

De placenta disrupta : dissertatio inauguralis medico-obstetricia quam ex auctoritate et consensu gratiosi medicorum ordinis, in alma Universitate Regia Fridericia Wilhelmo-Rhenana, pro gradu doctoris medicinae et chirurgiae, die [2ndo Augti.] anni MDCCCXXXVII / rite capessendo conscripsit Nathaniel Rumsey.

Contributors

Rumsey, Nathaniel, 1780-1847.
Royal College of Surgeons of England

Publication/Creation

Londini : Ex officina Tylerana, [1837]

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PLACENTA DISRUPTA:

DISSERTATIO

(20)

INAUGURALIS MEDICO-OBSTETRICA

QUAM

EX AUCTORITATE ET CONSENSU GRATIOSI MEDI-
CORUM ORDINIS, IN ALMA UNIVERSITATE
REGIA FRIDERICIA WILHELMIO-
RHENANA,

PRO GRADU

DOCTORIS MEDICINÆ ET CHIRURGIÆ,

DIE 2^{ndo} Aug^{ti} ANNI MDCCCXXXVII.

RITE CAPESSENDO CONSCRIPSIT,

NATHANIEL RUMSEY,

ANGLUS,

MEDICUS ET CHIRURGUS APUD BEACONSFIELDENSIUM

LONDINI:

EX OFFICINA TYLERANA.



PLACENTA DISSECTA

DISECTIO

PLACENTAE MEDICINA OBSTETRICIA

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THEATRO REGIO MEDICINAE ET CHIRURGIAE

MDCCCXXXII

AND SOLD BY

NATHANIEL BARNETT

PRINTED

BY JAMES JOHNSON, ST. PAULS CHURCH-YARD

MDCCCXXXII

BY DANIEL WILKINSON

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ET CONSANGUINITATIS VINCULO CONJUNCTISSIMO

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N. R.

PROOEMIUM.

APUD medicos ferè est recognitum, placentam aut placentæ partem multò post ejusdem debitam expulsionem in utero remanere posse. Retentionem frusti solent quidam, perspicuitatis causa, casum disruptæ placentæ nominare. Isthæc retentio vel disruptio è diversis causis accidere potest: ex imperitia scilicet, e statu insolito uteri sub tempus aut gestationis aut parturitionis, e contractione uterina spasmodica, fortasse aliis. Utraque accidente, sequitur symptomatum morbosorum copiosa varietas; nec dubitatur, quin puerperæ magnum periculum impendat. Contingit aliquando, ut placenta aut relicta pars evadat, revalescente fœmina, pluribus diebus aut etiam hebdomadibus post partum elapsis. Ab omnibus vero conceditur, ut remanente placenta, hæmorrhagia, decompositio, febris, mors omnes occurrere possint. Quocirca, omni medico practico maximæ est curæ, si tute liceat, placentam detrahere. Alioqui, ut hæmorrhagiam suppressat, irritationem seu inflammationem præveniat

aut subigat, et ægram languescentem sustineat summo opere conatur; semper observans quæ signa occurrant, massam placentalem quacunque forma evadere. Existimat enim, quamdiu in cavitate uterina remanet placenta, convalescentiam feminæ pene exspem fore.

Sed, omni vigilantia servata, non infrequenter accidit, ut medici etiam expertissimi medelam viderent, quum expulsionem massæ placentalis quoquomodo detegere nequevissent. Exempla, tanquam quoad descripta comparative rara sint, tamen numerosiora sunt quam quod hic testimonia producere necesse foret. Hinc orta est questio: QUID DE FRAGMENTO REMANENTE FIAT, IN ILLIS PLACENTÆ DISRUPTÆ EXEMPLIS, QUIBUS ÆGROTÆ CONVALESCUNT?

Per annos triginta quinque, inter quos medicis curis versatus sum, in praxi propria tantum quinque placentæ disruptæ exempla visa fuère. Hæc omnia cursu duorum annorum, novemque mensium acciderunt. Tria non sunt speciali observatione digna; reliquorum, unum certe, fortasse utrumque propter pertinentiam ad illam de fato placentæ questionem vexatam spectabile est. Quæliacunque sint, liceat consensu eruditorum et expertorum in arte medica, ex meis ephemeribus

medicis deprompta omnia preferre, aut ad confirmandam doctrinam adhuc receptam, aut, si quid eo valeant, etiam ad aliquid novi de placenta disrupta impertiendum. His exemplis descriptis atque illustratis, solummodo restabit, ut nonnulla de opinionibus quibusdam ad quæstionem supra memoratam referentibus addam.

PARS PRIOR.

EXEMPLA QUÆDAM PLACENTÆ DISRUPTÆ EXHIBENS.
CUM ADJECTIS OBSERVATIONIBUS.

EXEMPLUM I.

A. D. 1830. *Die 7mo Decembris.* “ Dominus
“ Marson adjunctus meus, studiosus medicinæ ob
“ mores, peritiam, diligentiam valde spectabilis, ar-
“ cessitus est, me absente, ad ægrotam pago vicino
“ videndam, quæ, decem diebus ante, auxilio fæminæ
“ obstetricis, enixa fuerat. Occurrerat sub tempore
“ laboris hæmorrhagia copiosa; quæ nondum con-
“ fecta est, et per tres dies novissimos fœtida fuerat.
“ Acciderat etiam vomitus, et male se habere ægrota
“ sentiebat. Examine per vaginam facto, Dom. M.
“ existimavit placentæ fragmentum in utero rema-
“ nere. Per inquietationem hanc necessariam ex-
“ aminatoriam rediit hæmorrhagia immodica, cum
“ recentibus coagulis commixta, quam secutæ sunt
“ deliquium et pulsus suspensio. Sub hac morbi
“ epocha me domum redeuntem nuntius petit ut
“ subsidium reddam. Subveniens, embolium ab ad-
“ juncto insertum e vagina subduxi, quum novum

“ coagulum læve, rotundum et horrifice foetidum
“ protinus evasit. Ægrota vino, aquâ vitæ, opii
“ tinctura suppeditabatur. Per quinque dies supra
“ rediebat quandoque hæmorrhagia languore con-
“ tinuo ingravescente.”

A. D. 1831. 6to die Januarii. “ Casus hic cum
“ variationibus nullius momenti ad finem progressus
“ est, ægrota indies bilem subviridem evomitantus.
“ Desivit hæmorrhagia, sed pulsus de die in diem
“ magis languescebat, et labia pallidissima erant.
“ Haudquaquam deficiens erat urinæ quantitas.
“ Levis icterina species per breve quoddam tempus
“ in facie apparuit. Mortua est puerpera post
“ partum et mensem absolutum.

“ Ad cadaveris inspectionem videbantur phæno-
“ mena sequentia.

