

## **Registrars' report : 1942 / Liverpool Maternity Hospital.**

### **Contributors**

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OXFORD STREET

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REGISTRARS' REPORT

FOR THE YEAR ENDED DECEMBER 31ST, 1942

OBSTETRIC SECTION

PREPARED BY

MARY H. MAYEUR

M.D., F.R.C.S., M.R.C.O.G.

PAEDIATRIC SECTION

PREPARED BY

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### Glossary of Abbreviations.

A.P.H.	...	...	Ante-partum hæmorrhage.
A.R.M.	...	...	Artificial rupture of membranes.
B....	...	...	Booked.
B.B.A.	...	...	Born before admission.
C.H.	...	...	Convalescent Hospital.
C.S.	...	...	Cæsarean section.
D....	...	...	Died.
E....	...	...	Emergency.
G.A.	...	...	General anæsthetic.
L....	...	...	Lived.
L.A.	...	...	Local anæsthetic.
L.M.A.	...	...	Left mento anterior.
L.O.A.	...	...	Left occipito anterior.
L.O.T.	...	...	Left occipito transverse.
L.S.A.	...	...	Left sacro anterior.
L.U.S.	...	...	Lower uterine segment.
M.	...	...	Macerated.
M1	...	...	Multipara 1, 2, etc.
P....	...	...	Primigravida.
P.M.	...	...	Post-mortem.
P.O.P.	...	...	Persistent occipito posterior.
P.P.H.	...	...	Post-partum hæmorrhage.
R.M.A.	...	...	Right mento anterior.
R.O.A.	...	...	Right occipito anterior.
R.O.T.	...	...	Right occipito transverse.
R.S.A.	...	...	Right sacro anterior.
S.A.	...	...	Spinal anæsthetic.
SB.	...	...	Stillborn.



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## GENERAL STATEMENT

### Statistical Summary.

3,380 Patients were attended by the Hospital. 1,230 were attended in their own homes; 2,150 were admitted to the Hospital, of which 1,480 were booked, and 670 emergency cases. This Report deals in detail with In-patients treated in Hospital. A summary of cases delivered in their own homes will be found below :—

#### Booked Cases

Delivered in Hospital after 28th week ... ..	1,461
Delivered in Hospital before 28th week ... ..	7
Discharged undelivered and not readmitted ... ..	9
Died undelivered ... ..	0
Admitted after delivery ... ..	3
Discharged undelivered and readmitted for delivery ... 248	—
Total ...	<u>1,480</u>

#### Emergency Cases

Admitted before labour—	
(1) Delivered in Hospital ... ..	352
(2) Discharged undelivered and not readmitted ... ..	30
(3) Died undelivered ... ..	0
Admitted in labour—	
Delivered in Hospital ... ..	264
Admitted after delivery ... ..	15
Abortions ... ..	9
Total ...	<u>670</u>

#### Pre-Maternity Clinics

Ante-Natal Clinics in various districts of the city are administered by the Hospital in co-operation with the Maternity and Child Welfare

Sub-Committee of the Liverpool Corporation.

Number of patients who attended these Clinics... ..	3,516
Total number of attendances ... ..	16,294

The Ante-Natal Clinic of the Hospital has dealt with the following :—

New Cases ... ..	3,070
Total ante-natal attendances ... ..	16,659
Post-natal attendances ... ..	996

## DISTRICT REPORT

Of the 3,380 patients attended by the Hospital, 1,230 were attended in their own homes.

#### Mothers

Delivered at home ... ..	1,165
Transferred to Hospital before or during labour ... ..	46
Abortions ... ..	19
Total ...	<u>1,230</u>

**Babies**

Stillborn	...	...	...	...	...	...	30
Neo-natal deaths	...	...	...	...	...	...	15
Survived (13 cases of twins)	...	...	...	...	...	...	1,133

**Presentations**

B.B.A.	...	...	...	...	...	...	135
Anterior Vertex	...	...	...	...	...	...	987
Posterior Vertex	...	...	...	...	...	...	16
Breech	...	...	...	...	...	...	31
Transverse Lie	...	...	...	...	...	...	9
Total							1,178

**Complications**

Maternal Death	...	...	...	...	...	...	0
Accidental hæmorrhage	...	...	...	...	...	...	13
Placenta prævia	...	...	...	...	...	...	6
Post-partum hæmorrhage	...	...	...	...	...	...	4
Forceps	...	...	...	...	...	...	12
Perineal Tear	...	...	...	...	...	...	140
Pyrexia	...	...	...	...	...	...	32
Mastitis	...	...	...	...	...	...	19
Other causes	...	...	...	...	...	...	13

No Mother died.

45 babies died or were stillborn, a foetal mortality of 3.8%.



### ANTE-NATAL TREATMENT

269 cases, 128 booked and 141 emergency

	No. of cases	BOOKED CASES				No. of cases	EMERGENCY CASES			
		Del'd in Hosp.	Discharged Undel'd	Died Before Del'ry	Died After Del'ry		Del'd in Hosp.	Discharged Undel'd	Died Before Del'ry	Died After Del'ry
Albuminuria	87	86	1	0	0	59	49	10	0	0
Anæmia	6	6	0	0	0	16	12	4	0	0
Asthma	2	2	0	0	0	1	1	—	—	—
Cardiac	15	15	—	—	1	12	10	2	—	—
Catarrhal Jaundice	—	—	—	—	—	1	—	1	—	—
Diabetic	—	—	—	—	—	3	3	—	—	—
Epilepsy	1	1	—	—	—	—	—	—	—	—
Hydramnios	4	4	—	—	—	15	15	—	—	—
Hyperemesis	1	1	—	—	—	10	4	6	—	—
Hypertension	1	1	—	—	—	5	5	—	—	—
Pyelitis	6	6	—	—	—	8	6	2	—	—
Observation of A.P.H.	5	5	—	—	—	11	8	3	—	—
	128	127	1	0	1	141	113	28	0	0

### HEART DISEASE

26 cases, 16 booked and 10 emergency

Type	Mothers				Infants		
	P.	M.	L.	D.	L.	D.	SB.
Mitral disease	8	6	14	0	14	0	0
Mitral and aortic disease	3	4	6	1	6	1	0
Paroxysmal Tachycardia	1	0	1	0	2	0	0
Cerebral Thrombosis	1	1	2	0	2	0	0
Congenital Lesion	0	1	1	0	0	1	0
Auricular Fibrillation	1	0	1	0	1	0	0
Total	14	12	25	1	25	2	0

### METHODS OF DELIVERY

Natural forces	16
Forceps	4
Cæsarean Section	6
Total	26

One Mother died, a mortality of 3.8%.

