

I would remark that I can hardly conceive a case that would resist his mode of procedure.

Having elevated the bedstead on four chairs, he placed the patient transversely, with the nates at the edge, and thighs well flexed on trunk, Dr. Salmon grasping the right leg firmly, whilst I did the same with the left, Dr. White sitting in the centre, and Dr. Stewart at the back, administering chloroform, completed the *mise en scene*.

When completely under the influence of the anæsthetic, Dr. White introduced a large speculum, and through that a wooden compressor, dilated and slightly concave at the end applied to fundus uteri, whilst at the projecting end a powerful spiral spring, capable of exercising a pressure of from seven to ten pounds, was attached. With one hand at base of spring, he kept up a continued pressure, whilst with the left in the vagina, he kneaded the cervix and dilated the os. Here I cannot refrain from remarking on his wonderful power of endurance. Ten to fifteen minutes, in the previous attempts we had made, invariably rendered our hands powerless; whilst Dr. W., after thirty or forty minutes in the exquisitely painful and cramped position for the hand, only faintly indicated by his countenance the distress he must have been enduring. To that power of long continued manipulation, much of his success may, I presume, be attributed. After some thirty or forty minutes of pressure with the hand on spring, he placed it against his breast, and used an amount of force that I, in my simplicity, would have conceived sufficient to rupture the bladder and the whole vaginal attachment. At the end of an hour, Dr. White, as also Drs. Salmon and Stewart, were alarmed at the patient's breathing and appearance, and Dr. W. reluctantly determined on relinquishing the attempt at reduction for the time, but as, in a conversation I had with her before the operation commenced, I learnt that she was fully determined, if we failed this time, never to submit to further efforts, I enquired of him whether he thought another ten minutes would suffice for success, and on his replying in the affirmative, I urged him to continue, as in my judgment I considered it safe to keep her for that additional time under the chloroform. The pulse then being most carefully watched, the pressure was resumed, and in less than ten minutes the uterus resumed its accustomed place, and the patient, by Dr. White's skill, rescued from a living death, in the estimation at least of Hippocrates, who, in his aphorisms, says, "Propter uterum est mulier." No bad