

SOME COMPLICATIONS OF THE PUERPERIUM, WITH A REPORT OF A CASE.*

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Case—Mrs. N., aged about 28. Housewife, formerly a seamstress. Well developed and well nourished. Previous health good. Habits active. Father asthmatic, since dead. One sister with a large family and a history of albuminuria and toxemia with every pregnancy. Patient became pregnant for the first time in the autumn of 1906, and expected to be confined about July 15th last. Her health during the period of her pregnancy was on the whole good. She had, however, an occasional headache, and some edema of the feet, hands, and face. Her appetite remained excellent, and she was quite able to do her own housework. On June 28th, she travelled 100 miles coming to her mother's home. Four days later, on July 2nd, her present illness came on.

She was in her usual good health during the day; took a lunch about 4 p.m., and at 9.30 p.m. was seized with a violent pain in the epigastrium. I saw her, for the first time, about an hour later. She was in great agony, tossing about, both in and out of bed, and perspiring freely. She vomited a dark fluid, but almost no food. Her temperature was normal, and pulse practically normal. Morph sulph. gr. $\frac{1}{4}$, hypodermically, gave some relief. As the severity of the pain diminished the rhythmic labor pains were detected. On examination the head was found entering the pelvis, the cervical canal obliterated, but the os undilated. Towards morning the pains subsided, and the patient rested well during the forenoon. In the afternoon she had headache, increasing in severity, and by evening she was very restless, nervous, and had a violent headache. She vomited frequently, had epistaxis once, and some oozing from the gums. The urine was scant and smoky. Pulse 90, very high tension. Temperature 99 2-5. A hot pack gave some relief and labor pains returned. A fairly vigorous child was born about 2.15 a.m. The os and perineum were slow in yielding, otherwise labor was uneventful. There was rather less hemorrhage than is usual.

A few hours later the patient again became nervous and restless, and there was some twitching and vomiting. A catheter

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