

followed when the fourth cannot be converted into the second. The forceps may also be applied, not without considerable difficulty, however, before the head has become locked in the pelvis and the maternal soft parts have not been subjected to any undue amount of irritation, to bring the parturient act to a happy, though, possibly, a tardy termination. In the event of failure in all of the foregoing measures, there still remains one more, the perforation and crotchet.

5. *Ossification of the head.*—The second, and probably the most potent cause, of this lingering accouchement, was the unusual degree of ossification and solidity of the cranial bones; and, although, there was no direct possibility of remedying this unfortunate state of things, after the position of the head had been rectified as much as the nature of the case required or permitted, a reasonable delay should have been granted, when if no advantage had been obtained, the forceps should have been applied, and in the event of failure, the last resource was to sacrifice the child. Turning in this case should *not* be thought of, as although the feet might possibly be secured and brought down without very great difficulty, still the size and hardness of the head filling up, as it would unquestionably do, the whole of the pelvic brim, would exert, in a very few minutes, such an amount of pressure upon the umbilical cord as to be sufficient to cut off the circulation, and cause the death of the child by asphyxia; again, the feet are not presented as a tempting, if not irresistible, handle, to pull away to the sad detriment of the maternal soft parts.

6. *General and local remedies and other measures employed in the case under consideration.*—I conceive it will require but a few words in reference to the administration of opium in one form or other, tartarized antimony, and secale cornutum, or the use of bleeding or the warm bath: what are the indications for the use of the foregoing means?—The answer is comprised in a very few words,—first, to produce such a degree of general debility or languor as will facilitate the dilatation, or overcome the resistance offered by a preternaturally rigid os uteri, and, secondly, to increase the expulsive action of the uterus when this latter appears to fall into a state of atony. I will now in a few words, point out under what circumstances the above various agents should be employed:

a. *Opium.*—This drug, by relieving muscular spasm generally, and suspending uterine action locally, will, therefore, subdue the very distressing, and if I may be allowed the expression, the useless pains, by inducing a certain amount of sleep, and necessarily a corresponding immunity of suffering: on awakening, the patient will not only find herself refreshed, but the pains will be changed in character, increased in frequency and severity, and with them a greater aptitude on the part of the woman to render that assistance which is required of her; it is no use to administer this drug to suspend the prolonged pains caused by malposition, nor has it any *direct* power to relax a rigid os.

b. *Tartarized Antimony; Bleeding and the Warm Bath.*—These means are only applicable in producing a sufficient degree of constitutional relaxation, as will tell upon a rigid and unyielding state of the os uteri; in the above case, their use was most positively counterindicated, here was a soft and largely dilated os, ready to allow of the passage of the product it had safely enclosed for a