

orifice of the matrix is, that this dilatation is the only means to discover whether the pains felt are in fact the pains of labour, for women often feel very sensible pains, which are not those that immediately precede delivery. To distinguish the false from true pains, it has been recommended for the midwife to touch the orifice of the matrix, as if the pains be true the dilatation will always increase, and if they are false pains, that is to say, pains which proceed from some other cause than that of the approaching delivery, the orifice will contract rather than dilate, or at least will not continue to dilate. From hence we have sufficient foundation to imagine, that these pains proceed from a forced dilatation of the orifice. The only thing which embarrasses on this occasion is that alternative of rest and sufferings the mother endures. This circumstance of the effect does not perfectly agree with the cause which we have just indicated; for the dilatation of an orifice, which is made by degrees, should produce a constant and continued pain, without any intervals of ease. But possibly the whole may be attributed to the separation of the placenta, which we know is fastened to the matrix by a number of papillæ, which penetrate