Impediments to Uterine Action.

SIR,—As "trifles make the sum of life," so in obstetrics, attention to trifles saves much time, and therefore conduces much to the safety of the patient. This must be my apology for bringing before the profession what is possibly well known to many of its members. I have frequently observed in my practice that a common cause of failure of uterine action in the second stage of labour, is the pouding back of the liquor amnii behind the child, so that the uterus cannot contract properly on the surface of the body, and from which it is separated by a layer of fluid. To remedy this, it is my practice, after rupturing the membranes, which I always do in multipara, as soon as ever the os is fully dilated, to introduce a gum-elastic catheter under the head into the uterus, and to leave it there until the head is well down on the perinæum, when it should be withdrawn. The catheter then introduced serves the purpose of draining off the superfluity of liquor amnii, and it also acts as an additional stimulus to uterine action, besides which, by attaching to it a long piece of India-rubber tubing carried to a vessel at the bedside, the patient may be saved much wetting of the bedding, etc. It is almost needless to state that the catheter should not be used for other purposes, and should be well washed in antiseptic fluid as soon as possible after use. Another troublesome complication of labour which I have frequently come across, but which is not, I think, mentioned in many of the text-books, is the condition called pendulous belly. This mostly occurs in women who have had large families, or are debilitated from some other cause. In it, owing to flaccidity of the abdominal walls, and consequent want of support to the uterus, that organ becomes more or less acutely anteflexed. Consequently, at the time of labour, the child's head is further forward than it should be, and instead of descending into the pelvis it remained impacted against the symphysis pubis. In this condition uterine action is often violent but futile. To remedy it, the patient should be got into bed as soon as seen, placed on her back, and the binder tightly applied, and tightened from time to time as the child descends. If the condition be detected early in pregnancy, an abdominal belt should be worn during that period.—Yours faithfully,

A. DE W. BAKER, L.R.C.P.Lond., M.R.C.S.E.

2, Lawn Terrace, Dawlish.

Serious Accidents during Coitus.

DR. ZEISS, of Erfurt, mentions, in the *Gynækolog. Centralblatt*, two instances which have come under his notice of serious accidents occurring during coitus. The first was that of a newly married young woman, who, after the first connection, suffered from such serious hæmorrhage that, as cold sponging and washing did not arrest it, Dr. Zeiss was called in on the following afternoon. He found the patient faint, almost pulseless, and covered all over with a cold sweat. A quantity of blood and clots had to be removed before he could make an examination. He then saw two lacerations in the hymen, and from the deeper of these, a vessel, out of the ruptured end of which a continuous stream of blood was flowing. Digital compression against the bone not proving efficacious, he put in a stitch, which was left in for three days. The patient slowly recovered her strength under tonics. Neither she nor any of her family had the hæmorrhagic diathesis. The other case was that of a married woman, aged 25, who had been delivered with forceps, but had done well and begun to attend to her household duties on the ninth day. At this time coitus took place, apparently in the genu-pectoral position. The woman suddenly felt a sharp pain and a considerable quantity of blood flowed from the vulva. Medical assistance was obtained, and cold disinfecting injections used, which arrested the hæmorrhage. When Dr. Zeiss saw her, he found a rent an inch and a half long on the right side of the upper part of the vagina, with jagged and gaping edges. This was treated successfully with iodoform-powder, and the vagina plugged with iodoform guaze.

The Connection between Quinsy and Rheumatism.

SIR, With all respect for Mr. Green's opinion, I would remark that the Collective Investigation Committee, in their report on Rheumatism, came to the conclusion that no certain connection between quinsy and rheumatism could be made out. Moreover, quinsy is essentially connected with adolescence and a strumous habit, and if Mr. Green will take care to inquire, he will be able to make out in almost every case, previous muscular or mental exhaustion. In young boys at school I believe masturbation is a frequent cause, and in after-years excessive sexual indulgence. Of course, I believe that a weak state of health renders one susceptible to take rheumatism. Since writing the above, I have seen a person who is frequently subject to quinsy, and she assures me she has never had so much as rheumatic pains. The attacks have always come on after extra fatigue. There are two points worthy of note, and they are, a second attack rarely follows except after some months' interval, no matter what the exposure. Laryngitis is a very rare accompaniment, contrary to what would be the case were tonsillitis the direct result of cold.—I am, sir, your obedient servant,

Claremont Road, Surbiton. F. P. ATKINSON.

"A Fleabite."

SIR,—I shall be glad if some member or members will kindly explain the following case. A patient of mine, a barrister, and of good physique and constitution, suffers in a remarkable, and to me an unique, manner, from the bites of fleas. He feels no pain at the time the bite is inflicted, and it is generally about twelve hours before the lesion is complete, when it shows itself in the form of a livid and almost purpuric mark, varying from half an inch to an inch in length, and nearly the eighth of an inch in breadth. From the above-named time considerable pain of a burning character is felt, and this lasts for two or three days. If the bites are on the inner and palmar aspect of the wrist, vesicles are formed within twenty-four hours, and if in the neighbourhood of the groin, the inguinal glands become slightly enlarged and decidedly painful. As far as I am able to judge, there is no hæmorrhagic diathesis on the part of the patient, but I am informed that his little nephew suffers very similarly. Fleabites, as we all know, are proverbially unimportant, but in the case I have described they are a real grievance, and I therefore venture to ask the advice of more experienced gentlemen than myself.—I am, sir, yours faithfully,

ASSOCIATE.

