commenced the operation. Both ears could be felt distinctly, and in that position considered the most favourable to admit of the child's exit. I placed her at the edge of the bed, and used the necessary precautions. I succeeded in locking the forceps after some difficulty and perseverance, and with a few extractive efforts, making pressure of the blades at the same time, the head moved forward. She was delivered at four P.M., much exhausted. The child was born alive and weighed eleven pounds some few ounces. After expulsion of the placenta she had considerable hæmorrhage, which was arrested before I left the house. Her progress to convalescence was speedy. The child lived over a week and died of jaundice.

CASE II.

Mrs. P., aged 30, in labour with her first child, residing at Lockerley, summoned me on a Sunday evening, about seven o'clock. She is a short, thick-built person, something after the style alluded to by Byron in "Don Juan," "a dumpy woman." Reports that pains commenced in the previous night, and have continued at regular intervals, and without intermission, to this time; from the commencement has had no sleep, and feels much tired. At nine the os uteri was dilated to about the size of a crown piece, thin at the edges, and yielding; membranes entire; head presenting. As I was five miles from home I decided upon remaining with her, with more comfort to myself than to my horse, who was exposed to the winds in an open shed. By daylight the head was in the vagina, and at eight, A.M., pressing against the perineum, the pains appeared quite strong enough to expel the child, but it did not come. I carefully avoided frequent examinations, fearing she would require instrumental aid in some shape. Warm applications were directed to be applied to the vulva and perineum, with the view of relaxing the parts, if possible. The room was kept cool and quiet, and proper drinks administered. The pains began to lose their wonted vigour, still I hoped it would eventually be over without any interference on my part. I had now been in the house seventeen hours. No progress in the last four hours, and the pains were dwindling into nothing, evidently from want of power. She was much exhausted, and disagreeable progressive symptoms were stealing upon her. It became necessary that she should be delivered with the aid of the forceps, if possible, without further delay. The os externum appeared smaller than usual. Probably her age (30, and the first child,) militated against the parts giving way. With considerable trouble and difficulty I passed the first blade, the second glided tolerably easy. She was delivered, after much care and patience, about three, P.M., twenty hours from the time of my arrival. The perineum was slightly lacerated. The child was full-sized, born alive, but died soon after. The mother down stairs in about ten days.

CASE III.

I was sent for one evening to Mrs. P., of Lower Wallop, in labour with her fourth child, under the care

of an old midwife. She had been in labour since the morning. Much excited, irritable, and highly nervous. Upon examination I found the left hand in the vagina, which the midwife had mistaken for a foot, and who said she "couldna' tell why the child didna' come, as the pains wur strong."* The membranes had been ruptured some hours. Pains very violent. I gave her a full dose of tincture of opium, which quieted her, and proceeded to turn. I passed my hand, and succeeded in getting back the arm, after several attempts. The right elbow could be felt, and also the right knee, which I hooked down. With the knee there was a portion of the funis, without pulsation. The breech passed easily, and labour was completed, satisfactorily, in about two hours. The child was still-born, rather above the average size; its left hand and arm considerably swollen, and very livid. The placenta followed quickly.

[To be continued]

EFFECTS OF IODINE ON THE MAMMÆ,

By JOHN M. BRYAN, Esq.

ELIZABETH MARLOW, aged 16, of robust healthy appearance, had menstruated regularly for more than twelve months; was very fat generally all over the body, and with very large mammæ for her age; applied to me January 12, 1836, for relief of bronchocele, there being great enlargement of the thyroid gland, both in front and at the sides, causing considerable uneasiness from pressure upon the adjacent parts. She commenced using Unguentum Hydriodatis Potassæ, rubbed into the swelling for fifteen minutes every night, taking inwardly at the same time five drops of the compound tincture of iodine three times a day which treatment she persevered in until March 14, when she commenced applying the tincture to the swelling night and morning, instead of the ointment.

This treatment was continued until April 23, when she began to suffer from giddiness and defective vision, and left off the iodine both internally and externally, as it was evidently affecting her health, the flesh losing its firm feeling and appearance, and she was becoming altogether out of health, and was placed under other treatment, having reference to her particular condition, in June and July, consisting of effervescent saline medicine, with alterative aperients. Nevertheless, she gradually became thinner, so that towards the end of the year the mammæ were quite wasted away, and there was a general wasting of the whole body, tending to the supposition that she was in a rapid decline, the bronchocele had also wasted very considerably, although not so

* The old midwife under whose care this case fell, was then upwards of eighty years of age. Her faculties were clear, and good, and she often boasted to me of having "followed the art," (as she quaintly designated it,) and of having attended several hundred cases. We may, therefore, fairly infer, she has deprived the local medical officer of many hundred pounds.

much in proportion as other parts. In the beginning of 1837, under a restorative plan of treatment, she gradually altered for the better, and became again in a few months quite *enbonpoint*, and so she has remained until the present time. The bronchocele enlarged also, and is now much the same as at the commencement of the treatment.

