

# OBSTETRICS.

IN CHARGE OF

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## TREATMENT OF ACUTE PUERPERAL SEPSIS.

H. N. Vineberg brings out the following points in a paper on puerperal sepsis.

1. Puerperal sepsis is wound fever or wound infection, and wound infection in the female genital canal, as elsewhere, calls for surgical measures, such as free drainage, irrigation, and the removal with a sharp instrument of any debris or exudate that may form on the surface of the wound. These means failing to accomplish the desired result, perform ablation of the diseased organ.

2. In a given case of puerperal sepsis a thorough search is to be made of the whole of the genital canal, in order to determine the site of the original infection.

3. If this is situated in the uterus, curettage, drainage, and irrigation are to be employed. In 95 per cent. of the cases of puerperal sepsis nowadays met with, this plan of procedure will be all that is necessary to bring about a cure.

4. In the remaining 5 per cent, roughly speaking, these measures fail to arrest the infection. An exploratory laparotomy is then indicated, the further course to be guided by the pathological lesions found. In most cases total hysterectomy will be required.

5. When large collections of pus form and are so situated that they can be readily reached either with a vaginal incision or with one above either of Poupart's ligaments, no time should be lost in resorting to surgical relief. When, however, they are not so favorably situated, judicious delay is advisable, with the hope that ultimately the pus may be evacuated without the risk of soiling the general peritoneum;  
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## ANTISTREPTOCOCCUS SERUM IN PUERPERAL SEPTICEMIA.

H. W. Webber reports a case in which a favourable result was obtained from one injection of antistreptococcus serum. The injection consisted of 10 cubic centimetres of