

a sterilized stiff wire stylet and anointed with sterile vaseline. This appliance, curved in the shape of a male sound, and guided by the fingers of the left hand of the operator, is now passed into the uterus, exactly as a sound is introduced through the penis into the male bladder. When the tip of the bougie has passed well around the globular fetal skull and points away from the promontory of the sacrum, the ring of the stylet is held firmly by the nurse and the operator slides the bougie off it and into the uterus, between the membranes and the muscular wall, until not more than two or three inches project from the external os.

The stylet is held in place merely to maintain the curve around the fetal skull and is withdrawn as soon as the bougie is in place. No force may be used in the introduction of the instrument, and, when this little operation is performed gently and carefully, the patient will suffer in no way, the sacral promontory will not be impinged upon, the membranes will not be ruptured, and certainty of action is practically assured. If sepsis follows the blame will usually lie with the operator.

The vaginal canal is now snugly packed with gauze, and if, after twelve hours, no labor pains have occurred, the gauze is removed and the bougie reinserted or another placed by its side.

It seldom happens, however, that the first bougie, if properly passed up to the fundus, fails to produce the desired result.

As soon as labor pains are well established both the packing and the bougie should be withdrawn and the case allowed to proceed without further assistance. It is a serious mistake to leave the bougie in place until it is forced out of the uterus by the contractions. Such practice not infrequently results in premature and high rupture of the membranes.

In the case of a multigravida with a short, softened and dilated cervix, I prefer my own expansion rings (so-called for want of a better name), which I present for the first time to-night, although I have used them successfully and with entire satisfaction in a large number of cases.

These rings are of such simple construction that I have not called upon any instrument maker to provide them for me, but make them myself, according to my needs. As one ring will suffice for several cases, unless the spring rusts and breaks, I have not made many.

The appliance consists simply of a soft rubber catheter with the tip cut off, into which is passed a long spiral watch spring of the cheaper grade. This forms a circle when in place and the approximate ends of the catheter are sewn together.