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Extirpation of the Puerperal Uterus by Abdominal Section.

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[Read before the Society, August 10, 1869.]

Mrs. H., aged thirty-seven, native of Pennsylvania, residing at 52 Spring Street, consulted Dr. H. R. Storer, on July 16th, 1869, for pregnancy complicated by a large obscure abdominal tumor.

The patient had menstruated regularly every three weeks since her fifteenth year, until the commencement of her disease. In November, 1867, she married; in December of the same year she discovered an enlargement, the size of her fist, in the left hypochondrium. For some months subsequently, having experienced little or no inconvenience from it, she did not call medical aid. About one year from the date of this discovery, perceiving a decided change in the swelling, the menses having been absent some two months, she became suspicious of her condition, and sought medical advice at the Massachusetts General Hospital. Here she was carefully examined by several surgeons, her case pronounced one of ovarian tumor, and papers of admission accordingly made out. For some reason or other the patient did not enter the institution, but sought advice elsewhere. Later she consulted Dr. Kimball, of Lowell, who pronounced the case one of fibrous tumor of the uterus. Several others were also consulted, whose names I did not learn, but who considered the tumor ovarian, and who told her it was impossible for her to live through her confinement. On July 16th, as I have said, fully understanding her desperate condition, she first consulted Dr. H. R. Storer, her full term of pregnancy having expired.

At this time fetal movements were thought to be perceptible, though, from the condition of the pelvic and abdominal viscera, it was impossible to make a decided diagnosis of the point. By inspection the abdomen was found quite large, and presented an irregular appearance. In the right hypogastric region, there existed a distinct, somewhat irregular tumor, upon which there was a sort of depression, which extended diagonally across the abdomen, and ended in another tumor in the left hypochondrium. Palpation of the first gave evidence of the distended uterus, through the walls of which, fetal members could apparently be detected. The tumor of the left side was round, regular, firm and unyielding, though elastic. Auscultation was thought to give evidence of foetal circulation. By vaginal examination, the finger came directly in contact, posteriorly, laterally to the left, and quite low down near the outlet of the pelvis, with a firm, round unyielding body, which so completely filled its cavity, that the space between it and the opposing side could not have been an inch and a half in extent.

The finger passed up through this narrow space with considerable difficulty, and detected the cervix uteri very high up, to the right, resting superiorly upon the pubes, laterally and to the left upon the tumor, firmly fixed in its position. Dr. Storer decided that delivery, even by cranioclasm, would be impossible, and requested me to take charge of the details of the case when labor should commence. Accordingly the patient was dismissed with instructions to notify me of the first signs of labor.

Two days afterwards, on July 18th, being out of town, I was telegraphed for, in great haste; from some mistake the message did not reach me for twenty-four hours. Upon my arrival, I hastened with all despatch to my patient, fearing some evil results from the delay, but at the same time, from the peculiar nature of the case, I felt assured that labor could never be naturally completed. I found the patient suffering from slight pains, the waters having passed off some hours previously. By vaginal examination I found the cervix dilated to the size of a dime-piece. Having got the finger past the point of obstruction by the tumor, there was not the least difficulty in detecting the foetal head, which presented still very high up, pressing upon the tumor from above. The dilatation thus far was effected, doubtless, by the pressure of the membranes. I took occasion at this opportunity to examine the tumor carefully, and found it as before, unchanged either as to location or consistency.

Upon the 19th, Professor D. H. Storer, was called in consultation. There were present Dr. H. R. Storer, Dr. Warner, and myself, and a careful examination was made by the gentlemen present. Professor Storer thought the tumor might possibly be ovarian, but did not feel quite sure. At his instance it was decided to leave the case for some little time to the natural powers. I spent the night with the patient, during which she had, or supposed she experienced, slight pains. Examination, however, revealed nothing new, and in the morning so completely in statu quo was the condition of everything, that I even doubted the fact of her being in labor at all. In the morning Dr. H. R. Storer saw the case again, and having satisfied himself that no progress whatever had been made, owing entirely to the presence of the tumor, and that this condition would continue, so far as any efforts on the part of nature were concerned, decided to proceed upon the following day to an abdominal section as the only possible chance of saving the mother's life.

July 21st, there being present Dr. Warner, Dr. McDonough, and myself, the patient was placed under the influence of chloroform, another examination made, and the following conclusions were definitely arrived at: 1st, that there was present, pregnancy complicated either by a fibro-cystic tumor of the uterus; 2d, that even with mechanical