with every agent generally employed to rouse the torpid condition of the kidneys, but without effect. Recourse was then had to small and repeated doses of iodide of potassium, and an ointment compounded of the same salt was directed to be rubbed freely over the abdominal region. The effect of this ointment was to produce extensive cutaneous irritation, and the tenderness was so great, that the patient begged to have it laid aside. It was, however, repeatedly used when the condition of the skin would permit it. In spite of these measures the accumulation gained ground; the patient became cachectic, and so exceedingly reduced in flesh, that it became obvious that she would sink, if the disorder could not be overcome by other means, than those hitherto employed.

I therefore proposed an operation, being convinced that if any good was to be derived from removing the accumulation by such process, it would be better to do it without the least delay.

I consulted my friend, Dr. R. on the subject, who bestowed much pains in considering the case; he thought with me that it would not be possible to avoid an operation, but suggested a plan of treatment which might have a fortnight's trial, and then if no good resulted, to proceed at once to paracentesis abdominis.

The medicine, however, produced no effect; it did not even stimulate the kidneys to more activity than what had been done previously, while the accumulation was increasing daily, and the distention of the abdomen distressing. Therefore, on the 17th of June, just eight days after Dr. R. had seen her, and six weeks from the commencement of the attack, I performed the operation, assisted by my excellent friend, Mr. Rogers, of this town, when fourteen pints of dark coloured fluid, resembling in appearance water, in which aloes and saffron were infused, were abstracted. The patient bore the operation well, the abdomen was well bandaged; she was put to bed, and from that time to her perfect recovery, not one important symptom occurred. She has since had two other children, and with the exception of occasional constipation, which indeed has always been her peculiar habit, she enjoys at this time perfect health. The secretion of milk, which was scanty during her illness, became most abundant after her recovery, and she was enabled to suckle her infant her usual time.

Remarks:—This case has suggested to me one material point in the treatment of peritoneal dropsy, viz., *not to uselessly protract an operation.* Effusion may be considered as one of the accidents of inflammation, and occurs without any hydropic disposition; but if water be suffered to remain for months in the cavity of the abdomen, vitiating and emasculating the bowels, and weakening the energy of the absorbent vessels, it appears obvious the accumulation will return, and an hydropic diathesis be induced. I am also inclined to think that the previous medical treatment had its share in this successful recovery, for although the mercury and iodine were incapable of exercising an influence on the vast body of water deposited, who shall say that when that water was removed they were not active agents in preventing a return?

Newport Pagnell, Bucks, June 25, 1844.

CASE OF TWINS, IN WHICH THE PLACENTA OF THE FIRST CHILD WAS NEARLY DETACHED, BEFORE THE MEMBRANES OF THE SECOND WERE RUPTURED.

TO THE EDITOR OF THE PROVINCIAL MEDICAL AND SURGICAL JOURNAL.

SIR,

There is not anything new either in the following case, or the treatment of it, but perhaps it might have been managed better; and if so, my want of due care on the occasion may be a caution to others who meet with similar cases; for it is easier to see afterwards what might have been done, than to do everything well at the time of such an occurrence. From these considerations I send the case for your decision, whether or not the publication of it may be desirable,

remaining, Sir,

Yours respectfully,

W. ALLISON

East Retford, June 24, 1844.

I was requested on the 24th of May, 1844, to see a woman, (the wife of a butcher, named Hawksley,) who was supposed to be in labour of her fourth child, and who had suffered from frequent uterine pains which had prevented her from sleeping during the last twenty-four hours. The child's head was felt presenting at the brim of the pelvis; not pressing upon the lower part of the uterus, round the os uteri; the os uteri nearly as large as a half-crown piece; the membranes neither broken nor protruding. There was a coloured though not excessive discharge. She was desired to get into bed, and to take some gruel, which was not to be hot.

On calling again after a lapse of some hours, the membranes were rather protruding, but the pains were still inefficient. The woman told me that one of her intimate friends had remarked that day, "From your size, you do not appear to me to be at your full time;" and she named that remark to me, just at the moment when I was thinking that the uterus was over distended, and more probably so by two children than by an unusual quantity of liquor amnii. On examining her body externally, it felt large at the sides, and as if the uterus contained twins.

