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An Unusual Case of Extra-Peritoneal Abdominal Pregnancy

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The case which I wish to describe is one which I had the opportunity of attending and following when I was house surgeon to Dr. A. W. Russell, and to that gentleman I am deeply indebted for permission to submit it to you in detail. It is a case outstanding in my memory, not alone for its importance obstetrically, but on account of my respect for the fortitude and long suffering of the patient.

Mrs. W. was admitted to the Glasgow Royal Maternity Hospital on 10th January, 1920. At the time of admission she complained of "pains back and front," and stated that her "waters had broken" on 31st December. She was a small woman, 31 years of age, and had had five previous pregnancies, all of which had concluded naturally at term, her youngest child being 4 years of age. Her previous medical history was unimportant.

Enquiry revealed that her menstrual periods were regular and painless, lasting four days in twenty-eight, and that she had menstruated regularly and normally until 10th June, 1919. The breasts were enlarged, the nipples pigmented, and secretion could be readily expressed. The abdomen was prominent, the abdominal muscles somewhat taut, and there was a readily palpable mass of the size and consistence, and in the position of a four months' pregnant uterus. Fœtal parts or movements were not palpable, and the patient herself had not been conscious of fœtal movement. Careful auscultation failed to discover sounds of a fœtal heart. The perineum was intact, the external genitals and vaginal canal normal. There was a depression and bulging of the right and posterior fornices, while a softened non-dilated cervix was located high up behind the symphysis pubis, and rather to the left. For a week the patient was observed and, while feeling much easier, examination then (17th January) showed no alteration in the local condition.

On 21st January an examination was made under a general anæsthetic, and this suggested that the enlargement was uterine, and that that organ was bound down on the left side by adhesions, probably resulting from an old pyosalpinx. Next day a small piece of decidua was passed, but this, unfortunately, was not preserved by the nurse. The temperature up till the 21st, when the chloroform examination was made, had risen at night, but had never passed 99.5°. On that