One patient had Twins: 2 babies died—the foetal mortality being 7.4%.

Five sterilising operations were performed.



# Details of Cases

Reg. No.	Age	Grav. id.	Maturity	Type	Symptoms of failing Compensation	Days in Hosp. before delivery	Method of Delivery	Result	Remarks
<b>BOOKED CASES</b>									
7751	26	P.	36	Mitral stenosis and reflux	Breathlessness on exertion	28	Normal	M. C.	Well compensated, very few symptoms.
8975	23	P.	32	Mitral stenosis	None	14	Normal	L. L.	No cardiac symptoms, in hospital with albuminuria.
8854	22	P.	40	Mitral stenosis	Breathless on exertion, cyanosis	24	Normal	L. L.	Renal calculus.
9345	29	P.	38	Mitral stenosis and aortic reflux	Oedema, bronchitis	4	L.U.S. Casarean section	L. L.	Complicated by acute toxæmia; sterilised.
8448	24	P.	38	Mitral stenosis	None	6	Normal	L. L.	No cardiac symptoms.
8678	26	P.	40	Mitral stenosis and reflux	Mild bronchitis and dyspnoea	2	Normal	L. L.	No symptoms in bed; stood labour well.
8445	24	P.	38	Mitral stenosis and aortic lesion	Dyspnoea and oedema, cyanosis	24	L.U.S. Casarean	L. L.	Not well compensated, but improved in bed. Sterilised.
9007	29	P.	36	Mitral stenosis and reflux	Cyanosis & dyspnoea pronounced	34	L.U.S. Casarean	L. L.	Poor compensation; improved in puerperium. Sterilised.
8681	35	M5	56	Mitral stenosis	Dyspnoea	21	Normal	L. L.	A.R.M., after rest in bed.
5089	27	M3	34	Mitral stenosis and aortic reflux	Dyspnoea & bronchitis, cyanosis	60	L.U.S. Casarean	L. D.	Compensation restored by rest, then operation. Sterilised.
9087	26	M2	38	Mitral stenosis and reflux	Bronchitis	4	Normal	L. L.	A.R.M., patient found to have Gc. Warts
9016	35	M3	34	Mitral stenosis and reflux	Dyspnoea and oedema	14	Normal	L. L.	A.R.M. at 38th week; sterilisation during puerperium.
1447	28	M1	30	Mitral stenosis and aortic reflux	Complete breakdown	8	Normal	D. L.	See Maternal Death No. 1447.
5879	28	M1	36	Mitral stenosis	None at rest	14	Normal	L. L.	A.R.M. at 38th week.
8446	27	M1	36	Mitral stenosis	Dyspnoea	10	Normal	L. L.	Admitted in premature labour with acute respiratory infection. Previous C.S.
5758	24	M1	38	Mitral stenosis and aortic reflux	Bronchitis and pneumonia	3	Forceps	L. L.	Admitted in coma with right hemiplegia. Recovered completely.
8403	29	P.	30	Mitral stenosis	Cerebral thrombosis	30	Normal	L. L.	C.S. performed partly on account of age.
8521	36	P.	36	Mitral stenosis	None	6	Classical Casarean	L. L.	Collapsed during labour, but improved rapidly after delivery.
8682	23	P.	38	Mitral stenosis and aortic reflux	Dyspnoea severe and oedema	6	Forceps	L. L.	Dyspnoea rapidly became worse in 2nd stage. Twins. Transferred after delivery to Royal Infirmary.
8202	23	P.	40	Mitral stenosis	Dyspnoea and cyanosis	3	Forceps	L. L.	Auricular fibrillation 14 days, then recovered. Sterilised.
7950	38	P.	40	Paroxysmal tachycardia	Attacks of dyspnoea and faintness	21	Forceps and breech extraction	L. L.	A.R.M. at 36 weeks; sterilisation advised but refused.
9118	21	P.	40	Mitral stenosis	Auricular fibrillation	In labour	L.U.S. Casarean	L. L.	Admitted in coma with left hemiplegia. Recovered slowly with considerable residual palsy and aphasia.
9311	31	M1	34	Mitral stenosis, aortic reflux	Dyspnoea and bronchitis	9	Normal	L. L.	Accidental hæmorrhage.
7908	30	M2	40	Mitral stenosis	Cerebral thrombosis	1	Normal	L. L.	A.R.M. at 38 weeks.
3257	40	M2	39	Congenital	Cyanosis marked	14	Normal	L. D.	
6174	26	M1	37	Mitral stenosis	None	11	Normal	L. L.	



### ALBUMINURIA WITHOUT CONVULSIONS

135 cases were treated during the year ; 86 booked and 49 emergency.

SUMMARY OF RESULTS									
No. of cases				Mothers		Infants			
	P.	M.		L.	D.	L.	SB.	M.	D.
Booked ... ..	64	22		86	—	83	4	1	3
Emergency ... ..	36	13		49	—	34	8	6	0
Total ...	100	35		135	—	117	12	7	3
	135			135		139			

No Mother died.

There were 8 pairs of twins, and 4 pregnancies terminated before viability of the child. Of 139 babies 22 were lost, a foetal mortality of 15.9%.

