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A. H. WRIGHT, B.A., M.D. Tor., M.R.C.S. England.

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ACCIDENTAL CONCEALED PUER-PERAL HEMORRHAGE.*

BY ALBERT A. MACDONALD, M.D.

Medical men, by the nature of their calling, require to be always ready not only to respond to the urgent call, but they must be trained to act with promptitude and judgment. We cannot, like our brother practitioners of law, hear the case, and reserve our opinion until we have searched the authorities for precedents and opinions. We must carry our working library in our brains, and have there an active index for ready reference. It is true that in some surgical cases we have the opportunity of deliberately going into the history of the case, and of preparing our patient and ourselves for the moment of trial. We can study the subject, plan out our operation, and provide for what we deem to be every emergency, and, even then, we may find that perturbed nature has not followed her regular habit, but has led off in an entirely unexpected direction.

The demands made upon the strength and nerves of the surgeon when battling, perhaps, with deep adhesions, or the dreaded oozing which, in some instances, follows their separation, or when endeavoring to remove some morbid growth from a region closely surrounded by vital parts, are great; but I do not think they are to be compared to those made upon the

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resources of the obstetrician when he is brought, perhaps at the dead hour of the night, unaided, face to face with a desperate case where the life-blood seems to be flowing away before his eyes, and in spite of his best efforts.

It is of such cases that I would briefly speak to-night. I cannot take up all the ante-partum hemorrhages, but will make a commencement by alluding to "accidental" and "unavoidable" hemorrhages occurring during the last three months of pregnancy. These are so different in character and results from those happening at an earlier date that they would not bear discussion together.

It is now over a hundred years since Rigby made this artificial division of the hemorrhages of the last three months of pregnancy into "accidental" and "unavoidable," and though the terms have been assailed as unscientific, undesirable, and too absolute, we are not yet in possession of terms more suitable. It is my intention, first, to mention accidental concealed hemorrhage occurring during the last three months of gestation. By giving this clear definition, I exclude that form of hemorrhage which happens when the placental attachment is in the lower polar circle. In such cases, though the bleeding may at first be concealed, it soon finds its way out in much the same way that it does in placenta prævia lateralis. Fortunately for both patients and practitioners, this distressing accident is by no means common. Blundell, Churchill, Burns, Cazean, Meigs, Hodge, and Bedford are all authors of considerable note