Northampton, March 16, 1852.

Hospital Reports.

QUEEN'S HOSPITAL, BIRMINGHAM.

CASES

Reported under the terms proposed by the Association.

BY OBSERVATOR.

Case of Pleuro-Pneumonia complicated with Tubercle.

THIS case, in which it was obvious that pleurisy and acute pneumonia existed, forcibly illustrates the importance of ascertaining the previous history of a case. In this instance, the only symptom of tubercle was an old-standing cough; where the acute complications have produced organic changes, of course an accurate diagnosis is rendered extremely difficult.

History.—Frederick Farmer, aged 42, of nervo-sanguineous temperament, became an in-patient of the Queen's Hospital, Birmingham, under Dr. Nelson, on the 2nd of December, 1850. He stated that he had been subject to cough for some years, and that a fit of coughing usually occurred every morning. About a fortnight previous to admission, after violent exertion, he was seized with a dry harsh cough, with chilliness and difficulty of breathing, which came on in the night, but did not observe that the expectorated matter was at all discoloured. He was attended, expectorants were administered, but he became worse and was sent into the hospital.

Symptoms.—He now complained of severe dyspnoea, which was increased by the slightest exertion, with dull pain on inspiration. His cheeks were flushed, and during the last five days his legs had swollen. Expression of countenance intensely anxious, absence of the respiratory murmur, and of the local thrill in the lower part of the left lung; also complete dullness under percussion. On the lower portion of the right side there was marked crepitation, and hasty bronchial respiration above. Pulse 96; respiration 50.

Diagnosis.—Pleuro-pneumonia with effusions.

Indications.—To subdue inflammatory action and promote absorption.

Treatment.—Calomel was ordered, every two hours, and tartrate of antimony with hyoscyamus, every hour, and a blister was applied to the chest. On the following day his spirits were a little higher, but scarcely any

change had taken place. Pulse 116; respiration 56. He gradually sunk and died on the 4th.

Post-mortem appearances.—The left lung had collapsed to about half its natural size, and in the left plural cavity was a large quantity of whitish serum, several adhesive bands stretched across from the lungs to the pleura, and there were large flakes of fibrinous lymph in the lower part. There was also a small excavation at the apex, containing disintegrated tubercle. The right lung was gorged with blood and the lower portion was in the first stage of acute pneumonia.

Observations.—It seems probable that tubercle had been deposited in the apex of the left lung, which became softened, under the continued irritation of a neglected cough. Ultimately, as is frequently the case, acute pleurisy supervened, which not being actively treated, proceeded to effusion, causing collapse of the left lung. The burden of the circulation falling on the right lung alone, engorgement and inflammation followed, and death ensued. A timely abstraction of blood might have been beneficial, but in the sinking stage, would have been useless.

Case of Frontal Neuralgia.

IN reference to this complaint, it may not be out of place to remark that neuralgia, chronic rheumatism, spasms, and some nervous affections, may be and are sometimes made subjects of simulation and pretence, in order to obtain comfortable board and lodging, and thus impose upon charitable institutions. Where there is reason for suspicion, the application of setons and blisters, with brisk purging and low diet, generally proves an efficient test of such pretensions. The simple and consistent account given by the patient in this case, his early report of relief, and general conduct, left no doubt of the truth of his complaint.

Matthew Chambers, aged 24, of nervo-lymphatic temperament, was admitted an in-patient to the Queen's Hospital, under Dr. Nelson, on the 14th of December, 1850.

History.—He stated that his general health had been tolerably good, but that for some months he had been afflicted with acute shooting pains. Purgatives and liniments had been employed, but to no purpose.

Symptoms.—The pains which were limited to the left side of the forehead and left temple continued. The urine contained large quantities of lithates and the bowels were costive. Pulse 88, steady.

Diagnosis.—Local neuralgia.

Indications.—To improve the secretions and diminish the local sensibility.

Treatment.—He took pills of mercury and colocynth every night, and a colchicum pill with an alkaline diuretic draught thrice a day, and a belladonna plaster was applied over the left eye.

On the 17th, the bowels and kidneys acted freely, and only occasional slight twitches of pain. Continued the medicines.

On the 21st the pains were very slight; the urine clear and tongue clean. He continued the aperient