

THE CANADA MEDICAL RECORD.

Vol. XII.

MONTREAL, JANUARY, 1884.

No. 4

CONTENTS.

ORIGINAL COMMUNICATIONS.	PROGRESS OF MEDICAL SCIENCE.	EDITORIALS.
Notes on the use of Ether in Obstetrics 73	Clinical Lecture, 86. — Abstracts from a Practical Treatment on Diseases of Women.. 89	College of Physicians and Surgeons, 95.—Death of Dr. John Reddy, 96.—Making alleged fraudulent Doctors, 96.—New York Post Graduate Medical School, 96.—The Index Medicus, Personal..... 96
SOCIETY PROCEEDINGS.		
Medico - Chirurgical Society, Montreal 76		

Original Communications.

NOTES ON THE USE OF ETHER IN OBSTETRICS.

By CASEY ALBERT WOOD, C. M., M. D., Professor of Pathology, Medical Faculty, University of Bishops College, Physician to the Western Hospital.

(Read before the Medico-Chirurgical Society of Montreal, December 28th, 1883.

Until about a year ago it was my invariable rule to employ chloroform in midwifery, not only for the alleviation of pain during the first and second stages of labor but also for the performance of any of the operations incident to obstetrics. Since that time I have considered it advisable to modify my practice in some respects and to substitute ether, and in this paper I propose shortly to give my reasons therefor, and to ask of members of this Society, whose larger experience warrants their speaking with authority, their opinions upon the subject.

The only apology I have to offer for the assumption that it is possible to come to any conclusions of value in a small number of cases—twenty-six in all—is that attendance upon cases of midwifery

where it is necessary to employ anæsthetics, gives one ample opportunity to study their effects in each instance; for the moderately careful observer, who stays up half the night in the endeavor to relieve a parturient female, is likely to have sufficient chances of watching the progress of events and the extent to which they are influenced by the administration of remedies. In those cases where relief is called for in the first stage of labor, examples of which are most commonly found among primiparæ, where a slowly dilating or rigid os is represented by sharp pains, nervous excitability, inability to sleep, and, after a time by exhaustion, I have usually been able to succeed in quieting the patient and obtaining rest by giving her a full dose of chloral; or, if that fail, by administering a few doses of morphia. After a few hours of quiet, dilatation proceeds more quickly, and by the time the effects of the opiate have passed away the labor has progressed to the second stage. In the beginning of October, however, I had a patient who refused to exhibit this satisfactory phase of affairs. She was about to be confined of her second child; had been delivered of her first by the use of forceps after a prolonged labor, and was in great dread of a second ordeal. In addition to her nervousness the membranes ruptured after the os had dilated to the extent of a ten-cent piece, revealing an occipito-posterior presentation. The pains were not very severe or very frequent, but they appeared to exhaust the patient, who insisted upon my giving