

Additional observations on unavoidable hæmorrhage in cases of placental presentation / by J.Y. Simpson.

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ADDITIONAL OBSERVATIONS
ON
UNAVOIDABLE HÆMORRHAGE
IN
CASES OF PLACENTAL PRESENTATION.

BY J. Y. SIMPSON, M.D. F.R.S.E.
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From the London Medical Gazette, Nov. 7, 1845.

"Tis pity, She's not honest, honourable."
SHAKESPEARE'S WINTER TALE.

BEFORE proceeding to demonstrate what I conceive to be the anatomical and practical errors into which Dr. Lee has fallen, in his observations upon the alterations which I have advocated in the treatment of unavoidable hæmorrhage, I shall first point out some of the misstatements contained in his last communication on the subject*. I do so, not so much in my own self-defence against the criticisms and charges brought against me, as in order to clear the ground for correct future inquiry.

1. "Dr. Simpson, who professes (observes Dr. Lee) to know the number of cases which I have seen much more accurately than I do myself, says the number is 46, and not 45." With the view, however, of shewing my reckoning (46) to be erroneous, Dr. Lee has published in the GAZETTE, p. 1109, a table which—to use his own words—"contains all the cases of placental presentation which I (Dr. Lee) have ever seen, and of which I have preserved the histories." This long table assuredly contains only 45 cases, and so far appears to demonstrate that I was wrong in alleging Dr. Lee's published cases of unavoidable hæmorrhage to amount to 46. The explanation of this, however, is, that

Dr. Lee has omitted one of his own published cases from the table, and thus reduced their total amount from 46 to 45*.

2. Dr. Lee's table does not shew so many maternal deaths after "turning" in unavoidable hæmorrhage, as actually occurred

* As the case here omitted has been dropped out of the table at a point where, of all others, it is perhaps most difficult for the general reader to detect the absence of it, I may state its exact locality. Dr. Lee has reported his cases of placental presentation in chronological order. The 35th case in the table in the GAZETTE, is marked as being one in which "turning, by Mr. Harvey," was performed. This is the second last placental presentation reported in Dr. Lee's Clinical Midwifery (p. 162-3), and occurred in July 1842. On the 11th July, 1843, Dr. Lee was called to a case of *partial* placental presentation (Medical Gazette for September 19, p. 893), which is entered in the table as "No. 38, membranes ruptured artificially by Dr. Lee." It should be No. 39, and the numbers of all the subsequent cases should be altered correspondingly. For between the dates of the two preceding cases, Dr. Lee saw and has reported *three* cases of complete placental presentation, in all of which turning was performed. These cases occurred, one on the 7th of Sept. 1842; a second on the 15th of Oct. 1843; and the third on the 24th of Feb. 1843. But Dr. Lee has omitted one of the *three*, and entered *two* of them only in his table. The three cases, one of which is thus omitted, form the three last in Dr. Lee's table of unavoidable hæmorrhages in his published Lectures, p. 379.

* Medical Gazette, Oct. 24, p. 1106.

in his practice, and as he had previously admitted in his published accounts of the same cases. He has entered the fate of the mother in his seventh case thus: "Death before turning was performed by Dr. Lee;" but it appears that in this case Dr. Lee twice tried to turn the child, and at last effected it. The child was born alive; and the mother, instead of dying *before* delivery by turning was performed, lived for "a few days" afterwards. (See the full details of the case in Dr. Lee's *Clinical Midwifery*, p. 145, Case 266; or *Lectures*, p. 376, Case 7.)

3. Dr. Lee avers that my table, shewing the average maternal mortality accompanying placental presentations, is copied "largely" from the similar table previously published by Dr. Churchill. But Dr. Churchill's table of uterine hæmorrhages contains the results of 174 cases of placental presentation, while my table contains the results of 399 cases. Dr. Churchill's table is made up of the returns of the practice of twenty-three different accoucheurs; my table is made up of larger returns, from the practice of fourteen different obstetric practitioners and institutions. Eight of the returns in my table (embracing 247 cases) are not given at all in Dr. Churchill's. Of the six remaining returns, that are common to Dr. Churchill's table and my own, in *five* the figures in the two are, in one or other respect, different; for after a careful analysis of the original works of the reporters, and some private correspondence with Dr. Churchill on the matter, I arrived at a result somewhat different in each instance from those previously published by him. I could not at the time detect so large a number of cases as he stated, in the two works of Giffard and Smellie; I found he had inadvertently given Dr. Lever's cases as 13 instead of 14, and (4) the fatal results in Dr. Ramsbotham's cases as 16, instead of 8; and, 5th, I was able to give a much larger number of cases as pertaining to Dr. Lee*, in consequence of his having published in the interim some additional data. *In the sixth and last return only*—viz. that of the Dublin Hospital—Dr. Churchill and I both give the *same* numbers—viz. those reported by Drs. Clarke and Collins themselves, with regard to their own practice in that institution; and I have already stated that so far we were both wrong, as Dr. Collins met with 12 cases of placental presentation, 3 of which terminated fatally, and not, as he himself inadvertently states, with 11 cases and 2 deaths. Hence, *so far from my table being, as Dr. Lee*

