

ions differ regarding the treatment to be employed here. According to the view of those who hold that the danger is due to the accumulation of blood in the abdominal vessels and the consequent diminished supply to the heart, the loss of blood even in drops is very dangerous. According to the view which appears to me to be correct and which I have advocated, the indication is not to conserve, but to allow the free escape of a certain amount of blood from the body in order to prevent overdistention of the lungs and of the right side of the heart. How can this best be brought about? The patient is still kept under chloroform; ether is given hypodermically from time to time, and the nitrite tends to counteract the contractility of the uterus, and so to delay the separation and expulsion of the placenta. This event must not be allowed to take place naturally, because it is apt to cause too sudden a change in the vascular pressure and to prevent the loss of blood, which it is our chief aim to bring about. Neither should the Dublin or Crede method of expelling the placenta be used, for the same reason. The most satisfactory procedure is to pass one hand into the uterus, separating the placenta gradually, the other hand being placed on the abdomen against the uterus. As the sinuses are torn through, blood escapes, the amount lost being carefully watched. In carrying out this operation the greatest skill, coolness, and judgment are required. As the uterus retracts and contracts, following the removal of the placenta, the heart should be carefully watched and another dose of nitrite of amyl given if necessary. If, owing to the amount of chloroform and amyl nitrite administered, marked contraction does not occur in the uterus, no alarm should be felt. This condition is better than sudden contraction, because the changes in the circulation are more gradually brought about. The organ can easily be compressed between the hands, and if necessary the hot douche can be used, but the latter agency should not be employed save where there is danger of the loss of too much blood. Neither should ergot be used in these cases, except in the last mentioned condition, because it opposes the escape of the blood from the uterus, which we desire to a certain extent to encourage. Hitherto it has been recommended by many to bleed the patient from the neck or arm. This, it appears to me, is altogether unnecessary, when we have at our disposal the easy method of bleeding from the uterus that I have just described.

The treatment of heart cases during the puerperium is of the greatest importance. Rest in bed for some weeks is advisable. For a time after delivery stimulants of ether and brandy may be required. Strophanthus or digitalis is to be given cautiously. The most easily digested nourishing food is to be taken. There