“ Membrana adiposa adipem permultum con-
“ tinebat bile flavum. Stomachus et intestina sanæ
“ videbantur. Hepar diaphragmati adhærens, pal-
“ lidum erat et crassum præter solitum. Nullum
“ continebat pus, sed per lympham indurabatur.
“ Vesicula fellis non solum bilem spississimam con-
“ tinebat, verum etiam calculos unum et sexaginta
“ alios grani tritici instar, alios nucis abellinæ. Unus
“ in ductu communi choledocho inveniebatur.

“ Dolorem requaquam conquesta erat ægrota.
“ Uterus sex uncias longus, in nulla parte con-
“ tractus erat. Inveniebatur fundo adhærens pla-
“ centæ fragmentum juglandis grandioris instar,
“ presse coopertum, (excepta sexta superficiei ejus
“ parte media nuda,) lymphæ coagulabilis lente-
“ scente tunica, et talis cum utero erat ejus con-
“ nexio, qualis per dissectionem solummodo solve-
“ tur. Textura fragmenti durior erat quam placentæ
“ sanæ. Uteri superficies interna tota cum liquore
“ muco-purulento fœtidissimo oblinebatur.”

Causa disruptionis in hoc exemplo incerta est. Fortassè per adhæSIONEM morbidam superficiei placentæ ad fundum uterinum disruptio effecta fuit; probabilius autem, ex imperitia feminæ obstetricis casum evenisse. Hanc causam si accipias, sequitur ut adhæSIO firmissima sub inspectione post mortem detecta disruptionis eventus foret. Et sic sentio. Mihi enim, quanquam non dubitanti, ut exempla quædam sequentia satis indicabunt, quia adhæSIO præternaturalis inter uterum et placentam, effectus, ut apparet, inflammationis uterinæ aliquando inveniatur, phænomena nuperrime descripta certo indicio sunt adhæSIONEM, qualiscunque fuerit, ad tempus parturitionis existentem postea multo firmi-

orem factam esse ; fragmento sub illa post mortem inspectione detecto speciem præbente vascularem, non solum naturalis placentæ valde dissimilem, sed etiam illius induratæ placentæ quæ per inflammationem adhærescit. Eo viso, auctoribusque aliis in rebus obstetriciis spectandis, ut posthæc ostendam, annuentibus, adhæSIONEM uterino-placentalem etiam post partum firmiorem reddi posse, mea sententia est, præternaturalem adhesionem in hoc exemplo visam non causam disruptionis, sed magis effectum conatum quorundam vis medicatricis naturæ ad exitum fatalem obviandum, fuisse.

Alter hujus casus effectus proximior, ab obstetrice vero non suspecti, erat hæmorrhagia copiosa, quæ coagulis formatis, gradatim minuebatur et septimo die foetida fiebat. Ex hac hæmorrhagia protracta et immodicâ mors demum prodiit.

Rebus sic stantibus, hoc exemplum, ni fallor, quasdam suggestiones offert, notatu non indignas, de illa quæstione supra memorata : Quid de fragmenti remanente fiat, in illis placentæ disruptæ exemplis, quibus ægrotæ convalescunt. Hujus fragmenti placentalis aspectus vascularis, vitalitatis suæ adauctæ argumentum, et portionis tam largæ ejus superficiei per membranam organicam obductio, sunt res memoratu

dignissimæ. Quænam ratio de illis reddenda sit? Estne improbable hæc prodiisse phænomena, partim e largioribus vasis sanguineis fragmenti collapsis, partim e depositione lymphæ intra et super fragmentum? Utcumque sit, pene certum est vitalitatem adauctam fragmenti, ejusque lympa coagulabili obductionem, una cum coagulis formatis aliquam vim in hæmorrhagia minuenda habuisse, quamquam non compotes erant ad prioris hæmorrhagiæ effectus obviandos. Si ita res se habet, cur dubitaremus, quin decompositione fragmenti remanentis repressa, vitalitate ejus per adhæSIONEM firmissimam servata atque aucta, et vasis ejusdem laceratis ac sanguine fluentibus per collapsum oclusis atque membrana organica quasi obsigillatis,—his omnibus peractis prius quam exhaustio sanguinea nimis progressa fuisset, — symptomata disruptionis periculosissima jam subducta fuerint? Et quid opinioni obstat ut, rebus in certis disruptionis exemplis magis faventibus, tota fragmenti superficies contra hæmorrhagiam antequam mors accesserit, fuerit cauta? Mihi quidem, septem pene abhinc annis, est ista opinio per hujus exempli phænomena suggesta; et quæ aut videre, aut legere, aut audire exinde accidit, sententiam, medelam naturalem hac aut tali

ratione possibilem fore, potius confirmare quam infirmare valuerunt.

EXEMPLUM II,

A. D. 1832 die 23mo Aprilis. “ Ad undecimam
“ horam ante meridiem arcessitus fui ut puerperam
“ viderem, fœminam circiter 30 annos natam, et
“ firmæ valetudinis, quæ bis terve prius pepererat.
“ Auxilio fœminino acciderat partus decima noctis
“ præcedentis hora. Obstetrix dixit, partem placentæ
“ adhuc remanere, atque hæmorrhagiam exilem se-
“ cutam esse. Uterus tactu durus atque rotundus,
“ umbilico tenus porrigebatur. Placentæ fragmen-
“ tum editum examinavi, quod laceratum videbatur,
“ cum exigua parte membranarum affixa. Explo-
“ ratione per vaginam facta, altera placentæ pars
“ fundo uteri adhærens inveniebatur. Hanc levi
“ indicis pressura ad juncturæ lineam separavi,
“ manum leniter et facile per os dilatabile uteri
“ inserens, et sine ulla difficultate detraxi. Puerpera
“ non multo post convaluit.”

Hoc exemplum nihil offert speciali observatione dignum. Separatio fragmenti remanentis facile manu effecta, haudquaquam notioni favet placen-

tam per adhæSIONEM disruptam fuisse, quam ordinariæ uteri contractiones solvere non poterent. Causa probabilior est obstetricis imperitia.

Proximum placentæ disruptæ exemplum quod mihi videre contigit, intra tria hebdomada accidit post hoc modo descriptum;—*i. e.* die 12mo Maii. A.D. 1832; sed quum sub altero puerperio ejusdem foeminæ casus iterum intervenit, convenientiæ causa alium antepono quod paulo tardius eodem anno evenit.

EXEMPLUM III.