TREATMENT						
Rest and diet ... ..	...	...	...	...	...	61
Induction—						
(a) Medicinal ... ..	...	...	...	...	...	2
(b) A.R.M. ... ..	...	...	...	...	...	53
(c) Surgical ... ..	...	...	...	...	...	8
Cæsarean Section ... ..	...	...	...	...	...	7
Induction of abortion ... ..	...	...	...	...	...	4
Total ... ..	...	...	...	...	...	135

METHOD OF DELIVERY						
Natural forces ... ..	...	...	...	...	...	56
Natural forces after induction ... ..	...	...	...	...	...	60
Forceps ... ..	...	...	...	...	...	8
Cæsarean Section ... ..	...	...	...	...	...	7
Induction of abortion ... ..	...	...	...	...	...	4
Total ... ..	...	...	...	...	...	135

## ALBUMINURIA

Reg. No.	Age	Gravida	Maturity	Relevant Past History	Albumen on admn. grms.	Albumen on disch. grms.	Oedema	Head-aches	Eye Signs	Highest B.P.	No. of days in Hospital before Delivery or Discharge	Special treatment	Type of labour	Result M. C.	Remarks
BOOKED CASES															
7834	35	P.	36	Nil	4 1/2 grs.	Tr.	++	-	-	150/100	12	A.R.M.	Normal	L. L.	Twins.
7611	31	P.	35	Nil	3 gr.	2 gr.	+	-	-	190/120	7	A.R.M.	Normal	L. D.	Died, prematurity.
7578	22	P.	36	Nil	2 gr.	3 gr.	-	-	-	160/90	21	A.R.M.	Normal	L. L.	
7838	26	P.	38	Nil	Solid	2 gr.	-	+	-	150/80	7	A.R.M.	Normal	L. L.	
7654	29	P.	36	Nil	4 gr.	2 gr.	+	-	-	150/90	7	A.R.M.	Forceps	L. L.	
7679	24	P.	36	Nil	3 gr.	Nil	++	-	-	160/90	14	A.R.M.	Normal	L. L.	
7964	18	P.	37	Nil	6 gr.	Nil	-	-	-	160/110	9	Oestrin	Normal	L. M.	Intra-uterine death.
7974	22	P.	37	Nil	2 gr.	Tr.	-	-	-	130/80	6	A.R.M.	Normal	L. L.	
7949	24	P.	38	Nil	8 gr.	2 gr.	-	-	-	180/90	3	Surgical induction	Forceps	L. L.	Vesico-vaginal fistula.
7946	29	P.	36	Nil	10 gr.	2 gr.	+	-	-	170/120	14	A.R.M.	Normal	L. L.	
8071	21	P.	37	Nil	Solid	Nil	++	+	-	168/100	2	A.R.M.	Normal	L. L.	
7948	22	P.	38	Nil	3 1/2 grs.	Tr.	-	-	-	130/100	14	A.R.M.	Normal	L. L.	
8045	23	P.	38	Nil	4 gr.	Tr.	-	-	-	130/80	4	A.R.M.	Normal	L. L.	
8035	32	P.	38	Nil	2 1/2 grs.	Nil	+	-	-	140/100	14	A.R.M.	Normal	L. L.	
8057	27	P.	36	Nil	1 1/2 grs.	Nil	+	-	-	150/90	11	A.R.M.	Normal	L. L.	
8103	23	P.	39	Nil	1 1/2 grs.	Nil	+	-	-	160/90	14	A.R.M.	Normal	L. L.	
8024	24	P.	37	Nil	1 gr.	Nil	++	+	-	140/90	5	A.R.M.	Normal	L. L.	
6499	21	P.	39	Nil	4 gr.	Nil	++	+	-	170/110	7	A.R.M.	Normal	L. L.	
8207	27	P.	32	Nil	2 gr.	Tr.	++	+	-	150/100	25	A.R.M.	Normal	L. L.	
8277	19	P.	37	Nil	2 1/2 grs.	Tr.	++	+	-	140/110	8	A.R.M.	Normal	L. L.	
7805	30	P.	30	Nil	2 gr.	1 gr.	+	-	-	150/100	48	A.R.M.	Normal	L. L.	
8329	20	P.	39	Nil	2 gr.	Nil	+	-	-	160/190	10	A.R.M.	Normal	L. L.	
8342	26	P.	37	Nil	6 gr.	Nil	+	-	-	130/90	9	A.R.M.	Normal	L. L.	
8362	24	P.	39	Nil	2 1/2 grs.	Nil	+	-	-	140/90	6	A.R.M.	Normal	L. L.	
8695	23	P.	32	Nil	2 1/2 grs.	Nil	+	+	-	180/120	14	A.R.M.	Normal	L. L.	Mitral stenosis.
9012	37	P.	34	Nil	Solid	8 gr.	+	-	-	180/110	18	A.R.M.	Normal	L. M.D.	1st twin macerated. 2nd died prematurity.
8988	24	P.	40	Nil	1 gr.	Nil	+	-	-	130/90	7	A.R.M.	Normal	L. L.	
9144	35	P.	38	Nil	1 gr.	Nil	-	-	-	140/90	10	A.R.M.	Normal	L. L.	
8131	30	P.	36	Nil	3 gr.	1 gr.	+	-	-	150/110	14	A.R.M.	Forceps	L. L.	
9032	20	P.	38	Nil	4 gr.	Tr.	+	-	-	130/70	14	A.R.M.	Normal	L. L.	
9287	24	P.	38	Nil	9 gr.	Tr.	+	-	-	150/90	9	A.R.M.	Normal	L. L.	
9349	22	P.	37	Nil	1 gr.	Nil	+	-	-	130/90	4	A.R.M.	Normal	L. L.	
8502	26	P.	30	Nil	6 gr.	2 gr.	+	-	-	140/100	60	A.R.M.	Normal	L. L.	
9292	22	P.	39	Nil	2 gr.	Nil	+	-	-	120/70	7	A.R.M.	Normal	L. L.	
9229	26	P.	38	Nil	1 1/2 grs.	Nil	+	-	-	140/90	20	A.R.M.	Normal	L. L.	Patient had only one kidney.
9351	24	P.	39	Nil	2 gr.	Nil	-	-	-	160/80	4	A.R.M.	Normal	L. L.	
9361	21	P.	38	Nil	2 1/2 grs.	Tr.	-	-	-	130/80	14	A.R.M.	Normal	L. L.	
8854	22	P.	34	Nil	2 gr.	Tr.	-	-	-	130/100	36	A.R.M.	Normal	L. L.	Renal calculus.
9348	31	P.	37	Nil	1 gr.	Nil	+	-	-	160/100	12	A.R.M.	Normal	L. L.	
9495	32	P.	38	Nil	1 gr.	5 gr.	+	-	-	180/100	6	A.R.M.	Forceps	L. L.	
9453	26	P.	36	Nil	2 gr.	Nil	+	-	-	150/100	14	A.R.M.	Normal	L. L.	
9350	24	P.	36	Nil	2 gr.	Nil	+	-	-	120/80	20	A.R.M.	Normal	L. L.	
8379	26	P.	38	Nil	3 gr.	Nil	+	-	-	145/90	12	A.R.M.	Normal	L. L.	
8483	31	P.	39	Nil	3 gr.	Nil	+	-	-	160/110	79	A.R.M.	Normal	L. L.	
8549	29	P.	36	Nil	13 gr.	Nil	+	-	-	150/100	19	L.U.S. Caesarean	Normal	L. L.	
8449	28	P.	40	Nil	3 gr.	Nil	+	-	-	165/135	4	A.R.M.	Forceps	L. L.	
8569	27	P.	38	Nil	7 1/2 grs.	Nil	++	-	-	160/110	17	A.R.M.	Normal	L. L.	
8653	27	P.	38	Nil	2 gr.	Nil	+	-	-	170/100	6	A.R.M.	Normal	L. L.	
8587	21	P.	38	Nil	2 gr.	Nil	+	-	-	120/90	20	A.R.M.	Normal	L. L.	
8593	35	P.	36	Nil	1 1/2 grs.	Nil	+	-	-	190/100	16	A.R.M.	Normal	L. L.	
8679	21	P.	39	Nil	1 1/2 grs.	Nil	+	-	-	150/90	3	A.R.M.	Normal	L. L.	



