HÆMORRHAGE FROM DETACHED PLACENTA NEAR THE EIGHTH MONTH OF GESTATION: LABOUR INDUCED BY BARNES'S DILATOR: RECOVERY.

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MRS. —, aged 44, had had three children, each labour being normal. She said she was standing in a cart on the 25th of November, and giving her little girl to her husband, who had just got out at his own door, when the horse went on and she was thrown forwards, but was saved by her husband from falling. She was frightened, but soon recovered from the shock. During the night, she got out of bed to pass urine, when a large quantity of blood poured from her. When she returned into bed, the hæmorrhage ceased. In the morning, she rose and continued her domestic duties as usual.

On that day week (December 2nd), she had a return of the hæmorrhage, which, according to her account, was profuse. It came on while she was in bed, and continued until she was faint. Her husband got up and came for me about twelve o'clock at night. I went immediately, and found her still faint. She had lost a great deal of blood, which was still oozing from the vagina. The os uteri was tilted upward and forwards; it was a little larger than a sixpence, and rigid. I plugged the vagina with a silk handkerchief; applied cloths dipped in cold water over the pubes and to the vulva; raised the legs; admitted air freely into the room; removed some of the bedclothes; and gave twenty drops of oil of turpentine and a dose of ergot as soon as I could.

I watched her the following day and night, giving her diffusible stimulants, with an egg in some tea or gruel occasionally. She did not have any pains from the very first of my seeing her.

I left word that, in the event of any more loss, I was to be sent for immediately; and that she was not to get up for some days. In the course of two days, she came down stairs at noon, and continued much the same until seven o'clock in the evening, when, on crossing the room, the hæmorrhage returned, and she fainted. She was taken to bed, and I was again sent for, and arrived shortly afterwards, when I found her very pale and almost pulseless. The vagina was filled with coagulated blood; the os uteri flaccid, and a little more dilated than on my first examination. I could just make out that it was a vertex presentation. I did not think it advisable to rupture the membranes, as I might, if necessary, turn better with them entire. I decided to use No. 1 dilator, and deliver by turning as soon as the os became sufficiently expanded. Desiring assistance, I sent to Wisbeach for the first surgeon who might be in the way, and at once began dilating the os. I found some difficulty in making the India-rubber remain in the os; but at last I succeeded by passing it in with a piece of whalebone. This answered admirably. There was no pain complained of during the dilatation; and, when the os was sufficiently opened, I left off injecting, and allowed it to remain until the arrival of the surgeon. When Mr. Wm. Groom arrived, he examined the expanded os, and agreed with me that I might introduce my hand. Just at this time, it seemed that the dilator had got its full volume of cold water; for, in attempting to inject a little more, to show Mr. Groom how it acted, the dilator burst with a loud report. As soon as the gush of water had come away, I passed up my hand by the side of the head and brought down the feet. The only little difficulty I experienced was from the

os uteri contracting on the head, which I liberated as soon as I could introduce my finger into the mouth. The patient had not felt the child move for some hours; and it was still-born.

December 15th. She was going on favourably, feeling only weak from the excessive loss she had sustained.

I have now used the dilators three times, with good results.

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ON DEODORISERS AND DISINFECTANTS.

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At the present time, when the attention of the public generally and of medical men in particular, is powerfully drawn to the means of preventing the spread and propagation of infectious diseases, a few remarks on the above subject may not be out of place.

It should be premised, that the very idea of disinfection is grounded on the assumption that diseases of a certain class are capable of communication to a healthy subject, by means of minute material particles given off among the secretions or excretions from the body of a person affected by them; it is assumed that these particles, like all true organic substances, are capable of oxidation and destruction by certain chemical agents; and it is the power of producing this result which forms the essential property of the disinfectant. Since, however, the liability to infection is vastly increased, and the general health seriously impaired by many external conditions, among which the habitual presence of foul odours takes a prominent place, various substances of another class have come into use, which, without possessing any general oxidising power, combine with and fix some of the gases which always accompany animal decomposition, and add greatly to its depressing influence upon the system.

These substances may be termed *deodorisers*, in contradistinction to the true disinfectant. Of the latter we shall speak first, as it forms by far the more important portion of the subject.

Disinfectants, then, owe their power in every case to nascent oxygen, i.e. to that gas in the act of emerging from a state of combination, under which circumstances its affinities are unusually strong, and it so far resembles that much talked of, but little understood body—ozone.

The hypochlorite of calcium, or "chloride of lime," is the most valuable member of this group, since it alone, of all the substances at present in use, is capable of directly purifying the atmosphere, whether by decomposing gases diffused through it, or oxidising organic particles suspended in it, as well as of destroying the source of infection or pollution; this important end is attained by virtue of the property it possesses of disengaging hypochlorous acid by contact with water, and especially with mineral acids.

Hypochlorous acid consists of chlorine and hydrogen, one equivalent of each; that is, in the right proportion for forming hydrochloric or muriatic acid, combined loosely with one equivalent of oxygen. Hence, on contact with any organic particle, the latter gas is immediately surrendered to it, the result being the virtual combustion of the particle and the formation of hydrochloric acid. The hypochlorite of calcium itself acts in an exactly similar manner if it