

child-bed, and tend to render convalescence both hazardous and protracted.

There are two methods of dealing with lesions to the perinæum—dressings or sutures. Much depends upon the amount of injury inflicted; if of minor extent, the former will suffice; if of major, the latter will have to be resorted to. Many Obstetricians prefer to put in the wires as soon as delivery is complete; the number of stitches required may vary from one to ten.

In my next paper we will enter upon the Nursing duties required after rupture of the perinæum.

(To be continued.)

### YELLOW FEVER.

By ETOILE.

(Author of "Events in an Irish Country House.")

A FEW remarks about yellow fever in Bermuda, where the writer was stationed about seven years, may prove alike interesting and instructive.

Bermuda, our oldest British Colony, has lately been prominently before the public, in consequence of the exile there of a battalion of the Grenadier Guards, and its recent connection by "cable" with the telegraph system of the world.

Situated in a latitude similar to that of Madeira, its climate, during the months of November to the middle of April, is charming and healthy. The islands being only twenty-seven miles long, in no place exceeding a mile and a-half in breadth, and the highest Lilliput mountain not exceeding the altitude of two hundred and sixty feet above the sea, the cool breezes sweep continuously across them, and many illnesses, such as small-pox, &c., are virtually unknown there. Bound like a gem upon the bosom of the Atlantic, both political parties in the State have agreed to turn the Bermudas into a second Gibraltar, as they afford a rendezvous and depot for our North American squadron, warlike stores and provisions, are the site of a Royal dockyard, and possess a Marine repairing slip for vessels driven by storms to seek shelter there. Strangely enough, these islands have been devastated from time to time by that scourge, yellow fever; but owing to the strict enforcement of the quarantine laws, and possibly more modern sanitary arrangements, the Bermudas or Somers Islands have been free from yellow fever since 1864. The earliest records of an epidemic of that nature show that it originated in 1780, and lasted, with fatal effects, for several months. We then are brought down by rapid strides to 1796, the years 1812, and 1818, and 1819, when for two successive years many of

the inhabitants were attacked by fever, and not a few died. The isolated position of the islands and other circumstances appear to have preserved them from the fever until 1837 and 1843, when it broke out with great virulence during the summer months—especially in August and September—and the Angel of Death entered many a household. The islands were then free till the summer of 1853, when it raged in terrible fury, and difficulty was often experienced in obtaining bearers to carry the dead to their graves. Even the military ceremony of firing over the graves of soldiers was dispensed with, by reason of its depressing effect. The last time "Yellow Jack"—the common name for yellow fever—made its appearance in the islands was in 1864, when the ports were thronged with vessels engaged in blockade running between Bermuda, Wilmington and Charlestown, during the American Civil War, by means of steamers painted a sea-grey colour and burning smokeless coal.

Impartial committees of enquiry have established the fact that yellow fever will not originate in these islands. Indisputable evidence has been produced, as regards the three last periods, that either vessels having yellow fever on board had communicated with or been inside the harbours, or that infected persons had landed, or those who had died being buried ashore. The fever is wonderfully rapid in its progress, and death sometimes ensues within a few hours. The most rapid case was mentioned to the writer as follows:—"I was standing," said my friend, "outside the door of the church at St. George's, talking to Mrs. A., before the 11 a.m. service commenced; she appeared then to be in perfect health. At 1 p.m., when I came out, preparations were being made for her funeral." If the patient does not die within forty-eight hours, reasonable expectations may be entertained of recovery. When, however, the "black vomit"—aptly named by John Hunter the Death of the Blood—ensues, not more than one in a thousand recovers.

A sergeant of the Royal Engineers was that fortunate unit in 1864. He served under the writer in 1873, and mentioned the incident. I asked what steps were taken when the "black vomit" set in. "Well, sir," he said, "the black nurse in attendance filled a large wine-glass three-fourths full with the juice of a fresh lime, and then filled the glass with collodion and mixed the two together. I drank it, and it remained down, and I recovered." It may perhaps, therefore, be assumed that this extraordinary mixture formed an artificial lining to the mucous membrane, and eventually enabled it to resume its natural functions.

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