# ALBUMINURIA (continued)

Reg. No.	Age	Gravida	Maturity	Relevant Past History	Albumen on admn. disch. grms.	Head: Eye aches Signs	Highest B.P.	No. of days in Hospital before Delivery or Discharge	Special treatment	Type of labour	Result M. C.	Remarks
<b>BOOKED CASES</b>												
7780	28	P.	34	Nil	3 gr.	—	130/90	21	Surgical induction	Normal	L.	
8731	21	P.	40	Nil	2 gr.	—	140/80	5	—	Normal	L.	
8609	29	P.	39	Nil	2½ gr.	—	150/90	6	A.R.M.	Normal	L.	
8777	25	P.	39	Nil	2 gr.	—	140/100	3	A.R.M.	Normal	L.	
8703	25	P.	38	Nil	4 gr.	—	150/100	14	A.R.M.	Normal	L.	
8689	21	P.	38	Nil	1 gr.	—	130/110	12	—	Normal	L.	
8805	20	P.	30	Nil	6 gr.	—	160/110	5	—	Normal	L.	
8747	25	P.	36	Nil	2 gr.	—	140/70	15	—	Normal	L.	
8811	20	P.	38	Nil	1½ gr.	—	150/110	14	—	Normal	L.	
8690	20	P.	30	Nil	3 gr.	—	150/120	60	A.R.M.	Normal	L.	
8471	28	P.	36	Nil	3 gr.	—	170/120	12	—	Normal	L.	
8573	29	P.	34	Nil	3 gr.	—	140/110	28	A.R.M.	Normal	L.	
9063	20	P.	33	Nil	2 gr.	—	130/90	4	—	Normal	L. D.	Twins. Baby died, prematurity.
9464	35	1	37	Nil	3 gr.	+	230/120	2	A.R.M.	Normal	L.	
7483	22	1	33	Nil	2 gr.	+	130/90	30	A.R.M.	Normal	L.	
8460	28	1	34	Nil	6 gr.	—	130/80	34	Surgical induction	Normal	L.	
8371	23	2	34	Nil	4½	—	165/110	26	A.R.M.	Normal	L.	
8532	27	1	39	Nil	2½	—	120/90	5	—	Normal	L.	
8534	32	4	34	Previous pregnancies	2½ gr.	—	150/100	40	A.R.M.	Normal	L.	
8680	37	5	36	Nil	3 gr.	—	160/110	18	—	Normal	L.	
1653	34	1	30	Nil	6 gr.	—	195/140	30	—	Normal	L. SB.	Had accidental haemorrhage.
8713	43	2	35	Nil	1½	—	150/100	13	—	Normal	L.	
4751	35	1	34	Previous pregnancies	2 gr.	—	140/80	37	—	Normal	L.	
5867	27	2	28	Previous pregnancies	7 gr.	—	175/125	18	—	Normal	L. SB.	Had accidental haemorrhage.
1987	29	2	33	Previous pregnancies	½ gr.	++	200/130	7	Surgical induction	Normal	L.	Considered a case of essential hypertension.
7772	25	1	36	Nil	2½ gr.	—	130/90	19	—	Normal	L.	
7701	40	3	34	Nil	4 gr.	+	190/120	14	A.R.M.	Normal	L.	Twins.
7739	40	2	34	Previous pregnancies	2 gr.	++	150/90	29	A.R.M.	Normal	L. SB.	Small baby. Did not grow on conservative treatment.
7901	28	3	38	Nil	3 gr.	+	170/90	3	A.R.M.	Normal	L.	Two previous S.B's.
7918	37	2	38	Nil	3 gr.	—	150/90	4	A.R.M.	Normal	L.	
6216	31	2	34	Previous pregnancies	2 gr.	—	160/100	14	—	Normal	L.	
7767	27	1	38	Nil	3½ gr.	+	170/90	3	A.R.M.	Normal	L.	
8097	42	2	T.	Nil	1½ gr.	+	170/110	4	A.R.M.	Normal	L.	
7808	36	2	34	Nil	2½ gr.	+	150/90	28	A.R.M.	Normal	L.	
1117	31	1	36	Previous pregnancy	9 gr.	++	160/90	4	A.R.M.	Normal	L.	
<b>EMERGENCY CASES</b>												
8345	28	P.	30	Nil	14 gr.	+	160/100	24	—	Normal	M.	
8292	23	P.	36	Nil	4½	—	160/90	12	A.R.M.	Normal	L.	
8256	39	P.	34	Nil	5 gr.	—	160/100	7	—	Normal	L.	
8299	28	P.	30	Nil	Solid	+	170/110	21	—	Normal	M.	Severe epileptic.
8138	31	P.	34	Nil	12 gr.	+	180/110	7	—	Normal	M.	
6930	30	P.	38	Nil	8 gr.	+	175/85	3	—	Normal	L.	
8134	22	P.	39	Nil	6 gr.	+	150/100	2	—	Normal	L.	
7587	40	P.	38	Nil	2 gr.	+	160/100	2	L.U.S. Caesarean	...	L.	C.S. done for age and toxemia.



