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Forgotten Books, 2018. Hardback. Condition: New. Language: English . Brand New Book ***** Print on Demand *****. Excerpt from The Cincinnati Medical News, Vol. 14 Under such circumstances, he would dislike to perform the operation, especially when the cervix was not sufficiently dilated to permit the easy removal of the placenta. Those were the cases probably in which the operation could not be performed, and yet they were precisely the cases in which there was the greatest danger in waiting, for, it the patient was anemic or in a condition of exhaustion, the chances of consecutive septicemia were increased ten-fold. Under such circumstances the physician could be guided only by common-sense principles which govern the management of individual cases. We should wait in those cases, however, only such length of time as is absolutely necessary before making an attempt at removal of the placenta. It was only in such cases that delay was indicated. Dr. T. Gaillard Thomas thought that the question asked by Dr. Pooley was not so easily answered, but that he had asked one of the knottiest question in obstetrics. It was certainly one of the most difficult of questions to answer at the bed side. His feeling was that the time which we could leave the placenta in the uterus with safety could not be estimated. For, as soon as decomposition of the placenta began to take place, septicemia might occur, and, when that morbid process was developed, removal of the placenta would not arrest it. If the woman is bleeding in consequence of retained placenta, he never invades the cavity of the uterus. His plan is to avail himself of the hydrostatic pressure of the blood by tamponing the vagina after Sims method, when the blood will percolate between the decidua, rip off the placenta...



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