

ADDRESS ON OBSTETRICS BEFORE THE CANADIAN MEDICAL ASSOCIATION.

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Animated by a desire to promote the interest of this Association, and feeling the obligation which rested on me as a member thereof, I consented to open the discussion in the department of obstetrics and gynecology. Soon thereafter I recognized the responsible position in which I had placed myself, and began to sorely repent my rashness. But the consciousness of the liberal-mindedness of the members of the Canadian Medical Association assured me that in an honest endeavor to discharge a self-imposed duty, I need not look in vain for their kind indulgence.

I was anxious to present to this Association some subject in connection with this department which would not only be interesting to the specialist, but to the general practitioner as well, as the general practitioner largely prevails in this young country of ours. I have therefore selected so commonplace a subject as *Subinvolution of the Uterus*, not more on account of the frequency of its recurrence and the not unfrequently more or less unsatisfactory results of treatment, than the personal desire to obtain the views as well as the experience of a great number of those present. And even if the observations, clinical research and line of treatment of so many here, who are more competent to speak upon this subject than I am, shall not bring out any great advance, I shall nevertheless not regret the introduction of the discussion. If no new remedies are brought forth, no specially different lines of treatment are advocated, still if we catch the inspiration to the proper use of remedies well known, I venture to say that the time is not misspent. Because of the prevalence of this affection, so much the more has it enjoyed the mind of the general practitioner, and in many instances is looked upon as the opprobrium of an art. "Sir, thou hast nothing to draw with, and the well is deep." I use the term "subinvolution" in preference to any other name, such as areolar hyperplasia, chronic metritis, etc., and for two reasons. It conveys in its meaning a fact that there has been an arrest or retardation of all those normal and physiological changes which are embraced under the head of

involution, and secondly, one is free from those mists and obscurities, those suppositions and hypotheses, where an honest endeavor to give a name according to the pathological condition of the parts obtains. For one hears of areolar hyperlasia, chronic metritis, hypertrophy of the uterus, sclerosis of the uterus, chronic parenchymatous inflammation, or chronic corporeal parenchymatous inflammation, diffuse proliferation of connective tissue, diffuse interstitial metritis, etc., etc., all of which indicate to the thoughtful student that further elucidation of the nature of the pathological changes of this condition may yet be expected.

As eczema in its early stages differs from eczema in its later stages, and as the pathological conditions of hepatic cirrhosis in its early stages differ materially from those noticed in the later stages, so we often find the subinvolved condition of the uterus frequently presenting variations consequent upon the duration of the ailment, although I believe this is not invariably so. For this reason, more than from natural conservative tendencies, I would retain the old familiar term "subinvolution."

We understand by this that there has been a failure to undergo sufficient reduction in size after delivery or abortion. I infer that something has prevented the ordinary changes incident to the retrograde metamorphosis from taking place, which in the short space of six or seven weeks reduce a uterus of 24 ounces to two ounces. Nature intends a proper and rapid reduction of this organ. How, then, is it that we have this ailment occurring so frequently? That there are known or unknown causes—avoidable or unavoidable—which prevent involution, will not be denied. The art and science of medicine are not only to relieve symptoms and remove morbid conditions, but to worthily stretch out into other and more philanthropic fields; and now in all civilized countries preventive medicine is occupying a prominent place.

After delivery, gradual diminution of blood supply and an increasing activity of the processes of absorption bring about involution of the uterus. But amidst unfavorable circumstances, the ordinary retrograde metamorphosis undergoes some departure from health.

I shall endeavor to present to you some of those unfavorable circumstances or influences, the prevention of which will largely contribute towards