being occasionally administered, with the object of relieving the tendency to constipation. The urine continued clear, and with no evident departure from its natural condition.

No relief of any consequence was obtained to her symptoms by these means. The view at first taken was, that this lumbar pain was an ordinary form of lumbago, which in the majority of instances being accompanied by, if not dependent on, constipation, would be alleviated so soon as the secretions from the intestines became natural and regular. As there were no erratic pains in the limbs, nor other symptom of a rheumatic character, the possibility of the pain being allied to that disease was not tenable. It was not till a week after admission that her urine began to exhibit some characteristics of derangement, with tenderness in the region of the kidneys. On the 8th of October, it was of a high specific gravity, 1.023, of darker colour, and depositing a sediment after cooling. The sediment was re-dissolved on application of heat, and exhibited the usual characters of the lithate of ammonia under the microscope; and accompanying this deposit were many crystals of the uric acid, occurring in the stellar form, accompanied by some few of the lozenge or acute rhombic shapes. The stellated masses of crystals were those produced apparently by the aggregation of many lamellated lozenges, whose axes lay in varying directions. The cause of the pain now became evident; the formation of uric acid in these minute crystalline aggregations being for the most part always attended with these acute lumbar pains.

From the absence of a more copious deposit of uric acid in the form of sand or gravel, as it is commonly called, there is some reason to fear that these crystalline masses may have formed minute calculi, and have become impacted in the pelvis of the kidney. The urgent pain suffered by the patient, and constantly referred to the region of the kidney, is in all probability dependent on this cause, or on that congested condition of these organs always present during the secretion of abnormal quantities of uric acid. The stellated form of crystal which you have just seen in the field of the microscope is peculiarly adapted to excite pain and irritation on any surface over which it may pass. The retching and vomiting which have occurred during the last twenty-four hours suggest also that minute calculi may be irritating either the kidneys or the ureters.

The morbid causes that lead to the formation of uric acid and its compounds in excess, are various. Whenever the cutaneous secretion is suddenly arrested or suppressed, uric acid compounds universally appear in abundance in the urine, the kidneys having thrown upon them the vicarious office of excreting from the blood those nitrogenous elements which should escape through the outlet of the skin. Thus, in ordinary colds, produced by a sudden chill of the surface, the urine becomes sedimentitious, and the urate of ammonia deposited on the cooling of the urine, appears as a copious white, fawn, yellow, or pinkish deposit. Food, rich in nitrogen, more than sufficient to supply the waste of the tissues, causes an increase and deposit of uric acid. Thus, a rich and luxurious diet, especially if combined with habits of indolence, becomes most favourable to the production of this deposit. Some forms of indigestion are accom-

panied by uric acid deposits. In these cases perfect assimilation of the elements of the food is not effected, and the nitrogenous elements of the ingesta not appropriated, or not perfectly assimilated, escape by the renal excretion in the form of uric acid compounds. In all forms of inflammatory fever, in acute rheumatism, and many other acute diseases, the waste of the body proceeds with rapidity, depending on the disintegration and absorption of the tissues, the balance between the supply and the waste being for the time suspended; the metamorphosis of the tissues proceeding faster than the supply of nutriment. Under these circumstances uric acid becomes developed in abundance. Lastly, local injuries to the loins and kidneys will induce a condition favourable to the appearance of uric acid in excess.

In the case of this woman there is no difficulty in referring the abundance of uric acid compounds to mal-assimilation and imperfect digestion. The uneasy sensation after food, the acid eructations, occasional flatulency, torpid and irregular bowels, declare the presence of dyspepsia. Accompanying the dyspeptic symptoms is a condition of the skin, frequently present in certain forms of indigestion, which unquestionably predisposes to the development of azotised products in the urine. Her skin is dry, harsh, and scurfy.

The indications of treatment are based on this view of her symptoms. She has been ordered a hot bath daily, to induce if possible, a greater activity in the function of the skin. Mercurial alteratives, so combined as to predispose the cutaneous exhalants to free action, have also been ordered,—

R. Hydrargyri cum Creta, gr. ij.; Pulv. Ipecac., gr. ss.; Extr. Conii, gr. iij. Tere simul ut fiat pilula nocte maneque sumenda,

and effervescing draughts, with carbonate of potash, together with a farinaceous diet, embrace the treatment at present. The effect produced by it will form the subject of a few observations at our next meeting.

