

## ON SOME SUPPOSED EFFECTS OF THE ERGOT OF RYE.

By R. U. WEST, Esq.

MUCH has been written on the supposed deleterious influence of the ergot of rye on the fœtus. In the course of a somewhat extensive midwifery practice, I have administered this medicine about three hundred times, and I feel bound to say that I have not observed the pernicious effect attributed to it. I have certainly in a few cases, where the pains have been continuous for some time before the birth, found some difficulty in establishing respiration; but if this circumstance were due to the ergot, it could have been owing only to uninterrupted pressure on the brain—a merely indirect mechanical effect, and one which is not unfrequently observed after severe labours when no ergot has been given. But the pernicious influence on the fœtus is asserted to be a *specific* effect of the medicine—a sort of poisoning. Now, some years ago, I did unquestionably register one doubtful case of still-birth, as due possibly to this specific influence; because the case was one where the labour was easy, the pains not uninterrupted, and the child had the appearance of having been alive up to the time of its birth. But surely one such case, out of so many with a different result, would be very doubtful evidence, even were it not rendered still more doubtful by a case which I met with last September, in which I should certainly have attributed the death of the child to this kind of poisoning, but for a circumstance which occurred immediately after.

When I first arrived at the house of my patient, finding the os uteri in a thick, rigid, and undilatable state, I waited a few hours without doing anything. I then, when the os was in a more favourable condition, gave a full dose of ergot, because the pains were very inefficient. In an hour, the child was born—dead. Now, the pains had been anything but continuous; on the contrary, the intervals were unusually long and complete; that between the two last pains which attended the expulsion of the head having been at least five minutes in duration. The child had every appearance of having been alive up to the time of birth, and though there was no pulsation in the funis, yet the umbilical vessels felt full. This, then, thought I, must be an example of the *specific* bad effect of the ergot. But, when the child was removed, I placed my hand on the abdomen of the mother, and found there was another child. And in a quarter of an hour a second child was born *footling*, very lively and vigorous. Now, surely any specific poisonous influence of the ergot must have been experienced by *both* children, and more by the second than by the first, in proportion to the greater length of time during which it was exposed to it.

We must endeavour to avoid mistaking the *post hoc* for the *propter hoc* in this, as in all other inquiries.

It has been suggested to me by an ingenious friend of mine, Mr. Grantham, of Burgh-le-Marsh, to whom I mentioned this case, that possibly in some few instances of head-presentation even, the funis, though not prolapsed, may still be placed in such a situation as to be unduly and continuously pressed upon during the last stage of the labour. And I would myself suggest the occasional possibility of the presence of some organic malformation, rendering extra-uterine life impossible.

It may be proper to observe, that I have for many years been in the habit of administering a decoction of the ergot prepared from a coarse powder, which I make by grinding the drug in a coffee-mill. By boiling two drachms in about two ounces of water, and using the decoction poured off from the dregs, the dose given would be equal to about a drachm of the ergot in substance. I very early in practice learned to distrust every other method; and since adopting this plan, I have scarcely ever had occasion to give a second dose.

I am quite sure that the ergot of rye, when given with the ordinary precautions, does no harm to the mother; and I am very doubtful about its hurting the child.

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## BIBLIOGRAPHICAL NOTICES.

A LECTURE ON THE SANITARY CONDITION OF CHORLTON-UPON-MEDLOCK, delivered on Jan. 12th, 1854, by JOHN HATTON, Esq., M.R.C.S.E. Manchester: 1854.

CHORLTON-UPON-MEDLOCK is part of the borough of Manchester, containing 7,708 houses, and 39,692 people; and Mr. HATTON, who has been in practice there for fifteen years, acting as surgeon to the dispensary and union, has taken great pains thoroughly to investigate its sanitary condition, and to bring the results before the public in a lecture delivered at the Town Hall, at the request of the Manchester Sanitary Association. Appended to the pamphlet is a very convincing map, in which the fever and cholera cases are marked, and are shown to affect the same fœcal localities. There is also an ingenious drawing, bringing clearly before the eye some blocks of back-to-back houses, in which the mortality was high. The local authorities have sewered and paved the streets, and supplied the district with water; but it seems they have not compelled the owners to drain their houses into these sewers, or to take in the water. Experience shows that landlords must be compelled to do this, or they will not; and, on this account, we want the vigorous orders of a central authority. The country looks to Manchester as a great centre of practical activity; and the duty of great improvements in sanitary matters lies with such a community, who should set the example to smaller places; for they have ample wealth, knowledge, and practical power. Those who take the trouble which Mr. Hatton has done are deserving of the best thanks of the nation, as it is only by bringing before the public mind the same sad story of the connexion of disease with filth, that any grand national movement will be made in the right direction.

There is a main point enforced by Mr. Hatton, which cannot be reached by simple sanitary arrangements alone—the habits of the people. Those with dirty, slovenly, disorderly, and dissipated habits will, with the same means as the clean and orderly, have all the wretchedness of squalid poverty, with its attendant diseases. The education of children in habits of order will alone reach this; and in this the public may co-operate with us. Private exertions may greatly assist, if that large body, persons of leisure, who wish to do good to the poor, and know not exactly how to do it, who see the hollowness of much that is now attempted, and are dissatisfied with schemes for improving those at a great distance, when so much paganism and barbarism exists close to their own doors, would take earnestly to the improvement of the physical condition of the poor close to them, each by *kind attention* to one or more families, without indiscriminate charity, but by help, overlooking, and judicious advice in increasing the cleanliness and comfort of their dwelling houses. Much good might thus be done towards improving the health of the community, and quite as much good to the mental comfort of those who so occupy themselves. Surely life is not given to be employed in crotchet or worsted work, in paying and receiving visits, in the collection and retailing of gossip, in walking, talking, and feeding, in zealous outpourings against the errors of those who do not think exactly as we do, or in merely reading good books, or similar exercises. We see the evils of this sloth and self-pleasing in the bodily disorders of the idle classes. If such would work in the way here suggested, they would improve their own health and happiness in increasing that of others, and would make a quiet, unassuming, but most effective staff of sanitary reformers. There are some such, happily, in every town, and more in the country places, and amongst the highest in the land; but the number in large towns and cities is comparatively few, although they should be there the most numerous. And what is needed, and evidently wished for, is, that the many may be raised to the standard of the highest few.