

such as kelotomy, those involving the peritonæum, and the removal of deep-seated tumors in the vicinity of large vessels. It had been said that ether always produced perfect anæsthesia within a few minutes, but, out of 125 cases in which it was administered in the German Hospital during 1886, in eleven satisfactory relaxation of the muscles could not be produced. In those cases chloroform was substituted and produced complete anæsthesia.

There was but one contra-indication to the use of chloroform, namely, a fatty or weak heart. Ether was also objectionable in these cases, but less so than chloroform. Patients addicted to the use of alcohol, perhaps in only moderate degree, took ether badly. During his hospital practice he had known pneumonia to follow the administration of chloroform in only two cases; both were cases of a bloody operation upon the mouth, and the pneumonia was due to blood entering the trachea. Both patients recovered. Valvular lesions of the heart were not necessarily contra-indications to the use of chloroform. In such cases there was often compensating enlargement of the heart. Fear and nervous depression contra-indicated the use of chloroform. In such cases, if it was necessary to employ chloroform, he would precede its administration by that of stimulants and a small amount of morphine.

DR. R. F. WEIR said there was a growing feeling among us that ether was not so safe an anæsthetic as we had for some years believed. He had frequently given it to persons having signs of kidney disease, and without untoward effects, but he had come to employ additional precautions in such cases. Regarding pneumonia, it was more frequent when the spray was used; it was also more frequent since the free use of carbolized cloths over the wound. In other words, pneumonia occurring after the administra-

tion of ether, according to his observation, was due to exposure of the patient. He had seen less of this trouble since he had called the attention of the hospital attendants to that matter. Ether had been employed almost exclusively in the New York Hospital since 1850. From that time to 1870 about 7,700 operations had been performed, with three deaths from ether. From 1876 to 1886 there had been 2,289 operations, with one death from ether. During the latter period there had been 802 operations in the House of Relief, with one death from ether. While in many cases the patients took ether badly, he could not recall any in which an operation had had to be discontinued.

DR. L. A. SAYRE said he was so thoroughly convinced of the correctness of his views regarding the relative safety and value of ether and chloroform, that he continued to use the latter in spite of the opposition which it met with in this country. He preferred chloroform to ether because it was more agreeable to the patient, it was more speedy in its effects, it did not produce spasmodic muscular contraction, and it was not followed by bad effects, such as vomiting, Bright's disease, pneumonia, etc. He strongly condemned the careless and free use of ether and chloroform largely mixed with air, as was so common. Chloroform and ether were powerful agents, each having caused many deaths; therefore they should be used with the same care and skill employed in the administration of any other powerful drug.

The speaker exhibited an inhaler which he had employed for many years for administering chloroform. Twenty or thirty drops of chloroform employed in this way would almost invariably produce anæsthesia with a very few inhalations, and when so small a quantity was employed, if by any possibility the heart should cease