# ALBUMINURIA (continued)

Reg. No.	Age	Gravida	Maturity	Relevant Past History	Albumen on admn. grms.	Edema	Head-ache	Eye Signs	Highest B.P.	No. of days in Hospital before Delivery or Discharge	Special treatment	Type of labour	Result M. C.	Remarks
7668	24	P.	36	Nil	...	+	-	-	140/90	6	...	Normal	L.	Increasing toxæmia, C.S. for contracted pelvis.
7798	22	P.	36	Nil	...	+	-	-	180/120	48	...	Normal	L.	
7850	41	P.	39	Nil	...	++	-	-	200/130	7	L.U.S. Cesarean	...	L.	
7955	23	P.	37	Nil	...	++	-	-	160/110	2	A.R.M.	Normal	L.	
7820	25	P.	36	Nil	...	+	-	-	160/80	8	A.R.M.	Forceps delivery	L.	
8015	36	P.	40	Nil	...	++	-	-	170/120	3	A.R.M.	Forceps delivery	L. SB.	111 hours in labour, baby 9 lb. 5 oz. died in utero.
8050	33	P.	36	Nil	...	++	+	-	150/100	6	Surgical	Normal	L. SB.	Baby died after induction.
7688	26	P.	37	Nil	...	++	+	+	150/75	14	Surgical	Normal	L.	Not sterilised.
8916	20	P.	14	Nil	...	+	+	+	140/80	10	Hysterotomy	...	L.	
8821	34	P.	36	Nil	...	+	+	+	140/90	13	A.R.M.	Normal	L. SB.	
8472	21	P.	36	Nil	...	+	+	+	170/110	7	A.R.M.	Normal	L.	
8855	32	P.	34	Nil	...	+	+	+	150/100	15	A.R.M.	Normal	L.	
8429	22	P.	34	Nil	...	+	+	+	150/80	12	...	Normal	L.	
8629	23	P.	34	Nil	...	+	+	+	180/110	14	Oestrogen	Normal	L. M.	Intra-uterine death. Touched placenta with stomach tube, A.P.H.
8536	31	P.	35	Nil	...	+	+	+	190/130	21	Surgical	Normal	L. SB.	Baby died during labour. Accidental hemorrhage.
8981	31	P.	38	Nil	...	+	-	-	170/120	9	A.R.M.	Normal	L. SB.	
8962	26	P.	34	Nil	...	-	-	-	150/100	16	L.U.S. Cesarean	...	L.	
8671	21	P.	36	Nil	...	-	-	-	150/100	7	...	Normal	L.	
9545	29	P.	36	Nil	...	+	+	+	160/90	2	A.R.M.	Normal	L.	
9470	32	P.	37	Nil	...	+	+	+	160/110	10	A.R.M.	Normal	L.	
9362	30	P.	37	Nil	...	+	+	+	180/160	11	A.R.M.	Normal	L.	
9474	35	P.	32	Nil	...	+	+	+	180/160	2	...	Normal	L. M.	
9065	28	P.	30	Nil	...	+	+	+	180/100	28	L.U.S. Cesarean	...	L.	
9298	21	P.	38	Nil	...	+	+	+	150/90	15	A.R.M.	Normal	L.	
9512	39	P.	36	Nil	...	++	-	-	180/110	35	...	Forceps, breech extraction	L. L.L.	Twins.
9077	26	P.	30	Nil	...	-	-	-	186/130	3	Classical Cesarean	...	L. SB.	Baby died during labour.
8981	31	P.	37	Nil	...	+	-	-	180/120	8	A.R.M.	Normal	L. SB.	
8169	25	P.	40	Nil	...	-	+	+	150/100	20	A.R.M.	Normal	L.	Sterilised.
3215	46	7	26	Previous pregnancies	...	-	+	+	220/110	2	Abdominal hysterotomy	...	L.	
8149	43	4	38	...	...	++	-	-	140/100	6	Nil	Normal	L. L.L.	Twins, 1st prolapsed cord.
8201	31	1	26	Previous pregnancy	...	+	-	-	170/110	5	Abdominal hysterotomy	...	L.	
7934	40	2	34	Nil	...	+	-	-	160/80	16	A.R.M.	Normal	L.	
7649	31	1	34	Previous pregnancy	...	+	-	-	150/105	16	A.R.M.	Normal	L.	
7904	28	1	37	Previous pregnancy	...	++	-	-	140/110	14	...	Normal	L.	
7804	31	1	20	Previous pregnancy	...	+	+	+	250/170	5	Abdominal hysterotomy	...	L.	Sterilised.
7856	32	2	34	Nil	...	++	-	-	160/90	2	...	Normal	L. L.L.	Twins.
7639	29	2	34	Nil	...	+	-	-	190/160	5	...	Normal	L.	
9493	29	2	40	Nil	...	++	+	+	160/100	2	Surgical induction	...	L.	
9314	37	3	37	Previous pregnancies	...	++	+	+	150/100	3	A.R.M.	Normal	L.	
6057	41	1	38	Previous pregnancy	...	+	+	+	190/130	33	Lower U.S. Cesarean	...	L.	Previous child SB. Intra-uterine death of foetus.
8252	40	5	24	Previous pregnancies	...	+	++	+	200/150	75	...	Normal	L. M.	