INTRODUCTORY LECTURE ON MIDWIFERY, DELIVERED AT THE BRISTOL MEDICAL SCHOOL, ON THURSDAY, OCT. 1st, 1846.

By J. G. SWAYNE, M.D., (Lond.,) M.R.C.S.E.

(Continued from page 501.)

As I have now completed this necessarily short history of midwifery, I shall next try to point out the manner in which you may best tread the beaten track which will ultimately lead to fame and eminence, only, however, after years of toil and application. Such is the rugged path—the steep ascent before you. There is no branch of medical science which requires of its votaries a more varied and extensive experience than this does; and perhaps there is no other which at first sight holds out such unattractive prospects in the cultivation of that experience. Before a man can attain any eminence in this art, he must have passed many a long year of plodding attendance upon uninteresting and every-day cases, which the youngest students are too apt to spurn as trivial and unworthy of notice. He must have gone through this dull routine of cases, apparently over and over again, with what he may think very little advantage to himself, in a

scientific point of view. But he will have the satisfaction on looking back upon his career, after the lapse of years, to find that his time and labour have not been misspent—that the tide of knowledge has been gaining ground, although by inches, and that every grain which he has collected in his patient gleanings, has added to his stock, and contributed to the extensive harvest which he is now reaping. This, then, and this only, is the way in which Hunters, Denmans, Baudelocques, and Naegelés have been produced, and it is only upon this practical foundation that their splendid works have been raised.

In the present day so much is required of the student that he is content to fly to short and easy roads to knowledge, rather than have recourse to the arduous but sure path of experience. He thus acquires a kind of superficial knowledge, which enables him to talk fluently and at random, upon a great variety of professional subjects, to the neglect of that safe and unerring knowledge, which is only acquired at the bed-side, and which alone can be of real service in the hour of need. All that you have read must be tested by your own experience, if you wish to effect anything great or original in any branch of natural science; otherwise all your knowledge will die with yourselves, and you will be little better than empty babblers, verifying what Lord Bacon says of the Greeks, "They have this property of children, that they are ready at talk but unripe at generation, their knowledge being verbal and devoid of works." It is much better in midwifery, at all events, to have a thorough practical acquaintance with a few leading principles, than to be able merely to discourse upon a great many, as Descartes has truly remarked, "*Nous devons préférer la connaissance de quelque peu de vérités à la vanité de paraître ignorer rien*"

Midwifery has this essential peculiarity, which distinguishes it from the practice of medicine and surgery,—it is more monotonous. Labour being a natural process, it presents a great number of cases with but few shades of difference, whereas two cases of disease hardly ever occur which do not present marked distinctions. In midwifery, the management of a case consists mainly in circumspection; there is much less to do than in treating a medical or surgical case. As mankind therefore delight to be busy, it holds out fewer inducements than medicine or surgery, operative cases being comparatively rare; thus it is, that very commonly pupils who are not the most attentive will say, after they have attended some half dozen cases, that they perfectly understand the process of parturition, and in despair give up attending any more. But I can assure you they cannot reason more idly, nor arrive at a more pernicious conclusion than this. As well might the inhabitant of a desert rock think that he perfectly understood human nature, because he is familiar with the faces of six untutored companions in barbarism, as a student who has attended half a dozen midwifery cases, pretend that he is well versed in the process of natural labour; and miserable must be his position who enters upon practice with his reputation built upon such a quicksand! What must be his feelings, if in country practice, at a distance from all aid, he is with a female, who, from mal-position of the placenta, is every moment bleeding to death, and he allows her to perish for the want of that cool head and steady hand

which a diligent attendance upon cases would have conferred upon him! And there are positions (I allude especially to country practice,) where the surgeon must practise midwifery or not practise at all, and yet in these very places, from the difficulty of procuring professional aid, the practitioner is frequently thrown entirely upon his own resources.

