to show at least the following facts, all of which will be of the utmost use in arriving at a general conclusion :—

1. Indication of case (corresponding with private note-book, for reference). Sex.
2. Date of birth.
3. Legitimate or not.
4. Social position and occupation of parents ; *i.e.*, of the father, when the child is legitimate ; of the mother, when the child is illegitimate or left chiefly dependent upon her.
5. Died or not during first year of age.
6. Remarks on cause of death, condition of dwelling, health of parents, moral condition, education, etc., as illustrating the event in cases of death. Other deaths in the same family, etc.

I have only to add further, that I shall be happy to aid in bringing before the public any information on this subject, which my medical brethren may not think it expedient to put in the form of an independent communication.

ARTICLE VI.—*Case of Intra-Uterine Small-pox.* By Dr ALEXANDER R. SIMPSON, Secretary to the Edinburgh Obstetrical Society, and formerly President of the Royal Medical Society.

(Communicated to the Edinburgh Obstetrical Society.)

CASES of intra-uterine small-pox are not so rare but that most of the Fellows of this Society have met with one in their own practice, or have seen them when exhibited here by others. It is but very rarely, however, that we have an opportunity of tracing out the progress of the intra-uterine disease so precisely as I was enabled to do in the case I have now to record.

Mrs M'L., aged 22, and married for five years, miscarried on Friday, the 1st of July, 1858. She had had six miscarriages previously, and had usually gone to about the 7th month of gestation before the fœtus was expelled. One fœtus only was retained till the eighth month, and lived up till the time of its birth. She was generally in the enjoyment of good health ; began to menstruate when only 12 years of age, and menstruated regularly every fortnight. After the occurrence of the miscarriage in the beginning of July, 1858, already referred to, she menstruated once—in the end of the same month ; but before the time for the recurrence of another catamenial period arrived, she had become impregnated ; and when I saw the patient for the first time, in the end of October, she presented all the appearance of a person in the third month of utero-gestation. She was then ordered to take ten grains of chlorate of potash three times a-day, as all the facts that could be furnished in regard to the repeated miscarriages seemed to point to some atrophic

disease of the placenta as the cause of the death of the successive infants. The patient continued to do well until the beginning of February 1859. On the 7th of that month, I was sent for to see her; and on my arrival, I was told that on the 5th she had been out walking, when she found herself so poorly that she was obliged to hurry home. She had had some shivering fits that same morning, a good deal of sickness, and a feeling of soreness all over the body; and she was then labouring under a high degree of fever, while the skin was covered with a multitude of rough red spots, evidently the commencement of some eruptive disease. On the following day, it became quite clear that the patient had got an attack of modified small-pox. A number of discrete pustules broke out all over the body, most abundantly on the face, hands, and arms. They ran the usual course, and began to fade away after the ninth day; so that, on the 23d of the month, eighteen days from the date of the onset of the disease, the patient was able to walk out of the house.

Up to this time the foetal movements continued active as usual; but a few days afterwards, on the 25th or 26th of the month, they began to be feebler and less frequent. The patient took no heed of this circumstance for a day or two; but having at last become alarmed about it, she came to me. This was on Monday, the 28th of February. I found the sounds of the foetal heart to be then very faint, feeble, and indistinct; but on visiting the patient at her own house on the following Friday (March 4th), I heard them again quite distinct, though less forcible than natural. I did not see her again till the forenoon of the Monday following; and on then listening through the stethoscope over the womb, found that the foetal heart had ceased to beat, or, at least, that its sounds were no longer audible. On the preceding day, the patient had been out walking, when, as she averred, she became rather suddenly sensible of a feeling of weight, or falling down, in the womb, which compelled her speedily to return home. That, in the sensation thus experienced by the patient, we have an indication of the time when the foetus died, it is of course impossible to determine; but there can be but little doubt that the probable date of its death was the 5th or 6th of March. On the 8th, the patient met with an accident; for, while voiding her urine early in the morning, the utensil on which she was seated broke beneath her, and a number of cuts and scratches were inflicted on the hips and thighs. Fortunately, however, the genital organs were uninjured, and the patient speedily recovered from the effects of her mishap. I did not again see the patient till about two o'clock in the morning of Friday, the 22d of March, when I was summoned to deliver her. She had been suffering more or less from occasional pains, referred to the region of the womb, for two days previously; but the true labour pains had only set in about two hours before I arrived at her bedside, and by that

time they had already succeeded in expelling the feet and body of the child. The head was soon delivered, and the placenta and membranes followed in due course.

