

sutures. A piece of oiled lint was applied, and a fold of linen dipped in cold wash ordered to be placed over the wound. Some warm brandy and water was given, and the patient replaced in bed, expressing herself as perfectly relieved. Enemata were ordered to be given every fourth hour, warm fomentations to the abdomen, and in two hours after the operation Ol. Ricini ʒj. : to be repeated in the evening if the bowels should not be moved.

Same day, 7 P.M.—Pulse 90, soft; pain much easier; belly soft; stomach quiet; bowels firm.

Ol. Ricini ordered to be continued, and Mij. Ol. Croton. Sup. Sacch. Pauxill. to be taken immediately. Continue enemata.

20th, 10 A.M.—Pulse 100; stomach irritable; occasional vomiting; bowels obstinate; abdomen flaccid; no pain on pressure; wound healthy. Treatment same.

Enemata Ol. Ricini and Ol. Croton. to be repeated.

6 P.M.—Pulse 110 to 120; vomiting troublesome; stomach extremely irritable.

Cont. Medicamenta ut antea. Effervescing mixture ordered every fourth hour.

21st, 10 A.M.—Pulse 120, feeble; had a restless night; bowels still firm; stomach extremely irritable, rejecting all; hiccup; tongue slightly furred; belly soft, bears pressure; wound healthy.

Continue same treatment, and ordered calomel and opium every fourth hour in addition.

7 P.M.—Pulse 120, weak; hiccup; vomiting continues, becoming sterco-raceous. Same treatment, salines, &c.

22d, 10 A.M.—Pulse 120 to 130; vomiting continues, extremely offensive; constant hiccup; great anxiety; bowels still torpid; belly soft, no pain on pressure; wound healthy.

Ordered brandy and water; continue salines, cal. and opium fomentations, &c. Cont. Enemata with Ol. Ricini and Ol. Croton.

Did not see the patient in the evening, but received a message to say that the symptoms were the same, and the patient appeared to be getting worse. She continued in the same state, I was

informed, until near 5 A.M. the next morning, the 23d, when the bowels resumed their natural functions; copious evacuations took place, and when I visited her at ten A.M. all the unpleasant symptoms had subsided; pulse 90, soft and full; belly flaccid, no pain on pressure; wound healthy.

Continue salines only. Ordered anodynes.

24th, 10 A.M. — Patient continues doing well; had a good night; tongue clean; stomach quiet; wound healthy; complains of the purging, which has been rather severe.

Continue salines, with anodyne at night.

26th to 30th. — Convalescent; improving.

UTERINE HÆMORRHAGE, WITH RETENTION OF THE PLACENTA.

To the Editor of the Medical Gazette.

SIR,

I SOME time ago saw an article in one of the medical journals on a method of expediting delivery. I have forgotten in which publication it was, and have spent a great deal of time in looking for it, in order that I might refer to it in this communication, but have not succeeded. It was, however, to the effect that the author, in cases of protracted labour from inefficient pains, had found benefit from introducing two fingers into the vagina, and pressing against its posterior part during a pain, in imitation of the bearing down of the child's head on the perineum; and he attributed the good effects—no doubt rightly—to what is called the excitomotory function of the nerves.

I have not tried this plan previous to the birth of the child, but I have found it useful on what is, I think, a more important occasion—retention of the placenta from inaction, or insufficient action, of the uterus, especially when this is complicated with hæmorrhage. The following is an outline of one out of two or three cases:—

I attended Mrs. D. in labour about a month ago. She is the mother of a number of children, and her last four labours have been accompanied with flooding after the birth of the child. At her last previous confinement, two years ago, I was present, and the hæmorrhage between the delivery of the child and that of the placenta was

such as to cause debility, and greatly to retard her recovery. On the present occasion she was in a very weak state from an affection of the hip-joint, and, owing to the feebleness and inconstancy of the pains, the child was not expelled till a fortnight after the os uteri first began to dilate. After the birth of the child, gentle traction of the funis, and firm pressure over the region of the uterus, were made for some minutes, without inducing any uterine contraction; and as there was considerable and increasing hæmorrhage, I introduced two fingers into the vagina, and made firm and continued pressure on the perineum with them. The uterus commenced to contract the instant this pressure was applied, and the contraction continued till the placenta, together with some coagula, were expelled, when the hæmorrhage at once ceased, and the uterus remained properly contracted.

This is a very easy measure, which can be put in force in a moment, and need not interfere with any other efforts either to promote contraction of the uterus or to check hæmorrhage. I feel satisfied, however, that it may often be of service, and that it may occasionally obviate the necessity of introducing the hand into the uterus. The liability of tenesmus to induce premature labour, and the increase of uterine action from plugging the vagina, are, no doubt, physiological phenomena indistinguishable with the one under consideration. I do not, however, propose that the above expedient should supersede the plug on any occasion where the plug is admissible.—I remain, sir,

Your obedient servant,

JOHN SNOW.

Frith Street, Soho Square,
Nov. 3, 1842.

MEDICAL GAZETTE.

Friday, November 11, 1842.

"Licet omnibus, licet etiam mihi, dignitatem Artis Medicæ tueri; potestas modo veniendi in publicum sit, dicendi periculum non recuso."

CICERO.

CHOICE OF A PROFESSION.

It is said that in Hindostan the members of every caste invariably adhere to the employment followed by their forefathers. In England, though it

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is natural for a parent to bring up at least one son to his own occupation, it would rarely be expedient to do the same with half a dozen; and most fathers would be grateful to the friend who should teach them the advantages of the several professions, with which they are not experimentally acquainted. Mr. Hudson has undertaken the office, and in a short manual* has furnished information for parents of various grades;—from those who can afford the sum required for a commission in the Guards, to those whose humbler ambition is satisfied with a clerkship at an auctioneer's. Nay, even the state of hackney writer is explained, though it is confessed that "this employment is a sort of *pis aller* for a young man." By hackney writers Mr. Hudson does not understand the minor retainers of literature, but certain rapid penmen who wait in the public-houses about Chancery Lane, till their services are required by the law-stationers. Mr. Hudson is impartial and clear-sighted, and has drawn a judicious sketch of his subject, which will bear enlarging with advantage. Perhaps he has not laid sufficient stress on the predisposition or fitness for particular professions, which is generally manifest in the young. It would be too bold to say *jurisconsultus nascitur, non fit*, yet it is certain that at the age when professions are chosen, this predisposition is commonly so marked as to make some employments far more eligible than others. Nor are positive disqualifications to be overlooked. A dry abrupt manner would be a most serious hindrance to a practitioner of physic, in whom are required, according to an ingenious writer, "those qualities which may serve to render him an agreeable companion: for the family physician should always be the family friend."

No one, again, would think of recom-

* The Parent's Hand-Book; or, Guide to the Choice of Professions, Employments, and Situations, &c. By J. C. Hudson, Esq. 1842.