

for the patient, for the strain on the heart will be for a time diminished in proportion to the amount of blood accumulated in them. Very soon, however, the vasomotor mechanism will tend to diminish this accumulation, thereby correspondingly increasing the burden on the heart. These various factors must differ considerably in different women, and it is not therefore difficult to understand why there should be such variations in the clinical phenomena witnessed in a series of cases in which the same cardiac lesion exists.

When labor sets in, what is to be done? The patient should be carefully watched from the first. If she has been previously in good condition, she may be allowed to go through the first stage without interference, an occasional dose of a stimulant being given, if necessary. If she be very restless or makes straining efforts, she should be quieted. If it is impossible to manage this, and if signs of heart failure appear, the patient should be chloroformed and the cervix dilated with Barnes's bags or manually.

We are now at the second stage. In some instances she may pass through this stage without trouble. In bad cases, however, especially in mitral disease, she should not be allowed to pass through it in her own strength. She should be chloroformed by an assistant, who gives his whole attention to his duty, while the child is extracted with forceps. Occasional injections of ether may be required. I wish, however, especially to recommend the use of nitrite of amyl. This drug was first tried with success in heart disease complicating labor by Fraser Wright, who gave it after the third stage was completed, when his patient was in danger of dying of pulmonary and cardiac congestion. Its action is to lessen the strain of the heart through the dilatation which it causes in the small peripheral vessels throughout the body, either from paralysis of the muscular fibres of the arterioles or of the vasomotor ganglia in them. Soon after its administration (from twenty to thirty seconds) its effects are seen. The drug is best given by the chloroformist in capsules containing four or five minims, which are broken and held to the patient's nose. It is also useful in opposing the tendency to chloroform syncope; a threatening of this condition may be kept off by a careful anesthetist. As the child is delivered, the nitrite of amyl is of great value in neutralizing the increasing strain on the heart due to the additional blood thrown out of the uterine circulation, as a result of the uterine retraction which follows delivery.

Hypodermic injections of nitroglycerin may be used instead of amyl nitrite.

The third stage now follows, that most to be feared. Opin-