

ture of digitalis, and with uniform success. The smallest quantity required has been four drachms, and the greatest twenty-eight drachms. This last was taken in thirty-three hours by a man in Canada; the only effect was that he was bathed in warm perspiration, and slept soundly for two days and nights, with the exception of waking up about every six hours to drink beef-tea. This was the worst case of delirium tremens I have ever seen. It required the united efforts of eight strong men to keep the patient from injuring himself. It was the second attack in six weeks. I have always remarked that the disease supervening after hard spirit-drinking is extremely severe, and requires more treatment.

Although I have never found any bad results from the medicine, I invariably examine the patient before repeating the dose, as poisoning is possible. This, without doubt, occurred five or six years ago to a patient who was ordered four drachms of the mixture every two hours, and very shortly after taking the third dose died, with all the symptoms of poisoning. Therefore, if this treatment be decided on, I would strongly recommend that the patient be carefully watched. I feel perfectly convinced as to its value, even if we consider only the shortening of the disease, this treatment only requiring from one to three days at the most; whereas the old modes require from three to fifteen days to combat the disease. I might add that I never give a drop of either wine, spirits, or beer, for I consider it is only adding fuel to the flame; but I allow as much beef-tea as the patient can take, or meat if it is fancied.

CLINICAL MEMORANDA.

[Under this head, we shall publish from time to time, as materials accumulate, short records of remarkable cases in practice which are sufficiently rare, interesting, or instructive; to deserve record, but do not call for lengthened statement or comment. Brevity and point should be the valuable characteristics of cases forwarded for this column.]

DEATH APPARENTLY IMMINENT FROM THE PRESENCE OF TAPE-WORM.

By E. GARRAWAY, Esq., Faversham.

L. H., a little girl, aged 13, had been suffering for some days from diarrhoea. This had now ceased; but I was sent for in consequence of continued vomiting, which had taken its place. She presented in some degree the aspect of one approaching the algid stage of cholera. The extremities were cold, eyes sunken, surface pale, pulse almost imperceptible, tongue furred and clammy, and there was constant pain in the epigastrium. A sustaining and stimulating dietary was ordered, but nothing could be retained. Calomel and opium, prussic acid, oxalate of cerium, together with mustard-poultices, blisters, etc., all failed to stay the sickness. At length, under drop-doses of carbohc acid, it subsided; still four days had passed, and there was no reaction; the child continued cold, and death appeared imminent from collapse.

Cogitating upon how I should fill up the "certificate of cause of death", my attention was called to one of the motions (the bowels had acted naturally), in which I discovered a fragment of tape-worm. The hint was gladly accepted; a full dose of turpentine with castor-oil was given; eleven feet of worm were quickly expelled. The child rallied immediately, and recovered herself at once.

CASE OF RUNNING OVER IN A CHILD, AGED TWO YEARS AND EIGHT MONTHS: RECOVERY.

By E. T. R. TENISON, M.D., Shepherd's Bush, W.

ON May 23rd last, the wheel of a cart was backed by a restive horse over the spine (in the lower dorsal region) of George Freebody, a delicate, though well-grown child, aged 2 years and 8 months, residing in Old Oak Lane, East Acton. At the time of the accident the child was lying on his face on the road. I saw the patient fifteen minutes afterwards, and found him pulseless, very pale, covered with cold clammy sweat, features sunken, eyes closed, and respirations sighing (14 in the minute). Not a trace of external injury, save a slight abrasion of the right forearm, was to be seen. After the exhibition of stimulants and a hot bottle to the feet, feeble reaction occurred, and a small quantity of blood was vomited. The collapse continued till next day (sixteen hours), and blood was again vomited on two occasions. Under the influence of perfect rest, small and very frequently repeated doses of calomel and opium, and milk, beef-tea, ice, etc., for diet (carefully excluding all solid food), he made a rapid recovery, and is now quite well.

What was the internal injury sustained? and whence came the blood? To these queries, I do not venture an answer. I publish the case, as it proves that a young child may live after undergoing a pressure of at least 560 lbs., the cart itself weighing 11 cwt.