But there is not such a great uniformity in midwifery cases as at first appears. It has been well remarked, that no two cases of labour are perfectly alike, and I can assure you that as far as my own experience goes, I can give an unqualified assent to this remark, for I never attend a labour without detecting some new feature, some little difference in every case from its predecessors, some difference perhaps in the nature of the pains, their frequency of recurrence; the time when the membranes break, their thinness or toughness; the size of the head; the width of the fontanelles, their situation with regard to the pelvis; the state of the passages, their calibre, obliquity, &c.; the time required for the expulsion of the placenta; the period of convalescence, state of the breast, &c., and a hundred other minutiae, which a moderately attentive observer cannot fail to notice. It is by a close study of all these little facts, that precision of knowledge is attained in this as in all other sciences. An eminent sculptor was once at work upon a statue, when one of his friends dropped in and remarked that he had made no progress since he saw him last. "Why," said the sculptor, "do you not see, I have finished this lock of hair, rounded that limb, and taken a little from this corner, which was too prominent before." "But those are all trifles," observed his friend;—"And is not perfection," said the artist, "made up of trifles?" So it is with us, it is only by a constant attention to all the little differences of touch which we meet with, and by the diligent education of our fingers, that we can ever hope to attain to the *tactus eruditus*, which is indispensable in all operations, and pre-eminently so in those now before us. A surgeon, it is said, ought to possess an eagle's eye, a lady's hand, and a lion's heart. In midwifery we require the two last qualifications only, and substitute for the eagle eye our fingers, which by long practice, we render equal in tact to the delicate feelers by which the lion distinguishes bodies in the dark, and intuitively acts upon such perceptions. It is by a careful notation of the landmarks, by faithfully recording the different situations in which the fontanelles and sutures of the child's head are placed at different times with regard to the mother's pelvis, that we have attained to that perfect knowledge of the mechanism of parturition, which is so indispensable in teaching us how to apply power in the use of instruments for hastening delivery.

There are still some other inducements which may be strongly urged in favour of the diligent attendance upon cases during the period of pupilage. He only who has witnessed a great number, and has seen what modifications the process undergoes in different instances, and with what varying degrees of rapidity the several stages of labour may proceed, can form a proper judgment when he may leave his patient with safety and credit to himself, and when he may not, so that a vast economy of time may thus be produced; and whilst a tyro is necessarily wasting his time in a lying-in chamber, to the neglect of his practice, an

adept would be going from place to place visiting his other patients.

But lastly, there is one most important thing to be learnt, and which can only be acquired by slow degrees, and by attending a great number of cases; it is a quality of paramount importance in midwifery, because it teaches the surgeon to preserve his equanimity of temper, and keeps him from rash and meddlesome interference. The quality I mean is patience. No man can possess this who does not know by experience what the powers of nature are competent to effect on these occasions. Patience is one of the first lessons which the young accoucheur has to learn. Patience enables the adept, who knows by experience what pangs nature will endure at this time, and yet in the end accomplish her work safely, to quietly await the result; when the tyro, listening to the suggestions of his own mind, and the entreaties of the patient and her friends, would rashly resort to instruments, and perhaps sacrifice the lives of the mother and her helpless offspring.

By the long time which I have dwelt upon this subject, gentlemen, you must now have perceived the very great importance which I attach to practical midwifery; for although in this science, as in medicine and surgery, theory must be combined with bed-side practice, I would rather see you start into practice discarding books and lectures, and trading only on a good stock of experience, than see you contenting yourselves with the former, to the utter neglect of the latter. It too often happens, that in midwifery as in surgery, rare and difficult operations become chief objects of study, to the neglect of every-day duties. In surgery, whilst crowds flock to the theatre to see operations they may never have to perform, minor operations which may occur every day are very apt to be neglected. Not one man in a thousand in the whole course of his life will have it fall to his lot to excise the superior maxillary bone, or tie the common iliac, but every practitioner will constantly be required to bleed, cup, apply bandages, and perform other minor operations in the ordinary routine of practice; and the misfortune is, that every old woman thinks herself a competent judge of the mode in which these little things are done. The same holds good with regard to midwifery.

I hope I have now said enough to stimulate your zeal in this pursuit, which I trust that you will enter upon without delay, remembering that a few cases are worth a thousand treatises, and that there is no time like the present, when coming examinations have not yet cast their shadows before them, and your studies are not yet so numerous as to be seriously interfered with. I may also remark, that this place offers facilities for midwifery practice of the same nature, and equal to those which are furnished by most London schools. I can only add, that I shall always have the greatest pleasure in furthering your object, and giving all the assistance I am able in any difficulties you may encounter in your career.

