

# THE CANADA MEDICAL RECORD.

VOL. VIII.

MONTREAL, MARCH, 1880.

No. 6.

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### *Original Communications.*

#### ROTATION OF THE FŒTAL HEAD FROM OCCIPUT POSTERIOR TO OCCIPUT ANTERIOR POSITIONS BY MANUAL INTERFERENCE.

By DR. JAMES ROSS, Toronto.

Many years ago my attention was drawn to a considerable delay which occurred in cases of natural labor, where the head of child presented, the pelvis of mother being normal, and the fœtal head of the ordinary dimensions, and in the majority of such cases I found the head of child presenting with occiput right or left posterior.

All obstetricians of experience are aware that in a natural labor, where the head of child presents occiput right or left anterior, it is in the most satisfactory position, and that the labor will in due time be completed without manual or instrumental aid, provided the pelvis of mother and head of child be of normal dimensions, and all know equally well that in many cases where the child presents occiput right or left posterior, the head will, by the expulsive effort of nature and the peculiar mechanism of the natural pelvis, rotate so as to become occiput right or left anterior, and that the labor will also be completed in due time without interference on the part of the attendant; but I find there is a considerable number of such cases (occiput right or left

posterior), say five or six per cent., where rotation will not take place, or if it does, it will have done so only after a long continued effort on the part of the mother, thus causing much unnecessary suffering to her and a loss of time to the accoucheur.

In November, 1854, I first attempted to relieve a case of this kind by rotating the head from occiput left posterior to left anterior, and with success. Rotation was accomplished by passing the forefinger well up under the pubic arch, and placing it upon the right temple or rather temporal ridge of right frontal bone of child, then pressing upwards, backwards and to the right as the pains recurred, until I found the posterior fontanelle was directed towards the left acetabulum of mother, and then retained it in that position until the expulsive efforts had pressed the head well down into the pelvis. The labor then proceeded as in an ordinary occiput anterior presentation, the occiput emerging from beneath the left pubis, and was completed without any undue effort.

Since November, 1854, I have paid particular attention to these occiput posterior positions, and have, in many instances, relieved my patients in like manner.

During the period from November, 1854, to April, 1871, I attended 2,860 labors, and noted in my obstetrical record 143 cases where rotation had been performed, and since 12th of April, 1871, I have attended 2,003 labors; with similar results, but have not deemed it necessary to indicate all the cases of rotation because I