bone, or, a gritty granular deposition, of greater or less solidity, according to the period of its secretion. In the case referred to from the *Lancet*, there were found "several plates of bone upon the free arachnoid, chiefly opposite the seventh dorsal vertebra;" the arachnoid also, above that vertebra, presented "a minutely granular appearance;" and, in the case which I have just reported, there were found in the choroid membranes, concrete substances, to a considerable extent. Such abnormal appearances indicate previous irritation in those portions of the membranes where such depositions are found, and doubtless a susceptibility to be acted upon again by a slight exciting cause. Now, in an injury such as that which in this instance brought on the tetanic irritation, the extremities of the nerves of sensation and motion, with their accompanying filaments from the ganglionic system, invested by their common membranes, are crushed and mutilated; the result is inflammatory action; and, upon examination, they are found "expanded in bulk, with increased vascularity," as Mr. Goodsir discovered in the case related by Mr. Miller, of Edinburgh. In tetanus, the absorbents are never, or only accidentally, found affected; it is not necessary, therefore, as in hydrophobia, that an irritating poison should be absorbed, or that any morbid secretion thrown out at the seat of injury, should be reabsorbed; on the contrary, in tetanus, the irritation commences in the cerebral or spinal membranes, almost as soon as the inflammatory action has begun at the injured extremities of the nerves; and this we can readily understand, from the intimate union of the sympathetic nerve with the regular spinal nerves throughout every portion of the animal machine. This transposition of irritation, we know, takes place to a great extent in many other instances, and we call it "sympathy." But this sympathy seems to exist chiefly between organs of a similar structure, or between portions of the same, or similar, tissues; and thus, in the case before us, the membranous sheaths of the injured extremities of the nerves are the parts which suffer most from the injury, they being most highly vascular; and the membranous coverings of the nervous centres, from previous susceptibility, immediately assume a similar condition, and thence arise the tetanic phenomena.

I think there can be but little doubt with respect to the inflamed membranes of the brain and spinal cord being the seat of this disease; for, although these membranes, intimately connected as they are with the brain or cord, are in a state of the greatest vascularity, and although inflammatory action, has, in many instances, even gone on to granular deposition and effusion of lymph, as in the present case, still the mind is unaffected—the brain continues to perform its office healthily, until checked by pressure from serous effusion; and after death, its structure is found unchanged and normal.

At the invasion of the disease, the muscles of the neck and back are thrown into spasmodic action, probably by the excitation to the cord itself, produced by the inflamed and consequently thickened theca. If inflammatory action be not here arrested, it extends along the sheaths of the regular nerves, passing off from the spine; and the sympathetic nerve becomes of necessity involved; then supervenes that general

increased irritability—that peculiar sensibility to external impressions, which is always sooner or later observed in tetanic cases. This increased irritability is concomitant with increased capillary action, and hence we always have warmth of the skin, and often profuse perspiration at this, which may be called the middle, stage of the disease. Should the patient survive this stage, symptoms of serous effusion into the arachnoid gradually appear; respiration and circulation become impeded, or altered; the cold damps of death collect upon the face and head; and at length the patient passes from off the stage of his human sufferings, perhaps in a convulsive paroxysm, which to the bystanders may appear a struggle of agony, but of which the dying man himself is happily unconscious.

CASE OF EMPHYSEMA OCCURRING IN CHILD-BIRTH.

By FRANCIS DAVIES, Surgeon, Pershore.

On Dec. 10th, 1829, at six p.m., I was requested to see Mrs. C., a delicate lady, with her first child, seven miles in the country. She was complaining of slight pains in the back; discharge trifling; the os uteri but very little dilated; had no rest all night; the pains were not at all improving, nor did the labour appear to be at all advanced; I left her, and returned home.

11th, two p.m. I was again sent for, and found her nearly in the same state; at eight p.m. I gave her forty minims of tincture of opium; she slept soundly all night, and was quite well next morning.

12th, eight p.m. I was sent for in a great hurry; she was represented as being very ill indeed; I found the pains coming on regularly, but still they were slight; the os uteri dilated to the size of half-a-crown, and the edges quite thin, with a good deal of thick glairy mucous discharge, and the patient straining violently, with the idea of soon finishing the labour, as the nurse had told her to be sure to "help her pains." I explained to her the inutility of so doing, and, indeed, the mischief that was likely to ensue, as she was wasting her strength in unnecessary exertion. The labour went on favourably till five a.m., when she was put to bed of a fine boy; the hæmorrhage was very considerable, and I had some difficulty in restraining it. In about a quarter of an hour after the placenta had been discharged, she complained of great difficulty of breathing, and I was astonished at seeing her face, throat, and breast, swollen to three times their natural size, and of a bright scarlet colour. She also complained of great pain in the throat, about two inches above the sternum, and the difficulty of breathing seemed rapidly to increase; indeed, so much so, that she said her breath did not descend lower than the top of her chest. On putting my hand on the throat, I very distinctly felt a crackling, and could easily hear a peculiar noise, and upon subsequent examination I was satisfied that she had ruptured her trachea by her injudicious straining. Pulse 110. Venesection to thirty ounces; two large basins of blood were lost before the breathing was relieved; pulse then 120. She was ordered the following medicines:—

Sulphate of magnesia	4 drachms.
Nitrate of potass	1 drachm.
Potassio-tartrate of antimony	2 grains.

