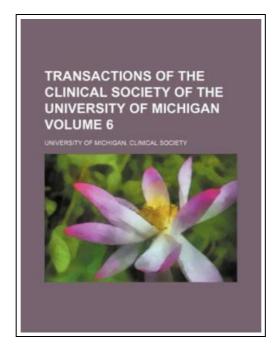
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Rarebooksclub.com, United States, 2012. Paperback. Book Condition: New. 246 x 189 mm. Language: English . Brand New Book \*\*\*\*\* Print on Demand \*\*\*\*\*. This historic book may have numerous typos and missing text. Purchasers can download a free scanned copy of the original book (without typos) from the publisher. Not indexed. Not illustrated. 1915 Excerpt: .case lies in the fact that there was not a single vaginal examination made from the beginning to the end of the labor, all investigations being per rectum; in the fatal outcome of a Cesarean done quickly and easily on a patient apparently in fairly good condition except for a single factor, and in the necessity of a Cesarean at all in a pelvis of only a moderate contraction. The single and apparently very important factor above referred to is the long interval between the rupture of the membranes and the opening of the abdomen. It is a well known fact that the danger of abdominal section increases rapidly with even-hour of delay after rupture. It is an equally well known fact that to do an abdominal Cesarean on every patient with an external conjugate of 17 centimeters would he absurd, since a large majority will deliver themselves spontaneously, especially with the help of the Walcher position which increases the true conjugate diameter. That the patient was already infected before operation seems reasonably sure from the fact that she was already in bad condition when she returned to bed after operation, and that she died from peritonitis is shown by the fact that while no autopsy was obtained, the incision was opened post mortem and streptococci were demonstrated in the purulent exudate which bathed the abdominal cavity. As presenting a problem of great frequency and as the first death from abdominal Cesarean section by Dr. Peterson...

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