* In his table of Uterine Hæmorrhages, Dr. Churchill enters Dr. Lee as having seen 23 cases of placental presentation, with 6 maternal deaths. Among Dr. Lee's first 23 cases (see Dr. Lee's own table), there were 8 mothers lost. Dr. Lee has not corrected Dr. Churchill on this point.

alleges, "so largely copied" from Dr. Churchill's, it is not copied from Dr. Churchill's in one single instance.

4. Dr. Lee specializes one instance in which he professes to have detected me actually copying directly from Dr. Churchill, the returns and figures of a particular author. Dr. Lee remarks: "Dr. J. Ramsbotham is represented in the table [of Dr. Simpson,] to have reported 19 cases, 8 of which died. This (continues Dr. Lee) is copied from Dr. Churchill's table." The answer to Dr. Lee's statement is sufficiently simple. Most unfortunately for the veracity of the allegation, Dr. Churchill, in the columns of his table referring to unavoidable hæmorrhage, does not mention or include Dr. John Ramsbotham's cases at all, and hence, of course, I could not copy from Dr. Churchill what Dr. Churchill has not in reality given.*

After Dr. Churchill's work appeared, Dr. Francis Ramsbotham published some remarks in the *MEDICAL GAZETTE* to shew that his father's printed cases were selected cases, and hence did not give a fair idea of his father's average success. My attention was lately drawn to these remarks in a conversation with Dr. F. Ramsbotham. Dr. Lee quotes Dr. F. Ramsbotham, as specially objecting to Dr. Churchill's use of his father's 19 cases of placental presentation. Of course this is a misstatement. I have already mentioned, under the last head, that, in his columns referring to placental presentations, Dr. Churchill, in his table, does *not* enter Dr. John Ramsbotham's 19 cases; and consequently it was impossible for Dr. Francis Ramsbotham to find fault with Dr. Churchill on this special count, even though Dr. Lee professes to give the very words of the count itself, and that too, apparently as an extract, within inverted commas.

5. Dr. Lee adds, that, in despite of Dr. Francis Ramsbotham's remarks on the preceding point, published in 1842, that gentleman's proper "caution to the profession has not, however, prevented Dr. Simpson from stating in his table, that 19 cases had been reported by Dr. Ramsbotham, 8 of which proved fatal, as if this had been the average number of deaths in his practice." In his lectures on unavoidable hæmorrhage, after mentioning the returns of Boivin, Clarke, and Collins, Dr. Lee himself adds, "Dr. Ramsbotham has related 19 cases of placental presentation, eight of which proved fatal." (*Lectures on the Theory and Practice of Midwifery*, by Dr. Lee, p. 371.)

* In his column of unavoidable hæmorrhage, Dr. Churchill has, opposite the name of Dr. Ramsbotham, given 44 cases, the number of partial placental presentations described by Dr. Francis Ramsbotham (the son), in the *MEDICAL GAZETTE* of 1834, vol. xiv. p. 690.

6. Dr. Lee states that all the statistical errors committed by other writers "contribute to vitiate Dr. Simpson's table, as all these errors have been copied into it." I have already shown that this is a mistake; that, for instance, instead of copying from Dr. Churchill's data, I have carefully endeavoured to correct them; and I have collated my data from the original works of the reporters, in all instances *except two*. In both of these instances I and others are now fully aware that I committed an indiscretion in relying upon the accuracy of the writer from whom I quoted. Under the last head I have alluded to the first of these two instances. But in adopting, without due examination, Dr. Lee's alleged account of the numbers of Dr. Ramsbotham's published cases of placental presentation, I was thoughtlessly led into error. Dr. Ramsbotham has given, in his excellent *Practical Observations*, the details of 21 cases of the kind, and not of 19, as stated by Dr. Lee. The second instance was accompanied with the same results. Dr. Lee had published an apparently careful and elaborate analysis of Mauriceau's cases of uterine hæmorrhage in the 51st vol. of the *Edinburgh Medical and Surgical Journal*, and I thought I might depend upon its accuracy; but "I have had the vexation to discover more than one error" in Dr. Lee's returns of Mauriceau's cases. Mauriceau has left details of the result of 19 cases of unavoidable hæmorrhage, instead of 17, as stated by Dr. Lee. Dr. Lee alleges further, that Mauriceau has recorded the histories of 37 cases of accidental uterine hæmorrhage. He has recorded the histories of not less than 50 such cases. When Dr. Lee republishes either his essay on the History of Uterine Hæmorrhage, or his Lectures on Midwifery, I shall be happy to furnish him with exact references to all the cases of Mauriceau which he has omitted.