A. D. 1832. *die 25mo Novembris.* “ Paupercula,
 “ duo et triginta annos nata, duabus accubati-
 “ onibus gravem hæmorrhagiam passa erat, et bis
 “ inventa erat placenta ori uterino affixa. Cursu
 “ recentioris gestationis rediit hæmorrhagia, quæ
 “ tamen sub parturitione, quum foemina auxilia-
 “ batur, non magni momenti erat. Paucis vero
 “ abhinc diebus iterum atque iterum effluxit san-
 “ guinis haud exigua quantitas, et abdomen tactui
 “ externo molle ac sine ullo tumore, velut uteri
 “ contracti, erat. Die duodecimo post partum pes-

“ sime se habere et pene in ultimis esse videbatur
 “ puerpera, cui vox deficiebat, cuique pulsus rapi-
 “ dus febrilisque, atque cutis callidissima erat.
 “ Lintea fluore nigro, qui tamen haud multus erat,
 “ tingebantur. Febriles affectus magisquam exsan-
 “ guineos patiebatur fœmina. Remanebat alvus
 “ sine ullo tumore et adeo mollis, ut ægre augu-
 “ rarer, placentæ partem in utero remanere. Con-
 “ ditio autem flaccida abdominis occasu alio (conf.
 “ Exempl. I.) causa idonea erat, cur diligentius ex-
 “ plorarem, quod facile feci, per os uterinum
 “ molle, dilatabile, ac pene duas uncias apertum.
 “ Placentæ massa se presentabat, me nihil ejusmodi
 “ suspicante. Manum intra vaginam inserens, in-
 “ dicem usque ad locum adhæsionis porrexi, et sine
 “ mora aut difficultate massam separavi. Hæmor-
 “ rhagia copiosa supervenit. Ad finem semihoræ
 “ ægrotam reliqui symptomatibus secundioribus.
 “ Vino et aqua vitæ suppeditata erat.”

“ Phlegmasia dolens secuta est, qua patiens
 “ longam post ægritudinem mortua est.”

Quod causa disruptionis in hoc exemplo refert,
 eodem modo ut supra sub exemplo secundo explicari
 potest. Casum ex imperitia obstetricis accidisse pro-
 babilius arbitror, quum ambobus in exemplis eadem

fœmina obstetricis munere fungeretur. Notanda est similitudo inter hoc et primum exemplum respecta uteri mollitie; aliorum valde dissimilia erant, quamvis ambo lethalia. Hic symptomata ad tempus periculosissima febrilia erant, effectus haud dubius placenta decompositæ; ad postremum mors a phlegmasia dolente inferrebat. Hoc symptoma tum apparuit, quum hæmorrhagia uterina jam foetida facta erat; quod aliis auctoribus et medicis practicis fuit observatum. *

EXEMPLUM IV.

A. D. 1832, die 14mo mensis Maii. “ Ingenui
 “ loci fœmina quæ quatuordecim diebus ante, ter-
 “ tium pepererat, mente subito concitata, hæmor-
 “ rhagiam uterinam extemplo passa est. Hanc illico
 “ arbitratus sume præcedente perturbatione exor-
 “ tam, talem effectum priori occasione me vidisse
 “ recordans.† Per biduum jam protracta est

* Conf. Cel. INGLEBY opus cui titulus: *A Practical Treatise on Uterine Hæmorrhage, &c.* cap. xxi. p. 220, ubi dicitur. “ It is worthy
 “ of notice, that the painful swelling of the leg appeared in these
 “ cases of placental disruption, when the discharge became very
 “ offensive.”

† De hæmorrhagia, e subita mentis perturbatione orta, liceat quod sequitur ex adversariis meis medicis superioris anni (1826) descri-

“ hæmorrhagia, atque etiam aucta, quamvis sine
 “ ullo fœtore. Debilis est, fœmina cum utero duro
 “ atque tumido.

Die 15mo ejusdem mensis. “ Per noctem
 “ postremam frequenter rediit hæmorrhagia, et bis
 “ ab aurora evaserunt coagula pluria. Fluxus non
 “ putidus erat. Uterus heri vespere durissimus, gran-
 “ disque instar capitis fœtus ordinarii, mollior erat
 “ hodie et minoris ambitus. Ægrotam jam debilissima
 “ erat, et explorationem per vaginam necessariam
 “ esse judicavi. Apud os uterinum, quod apertum
 “ erat cum labiis rotundis atque duris, imprimis
 “ reperta est massa placentæ, quam facile submovi.
 “ Postea inveni prope fundum fragmentum aliud
 “ quod firme adhærebat. Hoc quoque deglubendo
 “ separare tentavi, ungue sub margine inserto, sed
 “ tam firma erat adhæsio, tam mobilis uterus, et
 “ tam debilis fœmina, ut post plures cautos conatus
 “ absistendum esse decrevi; revera existimans
 “ melius esse et tutius ægrotam naturæ remediis

bere. “ Fœminæ quæ decem diebus ante partum ederat, et cui
 “ fluxus lochialis non multus fuerat, bene progrediebatur casus.
 “ Tunc temporis ad undecimam fere horam post meridiem, concla-
 “ mante quoquam sub fenestra, maxime perterrita fuit, et copiosa
 “ hæmorrhagia protinus evenit. Quæ ratio hujus susceptibilitatis
 “ vascularis reddenda est?”

“ commendare, quam conatibus reiteratis et pro-
 “ tractis exiguam vim remanentem penitus exhau-
 “ rere. Interea nullus effluxerat sanguis; sed
 “ aluminis solutionem bis injeceram, quæ semel in
 “ uterum, semel tantum in vaginam penetraverat.
 “ Hinc exorta erat contractio uterina vehementior,
 “ quæ digitorum ad fragmentum placentale acces-
 “ sionem multo difficiliorem reddidit.

Eodem anno die 25mo Novembris. “ Puerpera,
 “ quæ brevi tempore penitus convaluit, infantem
 “ adhuc lactat, et lunare tributum nondum per-
 “ solvit. Fragmentum placentale nullo modo
 “ evasit.”

EXEMPLUM V.

A. D. 1833, die 25mo Septembris. “ Eadem
 “ fœmina rursus parturivit, labore naturali. Post
 “ natum infantem manum introduxi, et caute ac
 “ mansuete placentam removi, maxime expectans
 “ dum per ipsam uteri contractionem separatio
 “ naturalis effecta fuerit. Vi quam minima usus
 “ fui. Massa secundinarum separata, digitum ante
 “ detractationem ejus fundo tenus porrexi, ad
 “ tumorem aliquem tractandum, qui forte placentæ

“ in priore partu disruptæ reliquum foret. Frag-
 “ mentum imprimis inveni quod certe præsentis
 “ accubationis erat, et facile separabatur; deinde
 “ inæqualitatem notabilem superficiei uterinæ, hanc
 “ vero prædicare non auderem ex placenta relicta
 “ esse exortem. Placenta præsentis gestationis,
 “ explorationi subjecta, in diversis ejus partibus
 “ imparissimæ duritiei inveniebatur.”

Ex his conjunctis exemplis liceat sequentes suggestus obferre.

