

PELVIC ABSCESS

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I was called in consultation to see Mrs. B., a married lady of 35 and the mother of five children. At the time I saw her she weighed 98 pounds, having lost 18 pounds during the two preceding months.

Family history: good. Previous history: two years prior to this time she had an attack of pneumonia, otherwise her history contains nothing of importance.

Menstrual history: five normal births, and one miscarriage. Six weeks prior to this time at about the third month of pregnancy, the vaginal discharge existed at intervals of about two weeks.

Present illness: dates from the miscarriage, being attended at that time by an untrained nurse. A small amount of hemorrhage from the uterus continued for a few days, which, however, soon became more copious and lasted for four weeks. During this time she felt comparatively well until about the end of the fourth week when she complained of pelvic pain, which continued for two days, extending down the left leg. She had a severe chill, and when her physician was called in he found her with a temperature of 102 degrees F., pulse 120, respiration 24.

Physical Examination: Patient somewhat emaciated; cheeks presented a well marked hectic flush; heart and lungs normal; abdomen rigid in the left lower quadrant; an indurated mass was palpable extending down along the crest of the ileum, from the anterior superior spine forward along Poupart's ligament and backward to the lumbar muscles. This area was dull on percussion. Upon trying to define the iliac fossae by pressing