

A CASE OF CONSERVATIVE CÆSAREAN SECTION.*

BY

WILLIAM GARDNER, M.D.,

Professor of Gynæcology in McGill University ; Gynæcologist to the Royal Victoria Hospital, Montreal,

With Report of Previous History

BY

DAVID J. EVANS, M.D.,

Lecturer in Obstetrics, McGill University, Montreal.

On September 24th, 1900, I was called by Dr. Morphy of Lachine to see Mrs. R. S., aged 29 years, IIpara, who was shortly expecting her confinement. Dr. Morphy informed me that two years previously he had delivered her of twins at the seventh month of pregnancy, after performing version. The extraction in each case was only accomplished with the greatest difficulty, and both children were born dead.

On examination, I found the patient to be an undersized, well-nourished woman. She presented no evidence of rachitis in the long bones of the limbs or in thorax or head. The heart and lungs were normal. The abdomen was greatly distended, the fundus uteri reaching to the ensiform cartilage. The umbilicus was prominent, the flanks full, and the skin over the abdomen presented the usual pigmentation and lineæ albicantiæ. Fœtal movements were observed.

On palpation, the excavation of the pelvis was found to be unoccupied. The fœtus was in an oblique position, the head resting in the left iliac fossa, while the breech could be felt at the fundus to the right of the middle line. The fœtal back was directed posteriorly, which would account for the fact that at no time could the fœtal heart sounds be heard in spite of repeated auscultation.

Pelvimetry.—The pelvic measurements were as follows:—A. II., 11 inches; Ii. II., 10½ inches; Ext. conjugate, 6½ inches: Diagonal con-

* Read before the Montreal Medico-Chirurgical Society, Oct. 19, 1900.