# ECLAMPSIA

10 cases, 1 booked and 9 emergency

Reg. No.	Age	Gravida	Maturity	Condition on admission	FITS			URINE			Edema	Highest B.P.	Head-aches	Eye-Signs	Days in Hospital before Delivery or Death	Treatment	Type of labour	Result M. C.	Remarks
					Before adm'n	Total	Onset	Alb. on adm'n	Quant. in first 24 hr.										
										grs.									
BOOKED CASE																			
6200	21	2	32	Pre-eclampsia	...	0	3	Ante-partum	14 gr. 2 gr.	12 oz.	—	190/140	++	—	5	Morphia, mag. sulph. A.R.M. colon lavage	Normal L.	M.	Fits controlled with sedative. Baby died in utero. Labour induced with stillborn.
EMERGENCY CASES																			
9433	38	P.	37	In labour, semi-comatose	3	6	Intra-partum	Solid Tr.	14 oz.	+	160/100	+	+	1	Morphia, mag. sulph.	Obstr'd L.	L.	Fits controlled with sedatives, C.S. for flat pelvis.	
7689	20	P.	32	Severe pre-eclampsia	...	0	2	Intra-partum	12 gr. 1 gr.	14 oz.	—	160/110	—	—	14	Morphia, mag. sulph.	Normal L.	M.	Spontaneous onset of labour, fits during.
8215	34	P.	34	Fair, admitted with severe abdominal pain	2	7	Ante-partum	Solid Tr.	12 oz.	—	185/120	++	—	5	Morphia, mag. sulph.	Normal L.	L.	Severe fits. Spontaneous onset of labour.	
8726	20	P.	40	Pre-eclampsia	...	0	2	Ante-partum	5 1/2	16 oz.	+	160/110	+	+	7	Morphia, mag. sulph. A.R.M.	Forceps L.	D.	Fit shortly after admission, baby died cerebral hemorrhage.
8697	20	P.	40	Severe headache and blindness	1	7	Ante & Intra	5 gr. Tr.	2 oz.	—	186/120	+	+	1	Morphia, mag. sulph. colon lavage, A.R.M.	Forceps L.	L.	Severe case, blind for 2 days after delivery, fits restarted 6 hours after delivery.	
8757	27	P.	40	Pre-eclampsia	...	0	2	Intra-partum	4 gr. Nil	24 oz.	++	190/130	—	—	10	Morphia, mag. sulph.	Forceps L.	L.	A.R.M. for pre-eclampsia, but had 2 fits during labour.
8880	28	P.	28	Severe pre-eclampsia	...	0	3	Intra-partum	7 gr. 2 gr.	10 oz.	+	150/100	—	—	8	Morphia, mag. sulph. lavage.	Normal L.	M.	Fits shortly after admission, controlled with sedatives. I.U.D. Spontaneous onset of labour.
8251	34	1	34	Severe pre-eclampsia, acute epigastric pain and headache	0	2	Intra-partum	Solid 6 gr.	20 oz.	+	190/120	++	—	5	Morphia, mag. sulph. lavage	Normal L.	SB.	Admitted with severe epigastric pain and headache; A.R.M., but fit 6 hours later.	
9044	46	4	37	Not in labour, severe epigastric pain and headache	0	3	Post-partum	2 gr. Tr.	10 oz.	—	200/130	+	—	1	Morphia, mag. sulph. lavage	Normal L.	L.	Admitted with severe epigastric pain and headache; A.R.M., delivered in 3 hours, 3 fits after delivery.	

No Mother died.  
Five babies were stillborn, a foetal mortality of 50%.

# **ANTE-PARTUM HÆMORRHAGE. PLACENTA PRÆVIA.**

21 Cases. 3 Booked and 18 Emergency

## **SUMMARY OF RESULTS**

TREATMENT	Variety		Mothers		Infants			
	Central	Lateral	L.	D.	L.	SB.	M.	D.
Expectant	—	—	—	—	—	—	—	—
Packing of vagina	—	—	—	—	—	—	—	—
A.R.M.	—	2	2	—	2	—	—	—
A.R.M. and Willett's forceps	—	2	2	—	—	2	—	—
Version and plugging with half breech	—	2	2	—	—	2	—	—
Version and Breech extraction	—	1	1	—	1	—	—	—
L.U.S. Caesarean Section	7	7	14	—	9	—	—	5
Classical Caesarean Section	—	—	—	—	—	—	—	—
Total	7	14	21	0	12	4	—	5
	21		21		21			

No Mother died.

