

Historical and practical enquiries on the section of the symphysis of the pubes, as a substitute for the Caesarian operation, performed at Paris, by M. Sigault, October 2d, 1777 ... / Translated from the French, by Lewis Poignand.

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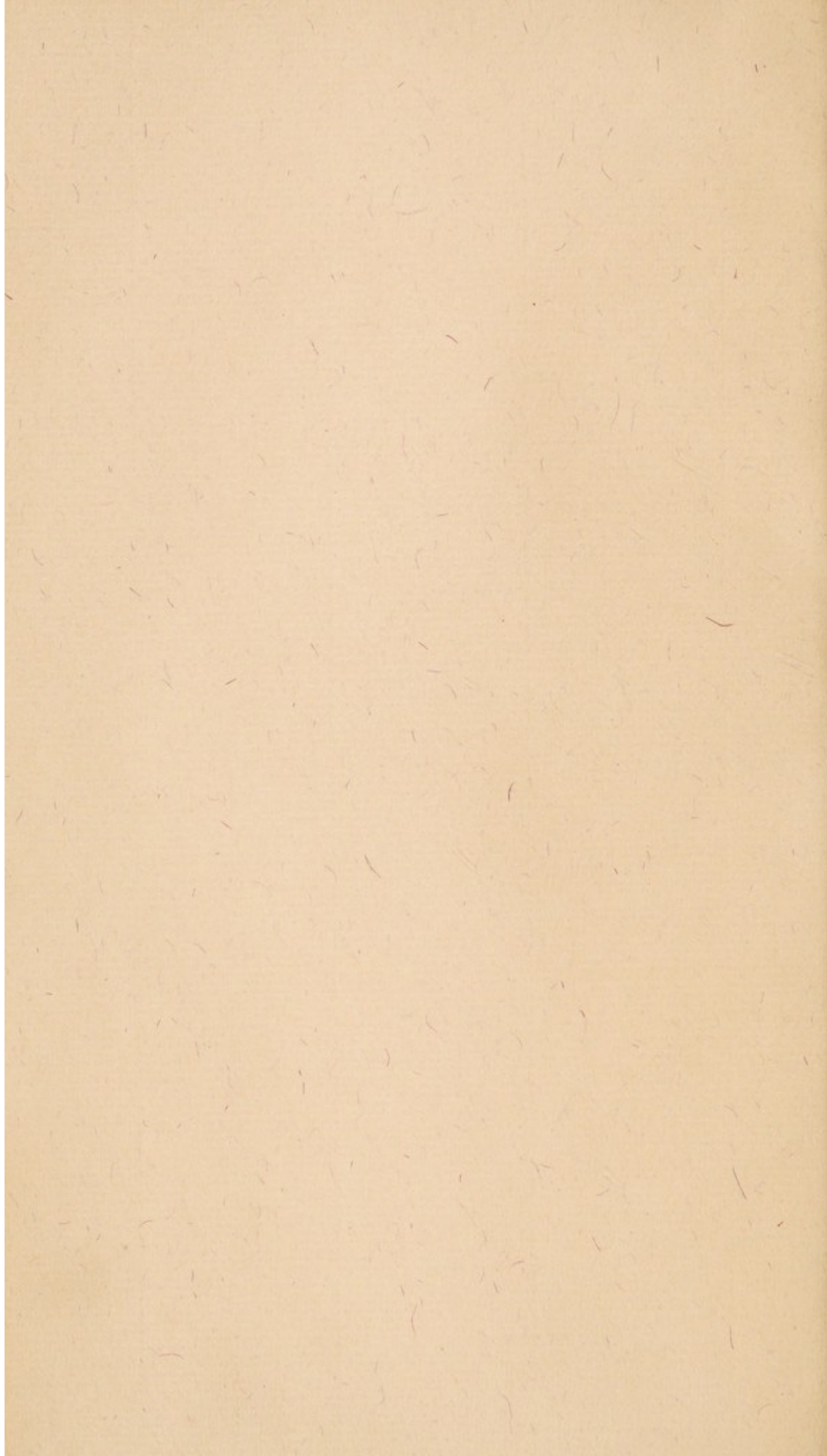
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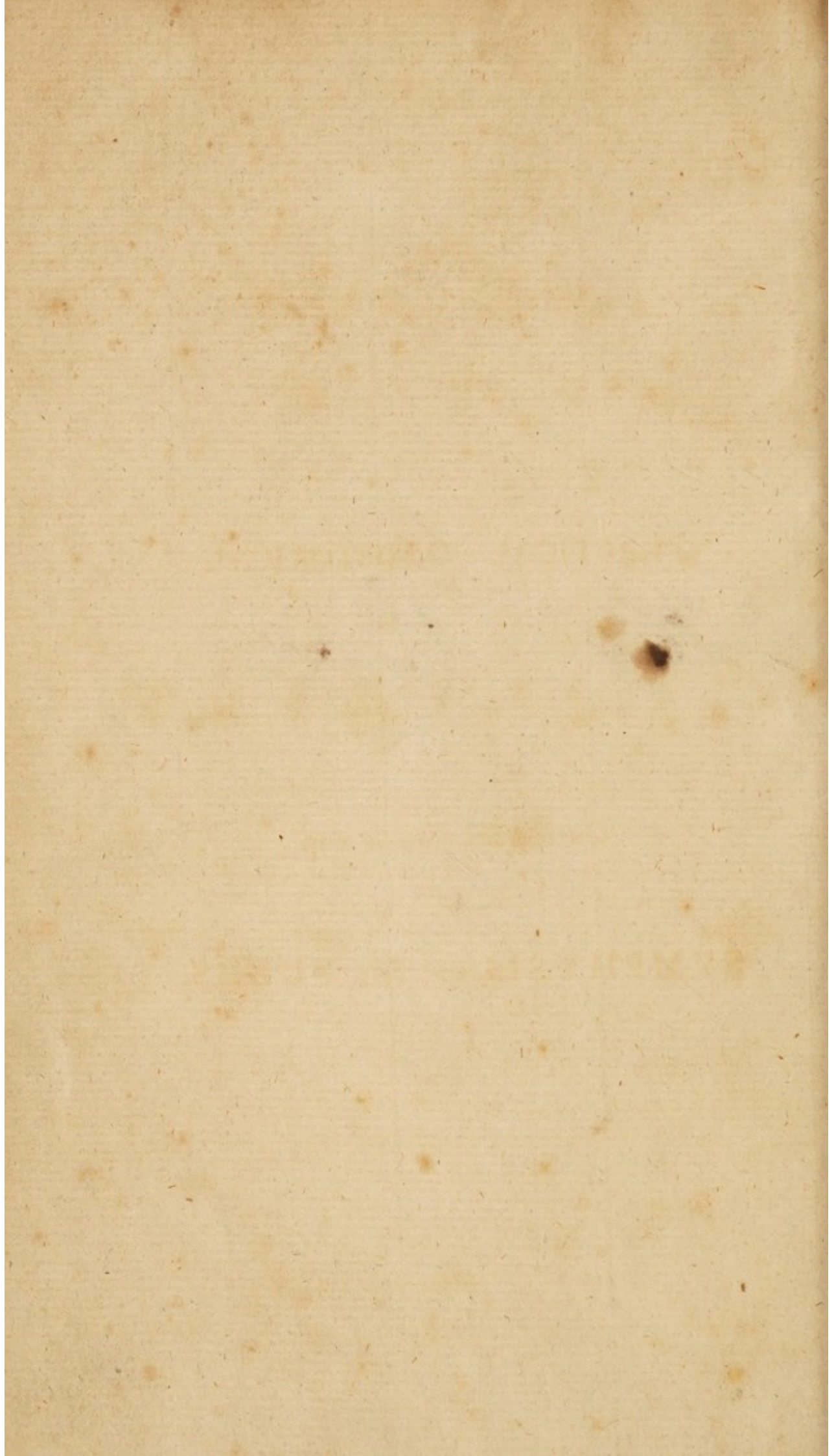
1815



PRACTICAL ANATOMICAL

OF THE

SYMPTOMS OF THE PUBES.



PRACTICAL AND HISTORICAL

E N Q U I R I E S

ON THE SECTION OF THE

SYMPHYSIS OF THE PUBES.

PRACICAL AND HISTORICAL

E. N. O. R. I. S. I. E. S.

On the section of the

SYMPHYSIS OF THE PUBES.

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HISTORICAL AND PRACTICAL
ENQUIRIES

ON THE SECTION OF THE
SYMPHYSIS OF THE PUBES,
AS A SUBSTITUTE FOR THE
CÆSARIAN OPERATION,

PERFORMED AT PARIS,
By M. SIGAULT, OCTOBER 2d. 1777.

By M. ALPHONSE LE ROY,
Doctor Regent of the Faculty of Physic in PARIS, and Professor
of Midwifery, &c.

TRANSLATED FROM THE FRENCH,
BY LEWIS POIGNAND,
Of the Corporation of Surgeons, London, and Surgeon to the
Westminster Lying-in Hospital.

LONDON:
Printed for R. BALDWIN, Pater-noster-Row.
MDCCLXXVIII.

TO
DR. JOHN LEAKE,
MEMBER OF THE ROYAL COLLEGE OF
PHYSICIANS, LONDON,
PHYSICIAN TO THE WESTMINSTER
LYING-IN HOSPITAL,
AND PROFESSOR OF MIDWIFERY;
AS A SLENDER TRIBUTE DUE TO HIS
EXTENSIVE MEDICAL KNOWLEDGE
AND DISTINGUISHED MERIT,
IN WHAT RELATES
TO THE OBSTETRIC SCIENCE
AND DISEASES INCIDENT TO WOMEN,
THIS TRANSLATION
IS MOST RESPECTFULLY INSCRIBED,
BY HIS HUMBLE
AND MOST OBEDIENT SERVANT,
LEWIS POIGNAND.

*Duke-Street, Westminster,
October 1, 1778.*

TO
DR. JOHN LEAKE,
MEMBER OF THE ROYAL COLLEGE OF
PHYSICIANS, LONDON,
PHYSICIAN TO THE WESTMINSTER
HOSPITAL,
AND PROFESSOR OF MIDWIFERY,
AS A BECOMING TRIBUTE DUE TO HIS
EXTENSIVE MEDICAL KNOWLEDGE
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IN WHAT RELATES
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LEWIS POIGNAND.

Del. Lond. H. Leake,
Omnib. 1778.

ADVERTISEMENT.

I was encouraged to undertake the following Translation, by that Gentleman to whom I have done myself the Honor to inscribe it; he obligingly sent the Original for my Perusal, with a Letter from the Author, which I have taken the Liberty also to translate. I perceived he was disposed to think favourably of the NEW OPERATION of cutting the Symphysis of the Pubes, so zealously recommended by my Countryman Mr. Le Roy, and therefore imagined it would be rendering acceptable Service to the Public, thus to make it more universally known to the Medical World, as well as to reconcile it to the general Opinion of Mankind, who are usually averse to Innovations in Practice, however beneficial to the Community.

