

From an obstetric point the pregnant uterus at full term, presents three more or less distinct zones—1. The upper zone which embraces the muscular layers of all that portion of the uterus actively engaged in the extrusion of the foetus—"the upper uterine zone, or segment". It is thick, muscular, and its peritoneal coat is intimately connected with it. 2. A distended lower portion, "the lower uterine zone or segment", about three inches in length, extending to the internal os, and which remains passive during uterine contraction, or undergoes dilatation, probably from antagonistic innervation. It is thinner, less muscular, but more elastic than the upper segment, and its peritoneal coat is loosely connected to it. 3. The cervix, which has become more or less obliterated during the progress of pregnancy.

The lower boundary of the contracting zone of the fundus is marked by a ridge of thickening, which under normal circumstances is scarcely, if at all, perceptible—"the contraction ring" or "the ring of Bandl." This ring marks the boundary line between the upper contracting zone, or segment, and the lower dilating zone, or passive zone.

On the outer surface of the uterus an inconstant circle of blood vessels—the *vena coronaria*—may be seen, and when present indicates the true line of division between the upper and lower uterine segments.

There are two sets of forces operative in every labor, the forces of expulsion, and the forces of resistance. The forces of expulsion are furnished by the involuntary muscular contraction of the upper uterine segment, aided by the muscular abdominal walls. By the action of these a diminution of the intra-uterine area is produced. The degree of force exerted by the combined action of these two forces has been estimated to be from 17 to 55 lbs. The forces of resistance are furnished by that portion of the parturient tract which must be dilated, viz. that portion of the parturient canal between the contraction ring and the vulva, which includes the lower uterine segment, the cervix, the vagina, and the vulva. In a normal labor the lower pole of the uterine ovoid is gradually dilated until the foetal body passes