

in men affected with inconclusive symptoms of phthisis, may incline us to a favourable interpretation of any such suspicious indications; but that in women rather less weight is to be attributed to this negative sign. 2nd. That the presence of the sign in women is almost conclusive evidence of the presence of the tubercular element in the blood. The paper concludes with the remark, that the symptom therein described is one of many proofs that consumption is *not* exclusively a local disease, but rather a constitutional condition, requiring for its elucidation and treatment far more than an acquaintance, however exact, with the phenomena of auscultation.—*Lancet*, July 12, 1851.

MIDWIFERY.

ON A CASE OF ELYCTROCELE IMPEDING DELIVERY.

By Robert Newman, Esq., M. R. C. S., Cheltenham.

I am induced to send this case to you on account of its being very rare, and at the same time believing it would perplex most men if met with for the *first time* in the last stage of labour.

About eight years ago I attended Mrs. D——, then aged thirty-one, in labour with her fourth child. On my arrival, the pains were very urgent, and upon examination I found what I at first took to be the membranes protruded and about to break; for in volume, in feel, in tenseness, the tumour exactly resembled it. Fortunately I hesitated before proceeding to rupture, and, after careful examination, discovered a large vaginal hernia.

The *practical* bearing of this record is, in my humble opinion, interesting, just as far as the *diagnosis*: may be allowed to be difficult.

I have attended this patient in parturition three times since this dilemma, and on each occasion have had to contend with some difficulty in the management. The last occasion occurred on the 11th inst., at six A.M., when I found unusual difficulty in keeping back the hernia during the expulsive action of the uterus.

My own impression is, that the attenuated intestine (distended to the uttermost with flatus, &c.) would have given way if it had got wedged in the hollow of the sacrum during the descent of the head of the child; therefore, my utmost endeavour was directed to the prevention of such an untoward event by keeping up constant pressure on the sac, not daring to desist one moment. Happily the head came down upon the perinæum in about an hour, and the labour terminated favourably.

THERAPEUTICS.

ON THE ENDOSMOTIC ACTION OF MEDICINES.

After some remarks on the construction of the apparatus—the properties of different membranes to be examined—the well-known deductions of Poiseuille, in his Memoir in the “Comptes Rendus” of the French Academy of Sciences for 1844—the author proceeded to mention his own observations. The endosmometer of Dutrochet consisted of a glass tube, with a somewhat bell-shaped movable expansion called the reservoir, having a deep contraction round the middle for securing the membrane. The form of reservoir preferred by Dr. Cogswell was that of a bell-jar with a projecting rim round the larger orifice, the end of the tube and the inside of the reservoir being ground to fit one another.