I have endeavoured to give a literal translation, as far as the Idiom of the English Language would permit; and where I was obliged

to depart from it, I have taken as much Pains as possible to preserve the genuine Sense and Meaning of the Original.

Several Repetitions and Digressions, which did not tend to illustrate the Nature of the operation, or confirm the Success of it, I have taken the Liberty to omit, for which my Apology is due to the Author. If in this Translation many Errors or Inaccuracies of Stile are to be found, I beg the Reader will permit me, as a Foreigner, to claim his Indulgence on that Account.

MONSIEUR,

MONSIEUR,

*J*E vous prie d'accepter un exemplaire de L'ouvrage que je publie en faveur de L'operation nouvelle de la section de la Simphise que j'ai déterminé, et à la quelle j'ai coopéré. J'y joius le recit de la Faculté de Medecine de Paris, et une Thèse qui vient d'être soutenue dans nos Ecolles, la quelle adopte mes principes et offre six exemples de succès. J'enseigne les accouchemens, &c. Je suis le premier Medecin de notre facultè qui se soit aussi décidément livré à cette partie de la Medecine qui est en France aux mains des Chirurgiens. Je connois vos travaux sur les fièvres à la suite des couches ; j'établis vos principes et je me plais a vanter vos talens. J'ai donné une Histoire des principaux Accoucheurs, Smellie & vous, Monsieur, y occupé un rang distingué. Recevez mon Opuscule comme un hommage que je me plais a rendre à votre célébrité. J'ai mandé à mon Libraire de me faire parvenir tous vos ouvrages, je compte en faire bon usage
pour

*pour un traité D'Accouchemens, que je vais publier
et dans le quel j'aurai un grand nombre de fois oc-
casion de publier avec quels sentimens d'estime re-
spectueuse j'ai L'honneur d'etre,*

Monsieur,

Votre très humble et très obeissant Serviteur,

ALPHONSE LE ROY,

Docteur Regent de la Faculté de Medecine

*Mai le 15, de Paris, Professeur D'Accouchemens
1778. et de Maladies des Femmes.*

M. Leake, Professeur D'Accouchemens.

TRANSLATION,

TRANSLATION.

SIR,

I INTREAT your acceptance of my Publication on the *new operation* of cutting the symphysis of the *pubes*, which I have successfully performed. I likewise enclose a report of the Medical Faculty at *Paris*, and a Thesis, which has lately been discussed in our College, wherein my principles are adopted; together with *six examples* of the success of this operation. I give lectures in midwifery, &c. and am the first in our faculty who has so devoted himself to this branch of physic, which in France belongs to surgery. I am acquainted with your *Practical Observations, &c. on the Child-bed Fever*. I adopt your principles, and take pleasure in praising your Talents. I have given a History of the principal *Accoucheurs*, wherein *Smellie* and you, Sir, hold a distinguished rank. I present you with a sketch of my work, as a tribute which I owe to your eminent Reputation, and have given orders to my
bookfeller,

bookseller, to send me all your works, of which
 I intend to make a proper use towards a Treatise
 I am going to publish on Midwifery, wherein
 I shall have frequent occasion to testify the
 respectful esteem with which,

S I R,

I have the Honour to be,

Your most humble,

And most obedient Servant,

ALPHONSE LE ROY, M. D. &c.

May 15, 1778.

M. LEAKE, Professor of Midwifery, &c.

PREFACE.

P R E F A C E.

WERE it allowable to estimate the advantage of a discovery by its public utility, it must be acknowledged the new section of the *os pubis*, introduced as a substitute for the *Cæsarian* operation, is one of the most important that has been made in this age. This operation was no sooner performed at *Paris*, upon Mrs. *Souchot*, than the fame of it was spread every where, and engaged general attention at home and abroad: people differed in opinion concerning it; some, who pretended to be judges of this discovery, were eager to decry it, and to give the name of rashness to the spirited enterprize of two physicians, who joined the practice of surgery to that of physic. They denied the possibility of
gaining

gaining a sufficient separation of the *os pubis* by this operation ; and in order to demonstrate what they advanced, their utmost power to that end was exerted in a public theatre, before a number of Students, but their efforts proved unsuccessful. They represented these two physicians in combination, to attribute to each other an imaginary success in their profession, and that they were bold enough when stimulated by interest to impose on the present age ; but these incredulous opponents were thunder-struck at the testimony of applause which many of the faculty, as well as several curious persons, gave to their proceeding. Envy has a thousand resources ; an alarm was spread of the precarious state of the patient ; palpable falsehoods were printed on the occasion, and every day papers were published in order to defame their reputation : in the mean time the cure advanced, and the patient at length recovered so as to resume her usual occupation.

occupation. She herself then attested her recovery, by appearing in the schools of the faculty, and other places. Upon a recital of the manner in which the operation was performed, and the success attending it, which were confirmed by the physicians appointed by the faculty; that respectable body, full of zeal in the execution of laudable deeds, decreed certain honours to the two members of their society, who had invented that operation. This act of approbation stimulated envy afresh. A pamphlet appeared under the title of *Reflections on the Section of the Pubes*. This title is merely a veil which conceals the utmost malignity.---It would be losing time to attempt the refutation of a scribbler, who had been previously called to Mrs. *Souchot's* assistance, and by whom the life of her first child, and also of three more could not be saved. Behaviour of this kind has been common in every age.

In

In the year 1775, when I published the first part of my course of midwifery, I had the misfortune to displease certain persons whose false principles I had exposed. The case of Mrs. *Souchot*, in which I was concerned, furnished them with a new opportunity to attack me and my practice, but their calumny had no effect, though they attempted to rob me of the honourable part I had in the discovery.

Some of the antients had a faint notion of the utility of the section of the *pubes*; but their works afford nothing but conjecture on the subject. Mankind will ever be indebted to Mr. *Sigault*, in being the first who entertained such strong and clear ideas of this operation, and for proposing the performance of it. We often reflect on the obstacles, without seeking to remove them, when a little exertion would be sufficient to compleat our wishes: with this view, I undertook a variety of experiments,

riments, and have been so happy as to succeed by them, in obtaining all the separation that could be wished for and expected. I think I have, by these means, proved the utility of the operation.

Mr. *Sigault*, to whom I communicated my success, meeting with a favourable case, acquainted me of it. I encouraged him to the operation, which we performed to our wishes. The *Parisian Journal*, in its account of this event, says, in a cursory way, "That I accompanied my colleague;" but to do justice to Mr. *Sigault*, I must here acknowledge, that he contradicted the journalist, though he was his friend, and declared that the whole care of the patient was mine, on account of a fit of illness by which he was confined.

Commissioners who had been appointed by the faculty to inspect the case, made a just report of it. Mr. *Sigault* and I gave
an

an account of each others proceedings ; in consequence of which they conferred on us the honour of a medal, with our names engraved upon it.

I have sufficiently, and perhaps too long dwelt upon personal wrongs.---- Though I may not have gained my due reward of fame and reputation, I shall certainly have the satisfaction to think I have made discoveries useful and highly interesting to mankind : the pleasure of doing good would be too delightful, were we not now and then interrupted in the pursuit of it.

HISTORICAL,

PRACTICAL AND HISTORICAL
E N Q U I R I E S

ON THE SECTION OF THE
SYMPHYSIS OF THE PUBES.

BY delivery is understood the descent of the child through the *pelvis*. The theory of this operation comprehends a knowledge of the positions, dimensions, proportions and relation which the child bears to the *pelvis*. When their respective dimensions are in just proportion, and the position is good, nature is all sufficient; but otherwise, we must have recourse to art. It is surprising that this fundamental principle should have escaped the ancients, and that even to this day most of the moderns should be unacquainted with it.

B

What

What has been the consequence of the ignorance of practitioners with respect to this operation? By mistaking the real obstacle, and being unacquainted with this art which assists nature, Accoucheurs have had recourse to means destructive to the mother or child, and sometimes to both, in circumstances which admitted of their preservation. Hence, no doubt, the prepossession in women which renders this otherwise desirable moment so formidable.

The chief object of the ancients, at the time of delivery, was the preservation of the mother's life, and they always preferred it to that of the child, as the latter could present to the public nothing but uncertain hopes of utility; but notwithstanding this, mothers often became the victims of injurious practice. The laws ordained that an operation, known since by the name of *Cæsarian*, should be performed on every woman dying in labour, in order at least to save

save the child. Modern practitioners have ventured to perform this operation on the living body likewise, with a view of saving the mother as well as child; but for one successful attempt, how many unsuccessful ones have been passed over unnoticed!

Shall we then pretend to have perfected an art, which, while it contributes only in some measure to the safety of the child, renders that of the mother more precarious?

Have not the moderns sometimes unseasonably performed the *Cæsarian* operation, by confounding a wrong position of the child with the want of due proportion in the parts? We have some instances of women recovering of this dangerous operation, who in a subsequent lying-in, were delivered without its dreadful assistance.

From such errors, and many others equally destructive, I deemed it of importance to establish in this art some clear and striking principles, founded upon the

dimensions of the body to pass, and of the parts which afford it passage.

When the *pelvis* is too narrow for the child's head, a circumstance which induced the ancients to destroy it, and which, according to modern practice, exposes the mother to the hazard of the *Cæsarian* operation, in order to preserve it, the incision of the *pubes* has been recommended. I have demonstrated the advantages resulting from it, and success has already seconded my expectations. I now discharge a duty which humanity dictates, in publishing this new operation, and my reflections from thence arising. I shall discuss the objections which may reasonably be made to it, and shall consider this important subject in three points of view, viz. *History, Practice, and Theory.*

First, I shall consider how the mind of man, so slow in its advances, at length arrived at a discovery of this operation.

Secondly, The manner in which it was performed on Mrs. *Sonchot*, together with
the

the whole process during and subsequent to the operation.

Thirdly, I shall endeavour to throw some light upon the causes of the accidents which happened in her case, and the means of preventing such in future; I shall afterwards point out the circumstances under which this operation may prove useful, and the principles upon which we may act in similar cases.

PART

P A R T I I.

WE are often extremely surpris'd at the size of a new-born infant ; 'tis hard to conceive how it has made its way into the world. Those who first made midwifry the object of their attention, endeavouring to account for this phænomenon, began by considering the structure of the *pelvis* ; they observed, that the different parts of which it is compos'd are connected by a substance which never becomes ossified in young women, and which, during the latter period of their pregnancy, swells and softens. From these circumstances they saw the beneficent intention of nature, which by this means admits, to a certain degree, a separation which enlarges the dimensions of the *pelvis*.