1. Verisimile mihi videtur placentam, in ambobus exemplis, per ejus adhæSIONem tenacem ad parietes et fundum uteri disruptam fuisse. Exemplo postremo, ut jam dixi, in diversis placentæ partibus structura ejus quoad duritiem valde diversa apparuit, et si hæc durities, ut celeberrimi medici consentiunt,* membranæ novæ tenacissimæ inter

* Inter alios de hac re disserentes, illustr. BLUNDELL sic loquitur.
 “ Sometimes, however, the womb inflames; and in consequence of
 “ this inflammation the placenta may become attached to its sur-
 “ face, and if this have been going on in the earlier or middle part
 “ of gestation, the adhesion may be extensive and strong. These
 “ adhesions may be accompanied with induration of the placenta, in
 “ consequence, I suppose, of an interstitial deposition of lymph in
 “ the pores of the placental structure.” Vide “ *The Principles and*
 “ *Practice of Obstetricy, as at present taught by JAMES BLUN-*

placentam et uterum interpositæ effectus sit morbosus, sequitur necessario, ut partes istæ placentales diversæ, cum tenacitate ad hanc duritie diversitatem proportionata, adhævisent. AdhæSIONEM aliquando tenacissimam esse ex exemplo quarto satis liquet *. Quod ad exemplum quartum pertinet, retentione fragmenti reperta, tentavi omnia recolligere, quæ in placenta removenda occurrerant, sed nequaquam recordari potui minimam vim in ea operatione adhibitam fuisse, et ante detectionem ea retentio mihi prorsus inopinata fuit. In exemplo quinto jam supra dixi me vi quam minima usum

“ DELL, M.D. *and Professor of Obstetricy at Guy's Hospital; with*
 “ *Notes and Illustrations by* THOMAS CASTLE, M.D. F.L.S. &c.
 “ Sect. L. pl. ‘*Retention from scirrhus adhesions.*’” Conf. etiam de
 hac re quod ex disceptationibus cell. INGLEBY atque RAMSBOTHAM
 altera hujus dissertationis parte proferre curabo.

* Ne res supervacanea habeatur quod aliud exemplum hujus adhæSIONIS tenacissimæ in propria praxi visum ex meis ephemeridibus medicis addere lubet. A.D. 1825, die 21mo Martii. “ Post partum
 “ infantem, successerunt dolores acutissimæ, sed nulla secundinarum
 “ expulsio. Ore uterino se occludente, per funem leniter pertraxi,
 “ sed cum nullo eventu, tunc manum introduxi. Maxima difficultas
 “ in separatione efficienda experta fuit; tam firma erat in quibusdam
 “ partibus adhæSIO, videbatur ac si quædam tenacissima vincula
 “ formata fuissent, non sine summa vi et assiduitate dissolvenda.
 “ Hæc apud placentæ marginem firmissima inveniebantur, sed ad
 “ postremum separationem effeci, partibus minus agglutinatis prius
 “ levatis, tenacioribus postea intrinsecus invasivis.”

esse, et persuasum habeo, placentam in ambobus exemplis sponte disruptam fuisse; parte majori laxiori secundinarum ab altera minori indurata atque adhærente parte per ipsas contractiones uterinas, abrupta.

2. Si vero solida sit hæc opinio, disruptionem, certis induratæ placentæ atque adhæSIONIS tenacissimæ exemplis, per ipsam contractionem uteri naturalem et sine ulla vi extrinsecus adhibita, aut etiam ulla actione uterina irregulari spasmodica, sponte effici posse, res est quæ, quamvis a nullo medico auctore, ut recordari fas est, explicite recognita, gravis tamen et multis nominibus non negligenda esse habeatur. Ex tali nempe causa disruptio sine ulla suspitione ex parte obstetricis accidere potest, et si placenta expulsa examinationi perspicaci non subjecta fuerit, ex adhærente fragmento hæmorrhagia et aliorum malorum lethalium series penitus ex improvise erumpere possunt. Ita in quarto descripto exemplo usque ad diem decimum septimam post partum incomperta remanserat disruptio. Revera suspicor, hoc frequentius accidere quam generaliter credatur, et non pauca fortasse exemplorum illorum quibus puerperæ mors typho adscribitur, potius irritationis fatalis e decompositione placentali ortæ exempla

fore. Magna utilitas atque etiam necessitas arctæ secundinarum expulsarum inspectionis, non ex hac mea sententia solum inferenda, sed ex ipso exemplo obvia est.

3. In eodem exemplo cum primo, secundo ac tertio comparato, variationes magni momenti quoad externum uteri tactum notandæ sunt. Ex his satis liquet, quam incerta disruptionis symptomata omnia exteriora phænomena sint, et rem difficillimam esse si non impossibilem, inspectione accurata placentæ expulsæ neglecta, factum disruptionis, sine exploratione per vaginam certum facere.

4. Contractio uterina vehemens quæ ab aluminis solutione injecta effecta fuit, ad quæstionem pertinet: quousque in praxi obstetricia limati iudicii sit, retenta placenta, quæ adhæSIONIS tenacioris videatur, quam quæ sit ex natura et sponte dissolvenda, per rerum astringentium injectionem contractiones provocare, per quas digitorum introductio, separatioque factitia impediri possint.

5. In eodem quarto exemplo, convaluit brevi spatio puerpera, quamvis fragmentum non parvum in utero remanserat, quod postea nullo modo evasit. Convalescentia feminæ talem explorationem qualis ad totam medelæ rationem demon-

strandam necessaria foret, fauste intercept; eadem-
que causa ex hoc exemplo certa de fato placentæ
retentæ indicia proferre nefas erit. Estne autem
aliquid impossibile aut etiam improbabile, inequali-
tatem superficialem uteri sub occasu posterioris
accubationis detectam, ipsius fragmenti secundum
conjecturam sub exemplo primo offertam vivificati
atque obsignati reliquum fore?

PARS ALTERA.

QUA SENTENTIÆ QUORUNDAM AUCTORUM MEDICORUM
DE PLACENTA DISRUPTA ANIMADVERTUNTUR.

Descriptis præcedentibus exemplis atque in loco illustratis, observantissime rogo, ut quasdam observationes specialiores, ad quæstionem de fato placentæ remanentis supra memoratam pertinentes, addere permissio detur. Salvis talium eruditorum illustriumque virorum debitis honoribus atque æstimatione, certe spero, per descriptas ac recensitas quasdam sententias ab auctoribus medico-obstetriciis spectatissimis latas, meliorem quæstionis disceptationem constituere, mihi integrum fore.

In pervulgatis scriptis medico-obstetriciis cel. DENMAN, et in prælectionibus publicis cell. BLUNDELL atque RAMSBOTHAM quæstio quasi obiter affertur, respectu ad eorum magis ad praxin pertinentem scopum, habito. Eadem ex causa, opiniones eorum quadam notabili dubitatione exprimuntur. Cel. DENMAN, exempli gratia, sine ullo argumento allato, de placentæ parte ‘marcita’ aut ‘digesta’

loquitur* ; cel. BLUNDELL, de parte “ fortasse sub
 “ putredine decrescente, aut sub tali absorptionis
 “ specie tabescente, qualis post partum, apophyades
 “ intra uteros ruminantium formatas removet † ;” et
 cel. F. A. RAMSBOTHAM, fil. dicit, “ partes placentæ
 “ remanentes in quibusdam rarioribus exemplis for-
 “ mationum hydatidarum nucleum fieri, aut in ra-
 “ rissimis, ut credit, revera absorpta esse.” ‡

* Vide ejus “ Introduction to the Practice of Midwifery,” cap. xiv. Sect. 5. ubi dicit : “ it has been found, when a portion of the placenta
 “ was left behind, that an existing hæmorrhage has ceased, and not
 “ returned ; and that this portion far sooner *decayed*, and was more
 “ readily *digested* or expelled than the whole.”

