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CLINICAL EXPERIENCE WITH OCCIPITO-POSTERIOR LABORS.*

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MR. PRESIDENT AND GENTLEMEN,—I wish to bring to your notice this evening the history of some occipito-posterior labors. I shall refer first to a labor which I conducted on September 25th, 1900. The whole duration of this labor was ten hours. The pains were strong and progress reasonably rapid. The position was O.D.P. When the head reached the perineum I gave a little chloroform, and the child was born face to pubis without difficulty and without laceration of the perineum.

Again, on the 9th of August, 1902, I confined a woman whose labor began with rupture of the membranes, advanced rapidly, and was over in five hours, the occiput rotating to the front without assistance. One sees, then, that there are some cases of occipito-posterior position which do not call for interference, and the difficulty lies in recognizing these early. My practice is, as long as the labor pains are of normal character, progress rapid and pelvis roomy, let it alone.

In August, 1899, I confined a young woman who had been about twenty-four hours in labor. The head was pretty low down and I put on the forceps and delivered, after a hard pull. Result: a dead baby, a severe laceration and a protracted convalescence. Not long afterwards I gave an anesthetic for a fellow practitioner in a similar condition. The result was the same. These two cases may serve to illustrate how this

* Read at the January meeting of the Toronto Clinical Society.