Hippocrates was of opinion, that the pains in the loins which women feel during labour, originated

originated from the posterior articulation of the *pelvis*; that they proceeded from the efforts which nature directed towards the parts. These are his words :

“ Women, in their first labour, feel very sharp * pains in their loins, and in the lower part of the *os ilium*; at that time these bones divide and separate one from the other.”

Hippocrates in the above passage attends only to the separation of the posterior articulation; but in another place † he seems to attend solely to the anterior. “ When the time of gestation is completed, says he, the bones separate to the right and left.” These passages have given rise to three different opinions relative to the separation of the parts of the *pelvis*, and the efforts of the *uterus* in expelling the child. Some would have it that these efforts were directed towards the posterior parts only, and separated the posterior articulation only; B 4 others,

* Hipp. de Natura Pueri.

† Idem de Epidem.

others, guided by observation, maintained, that they extended towards the fore part of the *pelvis*, and that it was particularly towards the *pubes* that nature had fixed the mobility and separation of the parts: And lastly, others were of opinion they were directed equally towards the whole opening, and tended to increase it in every direction.

The *Arabians* adopted this last hypothesis. “When the *fœtus*, says *Avicenna*, is on the point of exclusion from the mother, the *uterus* opens, the joints are separated, and this operation is one of the greatest efforts of nature.”

It seems that even the ancients had some thoughts of separating the *pubes*, in order to facilitate delivery, and that this notion had given rise to some fabulous accounts, which gained great credit amongst the vulgar, “Can any sensible man believe, says the celebrated *Vesalius*, that there are, as people pretend, nations who, upon the birth of a daughter,

daughter,

daughter, separate the *pubes*, in order to facilitate her labours ?”

The *Greeks* looked upon the symphyfes of the *pelvis* as fo many joints. *Vesalius* opposed this opinion. He looked upon the substance of the symphyfes to be like the other cartilages. So that if the opinion of the softening and separation of the parts was carried too far, he would establish one error, while he meant to explode another.

The authority of this great man made many of the same opinion. In the year 1319, one of our predecessors in the faculty of medicine at Paris, *Jacque D'Amboise*, equally famous for his talents and attachment to Henry the IVth. during the league, gave lectures on anatomy, as was customary, at *St. Come*. In the course of these lectures, he happened to meet with the body of a woman, who a few days after delivery was executed for stifling her child. Mr. *D'Amboise*, thinking this a favourable opportunity to decide the question of the softening

softening and separation of the bones of the *pelvis*, gave notice, that in a public lecture this subject would be considered; and he invited the most celebrated physicians and surgeons to attend. He demonstrated to the assembly, that the bones of the *pelvis*, especially towards the symphyfes of the *pubes*, separated a few lines,* and he proved that it did not proceed from any unfound state of the parts, because the woman had been in good health during her pregnancy. He shewed, that upon raising one thigh, the corresponding *pubes* rose above the other; nevertheless, in spite of authority, reason, and the testimony of the senses, many persons remained obstinate in a contrary opinion. Mr. *Pineau*, a very skilful surgeon and anatomist, was particularly struck at this circumstance, and hurt at the obstinacy of some of the company. He collected

* The French measure is nearly as follows:—Twelve lines make one inch, and twelve inches one foot; but their foot contains near thirteen English inches.

collected the whole of what had been said on this subject, and formed it into a small Treatise, which contains a variety of excellent observations, of which I shall give an extract.

This writer, with *Galen*, looks upon the symphyfes of the *pelvis* as so many articulations; that of the *pubes* seems to him more disposed than the rest to swell and soften during pregnancy. “The substance of the symphyfes, says he, is like a sponge, it becomes moist during pregnancy, and grows dry after delivery by degrees. The cause of this softness depends upon a mucous discharge upon these parts. Unsuccessful attempts have been made to dilate the *pubes* with a wedge; but this separation cannot be effected except near the time of delivery. When the finger is applied to the *pubes* of a pregnant woman, this part gives signs of extreme sensibility, which arises from the swelling in these joints distending the *periosteum*, and separating it. Might not art in-

crease

crease this softness of the parts which nature attempts? In order to promote this, may we not, during pregnancy, apply to the symphyfes, especially to that of the *pubes*, emolient cataplasms, oily embrocations, and femicupia, &c?"

Mr. *Pineau* perceiving that these means would be rejected, without even giving them a fair trial, therefore dedicated his work to the celebrated *Dr. Riverius*, persuaded that his name would have great influence. After an attentive observation, as we have seen, of the means by which nature brings about the swelling and softening, he tried every method which medicine or surgery could furnish, in order to effect it. "If we hold, says he, the thighs of a woman in labour, raised up and extended, the child at every pain advances the more, which depends upon the separation of the *pubes*."

In short, *Pineau* goes still further. He says, that we may not only dilate the symphyfes by the means which he proposes, but
that

that we may even separate it by *incision*. He shudders, however, at this proposal, and begins by resting on the authority of *Galen*, who says, “ The containing parts being less noble than the contained, may not only be dilated, but cut, for the preservation of the latter.” “ Now every sensible man, says *Pineau*, must allow the child in *utero*, to be more noble than the bones which compose the *pelvis*.”

The authority of *Galen* upon this occasion, was not well calculated to give credit to this idea. The great experience of *J. D'Amboise*, served to perpetuate in the schools of the faculty, the doctrine of the softening and the separation of the symphyse of the *pelvis*. *Silvius*, *Riverius*, *Riolanus*, and many others publicly patronized it.

Mr. *Duverney*, in his public lectures delivered at the *Royal Gardens*, shewed a *pelvis*, the *pubes* of which had been separated during labour, by the sole efforts of nature. *Morgagni*, whose authority is of much weight

weight in these cases, likewise adopted this opinion.

Finally, in the year 1768, Mr. *Sigault* presented a memorial to the surgeons of *Paris*, in which he proposed the section of the symphyfes of the *pubes*, in cases where the *Cæsarian* operation is employed, on account of the disproportion of the *pelvis* to the child's head. The reason which he gave as conclusive was, that by this section, the space of an inch was gained, which he had proved to be the case in several women who died in child-bed. It was objected in the first place, that in cases where the *Cæsarian* operation became necessary, an inch more room would not be sufficient. Secondly, it was alledged, that many circumstances rendered the reunion, of the parts very precarious.

While the French surgeons were disputing this matter, Mr. *Camper*, a Dutch physician, had recourse to experiment. He performed this operation on a *sow*, after she had

had littered; she continued to suckle her pigs, to eat, drink, and walk, and though she threw off the bandage which had been applied in order to favour a union of the parts, they were healed in 15 days.

This experiment being made known throughout Europe, decided one of the chief points in question, viz. the reunion of the parts, but it said nothing respecting the separation, and gave no answer to the objection made to its insufficiency.

Such was the state of the question, when in the year 1773, I had an opportunity of making many observations on the bodies of women who died in child-bed. I endeavoured, by anatomical principles, to bring to greater perfection the art of midwifery, and to obviate the dangerous consequences of delivery. I attended particularly to the operation proposed by Mr. *Sigault*, and endeavoured to reap every possible advantage from the hints he had given. I performed the section of the *pubes* upon dead subjects,

subjects, both male and female. In the first I observed a separation of between two and three lines space, and in the latter from three to four; in those who died in child-bed, I constantly gained from six to nine lines. I then reasoned thus: Why is there a separation in every subject? and why is this separation greatest at the time of delivery? An attentive examination of the parts which constitute the *pelvis*, resolved the first question. The two bones which form the hips are united anteriorly by means of a substance which has passed for cartilage; they are joined behind to the lateral sides of the *sacrum*, and are equally united to it by means of that same substance, which is fastened still more firmly by ligaments internally and externally. The name of symphyse was given to these three junctions of the pieces of the *pelvis*. The ligaments of the posterior external part are numerous and much stronger than those of the posterior internal part; so that by cutting those

which

which unite the *pubes* in the fore part, the posterior external ones becoming too powerful for the posterior internal, a separation of the divided parts must necessarily ensue.

It still remained to find out why the separation was always greater in women advanced in pregnancy, or delivered. I considered the state of the symphyfes in women after delivery, and always found the substance which serves as a medium of union, and which has usually the solidity of a cartilage, swelled and softened to such a degree, that a lancet was sufficient to cut it. I observed that the softness was always in proportion to the swelling; whence it followed, that upon cutting the *pubes* of women who died in child-bed, there appeared a greater separation, which seemed in proportion to the degree of swelling and softness in the cartilaginous substance.

Here

Here I had an opportunity of applying the observations already made on that change in the animal œconomy which pregnancy brings on. I observed that the cellular membrane was unusually relaxed in all women after delivery, and filled with a gelatinous matter; all the muscles were more tender than at other times, and so much so near the *pelvis*, that I could break them down between my fingers. I compared with this observation, those which prove that the flesh of impregnated females is constantly tender. I had remarked that in the country it was a custom to have old cows bulled in order to make them tender and more fit for food; which proved to me, that pregnancy renders the flesh soft and tender; and I was of opinion, that nature went still further, and extended her influence even to the bones.

Observation shews, that in fractures in
women

women with child, the callus does not form so as to unite the parts, until some time after delivery. Many experiments of this nature made on impregnated bitches exhibited the same phænomena. All these facts, joined to many other no less curious, convinced me that during pregnancy there is brought about, particularly towards the *pelvis*, a *solution of the earthly matter in the mother, which is converted to the use of the fœtus.*

I adopted this notion ever since the year 1770, and then communicated it to our learned and illustrious colleague, the late Mr. *Herrissant*, who had expatiated largely on the earthly animal matter. He approved of my opinion, as well as the manner in which it had been derived from observation. He appeared to me quite satisfied with the explanation which I gave him of the extraordinary softness of the bones of Mrs. *Soupiot*, a phænomenon which in his opinion had not been accounted for in any sa-

tisfactory manner. I am able, in consequence of my application since that time, to explain the means by which this solution of the earthly animal matter is effected.

After having compared all these facts which prove that the flesh, and even the bones, become soft, by a kind of solution during pregnancy, especially about the *pelvis*, I thought that the symphyfes ought naturally to be subject to the same change. I then perceived there was some propriety in the observations, which seemed heretofore not sufficiently established.

I imagined that the softness, and consequently the separation, ought to be in proportion to the greater or lesser degree of solution in the consolidating principle; this appeared evident from a view of the *pelvis* of a woman after delivery, in which the softness was such, that the *pubes* could be separated six lines. One would have imagined that the intermediate cartilage

lage

lage was almost dissolved, infomuch, that this swelling of the symphyfes, which was thought to depend upon an afflux of humours on these parts, appeared to me to be the effect of a solution of the earthly matter.