† “ Hujus verba sunt. “ The scirrhus portion of the placenta is
 “ said to have separated spontaneously in some cases, after the prac-
 “ titioner had failed. More generally, however, if the patient recover,
 “ this diseased part *wastes, sometimes perhaps wearing away under*
 “ *putrefaction, and in other cases wasting under a sort of absorp-*
 “ *tion similar to that which after delivery removes the secreting ex-*
 “ *crescences which are formed upon the uterus of the ruminating ani-*
 “ *mals.*” Vide “ Principles and Practice of Obstetrics,” &c. Part IV. Sect. 50, p. 629.

‡ “ At other times again, but *very rarely*, the remaining portions
 “ of placenta become the *nucleus* for *hydatidinous formations* ; and
 “ *more rarely still, I believe, they are actually absorbed.*” Vide ejus
 “ Lectures on the Theory and Practice of Midwifery, delivered at
 “ the London Hospital,” Præl. xlvii., “ London Medical Gazette,”
 tom. xiv. pag. 770. Confer etiam quod paulo ante præcedente
 prælectione ab eodem dicitur. “ On examining the placenta,
 “ also, after its removal, if a large proportion be wanting, I think
 “ it better to attempt to remove it immediately, under the em-
 “ ployment of the utmost tenderness, than to leave it to be expelled

Fieri non potest, quin horum dictorum obscuritas et indecisio planissimæ sint; neque argumentorum quorumlibet absentiam, aut gravium aut vanorum, excepta analogia a cel. BLUNDELL allata, prætermittere fas est. Sed non hæc solum, verum etiam quæstionis ipsius momentum per dictum aliud candidum BLUNDELLIANUM, in opera supra citato illustrantur, ubi dicit: "why it is in some cases that
 " the [retained] placenta putrifies rapidly, while in
 " others it remains unchanged, I am not able in a
 " satisfactory manner to explain, though the sub-
 " ject is well worth investigation." *Principles, &c.*
 ad Part IV. Sect. xlix. sub titulo '*fætid discharge.*'

Anno salutis, 1828, aut fortasse 1829, tractatus ingeniosissimus de exemplis quibusdam disruptæ placentæ ab ipso visis, ab illustr. F. C. Nägele, Medicinæ Doctore, ac apud Heidelbergenses Professore Medico-obstetricio, ad cel. L. V. de Froriep, Medicinæ doctorem, atque libri cui titulus, "*Notizen aus dem Gebiete der Natur und Heilkunde,*" editorem, ad publicandum mittebatur. Ex hoc tractatu excerpta quædam anglice versa in opere dicto, "*The*

" to putrify, to become, perhaps, the nucleus for hydatid formations,
 " or to the chance of its absorption." Lond. Med. Gaz. tom. xiv.
 p. 744.

London Medical Gazette," anni 1829, impressa sunt. Exempla, numero tria, cum summa diligentia ac acumine, quoad videtur, observata atque descripta sunt, et indicia in re tam obscura fortasse quam validissima offerunt, quod in duobus exemplis tota placenta, in tertio pars amplior in utero permanenter remanserunt. Idem duo exempla commemorat a Götzenberger medico practico expertissimo Heidelbergensi visa, de quibus hic se persuasum habebat, "that no trace of the placenta had been detected either in a solid or in a partly dissolved state." In his excerptis nulla de placentæ remanentis fato hypothesis expresse offertur; sed dictum Professoris, exemplum aliud a Salmone medico Batavo-Lugdunensi visum animadvertentis: "the whole placenta had been absorbed;" sententiam ejus indica re videtur. Observandum est quoque medicum anglicum Rigby, illa excerpta in linguam suam vernaculam reddidisse, ut amicus suus Merriman, medicinæ doctor, testatur, ad factum demonstrandum, professorem Nägele exempla quædam absorptæ placentæ—"several instances of the absorption by the vessels of the uterus of the retained placenta"—vidisse. Absorptionis vero hac aut quacunque alia methodo nulla indicia præ se ferunt

excerpta. Nihil aliud ex illis demonstrari potest quam quod fragmenta placentæ adhærentis nunquam, ut apparet, ex utero evaserint.

Ex omnibus autem auctoribus medico-obstetriciis, qui super hac re scripserunt, nullus quod sciam, hanc quæstionem tam directe consideravit quam amicus meus INGLEBY, medicus practicus Birminghamiensis, in opere suo, "A Practical Treatise on Uterine Hæmorrhage," etc., anno 1832 publicato. In capite suo xxi. de placenta disrupta—"On Disruption of the Placenta"—medicus hic expertus sententia sua indicata, exempla hujus casus interdum exstare, quæ naturæ committere melius est, quam ullum periculi augmentum per methodos artificias adhibitas provocare, ad sequelas varias disruptæ placentæ describendas progreditur. Hic de absorptione possibili retentæ partis, de ejus decompositione atque sub variis formis expulsionem, denique de quadam exceptione, ut dicit, huic naturæ legi loquitur. Quod absorptionis fragmenti refert, cel. INGLEBY sententiæ illæ professoris Nägele, talem processum per vasa uterina possibilem esse non adstipulatur; tametsi credit absorptionem in quibusdam perraris exemplis, per lymphatica uterina propria fieri posse. Quod ad occasionem hujus, e placentæ retentæ de-

compositæ lege naturali, ut dicit, exceptionis, ab eo scriptum tanti est momenti, ut non possum sequente pagina non describere. Hoc loco notare sufficiat, amicum meum æstumatissimum medelam, ut apparet, in nullo retentæ placentæ exemplo videre, si non per eventum perrarum absorptionis lymphaticæ. Verba ejus ad hanc rem spectantia sunt:—

“ Assuming that a considerable part of the placenta remains in utero, and does not pass away per vaginam, either in a solid or liquid and decomposed form, it must necessarily be absorbed; but how can the blood vessels, opening upon that part of the uterus which corresponds to the placental site, act as absorbing powers when they are plugged with coagula, sufficiently so at least to render the transmission of any substance through their calibres physically impossible? Granting therefore that absorption really takes place, it must be allowed to be a rare occurrence, and can only be effected by the proper uterine absorbents.”—*Practical Treatise on Uterine Hæmorrhage*, cap. xxi. pp. 206, 207.