The picture of the science which I have held up before you has its lights and shadows; the landscape is a chequered one: but yet, I think, its gleams of sunshine are much more frequent than its clouds. The man, whose duty it is to succour a woman in the time of travail, can then afford such hope, comfort, and consolation, as can be inspired by him in no other situation; and when the hour of danger is past, the first

outbreak of "joy that a man is born into the world," will pour itself forth in expressions of the most lively thanks to one who has seemed to be little less than the special instrument of a wise and good Providence. Such are the feelings of this happy moment, and they cannot fail to awaken in a noble and generous mind the most gratifying emotions. But there are other inducements towards the practice of midwifery which are of a secondary and less disinterested nature, but which, nevertheless, as the world is now constituted, cannot fail to have considerable weight. Those who enter this branch of the profession have the satisfaction of reflecting that although it is one of the most arduous, it is also one of the most lucrative. The midwifery practitioner gains the confidence of his patients sooner, and becomes actively engaged in business more quickly, than any other; and when he has once been employed he is almost sure to be retained. Women have naturally a great aversion to changing their medical attendant: they of course wish to admit as few as possible into the "arcana sacra;" and when once they have employed him for themselves, they will be almost sure to crave his assistance for the ailments of their children and the rest of their household. So closely connected in practice are midwifery and the diseases of children, that they are always given in the same course of lectures. Moreover, the province of midwifery, like that of surgery, is tolerably secure from the incursions of empiricism and quackery. Being built exclusively on facts, and confined to action rather than abstruse speculation, it is not like the kindred science of medicine, subject to the inroads of all kinds of unprincipled interlopers. Homœopathy, hydropathy, and mesmerism, may pretend to cure hydrocephalus, pneumonia, or peritonitis, by ways and means of their own, because the *rationale* and treatment of these diseases are past the comprehension of the vulgar, but they know better than to propose any new-fangled method of applying the forceps or turning the child in utero, any more than to attempt to ligature an artery, or reduce a dislocation; for even an ignorant, short-sighted, and gullible English public would quickly see the imposture, and hold it up to scorn.

As long as the world continues, and the human race increase and multiply, the practice of midwifery will never cease to be a source of emolument to our profession; for as the old women tell us, ours "is a never-failing trade." But to counterbalance the advantages I have just mentioned, there are many petty inconveniences which the accoucheur will necessarily have to put up with. After a day of toil, he will be liable to have his rest broken, to go forth and brave all weathers, spending the weary midnight hours in unprofitable listlessness, then to return to his duties the next day, with his energies damped, and his ardour quenched; and having gone through all this, he lies open to the most unmerited reproach, should everything not turn out favourably; for from the very nature of his calling, his fame must greatly rest with those who, generally speaking, are not noted for being mature in their judgment or continent in their speech. Thus, if a woman dies, either in labour or its consequences, her death will be sure to be laid by some officious meddlers at the door of the medical man. "You must bear in mind," says Dr. Gooch, "that whatever mischief happens after delivery, even if the

woman should break her leg, it will be imputed to something that happened at her lying-in, and the doctor must bear the blame." But if his reputation is built on a surer basis than the mere breath of fame, it will be certain to rise above these evil reports, unshaken by any such side blasts, and to remain a monument of truth alike the admiration and envy of all who are beneath. It is only the ignorant who have to fear such under-currents of slander, for in our profession ignorance is indeed weakness, and "to be weak is to be miserable, either doing or suffering;" but knowledge, on the contrary, is indeed power. Knowledge, however, for every-day use, requires to be dressed in an agreeable exterior; and if there is one thing, in fine, which will insure success in midwifery practice, it is a patient, kind, and attentive manner. There is no description of practice to which the trite adage "*suaviter in modo fortiter in re*" applies more aptly. We should ever remember that our patients belong to that sex, who from their confiding nature, are always wont to look up to ours for protection and support, and we should accordingly endeavour to forget our own inconveniences in our diligent attendance upon them at this trying and distressing period. These feelings, although they may be nurtured and fostered by that liberal education which every member of our profession ought to have received, yet to be genuine they should take root in that temporary sacrifice of self to the all-absorbing interest in the sufferings of fellow creatures, which so eminently characterizes the true gentleman, the philanthropist, and the christian.

