

wards, when she was discharged without much amelioration of her condition, and placed under the care of her friends, as the case had become no longer suited to the Hospital. Another case of this class was complicated with epilepsy, to which the patient had been subject for several years previously. In this case, the presentation was natural, but in consequence of the supervention of an attack immediate delivery was necessitated. The child was born dead, and the woman died five hours after the accouchement had been completed.

In another case, the patient had been brought to the Hospital comatose, and had been so for fourteen hours previously, the coma having resulted from puerperal convulsions, of which no less than seventeen fits had occurred before her admission; it does not appear that the woman had received any treatment prior to her admission. The forceps were used in this case,—the child was born dead, but the mother recovered and was discharged on the fifteenth day afterwards. In another instance, convulsions threatened after the delivery of the child and before that of the placenta. The timely employment of the lancet, and immediate extraction of the after-birth arrested the further progress of the symptoms.

Another case was complicated with extensive œdema of the labia majora. After labour had commenced, the labia were punctured, which effectually removed any obstacle to the delivery which might have been afforded by this condition of the vulvar aperture. It was this patient's first child.

A rather singular complication was exhibited in another patient. After admission she became affected with jaundice which necessitated her removal to the Montreal General Hospital, where shortly after her entrance severe cerebral symptoms manifested themselves accompanied with violent delirium. This condition terminated in puerperal convulsions which continued until her death, which took place a few hours after her delivery which was effected by Dr. Craik, the house surgeon of that Institution, artificially. The child in this instance was born dead. I was informed that at the autopsy which took place, the liver was found very much atrophied.

As apparently connected with this case, I may incidentally remark that one or two cases of a somewhat similar character occurred in private practice about the same time. I saw one of these cases with Prof. Holmes. She was married and in the sixth month of her second pregnancy. She was taken ill on a Friday with the premonitory symptoms of jaundice, which declared itself more and more unmistakably until she was first seen on the following Thursday by Dr. Holmes. On the following day severe delirium set in succeeded by coma, at which period I saw her. She died early on the following day. At the post-mortem examination of this case, the liver was also found considerably atrophied, especially the left lobe, of an intensely yellow colour, and so soft as to break down readily under the finger. This case furnished the material for an important monograph from the pen of Dr. Holmes, which appeared in the Montreal Medical Chronicle for January 1856.

One case occurred in which the vertex presented complicated with additional presentations of the left hand, right foot and Funis. This very rare complication was reported in the same Journal for June 1855, by the gentleman in attendance upon it, and I will allude to it more particularly hereafter.