The physiological effect of ergot is to produce uterine contraction and retraction; the uterus becomes anæmic, and the contractions tend to be tonic. It is said they induce constriction and rigidity of the cervix, instead of dilating and relaxing it, as do the normal con-tractions of labour. By its action on all invcluntary muscular fibres, it causes the arteries to become smaller-a factor in the arrest of hæmorrhage. The effect on the pulse rate is, according to the latest researches, to increase it; later, however, it diminishes. In large doses ergot irritates the stomach and intestines.

The question which concerns midwives is the indication for its administration; the safest rule is never to give it till after the third stage of labour is completed; it is then given either as a prophylactic against hæmorrhage, or to arrest hæmorrhage. In most of the lying-in hospitals it is not given as a routine practice. If labour is terminated by vigorous pains, and the uterus contracts and retracts satisfactorily, ergot is unnecessary. It is advisable, however, in a country district to leave a drachm in case of emergency. Where there is atony of the uterus ergot is ineffective, and one must rely on other means for checking post-partum hæmorrhage. If after-pains are due to retained clot, membrane, etc., half-adrachm of the Ammoniated Tincture every four hours is likely to relieve them, after first intensifying them, by causing the uterus to contract actively and expel what has become foreign matter. It is also useful in cases of sub-involution.

In a case of emergency, a midwife is justified in giving ergot to patients with severe accidental hæmorrhage, especially if the labour is premature, and, as far as she can judge, there is no danger of obstructed labour. Hermann lays it down as a law that ergot should never be given before the completion of the second stage in first labours; and the mass of authorities agree that it is inadvisable in cases of uterine inertia.

The dangers of giving ergot before the birth of the child are that the uterus may pass into a state of tonic contraction; exhausting the patient, hindering the circulation through the placenta, and so inimicable to the life of the child, and if there is obstruction either from pelvic deformity or abnormality of the child, rupture of the uterus may ensue. If ergot is given before the end of the third stage, there is a risk of the placenta or membranes being

retained, and any exploration of the uterus isrendered more difficult owing to the tonic con-traction it produces. In cases of postpartum hæmorrhage, the dose may be repeated. As a rule, when given by mouth, ergot acts in about twenty minutes. Α. hypodermic injection should be given deeply into the buttock. It acts almost instantly. It must be borne in mind that some people have an idiosyncrasy for the drug, and. it has little effect. Parmentier experimented and took half-a-drachm of powdered ergot for eight days, and suffered no inconvenience, and certain individuals have eaten bread made from diseased rye where the proportion of: ergot was as high as one in eight, and no evil effects have followed. It is important that the drug should be freshly prepared; it deteriorates if kept too long, or exposed to damp. Dilute acid is sometimes added to it in prescribing to preserve it. It is wise to ask the chemist for 'B.P. ergot,' i.e., ergot standardised ac-cording to the regulations of the British Pharmacopœia; inferior ergot is frequently sold, and is absolutely useless. As ergot is a scheduled poison, it is necessary to have an order from a doctor when buying it.

OFFICIAL PREPARATIONS. The following preparations are official :---

- Ergot (in powder), dose 20-60 grains. Infusion of Ergot, dose 3i-3ij. (One ounce of powdered ergot to a pint of boiling water.)

## Alcoholic:

Extract of Ergot, dose 2-8 grains.

Liquid Extract of Ergot, dose 10-30 minims.

Ammoniated Tincture of Ergot, dose 1-1 drachm.

Hypodermic Injection of Ergot, 3-10 minims.

There are, besides, on the market certain proprietary products, which are given hypo-dermically; the best known are Aseptic Ergot (Parke, Davis, & Co., and Ernutin (Bur-roughes, Wellcome, & Co.). Tuese are made up in glass bulbs, each containing one dose; their drawback is that they are expensive; it is said the effect is somewhat transitory. The Ammoniated Tincture and the Liquid Extract are most commonly used, diluted with water.

The French have in all twenty different names for ergot; perhaps none are so expres-sive as the German "mutter-korn" (mother corn); it is pre-eminently a drug for mothers, but its value lies in the wisdom with which it is given, and the knowledge of its power for evil is as essential as that of its beneficient: action. M.O.H.



