

5. Occasionally you may be able to diagnose the presence of twins by noting that the woman has an unusually large and tense abdomen. Sometimes you can demonstrate a groove running along between the two bodies, and occasionally you can palpate two heads, etc.

II. We now proceed to make use of the fundal grip to ascertain which pole of the fetus is occupying the upper zone of the uterus. Having located the back, we follow it upwards until both hands are placed over the upper pole of the fetus, but not necessarily of the uterus, and then by pressing the palms of the hands firmly against the abdominal wall we are able to keep the body of the fetus firmly fixed between them, while at the same time we can try for ballotment of the head with the tips of the fingers. If the head is occupying the upper zone of the uterus, we will be able to toss it from one side of the uterus to the other on account of the hinge movement at the neck, whereas in the case of a breech, the whole fetus will move *en bloc* when we try this test. The head is more movable than the breech, for two reasons:

1. On account of its globular shape it is not so completely invested by the uterus as the breech, but is only in contact with the uterus in certain places.

2. The articulations of the neck enable it to move from side to side independent of the trunk, while the breech being part of the trunk can only move *en bloc* with the latter. In consequence of this it is possible to ballot the head between the hands, a process which is impossible in case of a breech. If we do not get the ballotment of the head, and if the hand in following up the outline of the back seems to pass over a large, irregular, indefinite mass, and especially if we can feel the fetal small parts at the upper end of the fetus we can be pretty sure that the breech is occupying the fundus.

*Note.*—Jellett says that the upper pole in difficult cases has a tendency to get back behind the ribs, and that you can often facilitate your examination in these cases by pressing the lower pole upwards and backwards towards the same side on which the back lies. This will have a tendency to displace the upper pole out from its position behind the ribs, towards the centre of the uterus, and at the same time a little forward, so that the examining hand can more easily recognize its distinctive features.

III. Having ascertained upon which side the back is lying, and which pole of the fetus is occupying the fundus of the