REVIEWS AND NOTICES.

RESEARCHES IN OBSTETRICS. By J. MATTHEWS DUNCAN, A.M., M.D., etc. 8vo. Pp. 467. Edinburgh: A. and C. Black. 1868.

BEARING in mind the interest caused by Dr. MATTHEWS DUNCAN'S work on *Fecundity, Fertility, Sterility, and Allied Topics* (1866), its perspicuity and preciseness, the labour and value of its varied and many tables, on seeing another book appear by the same author, we expected a further treat in literary food, and we can well say that we have had an agreeable feast. It has required a considerable period for proper digestion; but the result has been that we have found it wholesome and nutritive. The book is so well worth reading on account of the clearness of statement, the accuracy of argument, the labour shown in many investigations, and the interest of the subjects brought forward, that we would not by a too elaborate review deter any one from its perusal. Nevertheless, its value, as an addition to our obstetric literature, demands more than a mere passing notice.

And, first of all we will do our fault-finding; for then we can go with greater lightness of conscience to the matter of the book itself. Notwithstanding what the author says in his short Preface, the chief fault in his book is, that it so manifestly bears on its face the fact that its chapters are various papers strung together, some apparently with little alteration. The author, too, has here and there commenced an interesting subject, and, after giving us its history, etc., and some one else's ideas, says little to further elucidate it. He speaks of Dubois (p. 187) as if he were still alive. He often leaves us at the end of a paper unsatisfied; but we hope that at some future time he will give us the result of these lines of thought carried on to a satisfactory conclusion.

The publishers have printed the book well; the sketches, however, of sections of the sacrum and ilium are too rough, and Dr. M. DUNCAN has not clearly enough indicated the exact plane of their section.

We have now finished our slight modicum of blame, and will give a glance at the valuable contents of the book.

The book is divided into five Parts, and those parts again into Chapters. Part I is on the Statics of Pregnancy. The first chapter, on the Position of the Uterus, is extremely useful. The author shows that, in the erect posture, the pregnant uterus is inclined to the horizon 30 degrees; that, in the supine posture, the uterus is also little changed in position, being still oblique, but at 60 degrees; and, as a deduction from this, that the best position to obtain *ballotement* is when the uterus is perpendicular; *i.e.*, when the patient is reclining with the spine at an angle of 30 degrees with the horizon.

In the next chapter is discussed the Position of the Fœtus *in Utero* in Advanced Pregnancy. Dr. Duncan supports the gravitation theory by proofs, from the position of the fœtus floating in a fluid of the proper specific gravity. We hardly dare obtrude any thing into our author's accurate observations on physics; but there are two questions which we would suggest. May not the obliquity of the fœtus in the fluid, as if militating against the gravitation, be caused by the fœtus tending to descend at first perpendicularly, but then being deflected by the curve of the head, and so descending as an inclined plane and thus preserving its obliquity. Again, with regard to the upward tendency of the head of a dead fœtus, might not the easy decomposition of the brain have something to do with presentation is, of course, overthrown. The fourth Chapter contains some interesting remarks on the Gait of the Pregnant Female.

In Part II we have the most complete essay—if we may so speak of disjointed papers—in the book; *viz.*, on the Pelvis, comprising its Development, the Function of the Sacrum, Deformities, and the Articulations. The body being taken in the erect posture, the sacrum is shown, by its then position, to be *not* a wedge with regard to the ilia, nor a key stone to an arch, but to be retained in its position by the strong sacro-iliac ligaments. It transmits the force of the weight of the body through the spinal column, by means of these ligaments, to the heads of the femora, through the iliac beams which lie between them. The balance of power is thus preserved; the iliac beam is pressed against the sacrum as against a fulcrum; the sacro-iliac ligament pulls the shorter arm inwards, and the larger arm is prevented from falling outwards by the pressure of the femur on the acetabulum. The author, with great care, shows that, the forces that exist being brought to bear on the pelvis, it must be developed as it is; that, where one sacro-iliac joint becomes ankylosed, the obliquely contracted pelvis is the result, and when both