

COMPLICATED PREGNANCY REQUIRING SURGICAL INTERFERENCE.*

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Among the many perplexing cases that come under the care of the general practitioner, few appeal to his skill and sympathy more strongly than cases of pregnancy complicated by pelvic or by abdominal conditions requiring surgical interference. The natural desire for children, and the dread all good women feel of any operation that jeopardizes the life of an unborn child, make them reluctant to submit to what is often the only chance of life for either. Pregnant women often bear surgical operations well. Recently, several cases have come under my care that have encouraged me to deal with these complications in a radical way, and with well founded hopes of success, such as could not have been entertained a few years ago.

For convenience and clearness, it will be better to divide these cases into two classes: Those in which there is a possibility of saving both mother and child, and: Those in which the nature of the complication offers no hope of saving the latter.

A woman, about thirty years of age, had been ill for a couple of weeks but had not consulted a medical man. There had been a chill at first, and fever had been thought to be present more or less every day thereafter until the final attack (on the twelfth day after the chill) that nearly ended her life: during these days also, there had been some pain and tenderness in the right iliac fossa.

She was four months pregnant. On the morning of the twelfth day of illness she was attempting to sweep, when a sudden pain in the abdomen caused her to sink upon the floor. She was lifted to a bed and Doctors Wright and Millen, of Wheatley, sent for. They found her in great pain and suffering from shock. There was a decided fulness on the right side of the uterus, perceptible on the outside of the abdomen; but it gradually grew less and, in a few hours, disappeared altogether in the general fulness that became apparent over the whole abdomen. The physicians quite reasonably decided that it was a ruptured tubal pregnancy, and Doctor Wright telegraphed me to operate.

I saw her about 4 p.m., and on opening the abdomen in the median line was surprised to see a copious discharge of thin, watery pus, and on searching for its origin located it at the appendix, which was discovered to be bent sharply on itself

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