As the edge of the os uteri had become thinner, the membranes were ruptured, and in about one hour a child was expelled; the navel-string was tied and cut, when the untied end bled so freely as to require a ligature. On passing a finger along the cord, about half the placenta was felt in the vagina; as, however, the abdomen was not much less in size, I made my left arm bare and passed my hand beyond the placenta into the uterus; when feeling a second head, I again ruptured the membranes, and then feeling what I thought was a knee, pulled it down, and found a *hand* in the vagina. Having returned my hand, having found two knees, and having ascertained that they belonged to one child; I used a good deal of force in turning the child with its legs downwards, the disturbance of which, produced some pains, and a second child was soon expelled, bringing the first placenta before it. There was profuse hæmorrhage during the extraction of the second child. The other placenta was readily peeled off, from the fundus of the uterus, and was

quickly brought away without producing any uterine contraction; there was still free hæmorrhage, and as I had previously asked for a pail of water, cold from the well, I held my left hand and arm a minute or two in it, and again passed that hand to the fundus of the uterus, which part I pressed between the left fist and the right hand taken from cold water and placed externally. At the same time I might have attempted to press altogether upon the common iliac vessels, but did not think of it at the moment when it might have been practicable. After having changed the point of pressure once or twice, there was a strong uterine contraction round my wrist, not my fist, and a more free hæmorrhage from below the contracting part, the spot where the first placenta had been attached, near the neck of the uterus, which induced me to bring my left hand below the contracting part and to keep up pressure, between my hands, at the lower part of the uterus, until it also was contracting tolerably well. Napkins wrung out of cold water were applied, together with forcible pressure of the uterus between my hands placed externally; several folded towels were placed upon the abdomen below the navel, and a broad tight bandage round the hips and body. Thirty-five drops of Battley's sedative solution were administered; the nurse was desired to keep the room cool; to give cold water occasionally, and to let the woman remain several hours as she was (in her dress) without disturbing the bandage. The following morning, the report was, "That the woman was very fainty one hour after I left her; that she did not faint completely; but, that she had lost a good deal of discharge." There was rather unusual discharge during the first three days, which was an object to her, inasmuch as she had not been previously in a good state of health and had lost flesh and strength.

REMARKS

The mistake in bringing down the hand instead of the knees in the first instance, lost perhaps one minute; perhaps no time on the whole, for I then knew what it was, and it was removed from the legs: nevertheless, some questions naturally arise in ones mind, should the membranes have been ruptured at my first visit to have saved time and strength? Could the after discharge have been moderated by producing a more complete uterine contraction immediately after withdrawing the second placenta? Should the hand have been kept longer for that purpose above the (hour-glass) contracted part?

Although we may suppose that as contraction was produced by pressure below, it might have been occasioned also above the middle, by taking more time for perseverance; yet, during that time, and the further time which would have been occupied in withdrawing my hand through a firmer hour-glass contraction, violent hæmorrhage would have continued from the situation of the first placenta. If the following question could be answered:—"What time would have been occupied in producing an entire contraction at the fundus?" we still could but guess at the answer to another—namely, "what would have been gained on the whole?"

In the present day various opinions are held upon almost every point in physic or surgery; and doubtless a common case like this admits of adverse theories.

Some practitioners would say, that after the expulsion of the second placenta, the introduction of the hand into the uterus was worse than useless; whilst others would maintain, that it was withdrawn too hastily—the one would say, that it produced the hour-glass instead of a proper contraction; the other, that without the introduction of the hand there would not have been any contraction at all, in a lately over-distended, almost bloodless, and flaccid uterus.

We know the result as it is; the woman is recovering very well, and, contrary to my advice, suckling both children, now thirty days since her labour.

During the first week, the younger infant always cried when its legs were moved; probably from the bruising and extension of its limbs whilst turning it in the uterus.

PROVINCIAL

Medical & Surgical Journal.

WEDNESDAY, JULY 10, 1844.

Our attention has recently been directed to a subject on which considerable difference of opinion exists, and on which, at the same time, it is highly desirable that correct views should be entertained. The destruction of animal life for the purposes of scientific inquiry, and the institution of experimental researches on the living animal, however important and, indeed, necessary to the elucidation of many physiological questions, are in themselves repugnant to every humane feeling. However therefore the end sought after, the acquisition of knowledge, may be valuable in itself and beneficial to mankind, in the light thereby thrown upon the processes of life, upon the functions of the living organism, and upon numerous questions connected with the preservation of life and health and the restoration of injured parts, the question still arises whether in any case we can admit that the end justifies the means.

The whole subject of vivisection with the view of scientific inquiry, has engaged the attention, and occupied the pens of writers employed by the Society for preventing cruelty to animals, and the arguments adduced by these writers have been met and examined into by others who have taken opposite views. While there is much exaggeration and ignorance, combined, we believe, with the best and most praiseworthy intention, on the one side, there is also, we are constrained to admit, on the other, a defect in viewing the real merits of the subject, while at the same time the only tangible grounds on which the practice is justifiable, or can