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THE MANAGEMENT OF THE THIRD STAGE OF LABOR.*

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A paper on this subject was read before a meeting of this Association in Hamilton eight years ago by the late Dr. George A. Tye, of Chatham. I was very much impressed by the views at that time enunciated, although I differed from the reader in many, if not most, of his conclusions. It was my pleasure to have an intimate acquaintance with Dr. Tye; and I am thoroughly convinced that he was one of the most conscientious workers, one of the most careful observers, and one of the grandest physicians that this country has ever produced. On the occasion referred to, he took a strong stand against Crede's method of expressing the placenta, and warmly advocated the expectant or donothing method. He stated that he had practised this plan of forcible expression for ten years, with bad results, inasmuch as he had a large number of hemorrhages. He had observed during a portion of that time that when called to cases which had been attended by midwives, who left the expulsion of the placenta to nature, that flooding seldom occurred, although the placenta was frequently retained a long time. He then abandoned the method, and pursued the expectant plan for seven years with good results. He thought that it not only tended to prevent the occurrence of hemorrhage, but also assisted in the prevention of puerperal fever.

With due respect for one whose opinions were always worthy of careful consideration, I will refer to some of his statements at a later stage.

On consulting Tyler Smith's work on obstetrics, which was the first I read in my student days, I find the following directions with reference to the management of the third stage of labor: "When the pains recur (after the birth of the child) gentle traction should be exerted upon the cord. . . . If there should be no pain, the finger should be introduced into the vagina, and the stringy insertion of the cord will generally be felt. . . . In extracting the placenta slow and gentle traction only should be used, as by this means the whole of the membranes . . . are likely to come away with the placenta." Other British obstetricians, and especially those of the Dublin school, at that time advised pressure on the uterus after the birth of the child as the best method of expelling the placenta, and preventing post-partum hemorrhage. To Credé, however, is due the credit of giving the most complete description of expelling the placenta by force applied externally to the uterus, as opposed to the method of extraction by pulling on the cord.

What, then, is Credé's method? I know of no procedure in midwifery which has given rise to more confusion than this same method. This has arisen from the fact that Credé in later years made an important change in the plan he

^{*}Read before the Ontario Medical Association, June 1, 1892.