9 Babies were lost, a foetal mortality of 43%.

6 Patients were transfused; 2 patients were packed before admission, none in Hospital.



# ANTE-PARTUM HÆMORRHAGE. PLACENTA PRÆVIA.

## DETAILS OF CASES

Reg. No.	Age	Gravida	Maternity	Condition on Admission	Variety	Treatment	Result M. C.	Remarks
<b>BOOKED CASES</b>								
8211	25	P.	40	Not in labour	Good condition	Central	... ..	Transverse lie, abdominal diagnosis and cystogram. uterine incision through the placenta.
8776	25	P.	40	Not in labour	Good condition	Incomplete, posterior lip of cervix	... ..	Slight bleeding, placenta felt on vaginal examination.
4599	30	2	44	In labour	Good condition	Incomplete, posterior lip of cervix	... ..	Post-mature, bleeding at onset of labour, large post-mature foetus.
<b>EMERGENCY CASES</b>								
8728	30	4	34	Not in labour	Good condition	Central	... ..	2 hemorrhages, one severe on admission, smaller three weeks before.
9370	36	1	40	Not in labour	Good condition	Central	... ..	Steady bleeding 6 hours, placenta felt on vaginal examination.
9049	42	6	34	Not in labour	Good condition	Central	... ..	One loss, placenta felt on vaginal examination; baby 4lb 13 ozs., died second day.
8952	31	3	37	Not in labour	Fair condition	Central	... ..	Several hemorrhages from 32nd week onwards, vaginal diagnosis.
1342	27	3	32	Not in labour	Fair condition	Central	... ..	One large loss; plasma transfusion; white leg in puerperium. P. Prævia in previous pregnancy.
8344	34	3	40	Not in labour	Good condition	Central	... ..	Slight bleeding, abdominal diagnosis and cystogram.
8574	35	P.	36	Not in labour	Fair condition	High lateral, on posterior wall	... ..	One profuse hemorrhage on day of admission; cervix shut.
8966	20	1	32	Not in labour	Good condition	High lateral, on posterior wall	... ..	Repeated small hemorrhages; abdominal diagnosis, before and after admission.
8124	28	P.	40	Not in labour	Fair condition	Incomplete, posterior wall and cervix	... ..	Three hemorrhages, last profuse; acute bronchitis.
9510	40	P.	40	Not in labour	Good condition	Incomplete, anterior wall	... ..	One slight loss; abdominal delivery because of age.
8706	33	P.	35	Not in labour	Good condition	Incomplete	... ..	Several small losses, 12 weeks onwards; myometomy; white leg.
9466	22	1	38	Not in labour	Poor condition	Incomplete, posterior wall	... ..	One profuse hemorrhage, 3 pints of blood and 2 of placenta before operation.
8784	32	4	40	In labour	Good condition	Incomplete, posterior wall	... ..	Profuse loss at onset of labour, followed by steady trickle.
7754	37	13	38	Not in labour	Good condition	Incomplete, posterior wall	... ..	Painless bleeding whilst in bed.
8115	33	2	39	Not in labour	Good condition	Incomplete, half across Os	... ..	Persistent bleeding. Willett's came off. Transfusion became necessary.
8296	29	2	40	In labour	Poor condition	Incomplete, anterior wall and to edge of Os	... ..	Severe bleeding during labour. Transfused. Puerperum pyrexial.
8026	32	2	40	In labour	Fair condition	Incomplete, post wall and lip of cervix	... ..	Transverse lie; severe bleeding at onset of labour; transfused.
9503	38	3	34	Not in labour	Poor condition	Incomplete, half across Os	... ..	Plasma transfusion; patient also showed signs of toxæmia.



# ACCIDENTAL ANTE-PARTUM HÆMORRHAGE

30 cases, 9 booked and 21 emergency

## SUMMARY OF RESULTS

TREATMENT	Type		Mothers		Infants			
	Concealed	Revealed	Mixed	L.	D.	L.	S.B.	M.
Conservative	...	1	2	5	—	3	1	1
Morphia and A.R.M.	...	2	5	22	—	9	10	3
Cæsarean Section	...	1	1	3	—	1	2	—
Total	...	4	8	30	—	13	13	3

No Mother died.  
17 Babies were lost, a mortality of 56.6%.  
7 Patients were transfused with plasma or blood.

## DETAILS OF CASES

Reg. No.	Age	Gravida	Maturity	Condition on Admission	Urine	Type	Treatment	Result	Remarks
<b>BOOKED CASES</b>									
8176	31	1	34	Good.	No albumen	Revealed	...	M.	Premature child—did well.
8902	22	P.	36	Good.	No albumen	Revealed	...	L.	Mainly concealed.
9123	35	P.	34	Good.	Albumen	Mixed	Morphia and A.R.M.	L.	Undergoing treatment for toxæmia.
3108	24	1	34	Poor.	Solid	Concealed	Morphia and A.R.M.	L.	Severe case—plasma transfusion.
1653	34	1	34	Good.	Albumen	Mixed	Morphia and A.R.M.	L.	Sharp hæmorrhage—ceased on A.R.M.
5867	27	2	30	Good.	Albumen	Mixed	Morphia and A.R.M.	L.	Breech presentation.
2864	27	1	40	Good.	No albumen	Revealed	Morphia and A.R.M.	L.	...
8096	21	P.	40	Good.	Albumen	Mixed	Morphia and A.R.M.	L.	...
7831	22	P.	40	Good.	Albumen	Revealed	Morphia and A.R.M.	L.	...
8098	21	P.	40	Good.	Albumen	Revealed	L.U.S. Cæsarean Section	L.	...
<b>EMERGENCY CASES</b>									
8176	31	1	34	Poor.	Solid	Mixed	Morphia and A.R.M.	L.	Plasma transfusion. No fetal heart on admission.
8266	28	4	36	Poor.	Albumen	Concealed	Morphia and A.R.M.	L.	Plasma transfusion. No fetal heart on admission.
8041	45	P.	40	Good.	No albumen	Concealed	Classical Cæsarean Section	L.	Mother congenital cardiac. Baby pneumonia.
3257	40	2	40	Fair.	No albumen	Mixed	Morphia and A.R.M.	L.	Baby 3 lb., died prematurely.
7903	20	P.	32	Good.	Albumen	Mixed	Morphia and A.R.M.	L.	Severe ante-natal toxæmia.
8962	28	P.	32	Good.	Albumen	Mixed	Morphia and A.R.M.	L.	...
8950	32	5	38	Good.	No albumen	Mixed	Morphia and A.R.M.	L.	...
8732	40	P.	36	Good.	Albumen	Mixed	Morphia and A.R.M.	L.	...
8852	23	1	40	Very poor.	Albumen	Mixed	Morphia and A.R.M.	L.	Massive hæmorrhage. Repeated plasma transfusions.
8744	16	P.	40	Poor.	Albumen	Mixed	Morphia and A.R.M.	L.	Repeated plasma transfusions and blood transfusions.
8508	37	P.	40	Good.	Albumen	Mixed	Morphia and A.R.M.	L.	Transfused both before and after admission.
8391	32	6	36	Fair.	Albumen	Mixed	Morphia and A.R.M.	L.	...
523	37	2	37	Poor.	Albumen	Mixed	Morphia and A.R.M.	L.	Mainly concealed.
9572	22	P.	37	Good.	Albumen	Mixed	Morphia and A.R.M.	L.	Severe toxæmia.
9448	34	2	33	Fair.	No albumen	Revealed	Morphia and A.R.M.	L.	Large retro placental clot.
9540	24	2	40	Good.	No albumen	Concealed	Still-oestrol	L.	Profuse bleeding; ceased on A.R.M.
9247	34	P.	32	Good.	No albumen	Concealed	Morphia and A.R.M.	L.	Admitted with tense uterus—no fetal heart.
9208	29	P.	40	Good.	Albumen	Revealed	Morphia and A.R.M.	L.	...
9215	43	14	40	Good.	No albumen	Mixed	Morphia and A.R.M.	L.	...
9011	41	7	38	Good.	No albumen	Revealed	Morphia and A.R.M.	L.	...