I endeavoured to make these ideas useful to the practice of midwifry. It appeared to me that the coccyx, which is united to the *sacrum* by the same cartilaginous substance which is found in other symphyfes, could, on account of their softness, recede during labour, as observed by *Deventer*, and that he recommended, in some circumstances, the retro-pressure of the coccyx to favour delivery. I imagined, that on account of the softness already proved, the *sacrum* itself might sometimes give way to a certain degree; a circumstance of the utmost consequence in the art of midwifry. Experience answered my expectations, and by the same simple means I have assisted women, who otherwise could not have been

delivered without the help of instruments.

With regard to Mr. *Sigault's* project, I suspected that a greater degree of separation could be procured than he had mentioned or obtained. I had remarked, with *Pineau*, that during some labours, in raising the thighs, and keeping them at a distance from each other, the child advanced better during each pain, particularly when the pains were of the forcing kind. I was then of opinion that the *triceps* and *gracilis* muscles could on each side separate the *pubes*, and produce a more considerable separation than was obtained by Mr. *Sigault*; and as after death the articulation becomes rigid, I thought it necessary to try some experiments on a subject still warm, although it was hard to be met with. In December 1774, I was called to Mrs. *Brasseur*, who was expiring in consequence of the injurious treatment of a woman who endeavoured to deliver her. She was dead when I arrived.

I begged leave of her friends to perform an operation on the body, which was interesting to mankind. Being permitted, I came soon after with one of my pupils, and placed the body upon a table, with some cloths under her loins, that the *pelvis* might project. The thighs being raised and held at the greatest distance from one another, I began the section of the integuments at the superior part of the symphyfes, a little to the right; the cartilage being very soft, I cut it with a slender knife; the incision was scarce performed, when the *pubes* parted so as to admit my four knuckles, an extent equal to two French inches and a half: When her legs were let down and extended, and her thighs near each other, the divided parts approached so close as to leave but an extent of six or seven lines, which were reduced to three or four when she was placed on her side. I endeavoured to find out whether any part of the bladder was injured, and

found it was not, and that the ligament which unites it to the *pubes*, was partly preserved on the left side.

This experiment confuted the objections of those who supposed there would be a want of sufficient separation, for it was evident to me, that a head of large size might be conveyed through a *pelvis*, whose aperture, from the anterior to the posterior part, only measured two or three inches.

It was always a maxim with me to be communicative in things relative to science, convinced that though a man may lose the honour of some discoveries, yet by enjoying the conversation of others, he will improve his own understanding.

I mentioned my discovery to several learned men, and introduced it in both my public and private lectures. I now turned my attention to the possibility of reuniting the parts divided in the operation.

The

The experiment of Mr. *Camper* made it a matter less doubtful, as we had already instances of the cartilages of the larynx uniting, it gave us strong reason to hope for the reunion of the symphyfes of the *os pubis*. Certain observations had even proved it, but others left room for doubt. We had examples of women who felt much uneasiness from the motion perceived in the symphyfes of the *pubes*, so as not to be able to walk. Other observations related to me by people of veracity, proved that this was sometimes obviated by means of a bandage. It now struck me that want of proper rest might be the cause of the parts not reuniting, and that it was occasioned by the patients getting up too soon, for the callus loses its agglutinating power in proportion to the motion of the parts. Wherefore in the reunion of fractures, if such motion happens, no fixed union succeeds, but the bones form a kind of articulation.

I mentioned all these ideas on the separation and reunion of the parts in my public and private lectures, and wished to see them confirmed by experience on living subjects. In short, I published a first part on the practice of midwifry, and shall soon publish more.

When treating on those cases of disproportion between the head and *pelvis*, where the *Cæsarian* operation had been recommended, I hinted at other methods, and expressed myself thus: * “To render the *Cæsarian* operation less frequent, and less fatal, to determine those cases in which it is pointed out, and reduce them to the smallest number possible, to substitute in its room a less dangerous operation, and lastly, to banish totally from the course of practice this formidable and generally fatal resource.”

I had the pleasure to see that many of my pupils,

* See the *Practice of Midwifry*, first Part, containing a Critical History of the Doctrine and Practice of the most eminent Accoucheurs, page 202.

pupils understood my doctrine, and defended my principles in their public Theses; particularly Mr. *Chandon*, who had proved his great abilities in the Marine Hospitals; and in order still to make himself more useful to the public, petitioned *Monf. Sartine*, for leave of absence to attend my lectures in *Paris*.

Having spent a proper time in *Paris*, he went to *Montpelier*, in order to take his degrees. He dedicated his Thesis to Mr. *Sartine*, Minister to the Marine Department, and therein defended my favourite proposition, *viz.* that in labour a woman never should lose her life when under the care of an able operator.

After describing such cases as are formidable, he shews the remedy, and relates many instances of cases usually proving fatal, wherein he has seen my practice attended with success. Mr. *Chandon* had the very uncommon delicacy not to appropriate to himself one of my ideas. After proposing various

various means to supply the use of the *Cæ-
sarian* operation, and among others, the sec-
tion of the *pubes*, he says, “By this opera-
tion none of the viscera essential to life
are endangered; it has been rejected merely
from timidity, and without any good rea-
son, especially since Mr. *Alphonse Le Roi*
has obtained so much separation as two
inches and a half in the *os pubis*.” And
here Mr. *Chandon* relates the observation
mentioned above. A surgeon, very well
versed in the art of midwifry, and unac-
quainted with my works, in the year 1776,
published and defended a Thesis in the pub-
lic schools, in which he condemned the sec-
tion of the symphyse, in cases where the
pelvis is too narrow to let the child’s
head pass. Mr. *Bodelocq* does not dis-
approve the opinion of the ancients as
to the swelling and softness of the
parts, but he says, very justly, that
we seldom observe any sensible mobility
towards the symphyse; nevertheless, he
mentions one *pelvis* which he had seen,
where

where the separation in the *pubes* amounted to fourteen lines. He disapproves the operation of the section of the *pubes*, on account of the insufficiency of a separation of one inch, mentioned by Mr. *Sigault*, in a Thesis at *Angiers* in 1772.

In order to obtain that separation, the author was obliged to thrust a wedge into the opening of the *pubes*, because he did not try his experiments on the *pelvis* of women who died in labour, or soon after delivery. He observed, that in case of a separation of one inch, the *pubes* does not diverge forwards above two lines; consequently, if there be a disproportion as to the transverse diameter of the head with the *pelvis*, of more than two lines, the operation is not advisable. This reasoning amounts to a demonstration. He advises then, in cases where one would wish to practise it, rather to use the forceps; but it were to be wished that he had taken pains to determine exactly the cases wherein this instrument can
reduce

reduce the disproportion ; and that he had shewn clearly in what degree he could diminish the size of the head, so as to overcome this difficulty.

When this surgeon heard I had obtained two inches and a half in the separation, he had a favourable opportunity of repeating my experiments, and having the same success, informed me of it, testifying how greatly he was interested in it. It is a characteristic of real merit to seek truth, merely for its own sake.

I heard of Mr. *Sigault's* Thesis, but as I had not seen it, in the month of *July* 1777, I went to his house, and begged of him to let me have a perusal of it, in order to ascertain the difference between his researches and mine, and to make them concur in giving some weight to a project which was inconsiderately rejected. My friend readily granted my request : he gave me his Thesis only, the memorial which he presented to the Surgeons Company not being at hand.

Impatient

Impatient to see the contents of this Thesis, I perused it, and will here give some extract of it.

By the title of this Thesis it implies, that in præternatural labours, the section of the symphyfes of the *pubes* is a much readier and safer operation than the *Cæsar*ian. It consists of five paragraphs, the first contains only some general propositions foreign to the subject; in the second he says, “The force of the *uterus* sometimes acts upon itself; hence arises in some labours a rupture of this viscus itself, in which case we have been obliged to make an incision into the belly of the mother, to extract the child contained in the abdomen. By this operation *Julius* was born; and hence they gave him the surname of *Cæsar*; and from this incident the operation was called *Cæsar*ian.

“The dangers of this operation are hæmorrhage, a diffusion of purulent matter into the cavity of the abdomen, a hernia
with

with strangulation of the intestines, mortification, convulsions, and death."

In the third paragraph he says, "The cartilages become relaxed towards the latter end of pregnancy, and during labour the bones recede from each other by little and little, and sometimes quite separate." He maintains this assertion upon the authority of some celebrated anatomists. In the 4th part he goes on thus: "*Fernelius* mentions the strong junction of the *pubes* as one of the chief obstacles to delivery. *Pineau* in those cases recommended relaxing applications and liniments; but they prove very ineffectual. Take a bistory with a blunt point, cut and divide the integuments above the *pubes*, go through the pyramidal muscles from top to bottom; the symphyfes of the *pubes* being now exposed, convey your fingers to the cellular membrane behind the *pubes*, and cut boldly this intermediate cartilage: Immediately the *pubes* will separate
above

above an inch, and the foetus, by the force of nature, will come safely into the world. When the power which tends to separate the extremities of the *pelvis* no longer exists, the *pubes* will reunite. This may be done more effectually by the application of a bandage. The wound being of a simple nature, a cure will be completed by rest, without any dangerous symptoms. This operation is preferable to the forceps, as that instrument may injure the head of the child, and produce inflammation or gangrene. Mr. *Camper* performed this operation on a *sow* with success."

In the fifth part Mr. *Sigault* answers the objections made to his doctrine, and says, "It will be objected, that when the symphyse is ossified, this operation cannot be performed; but this is a case which seldom happens. The danger of wounding the neck of the bladder may also be an objection; but this organ is joined to the symphyse only by a loose cellular membrane, which may be di-

D vided

vided with the finger, if the fœtus has not descended below the brim of the *pelvis*; and if it has, wounding the neck of the bladder is not an incurable case, as the ancients supposed. Others advance, that the *pelvis* cannot be sufficiently enlarged by the section of the symphyfes. But let us consider, that it is composed of different pieces, and that the extent of the aperture is an additional increase to the whole circumference of it. Others say, that the reunion cannot be brought about; but the contrary is proved by the experiments of Mr. *Camper*. And why should not the cartilages reunite? It is true, Mr. *Verdier* says, he has seen two women who became lame upon a similar state of the *pubes*; but doubtless this proceeded from some venereal infection, or a scorbutic or scrophulous humour. According to the observations of Mr. *Petit, Louis, and De Lafaye*, this reunion has been effected. Mr. *Morand de la Roussiere* saw a young man whose *pubes* had been separated while he was fencing; whence I conclude, &c."

Upon

Upon a perusal of this Thesis, I told Mr. *Sigault*, who asked my opinion of it, that excepting some few assertions contrary to the theory of midwifry, it was a very good one; but that nevertheless, his propositions ought to have engaged more attention, and that one ought to have had recourse to trials relative to this subject. Upon that he mentioned the opposition and disagreeable circumstances he had met with concerning it.