Ex omnibus his de fato placentæ retentæ sententiis est inferendum, quod non nisi quadam “ digestionem ” aut “ absorptionem ” fragmenti, puerperæ re-

valescentia speranda sit. Quam diversæ autem hæ sententiæ sint, et quam conjecturales, speciali non eget notatione. Videatur ac si non ex argumentis sed argumentorum penuria tales conjecturæ producerentur. Rebus sic stantibus, omnis sententia ad phænomenorum haud fucatorum confirmationem provocans consideratione digna est; et arbitrio medicorum eruditorum officiose submitto, necesse est prius ostendere, phænomena sub exemplo primo descripta, alia et meliori quam usus fui ratione explicari posse, quam ulla digestionis aut absorptionis hypothesis accipienda sit. Phænomena similia tamen a cel. INGLEBY visa ab eodem parum simili ratione interpretata fuisse prætermittere non possum; accedit igitur officium, ante argumenta ulteriora adducenda, hujus viri ingeniosissimi theoriam propriis verbis exhibere.

“ It has already been observed that a retained
“ portion of placenta is usually cast off from the
“ uterus in a decomposed state. To this law of
“ nature, however, an exception must be taken.
“ The exception has reference both to the ordinary
“ form of morbid adhesion, and also to a peculiar
“ organisation of the retained substance, occasion-
“ ing protracted and even fatal cases of hemorrhage,

“ which has not, I think, obtained from any of our
“ obstetric authors, a distinct notice. Although a
“ considerable part of the placenta may sometimes
“ be found in morbid association with the uterine
“ surface, it more commonly happens, that whilst the
“ great bulk remains perfectly healthy, a circum-
“ scribed portion only shall have become disorgan-
“ ised, and so firmly and intimately interwoven with
“ its connecting surface as to leave no distinct line
“ of demarcation. Under these circumstances, whilst
“ the placenta is being detached by means of the
“ funis, a portion of the mass may remain firmly
“ adherent . . . Instead of the retained portion
“ being cast off by the progressive contractions of
“ the womb, the connexion may be sufficiently close
“ to resist these efforts of nature; the organ re-
“ maining bulky, and the vessels supplying the ex-
“ traneous body unusually large. If the hemor-
“ rhage is inconsiderable, and the constitutional
“ energies unimpaired, the mass, by acquiring an
“ increased degree of organisation, presents a florid
“ hue, not unlike a fungous growth, in place of the
“ black and offensive structure which characterises
“ a disrupted state of the placenta. Moreover, the
“ retained portion may become so far identified with

“ the lining membrane of the uterus, as to render
 “ a distinct and perfect disunion impracticable.”—
Practical Treatise, &c. cap. xxi. pp. 208, 209.

Hac organisatione notabili congruimus ambo decompositionem ac expulsionem fragmenti impossibiles reddi. Omni alio respectu dissentimus. Mea sententia est hanc organisationem in causa convalescentiæ,—amici autem, in causa periculi atque mortis esse. Ad hunc finem dicit:—

“ Unless the mass be completely walled in, vessels will be exposed; and though decomposition may not take place, hemorrhage will necessarily arise; and as the uterus cannot be perfectly contracted, the cessation of the hemorrhage must entirely depend upon the formation of coagula within the vessels. On the clots being displaced, the effusion will be renewed from time to time.”—
Ibid. p. 209.

Tunc sequitur, ejusdem argumenti causa, exemplum, phænomena illa a me sub inspectione post mortem puerperæ visa quam proxime referens, his verbis:—

“ The dissections of women, who have perished
 “ from hemorrhages at different periods after delivery, fully establish my assertions. In one in-

“ stance of this kind hemorrhage began the third
 “ day after delivery, and, with the exception of a
 “ few short intermissions, continued during a period
 “ of five weeks, when it terminated in death. On
 “ inspecting the body, a tumour of rather florid
 “ colour, and the size of the largest walnut, was
 “ found firmly adherent to the sides of the fundus
 “ uteri at its highest part; the lining membrane
 “ covered the greater portion of the mass, though
 “ not its centre, which was ragged, and vessels
 “ could be traced opening upon it.”—*Ibid.* pp. 209,
 210.

Dixi supra, virum hunc eruditum nullam mede-
 lam possibilem putare, placentæ fragmento perma-
 nenter retento, nisi per eventum perrarum lym-
 phaticæ absorptionis. Hæc mea interpretatio verum
 non omni dubitatione libera est. E phrasi supra
 occurrente—“protracted and even fatal cases of
 “hemorrhage”—fortasse inferendum est amicum
 meum æstumatissimum non omnia hujus specialis
 organisationis exempla fatalia arbitrari. Contra
 vero consideranda sunt, quod capite priori dixerat,*

* “The patient is necessarily exposed to dangers of the most
 “formidable kind. For although the foreign body may be cast off,
 “or absorbed possibly without becoming decomposed, it is infinitely
 “more probable that flooding, or decomposition and irritative fever,

et omnis causæ medentis in his excerptis prætermissio. Si revera credit exempla quædam hujus organisationis non lethalia evenire, cui causæ convalescentia adscribenda sit? Si vero, ut videtur, omnia potius lethalia existimat; mihi nunc restat quædam meæ sententiæ, hanc organisationem medentem fore, documenta addere.

1. Hæc mea sententia ex historia processuum animalium, et medentium et morbosorum confirmari videtur: ex. gr. ex illis inflammationum adhæsivorum exemplis, per quas substantiæ extraneæ partibus animalium viventium conjunguntur. Varius lymphæ coagulabilis usus, articulo fracto, ad sequelas formidabiles cavitatum nudatarum præveniendas, plura talis vis medicatricis naturæ exempla elegantia profert.

2. Analogia insignis processui in exemplo primo descripto, si non processus ipse cum levi discrimine notatus, in illis conatibus a natura factis ad periculum separationis inter uterum et placentam, durante gestatione, ortæ, obviandum exhibetur. Hos conatus naturales tam lucide depinxit cel. RAMS-

“will take place.” Vide *Practical Treatise*, cap. xx. pag. 201. Hic præter expulsionem, aut absorptionem retentæ placenta nulla medelæ causa nominatur.

BOTHAM in prælectionibus suis apud Hospitium Londinense habitis, ut melius facere non possum, quam verba ejus ipsissima citare.

“ Cases are not unfrequently met with in which
“ two or three eruptions of blood having taken
“ place, consequent on some external and easily
“ assignable cause, the hemorrhage gradually
“ ceases, and does not return; but, under labour,
“ adhesion of the placenta is discovered.

“ I presume, under such circumstances, that the
“ cessation of the discharge depends upon an agglu-
“ tination of the placenta with the uterus; nor is the
“ explanation difficult. The two surfaces remain
“ in contact, though not attached, having been se-
“ parated from each other by some accidental
“ cause; and, to prevent a continuance of bleed-
“ ing, and to save life, nature makes a strenuous
“ effort; inflammation is set up in the membrane
“ of the womb, by which the placenta is glued to
“ the uterine surface, and thus the open vessels are
“ permanently closed.”—Vide Præl. xlvi., in opere
The London Medical Gazette, nuncupato impressam.
tom. xiv. p. 743.

