

The Chinese, more than 1,500 years ago, used a preparation of hemp or mayo to annul the pain attendant upon cauterization. Pulleyn, in 1579, mentions the possibility of putting patients who were to be cut for stone into a "trance or terrible dream," by the use of mandrake.

Again, John Baptista Porta, of Naples, in his work on Natural Magic, (1597) speaks of a quintessence extracted from medicine by a somniferous menstruum, the nature of which he does not explain. This was kept in leaden vessels perfectly closed "lest the aura should escape, for the medicine would vanish away. When it is used, the cover being removed, it is applied to the nostrils of the patient, who draws in the most subtle power of the vapour by smelling, and so blocks up the fortress of the sense, that he is plunged into the most profound sleep, and cannot be roused without the greatest effort,"—adding rather quaintly, that "things are plain to the skilful physician, but unintelligible to the wicked."

In Middleton's tragedy of "Women beware Women," published in 1657, there is the following passage. I'll imitate the pities of old surgeons. To this lost limb, who e'er they show their art, cast one asleep, then cut the diseased part."

Dr. Snow suggests that the evanescent substance referred to by Porta was sulphuric ether, which had been described more fully fifty years before Porta's book appeared. Compression on the Nerves, by Dr Moore, in 1784, Nitrous Oxide, by Sir Humphrey Davy, in 1800; and Carbonic Acid Gas, by Dr. Heckman, in 1828, were the agents in the latter part of the last and the beginning of this century, considered most useful in producing anæsthesia.

In 1846, sulphuric ether was first used in Massachusetts General Hospital to prevent the pain of an operation, and during the latter part of the same year, was extensively used in England and America. After the lapse of about a year, Dr. Simpson, of Edinburgh, discovered the anæsthetic properties of chloroform, and used it in his own department, that of midwifery, since then chloroform has been the anæsthetic most employed by British Surgeons. The advantages of chloroform over ether are, 1st. Its more agreeable odour; 2nd. Its more rapid results, and 3rd. The lesser bulk of chloroform required to produce anæsthesia.

In the truth of the first and third of these so-called advantages, every one will coincide; concerning the second, "that it is a more