Mr. *Sigault* told me, that Mr. *Camper* had petitioned government in *Holland*, to give him up a female convict, in order to try the operation on her; but that the learned *Gaubius*, whose opinion had been taken on the occasion, determined government to refuse his request.

The following were my reflections on this occasion:

“Men always fear innovations where they are most interested. Hence it is that useful discoveries meet with considerable oppositions, while trifling ones are received with

avidity. I am not surpris'd, Sir, at the opposition you have met with; upon a subject so interesting, you can convince only by reasoning joined to demonstration. Had you asserted a more considerable separation, had you declared that through the worst formed *pelvis* you could convey a head of the largest size, had you explained the nature of it, you would have met with three kinds of people; some, who will not yield to the most convincing arguments, being influenced by passion; others, more indifferent, would have their doubts, because they would not take the trouble to examine the matter; and a third party would have understood you, and have become your most zealous partizans; but they would say, that experience and reasoning were against you, for it has been demonstrated, that the separation of an inch, as you assert, is not enough, and you have not proved the contrary. You suppose that this inch acts upon the
whole

whole *pelvis*, and increases its dimensions so as to let the head pass, and you extend this principle to every kind of disproportion. As to Mr. *Camper*, I would not have granted his request any more than the government in *Holland* did. I would have objected to him thus: If you succeed, Sir, you will lead us into an error, because the success you meet with upon a well formed *pelvis*, will not prove the practicability of succeeding upon an ill formed one. You will prove the reunion of the parts. Your experiments on the sow proves it sufficiently; therefore when I advised my pupils to beg a convict in their provinces, represent, said I, to the Judges, that the reunion is almost certain; but inform them that it is of the highest importance to ascertain whether a separation of *two inches and a half* may be obtained, by which means, even through an ill-formed *pelvis*, a very large head may be conveyed. Furthermore ad-

vance, that all persons of sense and experience agree as to the safety of the operation; but that it is necessary to be assured whether the separation, in case of an ill-formed *pelvis*, may not be attended with some unforeseen accidents."

On the 27th of *September*, 1777, about two months after this conference, when we were at a meeting of the faculty, Mr. *Sigault* took me aside, and told me "that he was shortly to deliver the wife of Mr. *Souchot*, whose labours had always been very bad, on account of her deformity, and short stature, which was only three feet eight inches high.

"At her first labour, in the year 1769, I could not possibly myself succeed in extracting the head, but begged the assistance of Mr. *Piet*; and after trying alternately to the utmost of our power, the head came lengthened through the *pelvis* to an astonishing degree.

"In *May* 1771, I was sent for to deliver her

a second time. I called in successively Messrs. *Thevenot* and *Coutouli*, two gentlemen of experience and skill. We were obliged to extract the head with the crotchet. She was delivered by the same means in a third labour, though the head of the child was much smaller, being only in the eighth month of pregnancy. Since that time she has been afflicted with a *prolapsus vaginae*.

“ On Easter-day, 1775, I was called in a fourth time, and got a number of Accoucheurs and celebrated physicians to attend with me. About Six o'clock we severally began to use our utmost power to relieve her, but could not for two hours, when at length we extracted the head by the same manœuvre as before. It was then unanimously agreed, that this woman could never be delivered of a living child, except by the *Cæsarian* operation. I then proposed a *section of the pubes*, which was re-

jected. Do you think, says Mr. *Sigault*, it may succeed? if you think it may, will you favour me with your assistance and advice? which I readily assented to, but not without some caution.”

PART

P A R T II.

HOWEVER certain the success of the section of the symphyse of the *pubes* appeared to me, my hopes were attended with some fears, but reasoning quickly removed them, and feelings which warmed my heart, made me enjoy, by anticipation, the grateful acknowledgments of those whose existence I was likely to preserve by this means.

I was impatient to communicate my thoughts to Mr. *Sigault*, as we were equally engaged in the same laudable undertaking. In the mean time, that no reproaches might be made on me, or rather that I might have nothing to reproach myself with, I consulted some wise and experienced friends, rather with regard to the propriety of my
conduct,

conduct, than the nature of the operation. At length, on the 30th of *September*, Mrs. *Souchot* was taken in labour, and sent about Five o'clock in the evening for Mr. *Sigault*, who came about Seven, and returned at Ten. About One o'clock in the morning he called me up, and informed me that the child presented by the feet, and that the mother was willing to submit to the operation. I encouraged him in the undertaking, and we hastened to our patient with the pleasing hope of relieving her. When we arrived at Mrs. *Souchot's*, I made my remarks on her deformity, and was much encouraged by her seeming resolution. As her pains were neither strong nor quick, I asked several questions, in order to discover the bad formation of her body, and she gave this history of herself, *viz.* "She was thirty-eight years of age, born of healthy parents; her father, a music-master, was sixty-four years old; her mother thirty-eight when she was born. It was her misfortune to be placed

placed under the care of a bad nurse, where she had the small-pox at eight months; at the twentieth month her dentition was attended with violent purging and convulsions; her limbs became distorted, so that she could not walk till she was eight years old, nor even then without crutches, which she was obliged to use until the period of her menses. She was married in her twenty-ninth year, and had had four painful labours. Mr. *Sigault*, Sir, (added she) has always attended me, but I now commit myself to your united care."

I declared to her how deeply I felt for her situation, and next endeavoured to procure a just knowledge of the position of the foetus, and the dimensions of the *pelvis*. I observed that the child presented by its feet, that the orifice of the *uterus* was very much dilated, and that the diameter, from the anterior to the posterior part of the *pelvis*, did not exceed two inches and a half. I
told

told Mr. *Sigault*, that as the diameter of a child's head at its birth is usually at least three inches and a quarter, it would be impossible for it to be delivered at an aperture of only two inches and a half; that consequently she must submit to the *Cæsarian* operation, or that which we intended to substitute for it, to which last she consented.

Every thing being got ready, we folded the mattrafs three times, and placed her on it. We began by feeling for the middle part of the cartilage of the symphyfes, which we readily discovered by the finger. I advised Mr. *Sigault* to begin the section of the superior part of the symphyfes, but not above the pyramidal muscles, and to do it by two incisions. First, to divide the integuments as far as the middle of the *pubes*, while I held the lower part downwards, and then to begin the section of the cartilage. Secondly, to finish the incision of the integuments, without any fear of hæmorrhage

hæmorrhage obstructing him in the section of the cartilage. Mr. *Sigault* had nothing but a common bistory to perform this operation with. The thighs being opened and raised, he performed it in the manner mentioned. The moment the separation was completed, the *pubes* parted, as if the string of a bow had been divided, and receded to each side under the integuments. I immediately began to extract the child after Mr. *Sigault* had broke the membrane, and brought the feet as far as the os externum. I first made myself sure of the extent of the separation which we had gained by the section, in order to judge of a proper method to extract the head. I laid my four knuckles in the space procured by the section, which measured *two inches and a half*, an extent somewhat more than that which I had gained upon the body of Mrs. *Brasseur*, which gave me pleasure. The child's heels were turned to
the

the right side, and I extracted the body by gentle efforts, which I directed towards the lateral parts entirely, and not to the spine. I disengaged the left arm, and then the right, the head being still above the brim of the *pelvis*, I applied my hand to the face, which corresponded with the symphyse of the left ilium; I opened her thighs as far as I could, and fixed the largest portion of the right parietal in the separation. The integuments projected; I made the left parietal answer to the right lateral side of the hollow of the sacrum; afterwards, upon raising the body of the child, I drew out the left lateral side of the head, while at the same time, with the right hand applied to the nasal fossa, I brought the chin downwards. By these united efforts I overcame the greatest resistance at the brim of the *pelvis*. When it had now gained the hollow of the sacrum, I brought the occiput between the separation, and disengaged the chin at the inferior part of the os externum,

num, by raising the child's body; the rest of the body followed presently, and the patient was delivered, to her great joy, of a living son. The thighs being lowered, the separation appeared not to exceed eight lines. I immediately extracted the placenta, because the *uterus* began to contract itself exceedingly.

During this operation, which was neither very painful nor tedious, the woman lost very little blood, and the husband being called in, could scarce give credit to so fortunate and speedy a delivery. We applied some lint to the wound, and removed the patient on the mattrass, in order to make her bed. Upon the least opening of her thighs she felt very acute pains in the left posterior side of the loins and *pelvis*. We applied a napkin, by way of bandage, to keep the *pelvis* in a just position, to which we fastened two ribbands behind, one on the right, the other on the left, and brought them under the thighs, in order to tie them
before.

before. When put to bed, we found her pulse was not affected, and enraptured at becoming a mother, she requested us to give her the child, in order to suckle it.

We staid with her above two hours, and finding no appearance of danger, we parted, promising to meet again at Twelve o'clock.

Thus ended an operation heretofore unattempted, and at all times condemned and opposed. The care and management of the wound next became the object of our attention, which I considered of a very important nature, as I might meet with unforeseen difficulties, a detail of which shall make the conclusion of this part of my narrative.

At the appointed hour we took off part of the dressing; finding, with pleasure, that there had been no hæmorrhage, as the bed appeared very wet, I asked her if she had felt any discharge of urine, or if it had passed involuntarily? She replied, that she had made water twice voluntarily,
but

but in small quantities. We agreed to make a report to the medical faculty of what had passed, to request they would interest themselves in this operation, by sending commissioners to ascertain the fact, and attend to the treatment of the case. It was their monthly meeting that evening, and being arrived before Mr. *Sigault*, I made this operation the subject of my discourse among the members, explaining to them the particulars of our proceedings. The faculty, at my request, appointed Messrs. *Grandelas* and *Descemet*, two of their members, and gentlemen much respected for their skill and experience. Mr. *Sigault* now arrived, and read a paper to the assembly, exactly to the same purport as what I had mentioned.

We afterwards went to see our patient, and found she had no fever, but only some pains in the left sacro iliac region, and contiguous parts. She requested us to

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slacken

slacken the bandage a little, which we did.

The next morning, being the third day from her delivery, the commissioners paid Mrs. *Souchot* a second visit, when she had no fever, although she had been disturbed all night by the child. Mr. *Sigault* being indisposed, the treatment of the case was left to me. I took off the dressing, which gave the commissioners an opportunity of seeing the reality of the section. The *separation* now appearing to be about six lines, I observed to them, that by taking off the bandage it became larger, and still more so upon opening the thighs, and that the patient then felt very acute pains in the loins, in the left sacro iliac region, and in the cotyloid cavity of the same side. The bed was quite wet with urine, which she had voided only once, and that in a small quantity. She was removed to another bed, in order to be dry, which gave her great pain. As this

was

was the case from the slightest motion, several applications were proposed, and we fixed upon the following, *viz.* the white of an egg beat up with brandy. I feared lest some of the lymphatic vessels had been injured, and considering the parts upon which we had operated were somewhat of the same nature with the joints, I deemed this application a very proper one. A strict diet was ordered. Towards night the patient complained of great pain near the nipples, but she had no fever.