Causa hujus uteri atque placentæ agglutinationis ab eodem in priori pagina sic refertur. “ The last

“ case is the most difficult of all : that in which
 “ morbid adhesion takes place—agglutination be-
 “ tween the two surfaces of the uterus and pla-
 “ centa—in consequence, most probably, of a de-
 “ position of coagulable lymph, the produce of a
 “ peculiar kind of inflammation, which the lining
 “ membrane of the uterus has taken upon itself.”

De tenacitate majori vel minore ejus adhæisionis
 postea loquitur, præparationem anatomicam disci-
 pulis exhibens :—“ Here is a case where a portion
 “ of the placenta was so firmly attached to the ute-
 “ rine surface that it could not by any means be
 “ removed ; nay, I have opened more than one
 “ body, where a part of the placenta was left adhe-
 “ rent to the uterus, and where, on making a longi-
 “ tudinal section of the organs, and examining the
 “ cut edges, I could not determine the boundary
 “ line between the uterus and the placenta.”—

Præl. xlvi. opere supra citato, pp. 741, 742.

Si firmissima agglutinatio in hoc exemplo visa,
 atque per lymphæ coagulabilis depositionem effecta,
*conatus strenuus vis medicatricis naturæ, ad hæmor-
 rhagiam obviandam atque vitam servandam* durante
 gestatione dici possit, quid est cur dubitemus
 talem agglutinationem medentem etiam post par-

tum possibilem fore? Analogia inter hæc tria exempla, ab INGLEBY, RAMSBOTHAM atque meipso descripta clarissima est; restat solum ut distinctionis causa notem, conatus illos vis naturæ medicatricis, in exemplis a cel. INGLEBY et meipso descriptis, ut a depositione lymphæ *super fragmentum* satis apparet, post partum evenisse. Hoc uno discrimine, quod a cel. RAMSBOTHAM super ejus exemplum notatur ad illa duo cætera exempla pariter pertinere videbitur.

“ Such a change is not more extraordinary than
 “ many of the contrivances to avert danger which
 “ we observe nature daily practise, and quite in ac-
 “ cordance with the mode she generally adopts to
 “ repair injuries.”—*Præf.* xlvi. L. M. G., tom. xiv.
 p. 743.

Fortasse meæ sententiæ opponetur, eventum am-
 borum exemplorum a meipso et amico meo specta-
 tissimo descriptis fatalem fuisse. Respondeo:
 eventum infaustum nullum certum documentum
 contra hujus organisationis scopum præbere. In
 meo primo exemplo symptomata varia apparuere,
 per quæ felicior eventus necessario impediretur.
 Considerandum est quoque, quam difficilior foret,
 revallescente puerpera, certas convalescentiæ causas

detegere. Supponamus tumorem intra uterum formatum esse, inæqualitatemque superficiei uterinæ, in meo quinto exemplo inventam talis organisationis sequelam fore; hujus tumoris aut inæqualitatis existentia nullum certum indicium aut causæ aut methodi exhibet. Si per analogiam igitur, ut arbitror, sententia mea de hujus organisationis vi medica- trice aliquo nomine confirmatur, nullum fortasse argumentum probabilius adduci potest, quam dis- ruptæ placentæ exemplum, quo convalescentia a causis extraneis impedita, per examinationem post mortem occasio facti detegendi datum fuit, quod tota fragmenti disrupti ac adhærentis superficies, excepta ejusdem sexta parte membrana nova ante obtecta fuerit, quam mors ex illis extraneis causis evenisset.

Sed hæc hactenus. Quoad ab amico meo IN- GLEBY cæterisque auctoribus celeberrimis citatis dif- feram, modestiæ officium plene et observanter agnosco. Ex hoc autem non sequitur sententiam tacendi officium, ac si phænomena a me visa nullo- modo ad quæstionem hanc de fato placentæ per- tineant. E contra aliam rationem de istis reddere prius necesse erit, quam illa digestionis aut absorp-

tionis conjectura recipienda sit. Quod ad meam sententiam refert, sive in confirmationis loco, sive contradictionis ista phænomena stare arbitrarentur, mihi non magnæ curæ est; si modo valeant super hanc quæstionem aliquid novæ lucis effundere. Ad hunc finem melius consequendum exempla et argumenta mea gratioso medicorum ordini in alma universitate regia Fridericia Wilhelmio-rhenana propono. Si istis aut aliis rationibus probabile reddatur, naturam per descriptam organisationem, suam vim medicatricem pro vita tuenda exercere, manifestum erit quod in illis casibus, quibus auxilium arte confectum non sine magno periculo adhibeatur, medico practico religioso integrum erit, multum quod alias mentem valde sollicitum reddiderit, æqua mente vi naturæ medicatrici commendare. Si hoc tentamen medico-obstetricum aliquid nostræ humanitatis rebus quoquomodo prodesse valeat, voti compos fiam.

quod conjectura recipiendi sit. Quod ad hanc
sententiam referit, sive in confirmatione sive
contradictione ista plurimum est adhiben-
ta, nisi non magis careat, si modo valent
super hac questione, aliquid novum lucis ad-
ferre. Ad hanc enim uelut correspondens
exempla et argumenta sua græco medicorum
ordii in alia universitate regia Iuliana Wilhel-
mo thessali proponit. Si istis aut aliis rationibus
probabilia existant, naturam per descriptionem organi-
ationem, sicut iam medicis per vita laudis
errorum, manifestum est, quod in illis casibus, per
has auxilia sine contactu non sine magis, per
color adhibetur, medicis pariter religio integritas
est, omnium quod alias mentes, ubi solentem
redhibent, equas mentes et naturas medicarum con-
mendare. Si hoc tentamen medico-obstetricum
aliquid nostris, inpartibus, repdes proponendo
probasse videtur, vobis compos tum oportet, ubi
dignitate et aliis, uelut in antea, ut
conferat, si fuerit non minus, et si
etiam in confirmatione et in contradictione
et in omnibus, et si in aliis, et si
etiam in aliis, et si in aliis, et si
etiam in aliis, et si in aliis, et si

VITA AUCTORIS.

ANNO sæculi præteriti octogesimo primo Agmundeshami, in Anglia, patre optimo tunc temporis hujus oppidi medico practico tertius filius, natus, ejusdemque atque virorum aliorum maxime venerandorum curis usque ad decimum quintum ætatis annum literis humanioribus artibusque ingenuis imbutus, primum anno salutis 1796 animum ad medicinæ studium intendi, ipso dilectissimo patre præceptore usus. Post annos quatuor in pharmacopolio paterno peractos, ad scholas chirurgicas medicasque Londinenses—nominatim nosocomium Sancti Thomæ atque nosocomium Guyanum—missus fui; quas scholas per pene tres annos frequentavi, non solum ad prælectiones anatomicas, medicas, chirurgicas, obstetricias, chemicas audiendas, verum etiam ad praxin medico-chirurgicam videndam, sub ductu illustr. CLINE, COOPER, PEARSON, FORSTER atque LUCAS professo-

rum chirurgicorum ; ill. BABINGTON, RELPH atque HARVEY professorum medicorum ; ill. BABINGTON professoris chemici ; ill. LOWDEN atque HAIGHTON professorum obstetriciorum. Anno 1800 inter socios Societatis Physicæ Nosocomii Guyani Londinensis ; annoque sequente inter socios Collegii Chirurgici Regalis receptus sum.