7. In criticizing the data upon which my table of maternal deaths in placental presentations is founded, Dr. Lee charges me with having "suppressed the well-known fact," that of the three women lost by Mauriceau, under unavoidable hæmorrhage, one "died undelivered." I have elsewhere explicitly stated, (as Dr. Lee ought to know) that the table in question was expressly "made to shew the maternal mortality in *all* varieties of the complication, and under *all* modes of treatment, whether the membranes merely were ruptured, or the child turned, or the placenta spontaneously expelled, or the mother sunk without aid of any kind."

The same extract is a sufficient reply to Dr. Lee's analogous objection regarding Busch's cases. My report of the placental cases at the Royal Maternity Charity is

again adduced by Dr. Lee, not once, but twice (pp. 1107 and 1108). But I feel assured that to every member of the profession, the explanation which I have already published on this point is satisfactory. "Of Schweighauser's cases I have not yet," says Dr. Lee, "succeeded in finding any report." But Dr. Lee *may* find, if he pleases, Schweighauser's own report of them, if he will take the trouble to consult the well-known work of that author, to the pages of which I have referred in the foot-note appended to his cases in my paper in *Dr. Cormack's Journal* for March last.

Again, Dr. Lee charges me with the "omission" from the table of "Portal's 18 cases, of which I only proved fatal." I have already elsewhere explained that this error is one attributable to Dr. Lee's *own* inaccuracy, for in constructing the table, in order to arrive at an accurate and statistical result, "I noted down all the lists of instances I could detect, in which ten or more cases were reported. Latterly, I have found that I erroneously omitted Paul Portal, because I relied on Dr. Lee's accuracy, when, in his *Clinical Midwifery*, he stated that Portal's work contained an account of 'eight' cases only of unavoidable hæmorrhage, while it contains notices of the results of fourteen." (*MED. GAZ.* p. 1016.) As seen in the quotation I have given above, Dr. Lee now increases the number of Portal's cases from "eight" to "eighteen." It may be proper to add, that the last number is as incorrect as the first.

In my observations on unavoidable hæmorrhage, in the *MEDICAL GAZETTE* of October 10, I pointed out that of *all* the cases of turning in Dr. Lee's private and consultation practice, reported by himself in his *Clinical Midwifery*, the mothers operated upon died in the proportion of 1 in every $2\frac{4}{10}$. Dr. Lee pronounces this to be a "most extraordinary and astounding misrepresentation," and declares, that the "mortality, instead of being 1 in $2\frac{4}{10}$, was virtually less than 1 in 9." My calculation may possibly appear, to such as have not thought much upon the subject, "most extraordinary," but nevertheless it is strictly accurate; for Dr. Lee, in the work referred to, has detailed altogether 24 cases of turning in placental presentations, and 10 of these 24 mothers died, or exactly 1 in every $2\frac{4}{10}$. The ten fatal cases are those marked No. 1, 7, 12, 15, 16, 22, 25, 26, 29, and 35, in his Table in the *GAZETTE* of Oct. 24.*

Certainly not one of our great surgeons would be listened to, if, in order to explain away the mortality among his lithotomy patients, he gravely averred that some of

* [Dr. Lee's calculation refers to those cases only in which turning was performed by himself. See p. 1109.—*ED. GAZ.*]

them had *not* died of the operation to which he had subjected them, *because* the immediate cause of their death was laceration of the bladder during the operation, or subsequent inflammation in the bladder and parts concerned. Yet to explain away the number of maternal deaths that have occurred in his practice, under turning in placental presentations, Dr. Lee adopts exactly this line of argument. One of his patients, he argues, died of laceration of the uterus; and of the ten cases that terminated fatally after the operation of turning, it will be seen that three women died of uterine phlebitis long after delivery,—“a circumstance,” Dr. Lee continues, “which could not justly be attributed to the operation.” In order to confute this reasoning, it is only necessary to

quote Dr. Lee himself; for on this, as on other occasions, his published opinions of 1844 are quite different from his published opinions of 1845. In his Lectures printed last year, after shewing, (p. 345) that in his cases of shoulder and arm presentations he had lost, under the required operation of turning, 7 women from rupture of, and 13 from inflammation of the uterus, Dr. Lee adds, “Laceration and inflammation of the uterus are, *therefore*, the consequences of turning chiefly to be dreaded.”—(See Dr. Lee's Lectures on Midwifery, p. 344.)

In my next communication I shall take occasion to shew that Dr. Lee's anatomical and pathological reasonings on the subject in discussion, are as unsound as I believe his statistical arguments and criticisms to be.