On the fourth day we were indiscreet enough to say in her hearing, that the reunion took place in the animal under the care of Mr. *Camper*, without the help of a bandage. She therefore desired to have her's taken off. She would hearken to no reason, and in spite of us we were obliged to remove it. As she seldom gave the child the breast, and could not suckle with the left, but with greater pain than the

right, we used a glass pipe to draw off the milk. She had a slight degree of fever this evening.

On the fifth morning she had a little fever, which might be the more on account of her uneasy and disagreeable situation in bed, being unable to be moved, much restrained in diet, and also particularly desired to lay on her side.

On the sixth she had yet no stool. I now thought it proper to procure one, and ordered a clyster, which did not bring away any fœces. The union became now very visible in the symphyfes; the wound was very small, owing to the approximation of the integuments. It was proposed to change the dressings, and apply a small pledget of the balsam of arcæus. She now felt but little pain, the discharge was small, and every thing promised a speedy cure; but after our departure, she eat something, and in too great a quantity;

tity ; for Mr. *Desessartz*, dean of the faculty, who called to see her an hour after the dressing, found her shivering, and her pulse altered, together with difficulty of breathing. At our evening visit we found that all those accidents had disappeared. But a second excess in the article of eating, joined to some domestic troubles, during that night, brought on bad symptoms again.

On the seventh many physicians and surgeons who visited with us, were witnesses of her having much fever, attended with languor. She had also at this time a considerable discharge of lochia, with acute pains, and the pledget of the bals. arcæus was covered with a black discharge when taken off ; wherefore we had recourse to a defensive compound of aromatic brandy, called red water, mixed with the white of an egg. By observing a strict diet she found herself better, and at night we were

informed she had a copious stool, and made water twice in the afternoon.

On the eighth, considering the discharges, which this day had been profuse, I asked her if while she suckled there was not visibly a greater quantity? She replied in the affirmative; and to make myself sure of it, I applied my hand to the os externum while she suckled, and felt a considerable quantity come from her. We therefore advised the application of a bandage. During that day she made water twice, and had two large bilious stools. Many of our associates attended the dressing of the patient every day; among others Messieurs *L'Surier*, *Vicq*, and *Champsereu*. Mr. *Destremeaux*, son in law to Mr. *Levret*, came with them, and seemed to interest himself much in the success of the operation. He advised us to take care that the patient committed no excess through the advice of those

those about her; and told us, in presence of Mr. *Vicq* and many others, that Mr. *Levret* had computed the diameter of her *pelvis*, from the anterior to the posterior part, to be about two inches and a half.

I shewed Mr. *Pelletan*, in presence of the commissioners, the pledget, covered with the suppuration produced by the wound. My intention was to prove that the discharge did not, as he had given out, proceed from a suppuration of the cellular membrane.

Mr. *Goubelly* assisted this day at the dressing. He looked at the child, which did not thrive, on account of the irregularity with which he had been suckled. I perceived he was measuring the circumference of the child's head. In the evening I found the patient had passed the day very well; she was asleep when I arrived, and I would not suffer her to be waked.

On the tenth she had symptoms of general weakness, and her spirits were low; the discharge had been, and continued very copious: She wept and told me, with much uneasiness, that she saw many strangers attend at the dressings; her pulse, which was very irregular when I came in, became very quick, which convinced me that her spirits were hurried. I endeavoured to console her, and gave her some hopes of getting her distresses alleviated, which hopes were not frustrated. I discovered at night that she had eat, during the day, a great deal of meat, and drank a few glasses of wine; hence her pulse was feverish and quick, her skin dry, and she had no discharge.

On the eleventh the wound had a good aspect, but the evacuations had been so great, that they had penetrated through the bed, and were received into a basin, which had been indiscreetly emptied before we arrived. In order to obviate this inconvenience, the
bed

bed was covered with a great deal of tow, and orders were given to change frequently that which was near the wound. I went to Mr. *Desessartz*, dean of our faculty, in order to acquaint him with my uneasiness upon this occasion. I begged his advice and assistance in remedying this alarming case. He was quite of my opinion, that to stop this discharge, it was first necessary to determine its nature, which could not be done better than by analysing it.

The child became very weak, from a want of proper treatment. Mr. *Sigault* ordered a panado instead of milk, which the mother could not supply it with in sufficient quantity, or regularly.

On the twelfth I was sorry to hear that Mr. *Sigault* could not attend, on account of a fit of illness. The whole weight of the cure fell upon me, and only contributed to
redouble

redouble my zeal. The discharge and pains were now somewhat abated, and I thought the wound, which had a spongy aspect, and, instead of joining, formed a hare lip, would do better with a few drops of the balsam of *red fioraventi*, in order to stimulate the edges of it. I observed that the extremities of the divided *pubes* were swelled, that the left was more so, and projected beyond the right. Mr. *Default*, a celebrated professor of anatomy, who happened to assist at the dressing to-day, told me he had performed a succession of experiments relative to this operation; that after cutting the *pubes* of several dogs, he had only gained a very trifling separation, but that the reunion of the parts was always effected, though with some difference, which depended on the manner of performing the section; so that if he had made his incision and wounded the bone on either side, a shooting

shooting of callus was produced on that part; but when the incision touched the cartilage only, it united without shooting out; that he saw no discharge in his experimental operations, like that attending this of Mrs. *Souchot*. He informed me that the particulars of these cases, which seemed to be of a very interesting nature, had been treated of in a Thesis, which one of his pupils, a Dutchman, had maintained in a foreign university.

I could wish here to testify to this skilful professor, how much I was pleased with his readiness to concur in so important an operation.

On the thirteenth the child had sucked but seldom, nevertheless, the mother's breasts were flacid, the milk appeared curdled, and the discharges were very great. It appeared to me, that the chief portion of the ferous humour, tended towards the inferior parts
of

of the mother, whereupon I proposed taking the child from her, and ordered her the bark, with laxatives. Several of the faculty who were present, were not of this opinion; they thought proper to administer a clyster of emollient herbs, which produced, during the course of the day, two very copious stools, full of yellow matter.

On the fourteenth she had so much relief from these evacuations, that she turned several times in her bed; the symphysis was so sensibly closed, that I thought it really united. The patient removed herself from one bed to another, supporting herself on her elbows and heels.

From the fifteenth to the nineteenth the patient grew daily better, the discharge lessened, her pains sometimes quite left her, or were at least very slight. We now no longer applied to the wound any thing but
dry

dry lint and sticking plaster. She now made great quantities of urine. I every day blamed her for irregularity in diet, and observed that her child was very ill, and in great danger, if it had not a wet nurse immediately.

On the nineteenth her pains returned, with a great discharge. I again enjoined a strict diet, and advised the application of a bottle of hot water to the sacrum, which during that night was productive of great ease.

On the twentieth, all complaints being abated, I requested her still to be careful in her diet, but at night, the discharge being suppressed, and the pulse feverish, made me suspect she had not obeyed my orders. She repeatedly declared how hungry she was, when I told her, that if in her present situation she would be so rash as to eat supper, it would be of dangerous consequence to her; but I no sooner left her than, in spite of my advice, she eat two fresh eggs, and

and drank a great deal of wine and water.

On the twenty-first the indigestion, occasioned by her imprudence, was attended with such bad effects, I thought she would have died. She now had fever with pains, and a discharge so copious, that we were obliged to put a basin under the bed to receive it. This was the first time I had the opportunity of collecting enough of this discharge to try experiments upon.

I applied to Mr. *Buquet*, our fellow member, a gentleman very well skilled in chemistry and physic, and extremely zealous for the improvement of these sciences. Although he was ill, he took all possible pains to determine the nature of this discharge, and favoured me with the following analysis of it.

This humour was somewhat putrified and coloured, because it passed through the matras, which for some days had been imbued by it. It had a smell very unlike
that

that of urine. It could not be coagulated either by fire or spirits of wine, nor even by the mineral acids, which raised a quick effervescence with it. By means of vitriolic acid a slight urinary precipitate was obtained, and by evaporation a little brownish sediment almost dissoluble in *spt. vin.* This dried sediment had plainly the taste of sea salt, and the vitriolic acid, when poured on it, raised a quantity of vapour of spirit of salt. By these experiments it appeared, that this matter was nothing more than urine, with some degree of crudity.

On the twenty-second the discharge continued very copious, the patient became weak, and seemed to have caught cold.

On the twenty-third the urine, which had been for two days past suppressed, no doubt from the copious discharges, returned, and the fever abated. For two days past the child, owing to the extreme weakness of the mother, had not had the breast, but was now

put

put to it again. I heard, with much uneasiness, that people attributed the dangerous situation of this poor woman to me; whereupon I publicly declared my opinion concerning the necessity of getting a wet nurse for the child, and prescribing purgatives, laxatives, clysters, and the bark for the mother.

Strict diet, which the patient observed for two days, abated her complaint, and on the twenty-fourth she had four bilious evacuations, procured by two clysters.

On the twenty-fifth she was so much better, that we had hopes of her soon getting well.

On the twenty-sixth family troubles renewed the old complaints; she seemed to have got a fresh cold, but I judged otherwise of it, and thought that she was only in a state of cacochymy from weakness. Her extremities were cold, and she frequently
had

had a difficulty of breathing, which terminated with a shivering fit. Her belly was soft, but swelled. Her drink was ptisan, made with barley, raisins, and dates. In the evening she had fever; the discharges were stopped, and did not return till about Three o'clock in the morning, when the fever began to abate.

At this time, the 27th, being certain the *pubes* was united, I was desirous to examine what state the parts were in. I perceived that the incision had been made more on the left than right side of the symphyse, and that the left crus of the clytoris, and the meatus urinarius had been divided. Upon pressure she made water freely, from which I imagined the extremity of the duct only had been cut, without any injury to the neck of the bladder.

On the twenty-eighth the discharges decreased, as well as her cough and pains. In

my way home I met two of my colleagues, Messrs. *Nolan* and *Montabour*, who were going to see her. When I returned with them, we were surpris'd to find her eating endive, although I had recommended abstinence.

On the twenty-ninth I desired she might take eighteen grains of salt of bark,* at three doses, and a clyster, made with milk, and brown sugar; in consequence of which she had several copious evacuations; her pains left her, and the discharges abated.

This treatment being repeatedly used, the patient's health was visibly established, but there was another difficulty to overcome, *viz.* to take the child from the mother.

On the thirty-fourth the milky abscess broke, and from that time the patient recovered her strength and spirits.

The

* Salt of Bark is an opening Preparation of Bark.—Vide Lemery, page 627. Paris, 1756.

The thirty-fifth we gave her two ounces of manna in a decoction of fumitory, which made her vomit a great quantity of very yellow bile, and procured her four copious stools.