Tincture of digitalis . . .	1 drachm.
Water	12 ounces.
To make a mixture.	
Chloride of mercury . . .	12 grains.
Extract of hyoscyamus . .	15 grains.
Compound squill pill . . .	20 grains.

To make twelve pills; one to be taken every four hours, with a glassful of the mixture.

I saw her again in the evening, she was decidedly better; but for the last hour the pain in the throat, and difficulty of breathing, had much increased; pulse 120. I bled to about sixteen ounces; she was much relieved by it; she was desired to continue the medicine, omitting the sulphate of magnesia, as it had operated powerfully on the bowels.

13th. Swelling almost entirely disappeared; breathes perfectly well; can draw a full inspiration without the slightest difficulty; pulse 96, soft.

14th. Convalescent; from this time her recovery was rapid, and she has since enjoyed uninterrupted good health.

This case to me is particularly interesting. I am not aware that I have ever heard of a similar one. The excessive hæmorrhage in the first instance made me doubt the propriety of bleeding from the arm, but although so much blood had been lost per vaginam, it did not seem to exercise any influence on the disease. The bleeding from the arm immediately checked the hæmorrhage, and the quantity of discharge was afterwards trifling. This appears to me worthy of consideration. I really think it would be of the utmost importance to ascertain whether or not a full bleeding from the arm would arrest the progress of uterine hæmorrhage after delivery. In epistaxis hæmorrhagica and other diseases of that class, it is well known, under certain circumstances, to be a remedy of paramount importance, and I do not see why, under the same circumstances, it may not be equally beneficial in uterine hæmorrhage. In stout women of sanguineous temperament, we frequently have very considerable hæmorrhage, attended with severe pain in the uterus. This state of things is easily relieved by a full dose of laudanum, certainly not less than forty minims, and you will seldom have occasion to repeat the dose, but I have always found that twenty minims produced restlessness and headach, without alleviating the patient's sufferings.

The patients who, according to my limited experience, appear to me most liable to uterine hæmorrhage, are those with fair complexion, light hair, delicate constitution, and rather disposed to be fat; also tall women, with black hair and melancholic temperament, and who are, at the same time, thin. In health their pulse would be very slow, bowels costive, and all their movements attended with great sluggishness. With such patients I am always on the look out, and never leave them in the town under an hour after the placenta has been withdrawn, and in the country much longer.

I have seldom much difficulty in arresting hæmorrhage, and it is my humble opinion that it would but very rarely prove fatal were the following plan adopted:—A few pains before I expect the child to be expelled, I get the nurse to place her right hand under the patient's clothes to support the uterus, and when the shoulders and body are coming out, I desire her to press firmly on the contracted uterus; the pain

which expels the body of the child generally loosens the placenta, and I firmly believe that the external pressure materially assists the uterus during that operation. I separate the child, and by drawing the funis to its full length, without using any force, I introduce my finger, and generally find the placenta lying loose, partly in the vagina and partly in the uterus; and by drawing very gently with the chord, the placenta comes away without any difficulty, the nurse still continuing the pressure. I then feel the abdomen, to satisfy myself that the uterus is properly contracted; if so, I feel the uterus about the size of a cricket ball: I get the nurse to keep her hand firmly upon it for about a quarter of an hour, then to lessen the pressure gradually. I then get the bandage which was put on round her waist, before she was confined, drawn down carefully, and made comfortably tight round the lower part of the abdomen; it is a great support, and I have invariably found patients treated in that way do well.

PROVINCIAL

Medical & Surgical Journal.

WEDNESDAY, MARCH 5, 1845.

The amended Bill for the better regulation of the medical profession has now been introduced into the House of Commons, and the statement made by Sir James Graham, when asking permission of the House to bring it in, may be considered to indicate the chief alterations which the measure of last session has undergone. As a considerable number of the members of the Association may not have the opportunity of seeing this statement elsewhere, we have thought it right to give it at length; and as the second reading of the bill has been announced for early in April, being delayed until that period for the express purpose of allowing due time for consideration by the profession, we trust that the members will give their best attention to the subject in the interval. Whatever may be the absolute merits of the measure itself, it will be evident on the perusal of the statement, that Sir James Graham is desirous of meeting the wishes of the profession as a body, and that in several instances where he will probably fail of doing so, the difficulties with which he has had, and still has to contend, connected with existing powerful institutions and vested rights and privileges, must be considered as the main cause of sundry shortcomings and imperfections which might be pointed out.

INTRODUCTION OF THE AMENDED MEDICAL BILL. SIR JAMES GRAHAM'S STATEMENT.

Sir J. Graham rose and said,—Sir, I should not have considered it consistent with that duty which I am called upon to perform, to have troubled the house at any length upon the subject of the motion which I am about to make, had I not thought that a very great