

## Original Communications.

*Placenta Prævia.* By JAMES PERRIGO, M.A., M.D., M.R.C.S., Eng., Professor of Medical Jurisprudence, University of Bishop's College, Montreal.

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On Saturday evening, October 9, 1874, I was called to attend a Mrs. P., an English lady, living in Albert Street, a person for whose confinement I had been engaged. She had counted for October 6th. During pregnancy her health was unusually good, in marked contrast to two former pregnancies. The messenger came in great haste, and informed me that Mrs. P. was flooding frightfully and was in great agony. Immediately after arrival I made an examination, and, true enough, she was losing a good deal of blood. The "os" was dilated to the size of a fifty cent piece, was soft, and I could see was dilating rapidly. The placental edge occupied the right half of the "os," and it could be easily detected through the uterine wall. The pains were firm and strong, and were occurring in rapid succession. The membranes had not ruptured. Making the examination did not occupy me three minutes, and, during this time, the hemorrhage had ceased. Seeing then that the labour was rapidly progressing, and the patient and friends thinking that I had, by the examination, stopped the bleeding, I concluded to let nature have her course, merely watching for any return of the hemorrhage. At the end of half an hour, during which there was no hemorrhage at all, another examination was made, the os was dilated to double its former size, the bag of waters being very large, and more projected to that side unoccupied by the placenta. I ruptured the membranes, which were very thick and tense, and a perfect torrent of liq. amni came away. Only once have I seen such a quantity, it flooded the bed and went through the bedding on to the floor in a perfect stream. In passing my finger up as far as it could reach, I could see the placenta was detached that far, but could not make out whether it was wholly so or not. In passing the finger up, some hemorrhage occurred, but uterine pains coming on more strongly it ceased. In about one hour after the membranes were ruptured,

labour was completed, the placenta coming away immediately after the child. The child was a female, alive, and of the ordinary size, and appeared to be fairly conditioned. The mother conyalesced well, and was about in the usual time. This being my first case of Placenta Prævia, I congratulated myself on nature doing her work so well. The amount of hemorrhage before my arrival must have been considerable, but she did not appear to be much affected by it, but appeared to be more frightened by the expressed fears of the friends around her. The first thing she complained of was a gush of blood when at tea, and immediately after, uterine pains began and continued without intermission, to the end. The whole labour did not occupy five hours.

My next case was a French emigrant's wife, living in St. Elizabeth Street. I was called to this case by a midwife. She had been called in during the morning. Hemorrhage, to a slight extent, had occurred shortly before her arrival. No examination was made but rest was enjoined. The hemorrhage ceased almost as soon as it commenced, and the midwife left, leaving strict instructions that the bed should be kept. About two hours after, feeling a desire to pass urine, Madame Lescoi got up, and immediately the hemorrhage returned. The midwife was again sent for, and, in the evening I was sent for. Upon examination, the "os" was not open. Through the uterine wall a soft sponge mass was felt, but not so low down in the uterus as in the last case. Placenta Prævia was supposed, and action taken accordingly. Considering the amount of hemorrhage off and on during the day, it was considered best to plug. She complained of no pain at all, and told me she had yet three weeks to go according to her own counting. This was about nine o'clock in the evening.

A little after midnight I returned, and found she was beginning to complain of slight pain in the back. The plugs were taken out, and the "os" found in the same condition. No hemorrhage had occurred, as the plugs were only stained by the blood remaining in the vagina. I did not plug the cervix, but merely the vagina. The first plug was a large one and well placed in opposition to the "os," and supported by others placed in afterwards. Fresh plugs were placed as a precautionary measure, and I left her, with instructions to be sent for if her labor