At length, on the thirty-ninth, our patient consented to put the child to nurse. It recovered, and she got strength daily, so much, that she was impatient to get up, which we thought imprudent, till she had a proper bandage made and applied. We accordingly had one made by Mr. *Trenel*, a surgeon, and very skilful in that art.

Mr. *Sigault* was still confined at home by a very severe fit of illness. We agreed not to let our patient get up before he saw her, therefore waited till he could come, which was on the forty-sixth day from the operation, when Mr. *Trenel* presented us with a bandage, which perfectly answered our

intention. It embraced the sacrum, and was brought round to be fastened before. As soon as it was applied she walked across the room without feeling any pain or motion in the place of the operation. From that time she continued to get up every day, and to gain strength. Being impatient under every kind of restraint, she pretended the bandage hurt her, in hopes we might give her leave to throw it off.

On the sixtieth day from the operation, she walked down stairs, in order to go into a coach to the College of Physicians, and return thanks for favours received from the greatest part of that respectable body.

* “ She ascended the stairs, and entered the assembly-room, leaning on her husband’s arm ; being left to herself, she stood firmly for several minutes : The Dean ordering her to sit down, asked if she enjoyed
good

* Quotation from the Register of the Faculty.

good health? if she had a good appetite, and digested well? if she slept well and undisturbed? if she felt any pain in the parts where the operation had been performed? if she had, like other women, the power of retaining her urine, so as to make water at her own will? To each of these questions she replied, with an audible voice, that she had a very good appetite and digestion, and performed all her functions freely and regularly; that her sleep was sound, and that she gradually gained strength. She perceived that she walked up and down stairs every day with greater ease; she felt no pain or uneasiness in the parts operated upon; retained her urine while she sat down, unless it happened there was a great quantity to come away, and that it never came from her drop by drop, involuntarily or insensibly, excepting when she walked or stood, and this involuntary dis-

charge was less frequent every day. She felt a violent pain along her left thigh, but acknowledged she had been afflicted with this pain from her first lying-in. She added, that she had suckled her child during the first month, but that Messrs, *Sigault, Le Roye*, and the commissioners from the faculty, had ordered her to leave it off. The nurse was present with the child, and shewed it to all the gentlemen. It was in good health."

Although this case was thus made public by the faculty, some opponents to the operation gave out, that she was disabled from walking, but she daily confuted their aspersions.

P A R T III.

WHEN the section was performed on Mrs. *Souchot*, it became a subject of general consideration, and met with very unfair opposition. To rational experiments, they compared others made under different circumstances, which consequently could not have the same result.

I made no other answer to their unjust contradictions, than that “the child lives.” But some people, more reasonable, asked me, how there happened to be such contrary effects? “Because, said I, in order to obtain a separation of two inches and a half, ’tis necessary the subject should be pregnant, and far advanced; there must be a natural heat, and the thighs must be opened and raised.”

By

By and by a proper subject for the operation was met with, and they eagerly seized the opportunity. A young woman died in labour. Great numbers assembled on this occasion in the Theatre of a professor of midwifery. The section was performed within eight hours of her death, in the manner before described, and they gained a separation *beyond* what I had advanced ; but they considered this as an objection to the operation, because, the *internal posterior ligaments were lacerated by it*. However, it was allowed, that the separation I mentioned could be gained.

Others then said, that the operation was not necessary, for the child could have been brought into the world alive by the feet.

If her third child, in the eighth month, could not pass the brim of the *pelvis* alive, how could they expect that her last, which came at its full time, should pass it without dying ? But upon an examination of the respective dimensions, I shall demonstrate

strate the impossibility of this child passing through the *pelvis*, unless the head was somewhat diminished, or the diameter of the *pelvis* increased by this operation.

Mrs. *Souchot's pelvis* does not exceed above two inches and a half, from the back to the fore part of the brim, which was demonstrable by the finger in this manner. Having introduced the fore finger through the vagina, it touched the tuberosity of the sacrum. Now upon measuring the length of it, from the end which touched the sacrum, to the part answering the symphyfes of the *pubes*, I found it measured two inches and a half. This was easily done then, because the distended uterus kept up the vagina, which at another time would have been difficult, on account of her *prolapsus vaginae*. The moment the child was born, I measured the transverse diameter of its head from one parietal prominence to the other, and found it amounted to three inches and a half.

Why,

Why, said they, should we have recourse to this operation, when by grasping the child's head with the forceps, it might have been lengthened, and its transverse diameter reduced so as to make it clear the *pelvis*, and that without endangering the life of the mother or child? Here Mr. *Cotouli's* success with that instrument was highly commended.

If such means were the only ones to deliver the woman with ease, and save the child, why was it not used in the four preceding labours? Why did the critic, who is so well skilled in this art, neglect such salutary means, and give up a child which he could have saved? If the use of the forceps was so properly pointed out, why did not Mr. *Levret*, who is said to have restored its use, and made it so general, use it in the fourth labour?

In two forceps cases where I was called in consultation, the one 1775, and the other

other on the 15th Jan. 1778, in which case, Mr. *Lheriter* was concerned, both mothers and children died under circumstances much more favourable than in the case of Mrs. *Souchot*, consequently no other means were left to preserve them both but the Cæsarian operation, or the section of the *pubes*. By the first the mother most commonly loses her life, and in the latter there is no reason for such apprehensions.

The manner in which the head makes its way into the world, by the advantage of two inches and a half separation of the *pubes*, may be understood by the account of Mrs. *Souchot*'s delivery.

The disproportion of the head to the *pelvis* is obviated by the section, not only by the separation of the *pubes*, but by their diverging forwards.

When the diameter of the brim of the
pelvis

pelvis, from the sacrum to the *pubes*, measures two inches and a half, which was the case with Mrs. *Souchot*, the section of the *pubes* is the only expedient to save the mother and child. When three inches, this operation is indicated, and the separation should be directed according to the size of the head.

Mr. *Pean*, accoucheur to the Queen of Naples, relates a case of the difficult kind which proved fatal to the mother. The Cæsarian operation was performed after her death. Mr. *Pean* got the *Pelvis*, which afterwards was given me by his son.

In the three cases before mentioned, the mother could have been saved according to the practice of the ancients, which some moderns deem barbarity; but our operation would have saved both mother and child.

In cases where the brim of the *pelvis* measures three inches and a half, I believe that if the head be very large, the section of the *pubes* will be necessary; but the forceps should previously be tried, which in such cases may sometimes reduce the disproportion; if it cannot, the section should be immediately performed; but the separation of one inch in this case may be sufficient.

From hence we may conclude, that from three inches and a quarter to two inches and a half, and even, I think, two inches, the section is indicated.

Finally, my opponents endeavoured to reject this operation, on account of the accidents consequent to it. The separation of two inches and a half, said they, causes a laceration of the internal and posterior ligaments of the *pelvis*, for the operation being performed on a dead body, two inches of the inferior part of the ligaments were lacerated

lacerated by it. They therefore concluded that the operation ought to be rejected. If experiments were made upon the dead body twenty-four hours after death, ought we to conclude the result will be the same upon the living? Do we not see that dislocations in the living body do not produce the laceration of the ligaments, but will cause them after death: we have instances of it in the dislocation of the thigh and shoulder. They asserted that this laceration had produced a general suppuration in the cavity of the *pelvis*: I can maintain that there was no other suppuration than in consequence of the division of the integument, and that in a very small quantity.

The method which I advised of keeping the thighs asunder during the operation, is hurtful, and I now condemn it; because it makes the *pubes* diverge too suddenly, and strains the posterior ligaments.

The

The separation seemed to prevail most on the left side, and from experiments it seems to be so disposed naturally; and indeed when I introduced my hand to the face on that side, I evidently increased the separation. We may infer from hence, that the left sacro-iliac might have been irritated and bruised, which would have increased her pain; besides, from the coldness of the season, and other unavoidable circumstances, must naturally have contributed to make her worse. We may add too, that the defluxion on those parts was greater, on account of her general weakness.

Evacuations, whether produced by art or nature, relieved her: I therefore wished to give her laxatives joined with tonic medicines.

Having examined the patient and asked her many questions, one day, her sister followed me out of the room and said, " Sir, I am not surprized at these discharges

charges ; my sister, from her infancy, till she came to the age of puberty, has been afflicted with incontinence of urine, which returned after the accidents at her third lying-in. I assure you, that in her fourth pregnancy, when she removed to my house, she always had very copious and involuntary discharges of urine, whenever she was uneasy in her mind ; therefore I am not at all alarmed at her being so now." After the information, and further reflection, I thought it more natural to suppose it owing to a relaxation of the muscles which contract the neck of the bladder, as I know the constrictor muscles, which are called sphincters, have not always the same power of acting. In this case various causes tended to produce the relaxation.

Having proved the utility of the section of the symphysis of the *pubes*, and determined the cases in which it becomes necessary

cessary, let us now point out the manner of performing it.

The instrument used on this occasion, is a common dissecting knife with a convex edge, a little blunt in the point lest it should injure the bladder, and rather thin, because it cuts the better. The proper situation for performing this operation, is to place the woman on her back at a height convenient to the accoucheur; the thighs being somewhat opened and the *mons veneris* shaved, introduce a catheter into the bladder. The inferior part of the integument must be drawn down, and the incision begun about two or three lines above the *pubes*, and no higher.

This first incision must not be carried further than the middle of the symphyse. Another method may be used, viz. Take the integuments between the fingers on each side the symphyse, and make the incision in the middle. This way

would be easier for the surgeon, and less painful for the patient ; but the tension of the integuments makes it difficult. From this first incision you will have but little hæmorrhage, and the cartilage will be exposed to sight, so that you may chuse exactly where to proceed with the incision. By cutting in the middle of it, the suspensory ligament of the bladder will be divided, and in procuring the necessary separation it will be lacerated, which may occasion an incontinence of urine. There are cases in which this complaint can be attributed to no other cause than the laceration or relaxation of the ligament of that viscus ; it will therefore be right to avoid cutting in the middle of the cartilage. There are several advantages from cutting on either side : part of the suspensory ligament of the bladder will be preserved, and it is likely by so doing, that the bone on that side will be touched ; the shooting out from it will procure

procure a speedy agglutination and re-union. In the case of Mrs. *Souchot*, the incision having touched the *pubes* on the left side, that bone is thicker, and has shot out over the other side.

Mr. *Dessault* observed the same appearances in animals on which he had made his experiments. The left *pubes* appearing after the section to recede more than the right, there will be a greater opening on that side ; besides, the neck of the bladder being rather more inclined to the right, and the fundus being so always, all these reasons ought to determine us rather to chuse the left side.

