

arm, and pushing steadily upwards returned them likewise; then gradually introducing my own hand, well lubricated with oil, in the form of a cone, and carrying it carefully along the body of the child, towards the left umbilical region, until I grasped one of the feet; then moving my fingers to search for the other, and carrying my hand at the same time forward and a little to the left, I found the remaining foot, and grasped both firmly in my hand. I then gradually, with a slow but steady pull, brought them both down, until I had cleared the external orifice, and delivered the child as far as the breast; then taking a napkin, and encircling this part with both my hands, the delivery was completed in the usual way. The afterbirth was shortly after removed, by gently pulling at the cord; the uterine contracted; and the usual bandage put on to compress the abdomen.

The whole operation lasted about four minutes. During its continuance I had to administer spirit of camphor several times to prevent fainting. Immediately after the delivery of the placenta, I gave a strong composing draught of *Tœ opii* in water; directed warm clothes to be applied to the abdomen, and perfect rest and quietness. I remained with her during the remainder of the night; and for two or three hours subsequent to the termination of her labour, she had the most violent eructations of flatus I have ever witnessed; indeed the quantity expelled was truly astonishing. Towards morning, however, this abated; the other untoward symptoms improved; and although continuing in a very low and weak condition for some days, she gradually recovered, and in three or four weeks was as well as usual.

REMARKS.—There are two or three points in this case which are somewhat interesting. 1st—The *not very common* presentation of both hand and funis umbilicalis. 2nd—The extreme depression of the woman in connection with her subsequent rapid recovery. 3rd—The facility with which (owing to the previous exhaustion) the turning of the child was effected; and 4th—The after eructation of so large a quantity of flatus; the remote and proximate causes of which (as Cullen would say) might form an interesting subject of investigation to some of your readers. But it is not so much on their account that I have furnished the case for publication in your journal, as from a wish to show to the public and the Legislature how necessary it is that all, whether men or women, who are engaged in the practice of midwifery, should be thoroughly qualified by previous study and examination. There cannot be the least doubt, had this patient been left without further assistance than she had for the first forty-eight hours, in the course of a short time she must have been a corpse—her husband a widower—and her children motherless. She had been attended by two professed midwives (one of whom