As had been fully anticipated, the child at birth presented evidences of having been *in utero* the subject of an attack of variola; for a number of pustules, umbilicated in the centre, were found scattered here and there on the back, the head, and the thighs. The cuticle was separated, or easily separable, over great part of the body, and the fœtus altogether was in the state of decay which we always expect to see in the case of a child that has lain for two weeks dead in the maternal womb. The pustules were but few in number, and but sparingly distributed over different parts of the body; and in consequence of the degree to which decomposition had gone on, several of them, as the members of the Society could observe, had fallen out at points where the cuticle was scaled off, and had left only cup-like depressions in the cutis vera. But enough were still left of a character sufficiently distinctive to show that the fœtus had suffered from small-pox, and that it had died at that period of the disease when the pustules had existed for seven or eight days—supposing always that the development of variolar pustules follows the same course in an intra-uterine subject that it does in a newborn child. The death of the fœtus in this instance, however, was not to be attributed to the attack of small-pox alone, or even to that chiefly. On the contrary, the attack, to judge from the small amount of eruption that had taken place, seems to have been, on the whole, rather a mild one; for the appearance of the pustules indicated the attainment of a stage of the disease too far advanced to allow it to be supposed that the intensity of the fever caused the infant's death before the eruption had time to be developed. It seems probable, indeed, that it would have survived that disease, and it might have been carried to the full time, and have been born alive, had there not been at hand another source of danger in the morbid condition of the placenta. As the members of the Society could perceive, the placenta was unusually small, pale, hard, and fibrous-looking, having undergone a change which has sometimes been described as fibrous degeneration, or cirrhosis of the placenta,—a morbid condition of that organ which is well known to be an occasional cause of intra-uterine mortality.

But although the fœtus died, in all probability, of the defective nutrition and impeded oxygenation consequent on the diseased state of its placenta, and not of the attack of small-pox, of which it showed such distinct traces; yet the history of the case is interesting, as showing very exactly the date of the onset of the disease in the fœtus, and the length of time during which the mother suffered before the progeny in her womb became affected. We have, First, the mother attacked with the disease on Saturday, February 5th; the eruption appearing on the 7th, and beginning to fade on the 16th or 17th; and the patient so far recovered as to be able to be out of the

house on the 23d of the month. She had fairly recovered, and the eruption had faded away, and left only its yet vascular scars behind, when, Secondly, on the 25th or 26th of the month, twenty or twenty-one days from the time of the commencement of her own attack, she began to miss the fœtal movements; and this marks the date of the onset of the disease in the fœtus. On the 4th March, six or seven days after the fœtus thus seemed to have become affected, its heart-sounds were still distinct and clear; but on the third day afterwards, they were no longer to be detected. On the seventh or eighth day from the date of the commencement of its disease, the fœtus had died. In short, after the disease had run a course of three weeks' duration in the mother, and had expended itself in her constitution, the fœtus became affected by it, and died on the seventh or eighth day afterwards, although it was not expelled from the uterus till the end of another fortnight.

ARTICLE VII. — *Surgical Cases and Observations.* By A. M. EDWARDS, Lecturer on Surgery, Edinburgh.

TUMOUR IN THE NECK.

JOHN FARR, æt. 49, a broker, living in the West Port, sent to me with a moveable swelling, pulsating, about two inches in circumference, on the right side of the neck, upon a level with the upper margin of the thyroid cartilage. The tumour hard, with pulsation imparted to it from the subjacent bifurcation of the carotid.

Five months before, the patient complained of paroxysms of dyspnœa towards midnight, occasional slight dysphagia and pain over the right sterno-clavicular articulation, also of a numb feeling in the right side of the head, and an aching stiffness in the neck.

There was no bruit over the tumour, but a loud and distinct one over the innominata. He has had occasional hæmoptysis.

His general aspect is suspicious, presenting a careworn expression on a pallid countenance; he is losing flesh, and inclination for any exertion.

Diagnosis.—The swelling consists of a mass of glands enlarged by some irritating cause. Malignant disease not yet ascertainable.

Treatment.—To keep up the strength; endeavour to allay any attacks of inflammation in the tumour, which *might* be removed; but I decline doing so, as I believe it to be a secondary affection to some other existing disease. I recommended him to consult Dr W. T. Gairdner. So he accordingly went into the Infirmary. While there, Dr Gairdner detected a swelling behind the right posterior pillar of the fauces, which pulsated distinctly, like an aneurism. Under Dr Gairdner's care he greatly improved, and the bruit over the right sterno-clavicular joint became less distinct. I did not see him again for some weeks; during which period he left the Infirmary, and