

He complained at date of admission of severe pain extending along the course of the sciatic nerve, with tenderness on pressure. He thought the pain rather increased by a recumbent posture, and sometimes lessened by gentle exercise. There was very decided loss of motor power in the left leg. The points of introduction of the remedies which had been used subcutaneously were denoted by a number of elevated hard lumps of infiltrated tissue, and also by the scars of small abscesses. The patient was ordered two teaspoonfuls thrice daily of guaiac mixture, $\mathfrak{z}\text{iv}$; iod. potash, $\mathfrak{z}\text{l}$. On the 23rd, ten grains of Dover's powder was given at night. On the 25th, the treatment was changed to a tablespoonful thrice daily, of hydrochlorate of ammonia, $\mathfrak{z}\text{iv}$; pulv. acacia $\mathfrak{z}\text{ij}$; water, $\mathfrak{z}\text{iv}$. Mix.

This treatment was continued without cessation or change other than is mentioned in this paragraph, until the patient's discharge from hospital on the 25th of November, apparently entirely cured. On the 12th of November, he took $\mathfrak{z}\text{ij}$ of fluid extract of ergot. This was ordered for the purpose of testing under observation of the Class, the alleged good effects of this medicine in neuralgia. The result of this experiment is negative as to any advantage from its use. The patient took altogether three doses of Dover's powder; the one of ten grains mentioned above and two others of one scruple each subsequently. On November 16th, he received in the presence of the class a hypodermic injection, over the most superficial part of the sciatic, of morphia, o. sixth grain , and atropia, one-fortieth grain. In three minutes the pupils were sensibly dilated; in ten minutes the mouth and throat were dry, and the patient expressed great relief. A similar injection was used on the 19th with similar results.

The Class will find detailed here the treatment in full of a case of sciatic neuralgia. They may think the minuteness of detail unnecessary, but all clinical facts relative to a disease both so common and obstinate are valuable.

In a second case of sciatica treated during the lecture season, the muriate of ammonia treatment failed, and the case improved under iodide potash thrice daily with subcutaneous use of morphia and atropia two or three times weekly. We all know that there are coincident conditions of the system which must be taken into account in the successful treatment of all neuralgias, in whatever nerves situated, but it is not possible to make an abstract formulation of remedies to meet each case. It is, however, reasonable to infer that the muriate of ammonia treatment will be found more opposite in those cases in which some impediment to secretion or excretion leads to blood impurity, or in which the impurity arises from a poison directly introduced, as the syphilitic cases in which the neuralgia is in truth the "prayer of the nerve for healthy blood."—*New Orleans Jour. Medicine.*

Fatal Case of Post-Partum Hæmorrhage.

Nov. 24th, 1868, Mrs. D., æt. 35, was delivered of her sixth child. The labor was easy, and nothing that was observed at the time prognosticated hæmorrhage except its rapid conclusion, a single pain carrying the head through the lower strait and

delivering the whole body of the child. The after-birth, above the average size, came away in ten minutes with slight traction of the cord, and was passed unexamined into a waiting vessel. No hæmorrhage followed, and the uterus, with a little delay, contracted firmly. A compress was laid on the womb and a roller above it, and a firm binder pinned tightly over them. I remained two hours in the house, and then left her comfortable and in high spirits. When I made my second visit, twelve hours later, I found that she had been flowing, but had then ceased. Prescribed lead and opium, and directed the nurse in regard to external applications, should hæmorrhage recur, and particularly directing that I should be called immediately should any trouble arise not readily under their control. A week passed by and I heard nothing from my patient, and my anxiety led me to visit her. Her pulse and countenance admonished me that she had lost more blood than was fit, but she directly affirmed that she had not flowed more than was proper, that she was convalescing finely, and knew of no reason why she should not be up in due time.

I left her with some misgiving, but as she was a lady of excellent sense, and had been confined five times before, I thought she ought to be a competent judge of suitable convalescence. Dec. 6th I was sent for in haste, and told that she was flowing, and had been for sixty hours at intervals. I found her pulseless at the wrist, with a deathly pallor of the countenance, lying on her back with head low and feet raised, and altogether in a state of almost complete ex-sanguination. The womb was soft and reached to the umbilicus. I was immediately satisfied that the excessive hæmorrhage was due to a portion of retained placenta, but to have attempted its removal by the hand was then out of the question. My only hope was to check the hæmorrhage and by stimulant and nutrition to rally her so that she could bear the introduction of the hand. I checked the hæmorrhage, and left her with a fair pulse, after prescribing the free use of stimulants and beef essence. The next day she was better, and each day until the 12th she was comfortable and improving. On the 12th I was summoned in haste and found her in a state of partial syncope, nauseated and rapidly sinking. From this she rallied, and I was then convinced that her only hope was in freeing the womb of its contents by the hand. The case was plain but the operation would be attended with the utmost peril, and I called an able physician to be present. He approved the plan, and, at the request of the family, operated, removing a small quantity of pieces of the membrane and some blood clot, made a favorable prognosis, and prescribed for the next twenty-four hours. The next day she was worse, and I removed from the vagina a gill of pieces of the placenta. I forced the womb to firm and plid contraction, so that it was scarcely perceptible in the pelvis.

Dec. 14.—She is failing rapidly. A slow hæmorrhage continues. Lead, opium, and gallic acid internally, with brandy, eggs and beef essence, ice externally, ice water injections per rectum and per vagina, is now the treatment. Summoned counsel again and staid all night.

Dec. 15.—She died this afternoon, after thirty