Medical Etiquette.

SIR,—I think it is grossly inconsistent, as well as unfair, to the general practitioner, for a man who puts Physician as well as Surgeon on his door-plate, to receive half-a-crown and five shilling fees and retain club-appointments.—I remain, yours obediently,

GENERAL PRACTITIONER.

* Physician and Surgeon means L.R.C.P. and M.R.C.S., which are the ordinary qualifications of a general practitioner.

COMMUNICATIONS, LETTERS, etc., have been received from:

Dr. Ward Cousins, Southsea; Mr. Anderson, Preston; Mr. H. Handford, Nottingham; Mr. C. Grimsly, St. Asaph; Mr. W. E. Livsey, Liverpool; Mr. J. Arthur, Henley-in-Arden; Dr. H. Smith, London; Mr. W. Thorburn, Manchester; Mr. J. St. M. Thomson, Dalkeith; Mr. J. Hamilton, Glasgow; Mr. J. J. O'Sullivan, Kilkenny; Mr. S. F. Murphy, London; Messrs. J. H. Peck and Co., Wigan; Mr. W. R. Parker, London; Mr. Keetley, London; Mr. W. W. Millard, Edinburgh; Mr. J. E. Lane, London; Mr. E. Murphy, Ballyroan; Mr. A. Teevan, Melbourne; Dr. Lowther, Grange-over-Sands; Dr. Sidney Davies, Cairo; Mr. H. Byles, Eccleshill; Mr. R. J. Kerby, Charing, Kent; Dr. C. Roberts, London; Dr. P. Cowen, London; Our Liverpool Correspondent; Mr. J. W. Hunt, London; Mr. Christopher Heath, London; Dr. Anderson, Glasgow; The Secretary of the British Gynæcological Society, London; Dr. J. A. Lindsay, Belfast; Dr. A. Emrys-Jones, Manchester; Dr. A. W. Sinclair, Selangor, Malay Native States; Dr. Joseph Rogers, London; Dr. Ketchen, Middlesborough; Mr. J. E. Godfrey, Demerara; Mr. F. P. Atkinson, Surbiton; Mr. H. H. Tomkins, Gloucester; Mr. J. Warnock, Edinburgh; Dr. Maxwell, Woolwich; Mr. H. Boyle Runnalls, Saltash; Dr. Wyckoff, Brooklyn, New York; Mr. A. de W. Baker, Dawlish; Mr. S. Bingham, South Petherton; Mr. H. Greenway, Plymouth; Mr. J. Eaton, Cleator Moor; Dr. de Burgh Birch, Leeds; Mr. T. Holmes, London; Professor J. W. R. Tilanus, Amsterdam; Mr. A. J. Lee, London; Mr. A. S. Coleman, Leicester; Mr. J. Patterson, Ramelton, co. Donegal; Dr. R. H. Fox, London; Dr. W. A. Brailey, London; Mr. R. Roseburgh, Weston-super-Mare; Mr. T. L. Hall, Leominster; Dr. S. Thomson, London; Dr. T. R. Fraser, Edinburgh; Miss E. Hooley, Cobham; Dr. Walford, Reading; Mr. F. Hall, Bury, Lancaster; Mr. C. H. Bishop, London; Dr. Renioul, Liverpool; Our Cairo Correspondent; Our Berlin Correspondent; Our Paris Correspondent; Our Edinburgh Correspondent; The Secretary of the British Medical Benevolent Fund, London; Mr. W. A. Meredith, London; Mr. R. Jeffreys, Chesterfield; Mr. F. Dodgson, Cockermouth; Mr. D. A. Davis, Swansea; Dr. Bradbury, Cambridge; Dr. Maywall, Woolwich; Mr. B. Strachan, Sunderland; Dr. J. Tatham, Salford; Mr. W. Whitehead, Manchester; Our Glasgow Correspondent; Mr. R. A. Rawlins, London; Dr. Walford, Reading; Mr. J. Gould, Hatterleigh; Mr. E. S. Hasell, Isleworth; Dr. Styrap, Shrewsbury; Mr. H. G. Clark, Glasgow; Mr. A. Prichard, Clifton; Mr. J. West, London; Dr. M. Hay, Aberdeen; Dr. J. Williams, Sheffield; Mr. A. R. Davis, Hythe; Dr. A. Thomson Sloan, Edinburgh; Mr. W. T. D. Caldwell, London; Dr. W. J. Mickle, London; Mr. C. H. Bishop, London; Mr. F. P. Atkinson, Kingston-on-Thames; Anxious; Messrs. Bewley and Draper, Dublin; Mr. T. Jenner Verrall, Brighton; Mr. R. B. Sellers, Rochdale; Mr. T. W. Newsholme, Sheffield; Dr. E. F. Neve, Edinburgh; Dr. Thudichum, London; Mr. L. F. Hill, London; Dr. Asher, London; Dr. D. M. Sergeant, London; Dr. F. M. Blackwood, Chester-le-Street; Mr. A. Johnston, Ambleside; Mr. W. Donovan, Erdington; Mr. C. Williams, Norwich; Mr. B. C. A. Windle, Birmingham; Mr. S. Morton, Sheffield; Dr. Leslie Phillips, Birmingham; Mr. J. M. Brighes, Forest Hill; Mr. W. P. Biden, Hyères; Mr. W. E. Hacon, Canterbury, New Zealand; Our Aberdeen Correspondent; Our Manchester Correspondent, etc.

BOOKS, ETC., RECEIVED.

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