

weeks, together with great incontinence of urine for three months.

On making an examination, I found the os uteri fully dilated, the head presenting naturally, and the membranes protruding. The pains being feeble, and the membranes tense and rigid, I waited for about an hour; but, finding no progress in the labour, I ruptured the membranes. As the head advanced, I discovered a dense unyielding band, of an oval form, within the vagina, about an inch and a half from the external orifice, which prevented the further passage of the head.

Strong expulsive pains having by this time set in, I waited for about two hours, expecting that nature would overcome the impediment, or that relaxation would take place to such an extent as to admit of the passage of the child; but finding the resistance too great to be overcome naturally, and fearing that laceration would take place from the great pressure exerted upon the perineum above the constricted part, I made two incisions through the band, which had the immediate effect of allowing the expulsion of the child. The placenta was expelled in a few minutes afterwards.

From the history of this case, I have no doubt that sloughing of some portion of the vaginal canal took place after her last labour. On the first examination, no stricture of any portion of the vagina could be felt.

#### ENTRANCE OF A NEEDLE INTO THE CHEST: PROBABLE PUNCTURE OF THE HEART.

By T. L. PRIDHAM, Esq., Bideford, Devon.

A FEW evenings since, a woman brought a child, aged 10 years, to my surgery, saying, "it appeared in great pain, and that when her hand rested on its chest it moaned piteously". Although it was a stout child, I remarked that its appearance was very pale, feeble, and distressed. On examination of the body, I discovered a small stain of blood directly over the apex of the heart. On a further examination, at a little distance from the spot of blood, I distinctly felt an elevation of the skin, under which some foreign body appeared to be forcing itself. I then inquired of the mother, whether she was aware that at any time prior to the child's present state, a needle had entered the skin, and had been broken off, leaving the point imbedded. The mother replied that she was not aware of any such accident.

Notwithstanding this statement, I immediately made two incisions in the shape of  $\tau$  near the situation of the slightly elevated skin. My knife soon grated on something, which receded with my endeavour to extract it; and I was fearful that I should entirely lose the object; and that if I could not in some way fix it, my efforts to extract it would be fruitless. I therefore introduced a tenaculum sufficiently deep to surround the head of a needle, and drew it gently towards me. I was then able to lay hold of it with the forceps, and extracted a fine stocking-needle two and a half inches long, which the anxious mother was then able to tell me she had missed from her shawl two days before, having employed it in order to secure that article of dress.

My impression in this case is, on comparing the original puncture with the situation and beat of the heart, that the needle must have passed through the apex of that organ. How far it is possible to have done so without destroying life, is a question for consideration. The effectual manner in which the tenaculum assisted in extracting the needle, is worthy of record. In two or three days the child recovered its usual healthy and animated appearance.

## Reviews and Notices.

OBSERVATIONS ON THE TOPOGRAPHY AND CLIMATE OF ASPLEY GUISE, in reference to their Influence on Health and Disease, as compared with celebrated English and Foreign localities. By JAMES WILLIAMS, M.D. pp. 48. London: Thomas Richards. 1856.

The fact is now beginning to be recognised that our own country possesses localities fitted for the sojourn of the invalid, especially the consumptive; and that the dismissal of such patients to foreign parts is often little or nothing better than sending them away to die. To bring under notice one of these favoured spots of England, is the object which Dr. WILLIAMS has in view.

"The village of Aspley," says Dr. Williams, "is upon a deep though narrow line of the green-sand formation; a circular range of hills of moderate elevation extending from Tring in Hertfordshire to the neighbourhood of Biggleswade.... The general position of the village is sheltered by hills of moderate elevation; but, as far as my own experience goes, its healthful tendencies appear not to be due to that cause, inasmuch as my observations, made in three different parts, vary but little in the range of temperature, although more moisture is evident in the lower valley-like portions. The air is particularly dry and bracing, and upon the elevated parts exposed to the west, is compared by many to a sea breeze. The general temperature is but slightly below that of the Undercliff of the Isle of Wight. Sufficient evidence to those who may think the place oppressively hot in summer, is, that the average temperature of July and August is 61° of Fahrenheit only. The greatest range of temperature is in these months, and the smallest in November and December, which may be considered of no little importance to the consumptive invalid, who is generally as much tried during the latter part of the year as in the spring months.

"The principal feature in this locality is the dry sandy character of the soil; and the leading property of sand being its great power of absorption of both heat and moisture, its effect is to render the surface of the ground sufficiently dry (even immediately after heavy rain) for exercise, and also in hot weather to cool the atmosphere, by absorbing the superfluous heat; from hence we get radiation of the latter during the night, diminishing cold, and thus an equilibrium is approached, and the small variation of the atmosphere partly accounted for.

"This sand stratum in the higher parts of the village has been ascertained to be nearly one hundred feet deep. Underneath this we get springs of the finest water. It is bright and sparkling, nearly free from earthy impregnation, and, in addition, soft—an invaluable property when found in spring water." (pp. 9, 10.)

"Evidence of the dryness of the air of Aspley will be found in the small annual fall of rain. In this particular, my observations extend over a period of about four years, during which time, by very careful admeasurement, it only amounts to 18½ inches; a fraction less than Paris (18½); a little less than Toulon (19½); and three inches only more than at Marseilles. And, so far as I can learn, the annual fall of rain at Aspley is less than in any known English locality. This, with the entire absence of any river, or considerable stream, accounts for, and strengthens the evidence of the dryness of its atmosphere." (p. 26.)

The mean temperature for night and day lies between 36½ in January and 61½ in July; the annual mean being 47½, and the mean annual range 8. In the smallness of the range, Aspley is only exceeded by Pau, which has a range of 7 6-10ths.

Such being the hygienic condition of Aspley, Dr. Williams finds that, though neither it nor any other place enjoys an absolute immunity from disease, it yet enjoys a comparative immunity, and that the rate of mortality is below the average of a healthy rural district.

"In connexion with consumptive cases in particular, one fact is very remarkable—that persons afflicted with positive and incurable disease, live much longer here than in almost any other part of England, save our much sheltered southern coasts.