

moaning; only spoke when shouted at. The bedding was soaked with blood, dripping through to the floor. On examination, the vagina was dilated, the os uteri firm, but slightly patulous; blood was pouring from her in a continuous stream; no uterine contractions. I insinuated my finger through the os uteri, at the same time endeavouring to grasp the uterus in the left hand. I now found the uterus was enlarged, mobile, and contained something resembling a placenta in touch. A fluid drachm of tincture of ergot in brandy was at once given. As the bleeding in nowise diminished, I decided upon injecting hot water; so I passed the tube of a "Higginson" well into the uterus, and injected very slowly six times with water that I could put my hand in without great discomfort (a thermometer not being forthcoming). It seemed to answer well, as the bleeding greatly diminished. I now got my finger inside the os, and sweeping it round as far up as I could reach, I detached the placenta from several points; the bleeding now greatly diminished. A medical friend, who now arrived, helped me to repeat the hot water injection; after having done so, the os became soft and dilatable, so that I was able to insert two fingers, and extract the mass already referred to, which was the placenta. I thought I felt something else in the womb, but on withdrawing my finger, the os contracted so tightly that I could not reintroduce it. Dr. Livingston, who kindly assisted me, also tried to pass his finger, but failed; and as the bleeding had all but ceased, we decided to leave her alone—at least for the present. The dose of ergot was repeated, and teaspoonfuls of brandy and milk were given every ten minutes; pulse 50, very feeble. To have one ounce of strong beef-tea every half hour. After four hours she had rallied a little; no bleeding of any moment, no bagging of womb, no pain, no sickness; pulse 70, stronger; says she feels comfortable. From this time she progressed slowly, but surely, towards recovery; only a slight discharge during the three following days. To take ergot and aromatic sulphuric acid in chinchona. In ten days she was on the sofa, and was out in three weeks.

Remarks.—Patient is a pale, flabby woman; generally bleeds pretty smartly at her periods and confinements. When I saw her my first idea was to stay the hæmorrhage, and learning that something was supposed to have been passed, I thought the bleeding might be caused by the retention of the placenta, partially or wholly detached, in the latter case acting as a preventive to the due contraction of the womb. So when I found the os patulous, and looking at the rate she was bleeding, I decided not to plug, but at once to dilate the os and empty the uterus; moreover, the finger in its passage through the os would act as a plug. When I found the bleeding continued in spite of the finger being in the canal, and the os did not give much, I determined to use the hot water injection. This acted well, restraining the bleeding, and helping the os to dilate, so that I had not much difficulty in passing my finger and bringing away the placenta after the repetition of the injection; then the bleeding ceased. The ergot may have had something to do with this happy result; but I incline to give the hot water all the credit, as contraction ensued immediately after its application. Had there been iron in the injection I should have dreaded its entrance into the uterine sinuses, for during the injections the placenta was in utero; however, this may be no reason against its use in such a case. The course of the case showed that nothing was left in utero, as no clots or débris passed. Upon questioning her afterwards I learned that she had labour pains during the day previous; that she lost a quantity of blood during the night, but got up and went about the house in the morning; when at the water-closet she felt a great rush and hardly remembered more. Had assistance been procured the day previous in all probability her life would not have been in such jeopardy.

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ABORTION; SEVERE FLOODING; INJECTION OF HOT WATER; RECOVERY.

By ARTHUR PERIGAL, M.D.

MRS. T—, aged twenty-eight, mother of six children, sent for me on Sept. 14th, 1878. On arrival I learned she had had a discharge during the two previous days, but, deeming it a return of her periods (which had been absent on two occasions), it did not distress her. However, that morning, while at the w.c., she suddenly felt a gush, and something pass from her. She was at once got to bed, where I found her lying on her back, pale, pulseless, and