the child in consequence of its firm impaction at the brim and the uterus being strongly contracted upon it. The patient being placed fully under the influence of chloroform, we succeeded, after cautious and repeated efforts, made during the intervals of the pains, in introducing the right hand in to the uterus. A foot was readily seized and brought down below the brim. The child, however, was so impacted in the brim it was impossible to bring the leg down. The left hand was then introduced, as the right was altogether useless from fatigue and the effects of pressure, and the second foot was also seized and brought down into the upper part of the vagina. The two feet of the child were then secured, but it was found impossible by any amount of traction that could be exerted under the circumstances to bring down the limbs, and cause the body to revolve in the uterus. A loop of strong tape was then carried over the foot to the leg of the child and securely fastened. By drawing on this with one hand and at the same time pressing the shoulder firmly upward with the other hand introduced into the vagina, the shoulder receded from the brim, the inferior extremities came down and version was accomplished. As the patient's first labour had been perfectly natural and unattended by the slightest difficulty, and the action of the uterus continued strong and vigorous, no further trouble was apprehended. The head of the child, however, not being expelled, notwithstanding the presence of strong uterine action and the aid given to bring it down, a careful examination was made. The base of the cranium was found firmly wedged in the brim, and the womb, as felt through the abdominal walls, was larger and firmer than usual and quite globular in outline. We now decided that we had a head enlarged by hydrocephalus to deal with. We then perforated the skull behind the ear, a gush of water followed, and the collapsed head was instantly expelled. The patient subsequently had no unfavourable symptom, and, indeed, felt so well that she insisted on leaving the hospital on the seventh day after delivery.

Version of the child was performed in two instances of shoulder presentation. Both were complicated with prolapsus of the funis. The mothers recovered, but the children were