Quod ad hoc curriculum præparatorium pertinet, liceat mihi non solum tantorum virorum erga me beneficia recordari, verum etiam debita ac suavia officia pietatis reddere. Sub illa institutione paterna quibus quantisque non fruitus sum commodis ! Menti sanæ atque validæ in patre meo adjuncta est observationis accuratissimæ facultas. “Nullius in verba magistri,” mihi quoque copiam liberæ inquisitionis fecit. Acumen atque patientiam ejus non etiam minutissima aut fugacissima eluserunt morbi phænomena. Prognosis quoque summam peritiam possidebat. Talis erat vir,—tam quum privatæ consuetudinis morumque suavitate ac integritate, tum praxeos medicæ diligentia, æquanimitate, solertia atque fausto eventu distinctus, ut non solum vivus apud amicos ægrotosque gratia plurimum valeret, verum etiam ab omnibus valde flebilis moriretur.

Jam primo mei tyrocinii anno, patre præceptore, phænomena factaque ad rem medicam pertinentia scriptis mandare assuevi. Hunc morem usque ad præsens tempus, maxima ut mihi videtur utilitate practica, conservavi.

Ad finem anni salutis 1802 munere medico-practico apud Beaconsfield, oppidum proxima paternæ domus vicinitate situm, sub ipso patris oculo fungi incepti. In omnibus rarioribus difficilioribusque morborum exemplis consilio ejus potitus sum. Anno 1810 pater hic carissimus ad summos in medicina honores progressus est, non tamen Agmundeshamum reliquit, eodem oppido tandem post quatuordecim annos mortem obiens.

Fratri meo natu majori, dilectissimo, JACOBO RUMSEY, qui post patrem mortuum gradum doctorem capessivit, Agmundeshamique, medicam artem maxima omnium observantia exercuit, debitas pro suis consiliis fraternoque amore gratias reddere, neque modestia ejus permittit neque facultas mihi datur. Paucis igitur narrare potero quod ad praxin meam medicam refert. Per annos triginta quinque plurima exempla morbosa, præsertim obstetricia vidi. Phænomena et facta medica per quatuor decennia in ephemeridibus meis descripta

assuevi conservare. Horum sex tomos, forma ut dicunt quarta, jam possideo. Quædam coram societatibus eruditorum lecta, et typis mandata sunt. Tentamen a me scriptum, "On the Coincidence of Worms with Hæmoptysis," anno 1818, coram Societate "The Royal Medico-chirurgical Society" vocata, lectum, plerisque laudatum fuit. Sic opinio quam in opere, the "Edinburgh Medical and Surgical Journal" vocato, sequente anno publici juris feci,—febrem ex mera depletione fieri posse,—et quæ septem abhinc annis a viris cell. BENJ. TRAVERS ac MARSHALL HALL repetita fuit, novum principium medicum non parvi pretii a scriptoribus quibusdam spectandis esse notatur. Anno 1830, tentamentum scripsi "On Scarlatina," quod post lectionem ejus coram Societate "The Provincial Medical and Surgical Association" vocata, auctoritate ejusdem Societatis typis mandatum fuit. Cetera hujusmodi prætermittere liceat.

Peracto jam colloquio cum gratiosi medicorum ordinis Bonnensis professoribus publicis ordinariis, quorum erga me humanitatem pio et memori animo conservabo, ad summos in medicina et chirurgia honores accingor.

CORRIGENDA.

Page 11, line 1,	<i>pro</i>	preferre	<i>lege</i>	proferre
— 12, — 9,	—	fæminæ	—	fœminæ
— 13, — 9,	—	evomitantus	—	evomitante
— —, — 15,	—	et	—	circiter
— 14, — 2,	—	requaquam	—	nequaquam
— —, — 22,	—	quiu	—	quin
— 20, — 14,	—	<i>dele comma</i>		
— —, — 17,	—	sume	—	sum e
— 21, — 3,	—	<i>dele comma</i>		
— 23, — 7,	—	exortem	—	exortam
— 29, — 9,	—	absorpta	—	absorptas
— 30, — 8,	—	opera	—	opere
— 31, — 18,	—	indica re	—	indicare
— 38, in nota *	—	placenta	—	placentæ

1. The first part of the book is devoted to a general introduction to the subject of the history of the world, and to a description of the various methods which have been employed by historians in the collection and arrangement of their materials.

1. The first part of the book is devoted to a general introduction to the subject of the history of the world, and to a description of the various methods which have been employed by historians in the collection and arrangement of their materials.	1-10
2. The second part of the book is devoted to a description of the various methods which have been employed by historians in the collection and arrangement of their materials.	11-20
3. The third part of the book is devoted to a description of the various methods which have been employed by historians in the collection and arrangement of their materials.	21-30
4. The fourth part of the book is devoted to a description of the various methods which have been employed by historians in the collection and arrangement of their materials.	31-40
5. The fifth part of the book is devoted to a description of the various methods which have been employed by historians in the collection and arrangement of their materials.	41-50
6. The sixth part of the book is devoted to a description of the various methods which have been employed by historians in the collection and arrangement of their materials.	51-60
7. The seventh part of the book is devoted to a description of the various methods which have been employed by historians in the collection and arrangement of their materials.	61-70
8. The eighth part of the book is devoted to a description of the various methods which have been employed by historians in the collection and arrangement of their materials.	71-80
9. The ninth part of the book is devoted to a description of the various methods which have been employed by historians in the collection and arrangement of their materials.	81-90
10. The tenth part of the book is devoted to a description of the various methods which have been employed by historians in the collection and arrangement of their materials.	91-100

The book is divided into ten parts, each of which is devoted to a description of the various methods which have been employed by historians in the collection and arrangement of their materials. The first part is devoted to a general introduction to the subject of the history of the world, and to a description of the various methods which have been employed by historians in the collection and arrangement of their materials. The second part is devoted to a description of the various methods which have been employed by historians in the collection and arrangement of their materials. The third part is devoted to a description of the various methods which have been employed by historians in the collection and arrangement of their materials. The fourth part is devoted to a description of the various methods which have been employed by historians in the collection and arrangement of their materials. The fifth part is devoted to a description of the various methods which have been employed by historians in the collection and arrangement of their materials. The sixth part is devoted to a description of the various methods which have been employed by historians in the collection and arrangement of their materials. The seventh part is devoted to a description of the various methods which have been employed by historians in the collection and arrangement of their materials. The eighth part is devoted to a description of the various methods which have been employed by historians in the collection and arrangement of their materials. The ninth part is devoted to a description of the various methods which have been employed by historians in the collection and arrangement of their materials. The tenth part is devoted to a description of the various methods which have been employed by historians in the collection and arrangement of their materials.