

Take, for instance, the average case. The whole female organism, as soon as conception takes place, makes preparations to meet the growing demands of the impregnated ovum. The vital processes of both nutrition and elimination are more heavily taxed, and this, of course, means greater activity on the part of the nervous and circulatory systems. Under normal conditions, however, since the female organism is especially designed for the one great purpose, maternity, there is only a modification or increase of function throughout the body. Thus in every sense, in spite of its many complex details, normal pregnancy is purely physiological.

But if for any reason pregnancy is abruptly terminated before the time at which it would normally end, the condition becomes distinctly pathological. Delicate structures, especially those of the generative organs, are suddenly arrested while in a stage of active development, and a retrograde process has to be prematurely established. There naturally follows a marked depression of the whole nervous system, because of its unprepared state for meeting an event unexpected and unnatural. More important than all, however, is the fact that certain growing tissues that would separate normally at the end of pregnancy, in early stages are so closely attached to the uterine wall, that premature delivery always means tearing them away, leaving ragged, lacerated surfaces and an inevitable retention of tissue that because it has no further purpose must be either thrown off or absorbed by the organism. The extreme liability to infection at this time is well known, and is directly due to the predisposition which attends this invariable presence of dead or dying tissues.

From the foregoing, it must be apparent, that the effect of every miscarriage is depressing in character. Every organ cannot fail to feel the pernicious imprint, and there is a logical falling off of every vital process. Because of the formation and absorption of ptomaines and toxins of varying degrees of virulence, there is always more or less vitiation of the blood and disintegration of its corpuscular elements. While the hemolysis may not be extreme, it is generally sufficiently marked to leave no doubt that it is a prominent factor in determining the duration of convalescence and the completeness of recovery.

In regard to treatment it seems hardly necessary to speak of the importance of thorough antisepsis nor of the frequent necessity of removing decaying material. These things are well appreciated by physicians generally. But what should be emphasized is the great importance of vigorous reconstructive treatment after miscarriages, in order to hasten the restoration of normal conditions, with all that this may mean on a woman's whole future health.