

The treatment may be summed up in the home bred word—purging. The author's rule is never to repress diarrhoea; when there is improvement without it, to leave well alone; when there is no improvement without, to lose no time in setting it up. The purgative employed was calomel, sometimes in five-grain doses, with Dover's powder, more frequently in three or four-grain doses with compound colocynth pill. Opium is never given without calomel. Dr. Morton has "a great dread and distrust of opium in these cases, believing it to be capable of checking wholesome elimination, and masking dangerous symptoms." In addition to other means, scruple or half-drachm doses of sulphite of soda were given every three or four hours. The author is not satisfied this did much good, and he ascribes the good results

chiefly to the purging. He gives as generous a diet as the patient will bear, with a moderate and occasionally a liberal allowance of stimulants. The illustrative cases are well and minutely recorded. In conclusion, Dr. Morton puts forward two inferences as at least provisionally justifiable—first, that "severe and continuous purging, whether spontaneous or induced, is at least consistent with recovery from very severe forms of puerperal fever; and, further, that the diarrhoea is not only consistent with, but highly conducive to, the recoveries, and that it is so by elimination."

SHORT NOTES.

MEASLES.

Every year the lives of a large number of children are lost by measles, who would probably have grown up strong men and women if they had been properly nursed. Whenever a child is supposed to have measles it should be kept in bed, even though it may not seem very ill. On no account let a child with measles go out, or even to the door, but keep it in bed altogether until the rash has quite gone. Bronchitis is very apt to come on if a child be exposed to cold whilst it has measles.

CARBOLIC ACID.

In the course of his investigations upon the value of carbolic acid as a disinfecting agent, P. C. Plugge also studied its power as a reducing agent, and discovered incidentally that nitrate of protoxide of mercury containing traces of nitrous acid is a delicate test for its presence. When a solution of such a salt is boiled with a solution containing carbolic acid a reduction of mercury occurs, and the liquid assumes sooner or later, according to its dilution, an intense red colour. The reaction is distinct in one sixty-thousand dilution, and is manifest even when the dilution is one two-hundred-thousandth.

TEMPERATURE IN SURGICAL CASES.

Dr. Joseph Bell, of Edinburgh, in a paper on surgical cases in relation to temperature, lays down the following axioms:—

1. Suppuration, even very profuse, does not necessarily imply any great rise in temperature, so long as it is not putrid.
2. Fætor, or putrefaction of suppuration, always induces a rise in temperature.
3. A high temperature, lasting for more than three or four days after the injury or operation, indicates mischief impending, such as sloughing or abscess.
4. The temperature generally gives warning a day, or even two days, before the pulse.

REST IN LOCOMOTOR ATAXY.

In the July number of the *American Journal of Medical Sciences*, Dr. Weir Michell insists on the great benefit of rest in the above disease. In cases of locomotor ataxy in which the occurrence of various accidents, such as fracture of a leg, had compelled the patients to take absolute rest in bed during some time, the symptoms, and especially pain, were considerably amended, and in some instances the course of the disease was impeded or slackened. One case was experiment-

ally conducted. A sufferer from an intense attack of the disease was subjected to absolute rest without any other kind of treatment, and considerable amendment of all the symptoms was the result.

THE TREATMENT OF RHEUMATIC IRITIS.

Dr. Fano (*France Médicale*), recommends the following treatment, at once directed against the local affection and the rheumatic diathesis:—Solution of atropine, used in the shape of an eye-wash, and the nightly administration of ten grains of Dover's powder. The patient to be warmly clad in flannel, and to abstain from the use of neat wine, strong coffee, and spirits. The solution of atropine is made to the following strength: Distilled water, five ounces; sulphate of atropine, one grain; to be used in an eye-basin every three hours, during five minutes. The eye to be shaded during the day.

TYPHOID FEVER.

The *Medical Times and Gazette*, in speaking of the late outbreak of typhoid fever, says "there is no evidence that the germs of a specific disease, such as typhoid, can be taken into the cow's system through the channel of sewage grass, be thence excreted by the mammary glands, and, producing no toxic effect upon the cow, can spread enteric fever among the children who drink the milk. Such a sequence of events is most likely impossible; but, if possible, there has been no outbreak of fever or other disease in this country which would warrant us in believing that it has taken place."

WHOOPIING COUGH.

During the last year, 604 children have died in Manchester and Salford from whooping cough. The deaths of most of these children have been due to exposure to cold or damp whilst they were suffering from whooping cough. It is very important that when a child begins to whoop, it should not be allowed to take cold. When children commence with whooping cough they should be clothed warmly and wear flannel. They should not be allowed to get wet, nor should they be chilled by exposure to cold winds. If a child with whooping cough begin to wheeze and breathe with difficulty, there is always danger. On no account should the child be taken out of doors, and if possible it should be kept altogether in one room.

LUNACY IN IRELAND.

Though the population of Ireland has fallen away nearly two millions, the number of registered lunatics (according to the Inspector's Report just issued) is on the increase. The total number of the insane is 18,177. Of these, 10,958 are registered. There are 7,219 lunatics at large, whose free intercourse with society may be attended with serious consequences. Intermediate asylums are recommended, as they have been adopted in England. The lunatics in public asylums number 7,140; in poorhouses, 2,956; and in the central asylum at Dunderum, near Dublin, 175. The cost of maintenance is £23 per head in the district asylum, £11 in the poorhouses, and £32 in the central asylum. The inspectors deprecate