

## SOME VIEWS REGARDING PUERPERAL INFECTION AND ITS TREATMENT FROM OUR PRESENT- DAY VIEW-POINT.

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When requested a month ago to prepare a paper for this meeting of our Association I was at a loss for a time to know what subject to choose. After due deliberation, however, I decided in favor of the subject announced for this evening's paper, for the following reasons:

1. Because no paper on the subject of puerperal infection has been read before our Association for years; if I remember rightly the last having been read by myself.

2. Because our views, more particularly as to the management of many of these cases, have been considerably modified during the past few years.

3. Because in looking over recent reports regarding the frequency of, and mortality from puerperal infection, we find that although there has been a great reduction both in the frequency and mortality in hospital practice since the introduction of asepsis and antisepsis in obstetrical work, this does not apply to private practice. Reports from both Europe and America show that the mortality from puerperal infection outside of well-conducted maternity hospitals, is not much less than in pre-antiseptic days.

This deplorable condition of affairs is explained to be due (in great measure) to more frequent interference with the parturition process than formerly and also to improper after management. In reference to this I cannot speak positively, but judging from the number of cases I now see in consultation, contrasted with the number seen several years ago, I should infer that in this vicinity both the frequency of and mortality from puerperal infection in private practice had considerably decreased.

4. Finally, I have chosen this subject because it is a subject in which all the members of our Association are interested, about which all will probably have their individual opinions. A subject, therefore, which all can discuss with mutual benefit.

From our present-day view-point I shall first briefly consider what is meant by puerperal infection, its causation, the avenues by which it spreads, the natural safeguards in parturient patient against infection, and the mortality in cases where no active treatment has been used.