

I will touch but lightly upon the etiology and symptoms of this grave affection, and hurry on to the all-important part, treatment. Hemorrhage, after the birth of the child, may arise from different causes. Among the predisposing are those acting through the nervous system or through the circulation. The muscular irritability may be impaired by general debility by wasting diseases, impoverished blood, due to suffering and muscular effort, from the external influences of heat and vitiated air, increased pressure in the venous or arterial trunks; the pressure in the veins may be increased by the patient getting up suddenly in bed, by coughing, sneezing, vomiting, &c., in which the abdominal muscles are called into play, and by any condition which will produce chronic congestion of the pelvic organs. Arterial tension as a cause of hemorrhage is said to be exceedingly rare. Among the exciting causes are laceration of the external sexual organs, vagina, or of the cervix, or the result of a ruptured or inverted uterus. But I will confine my remarks to that which occurs independently of any lesions or displacements. It may occur before or after delivery of the placenta. Of course in the former case the placenta must be partially or completely detached, but the cause with which we have most frequently to contend is *atony* or *uterine inertia*. The causes which lead up to this condition of the uterine muscles are many. It has been observed after rapid as well as after prolonged labor, great distention of the uterus, as from plural pregnancy or excess of the amniotic fluid, the prolonged use of anæsthetics, albuminuria, hemophilia, as also deficient muscular development. Veit refers, under *Atony of the Uterus*, to "paralysis of that portion of the uterus to which the placenta has been attached." In this condition there will be found, on external examination through the abdominal wall, a depression, while internally a corresponding projecting mass.

Penrose mentions as a cause the partial morbid adhesion of the placenta to the uterus. Here the uterus may be firmly contracted, but the adherent placenta in the cavity of the organ prevents the shrinkage in size, indispensable to the complete obliteration of the blood vessels, and hemorrhage is the inevitable result. This is the condition of affairs when we have to deal with fibroids in the uterine wall, likewise polypus in the cavity.