RUPTURE OF THE UTERUS.

A NOT very uncommon accident to the parturient woman is rupture, or laceration of the birth canal. Fortunately such a complication is most likely to occur in the lower part of the canal, involving the cervix, vaginal walls, or perineum; all of which are attended with a minimum amount of danger, and are most accessible to treatment.

At times, though rarely, the upper part of the canal yields, giving rise to that alarming and often fatal accident known as rupture of the uterus. By rupture of the uterus is understood a laceration of some portion of the uterine wall, occuring during the process of parturition, and giving rise to hemorrhage, pain, collapse, and, not unusually, to partial escape of the fœtus into the abdominal cavity through the rent in the uterine walls. It is an exceedingly rare accident, occuring, probably, not oftener than once in 4000 cases.

Etiology. The maternal predisposing causes are:—frequent child-bearing, undue prolongation of labor, fatty degeneration of the uterine muscles from old metritis, syphilitic infection; previous operations on the uterus, as myomectomy, or Caesarian section; or from some variety of uterine deformity.

The fœtal predisposing causes are:—male sex of the child, hydramnios, mal-presentations.

The chief exciting cause is strong uterine contractions, coupled with mechanical impediment, or insuperable obstruction to the passage of the child, conditions existing in transverse presentations, pelvic contraction or deformity, large size of the fœtus, especially of the fœtal head, hydrocephalus, fibroid or other tumors.

The mechanism by which rupture occurs from this cause is worthy of special consideration, in that it furnishes one of the earlier symptoms, and hence a most important warning of the probability that such an accident is impending, and that relief must be prompt.