

influence of chloroform, so as to prevent convulsions coming on; and although the child has still several teeth to cut, for the last three weeks he has had but one slight attack of the spasms, which however caused his mother no uneasiness, the use of the ointment being still constantly continued, and the child is improving in every way; and I have not the slightest doubt but as soon as he has cut all his teeth, the spasm will leave him, as there will not then be any further cause of irritation.

In all these cases I would strongly urge that great attention should be paid, *firstly* to the state of the gums, scarifying them freely and deeply as often as necessary; and *secondly*, as the bowels are always constipated, giving every day one or two doses of the fluid extract of senna, which I have found to be the most suitable medicine, and to confine the child to a little simple cream and water or very thin arrowroot and water for diet, giving him as little as possible; and if we may judge from the success of these cases we may safely predict a rapid cure.

Craig Street, March, 1860.

---

ART.—XIII. *Case of Puerperal Convulsions.*—Twins.—Both children and mother saved. By P. R. SHAYER, M. D., Stratford, County Perth.

I was called per Telegram to the village of Shakspeare, some ten miles from my own residence, to see a woman living in the neighbourhood, who was in labour with her third child. Upon my arrival, I was informed that the patient had been ill some eighteen or twenty hours, and that she had had six or seven very strong convulsions or fits. When I arrived at the bedside she was immediately seized with a very severe and violent convulsion, which I thought would have terminated her existence, indeed I felt convinced that she could not have survived another attack similar to the existing one, so near was she apparently to the moment of her dissolution. When the paroxysm of this fearful spasm was at an end, I proceeded to the examination of the patient. The pulse was 120 per minute, the skin hot and dry, eyes staring and immoveable, countenance ghastly and of a livid hue, and every appearance of approaching death. She was of course insensible, and had been so for eight or ten hours. I now examined the uterus, found the os partly dilated, and the pains very feeble and irregular. After searching for the presentation, I found an arm and foot presenting. As there was no time to be lost, and apprehensive of another convulsion, I immediately seized my lancet, plunged it into the median cephalic vein of the right arm, allowed the blood to flow free and fast, until I had evacuated about one pound and a half. This brought the pulse down to about eighty per minute, and symptoms of returning consciousness began to manifest themselves. The countenance became more natural, and not so unbearable to look upon—the uterine pains began to set in, whereupon I began to assist nature in the delivery, by introducing my hand, seizing both feet, and gradually bringing them into the vagina, when with the assistance of a few pains and gentle traction, the child was readily expelled, apparently asphyxiated, but by the adoption of the usual appliances it was soon restored. After separating the offspring from the mother, I made another examination per vaginam, and to my astonishment I found the