The integuments being cut as far as the middle of the *pubes*, the superior part of the cartilage will be exposed, you must then begin the incision, and continue it as far as the symphyse, taking care to direct the catheter to the side opposite that on which the operation is performed ; then

finish the section of the integuments, and afterwards that of the cartilage. I have already pointed out the reason for performing the operation at twice. As you are in most danger of wounding the bladder in dividing the upper part of the cartilage, it is very important not to be obstructed by any hæmorrhage. This method, on account of its facility and readiness, together with its success, seems hitherto to be the best.

The moment the symphysis is divided, the *pubes* recedes, and this the more, according as the thighs are kept opened. If the separation is very sudden and considerable, as the posterior articulations act in the nature of hinges, the interior ligaments which cover them will be distended too suddenly, which may be of bad consequence; it is therefore adviseable to keep the thighs moderately opened during the operation, and afterwards upon raising them, to widen them gradually, until you have

have

have obtained the separation necessary to finish the delivery.

With regard to the delivery, if the child presents by the head, is it to be left to the expulsive power of the uterus, or are the forceps to be used? or is the child to be turned and brought by the feet? Mr. *Sigault* advises to leave it to the expulsive power of the uterus: I hope the following reasons will induce us to adopt a different practice. After the section there is an arterial hæmorrhage, but however trifling it may be, we ought not to disregard it. If after the operation we leave delivery entirely to nature, it would probably occasion pains in the posterior articulations, irritate and inflame the surrounding parts. Hence we ought not to leave the expulsion of the child to nature. Are we to use the forceps? In as much as they may be supposed to diminish the size of the head, they appear to be of some use;

but their pressure is often of fatal consequences.

Why should we then have recourse to a method which endangers the child's life, when the section has been undertaken merely to preserve it? The only way is to turn the child, an operation which I have performed with great success. After which the thighs are to be lowered, and placed near one another. The integuments, which were greatly distended during pregnancy, now will subside so as to cover the symphyfes. A bladder must be fitted to the end of the catheter, in order that the patient may not be obliged to stir when she wants to make water, and also in case the bladder has been injured, that the wounded part may heal without any inconvenience from urine. As to the wound, nothing more is necessary than dry lint, moistened with brandy beat up with the white of an egg, and discutient embrocations upon the
posterior

posterior articulations of the *pelvis*. A bandage must be applied, to keep the divided parts in contact; to which there must be two tapes fastened, to be conveyed between the legs and tied before. The mother ought to suckle for eight or nine days, in order to prevent bad consequences from the milk; laxatives with tonics may then be directed according to circumstances. Great care should be taken to keep the parts in a state of rest as much as possible, in order to favour a speedy re-union. We have all the reason imaginable to hope that by following the above rules, this operation would be attended with a more expeditious cure than in the case of Mrs. *Souchot*, and without the least alarming symptoms.

At an advanced age, they say, it is to be feared no softness will ever take place in the articulations of the *pelvis*. This objection will be removed, if they remember

what I have before said of the solution of the earthly matter during pregnancy, let the age be what it may. I shall now add some reflections on the process by which this afflux of fluids swells and softens the articulation. To give some idea of it, the following experiments are offered :

Wedges of porous wood, when driven forcibly into clefts made on the circumference of a rock, swell to such a degree, by means of the moisture they imbibe, as to break off huge pieces of it, to the astonishment of every one. The animal œconomy offers daily examples of this swelling of the articulations. We are taller in the morning when we get up, than in the evening, because the weight of the body all day compresses the cartilages lying between the vertebræ ; and during the night those parts, being free from pressure, swell by the afflux of fluids.

But these examples do not give a just
idea

idea of what happens, during pregnancy, to the cartilages in the articulations of the *pelvis*, which are swelled from another cause, called the vegetative principle, whose surprising power is beyond conception. The polypus of the nose, which is a soft and pulpy substance, by its gradual increase warps the bones of the palate. Who can calculate the power of a tender plant, which, to make its way out of the ground, will remove a weighty stone? Can we say by what means the fluids swell and expand the uterus after conception? It is then the principle of vegetation, and in the human system, that of life itself which is the cause of such admirable effects. The rigidity produced by age or constitution, can scarce ever be so great as to counteract its wonderful effect.

Another instance of the success of this operation will, I hope, give conviction, and firmly establish the great utility of this discovery.

Mr.

Mr. *Despres*, surgeon and accoucheur of *St. Paul de Leon*, in *Brittany*, was sent for, in *February* last, to the assistance of *Anne Berou*, a soldier's wife, who had been above two days, under the care of a midwife, in the strongest labour pains. Mr. *Despres* judged she could not be delivered of a living child, without the *Cæsarian* operation, or the section of the symphysis. Encouraged by the success we had met with, which was published in all the journals, he performed the latter, and by that means, in a short time, and without giving the mother much pain, he delivered her of a male child. Mr. *Despres* sent an account of the case to the dean of our faculty, to be communicated by him at their first meeting, which was done on the first of *April* 1778.

The operation was performed and attended with all possible success.

The remaining point to be discussed, is whether it may be often repeated upon the same subject. We must have a succession
of

of observations and facts to prove this. My design is to make experiments upon animals, and if, after a variety of trials, I find I may justly recommend it, I shall think it my duty to publish my observations; for the present it seems to me, that from inferences made upon certain and well known facts, we may affirm, that there is no reason against a repetition of it.

The most probable are concretions in the posterior articulations, which would prevent their mobility. I have endeavoured to find out the state of these parts in Mrs. *Souchot*, since the operation, and could not remark any sensible alteration by it; for though the symphysis of the *pubes* was thickened, there remained still a line between the two bones, which would admit of an incision. There is reason to believe that the reunion of the parts is brought about by a substance of the nature of a ligament, rather than by a callus. This is proved by
the

the experiments made by Mr. *Default*. But even supposing a concretion, may it not grow soft in a second pregnancy? Every circumstance seems then to make us presume, that upon a repetition of the section of the symphysis, the same separation may be obtained as in the first.

I shall here take the liberty of returning my thanks, in this public manner, to the Parisian Faculty, of which I have the honour to be a member. This respectable body first encouraged me in the prosecution of my experiments. Their approbation alone was a sufficient reward for the disagreeable opposition I met with since the success of this operation had been made public.

In this publication, my ideas are particularly presented to the promoters of useful discoveries, and I shall be happy to acknowledge at any time the favour of their advice. Every objection made with an in-

tent

tent to improve the art and bring it to perfection, will be very interesting to me, and I shall think it my duty to resolve it, if in my power. Opposition in sentiment, by investigating the subject, is often productive of truth: I am also sensible, with what weapons a generous opponent ought to engage; and I shall always reckon him an object unworthy of my attention, who has recourse to any other arguments than those of probity conducted by decency.

SINCE the conclusion of this TREATISE, Mr. *Cambon*, a very able surgeon at *Mons*, has sent us an account of a case, in which he performed the section of the symphysis of the *pubes* with good success upon a deformed woman; a detail of which he intends to give the PUBLIC.

A Decree

A Decree granted by the Faculty of Physic at Paris, with regard to the Case of Mrs. Souchot, under the Care of Mr. Sigault and Mr. Alphonse le Roy, the 6th of December, 1777.

THE members of this respectable body, whose utmost wishes and endeavours are exerted to promote science, and who have always given the greatest encouragement to ingenious men for useful essays or discoveries, have unanimously resolved :

1st. That an accurate account of all that occurred at their two last meetings of the first of October, and third of December, with regard to Mrs. *Souchot's* case, be printed in Latin and French. That the memoir read by Mr. *Sigault*, concerning the section of the spmphyfis of the *pubes*, performed on her by that gentleman,

gentleman, be also printed, together with the reports and opinions of the commissioners on this operation, respecting its consequence and cure; and that these shall be speedily printed and distributed, not only to the faculty themselves, but to the medical world; particularly to be presented, with submission, to our beneficent King, to the Princes, Ministers, and Magistrates, in order that this new discovery of preserving both mother and child, may be universally made known.

2d. That Messrs. *Sigault* and *Alphonse Le Roy*, to whom the faculty and the public were already indebted, be intreated to use their utmost endeavours in the prosecution of their good undertaking, and to communicate and submit their observations on this operation to the examination of the faculty, their views to perfect it, and their opinion of the state of the mother and child, which
renders

renders it necessary. Also that all the learned be requested to communicate what they know, either from experiment or otherwise, concerning it.

3d. That they could not help admiring and applauding the spirit and fortitude of Mrs. *Souchot*; were very sorry it was not in their power to allow her and her child a pension, but that the dean of the faculty should be directed to give her relief under her present indigence: Furthermore, they would humbly present a petition to their beneficent Sovereign, and solicit the public in general for her future relief, as a reward for her resolution, in submitting to an operation heretofore unknown, which may be the means to encourage others in her unhappy situation, to undergo the same, and thereby save their own lives, and those of their infants.

4th. That

4th. That the obligation they were under to Mr. *Sigault*, who invented and performed this operation, was the greater, on account of the singular service he has rendered society, and also for the expence he has generously been at on this occasion ; that as it is not in their power to confer a reward on him adequate to his merit, it was their desire he should hold a distinguished rank among them ; and that the present and future age may know how worthy he is, they have ordered that his name shall be engraved on a medal as follows :

“ In the year 1768, Mr. *Sigault*, D. M. P. invented and proposed the section of the symphysis of the *pubes* ; and in the year 1777, performed it with success.”

They have ordered also that a hundred of these should be presented to him.

And Mr. *Sigault* having publicly testified, that Mr. *Alphonse Le Roy*, one of the mem-

bers of our college, by his exhortations and experiments, had encouraged him to undertake this operation, and assisted him in completing the delivery and curing the wound, the faculty agreed, that the inscription should conclude in these words :

“ Mr. *Alphonse Le Roy*, D. M. P. assisted him,” therefore they resolved that he should be presented with fifty of these medals.

Such was the conclusion of the decree.

S. C. DESESSARTZ,
Dean of the Faculty.

To which two gentlemen, seniors of each order, have signed their respective names.

Messrs. H A Z O N,
C O C H U,
D U H A U M E,
L E Z U R I E R.

T H E E N D.

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Cancer, Abortion, and Barrenness.

Diseases of the Urinary Passage, and contiguous Parts, viz.
Obstruction or Incontinence of Urine, Ulceration of the Bladder,
and Piles.

Diseases of the Stomach and Bowels, bilious Disorders, nervous
and hysterical Affections, low Spirits, and Melancholy.

Of a Consumption, Dropsy, and Diseases of the Skin,
and Glands.

The Influence of the Passions on the Body and Mind, and
Effects of Weather on delicate Constitutions.

Of the salutary Power of Air, Diet, Exercise, and simple
Medicines, in the Prevention and Cure of *Chronic Diseases*.

To which are added,

PRESCRIPTIONS, or *Forms of Medicine*, adapted to each Disease.

By JOHN LEAKE, M. D.

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