

broke up the cataract more to get rid of the deformity, which interfered with his getting employment, than for the sake of restoring his sight. I operated with a needle through the sclerotic and broke up the lens easily. Pain came on, and a good deal of inflammation, and I bled him, and after that he went on fairly for a time. Leeches and belladonna were again applied, and at last the portion of lens which had fallen into the anterior chamber was absorbed, and the irritation ceased. He was well pleased with the result of his case, but his sight was very imperfect.

CASE CCCCLII. M., aged 35, with very recent cataracts. I operated on the right lens and broke it up through the sclerotic. He saw the needle moving about in his eye. He went away with the pupil blocked up by a considerable portion of the lens. I performed, at a future time, another operation upon this eye with a needle and got rid of the rest of the lens, but his sight was not materially improved. I afterwards operated upon the left eye and broke up the lens and capsule thoroughly. The pupil was clearing when he went home, but I never heard whether he regained his sight.

CASE CCCCLIII. M. aged 26. Had complete amaurosis in the left eye, of nine weeks standing, but had had a capsular cataract in the right for four years. I operated and depressed the lens, and his pupil remained clear, but his sight was no better. The other eye was, in the mean time, treated with mercurials, blisters, and turpentine, and when he went home his sight had improved a little but was very imperfect.

CASE CCCCLIV. M., aged 59, had been blind four years from an injury to the left eye by a twig, which produced cataract and adherent iris, and twelve weeks before I saw him he injured his right eye in the same way. The latter lens I extracted, and the former I depressed; when he recovered, both eyes were tolerably clear but his sight was no better.

CASE CCCCLV. M., aged 20, with opaque capsule following iritis, of four years standing, which he was anxious to get rid of, on account of the deformity, as he lost his situation as shopman in consequence of it. His eye recovered after an attack of inflammation, and he went away with a clear pupil, but very indistinct sight.

CASE CCCCLVI. M. aged 30. The right eye was lost from corneal disease, and the left was injured by a piece of iron, producing distorted pupil and opaque lens. I broke up the lens, and his sight improved very much. At a subsequent operation, I removed a portion of capsule which still blocked up the pupil and he had good sight for six days, when suddenly a clot of blood was found filling his interior chamber, and severe inflammation followed. He was treated actively but to no purpose, and he is, I believe, at the present time quite blind.

CASE CCCCLVII. F., aged 19, with fully formed cataract in the right eye, and very dim and myopic sight in the left. I drilled a hole in the anterior part of the lens by means of a curved needle introduced through the cornea. No symptoms of any consequence followed, and the eye became amaurotic. The other eye is in the same state and she is quite blind.

CASE CCCCLVIII. M., aged 50, a tremulous subject with fully formed white cataracts. He had the appearance of being an intemperate man, which, however, I believe was not the case; I broke up the right lens through the cornea, and small portions fell into the anterior chamber. A severe attack of inflammation followed, and I made a section in the lower part of the cornea to get rid of the lens which seemed to irritate the eye. When he recovered from this he had very little sight, and was so weak that he could scarcely walk.

[To be continued.]

## PUERPERAL CONVULSIONS SUCCESSFULLY TREATED BY CHLOROFORM.

By FRED. PAGE, M.D., Landport.

ON Feb. 14, Mrs. S., a woman about 30 years of age, in every respect healthy, and naturally of a cheerful disposition, at the full period of pregnancy with her sixth child, was suddenly seized with convulsions about mid-day. When I saw her, she had had seven or eight severe attacks in an hour. She was lying in a state of coma, with stertorous breathing, contracted pupils, pulse full, strong, about 80. She had a severe paroxysm soon after I arrived, with violent struggling, foaming at the mouth, etc., which left her, as before, in a state of lethargic sleep.

The os uteri was intact; there was not the slightest disposition to dilate; nor was there any symptom of approaching labour. She was bled to sixteen ounces. A violent fit ensued. I then kept her under the influence of chloroform for half an hour, and waited another half an hour; no fit occurred. A turpentine enema was given; and a blister was applied to the neck.

At 6 p.m., she had had convulsions at intervals. At the moment of my entering the room, the child was expelled suddenly during a fit. The placenta followed at once, and the labour was complete. The patient was still insensible, with rapid convulsions. The enema operated well. I again used chloroform for half an hour.

10 p.m., four hours after labour. The patient was very quiet, sleeping; there had been no return of the convulsions.

Feb. 15, 8 A.M., sixteen hours after delivery. She had been in convulsions during the night. I found her at 9 p.m. much as I left her the night before, in profound sleep. She had convulsions whilst I was there. Chloroform was again given for half an hour; after which she had no attack. Sensibility gradually returned, but it was some days before she quite recovered. She and her child are now quite well. I may remark that she has not the slightest recollection of anything that happened during her illness.

REMARKS. This was a case which assumed what is called the apoplectic form, in contradistinction to the hysteric, and in which much doubt has been expressed as to the propriety of exhibiting chloroform. In reviewing this case, it is evident that chloroform checked the attacks. It was used at three distinct periods: 1. Before delivery, preventing them for two hours; 2. Directly after delivery, for four or five hours; 3. Sixteen hours after delivery, when they ceased.

The first anxiety in puerperal convulsions is to empty the uterus and bowels as early as possible; but convulsions continued for twelve hours after the former had taken place. I must conclude that bleeding, the use of chloroform, and early emptying the uterus, are the grand remedies in this disease—especially chloroform. I shall be glad to hear more of its use in these cases.

NEW USE OF COWS. The health officer of Brooklyn, New York, in relation to the prevention of small-pox, says:—"In order to relieve the minds of parents in relation to the quality of (vaccine) matter to be used upon such occasions, and also to meet the wants of the medical profession in this city in particular, I would recommend that a cow be set apart, and kept at the grounds of the almshouse or elsewhere for this especial purpose, from which fresh (vaccine) matter could always be obtained. The authorities of Boston have for several years, in this manner, and with effect, supplied the profession in that vicinity."