CASE OF SCARLET FEVER, FOLLOWED BY SYMPTOMS OF EFFUSION ON THE BRAIN: MERCURIAL TREATMENT: RECOVERY.

By FREDERICK FRANCIS GIRAUD, Esq., Surgeon,
Faversham.

Annie Giraud, aged 9 years, had a mild attack of scarlatina about the middle of August, which appeared, as I had hoped, to pass off without leaving any sequelæ. However, on the 13th of September, slight œdema of the eye-lids shewed itself; and on the 15th, towards evening, whilst amusing herself quietly with the other children, she sat down, and complaining that she could not move, requested the maid to assist her in walking. Immediately after this, a general convulsion of the whole body took place, which continued for five or six minutes, and left her with hemiplegia of the left side. She now complained of great pain in the right temple and over the eye-brow of the same side. Six leeches were applied to this part, from which remedy she expressed great relief, which was soon followed by a return of power in the left side, after which she walked without the least difficulty. I gave her two grains of calomel, and went to bed, leaving her perfectly conscious and free from pain.

On visiting her the next morning, Wednesday, the 16th, at five o'clock, I found that she had slept well until about one o'clock, when she complained of headache and was sick; then she fell into a sleep again, which was interrupted occasionally by a feeling of sickness, with headache. I at first attributed these symptoms to the action of the calomel taken at

bed-time, but they proceeded from the head and not from the stomach, for in a few hours, viz., at half-past ten p.m., she complained of great increase of pain over the right eye-brow, and appeared terrified at the prospect of another convulsion fit, and exclaimed, "Oh! papa, if you cannot take away this pain I shall never be well again." Leeches were applied, but she soon became incoherent, and vociferated loudly, with occasional shrieks, so characteristic of meningitis. These symptoms were alternated with a kind of seesaw singing and tossing about in the bed; then a convulsive fit would come on, with different degrees of intensity, but leaving no paralysis of the limbs. The state of the pulse was constantly varying.

In this manner, the latter part of the day and much of the following night were spent. A blister was applied to the nape of the neck and to the right temple; an injection of croton oil with mucilage was administered; and calomel, in doses of two and three grains, was given every hour or every two hours, as opportunities were afforded to get it down; sometimes she would swallow it, at other times putting anything into the mouth induced a violent effort to spit and force it from the surface of the tongue. Mercurial ointment was freely and frequently applied over the abdomen and part of the chest.

During the whole of the day, and nearly all night, the act of rubbing the surface with ointment, as well as the efforts to make her swallow the medicine, caused much incoherent vociferation and resistance; but early on the morning of the following day—viz., 17th, she became more obtuse, and the convulsion fits less frequent; the pupils were dilated and fixed. Calomel and mercurial friction were continued at intervals of two hours through this day.

At about one o'clock, p.m., a constant rolling motion of the legs came on, whilst the hands and forearms were fixed and contracted; she snored loudly at times; the face was tumid; the lips livid; the pulse very feeble and rapid; the breathing was quick and laborious; and her existence seemed to be confined to mere organic life, which itself appeared to be fast declining. From one o'clock until four or five, p.m., several grass-green evacuations passed, which gave hope that the mercury had entered the system; still the severity of the symptoms gave me no reason to indulge a hope of her recovery; however, about seven p.m., she began to breathe more tranquilly, the pulse became less frequent, still the pupils remained fixed, and there was no return of consciousness.

At eight o'clock she breathed naturally, and the pulse was reduced to a little more than 100 in a minute; I therefore tried to rouse her, asking her at the same time whether she would take a little milk, when, to my great astonishment, she answered by saying, "yes." Soon after this she inquired for cold water, and then fell into a healthy sleep, which continued all night, only interrupted occasionally by asking for something cold to drink.

Friday, September 18th. She was much refreshed with sleep this morning, answered questions correctly, but had no recollection of any thing that had passed since the time she was first seized with convulsions; she complained of nothing but the effect of mercury, her mouth being very sore, and the left eye-lid and pupil still remained powerless.