# **MULTIPLE PREGNANCY**

There were 44 cases of Twins, 20 booked and 24 emergency. There was also one set of Triplets.

Reg. No.	Age	Gravida	Maturity	Presentation		Sex		Weight		Type	Result		Remarks
				1	2	1	2	1 lb. oz.	2 lb. oz.		Mother	1st Child	
BOOKED CASES													
7772	25	1	36	L.O.A.	L.S.A.	M.	M.	6 11	6 11	Uniovular	...	L.	Severe toxæmia of pregnancy.
7834	35	P.	38	L.O.A.	R.O.A.	M.	M.	3 10	5 13	Uniovular	...	L.	Toxæmia of pregnancy.
7886	35	P.	40	R.O.A.	L.O.A.	M.	F.	6 11	5 7	Binovular	...	L.	
7925	31	P.	29	L.S.A.	R.S.A.	F.	F.	3 12	3 3	Uniovular	...	L.	
7902	26	P.	40	L.O.A.	R.O.A.	M.	F.	4 5	4 4	Binovular	...	L.	
8262	25	1	40	R.S.A.	T. Lie	M.	M.	6 0	5 7	Uniovular	...	L.	Second twin : internal version.
8243	21	2	38	L.O.A.	R.O.A.	M.	M.	4 13	6 1	Binovular	...	L.	Fœtus papyraceus.
8284	27	3	38	L.O.A.	---	M.	M.	5 1	1 0	Binovular	...	L.	Severe toxæmia.
9012	37	P.	34	L.O.A.	R.O.A.	F.	F.	2 8	1 15	Uniovular	...	D.	
9522	31	P.	36	L.O.A.	L.O.A.	F.	F.	4 13	5 4	Binovular	...	L.	Second twin : version.
9534	23	P.	38	L.S.A.	T. Lie	F.	F.	4 8	6 6	Binovular	...	L.	
883	25	3	38	R.O.A.	R.O.A.	M.	M.	5 13	5 4	Binovular	...	L.	
8547	37	4	38	L.O.A.	R.S.A.	F.	F.	5 6	5 6	Binovular	...	L.	A.R.M. for over-distended uterus.
8584	32	2	40	R.O.A.	R.O.A.	M.	M.	6 10	5 11	Binovular	...	L.	
8786	25	P.	40	L.O.A.	R.O.A.	F.	F.	5 7	5 9	Binovular	...	L.	White leg.
6437	32	1	38	L.S.A.	R.O.A.	M.	F.	4 15	4 10	Binovular	...	L.	
8753	37	P.	38	R.O.A.	R.O.A.	F.	F.	6 10	3 2	Uniovular	...	L.	
8936	35	7	40	L.S.A.	R.S.A.	M.	M.	6 13	6 2	Binovular	...	L.	
961	32	2	34	R.O.A.	L.S.A.	F.	M.	4 2	4 10	Binovular	...	D.	
8471	28	P.	36	L.O.A.	R.O.A.	M.	M.	4 1	3 11	Uniovular	...	L.	
EMERGENCY CASES													
7644	27	2	38	L.O.A.	L.S.A.	M.	F.	6 3	5 8	Binovular	...	L.	A.R.M. for over-distended uterus.
7856	32	2	34	L.S.A.	L.O.A.	F.	F.	3 11	4 11	Uniovular	...	L.	Acute toxæmia.
7922	20	P.	36	P.O.P.	L.S.A.	M.	F.	4 8	5 2	Binovular	...	L.	
8049	37	P.	38	R.O.A.	L.S.A.	M.	F.	5 7	4 9	Binovular	...	L.	
8071	21	P.	37	L.O.A.	R.O.A.	F.	F.	5 11	5 0	Binovular	...	L.	A.R.M. for toxæmia.
7950	38	P.	40	L.O.A.	R.S.A.	F.	M.	5 3	5 3	Binovular	...	L.	Cardiac disease : forceps and breech extraction.
8149	43	4	38	L.S.A.	R.S.A.	M.	M.	5 1	5 1	Uniovular	...	L.	First twin : prolapsed cord.
8361	27	1	29	L.O.A.	R.O.A.	M.	M.	2 12	2 13	Uniovular	...	D.	Acute hydramnios.
7802	30	2	40	L.O.A.	T. Lie	F.	M.	5 10	6 8	Binovular	...	L.	Second twin : internal version.
7652	40	7	34	R.O.A.	L.O.A.	F.	M.	3 4	3 5	Binovular	...	D.	
8463	18	P.	34	L.O.P.	L.O.P.	M.	F.	4 7	4 0	Binovular	...	L.	
9614	24	P.	36	L.O.A.	R.O.A.	M.	F.	4 13	4 11	Binovular	...	L.	Cesarean section for delayed labour.
8512	39	P.	38	L.O.A.	R.S.A.	F.	M.	5 3	2 8	Binovular	...	L.	Toxæmia of pregnancy.
9159	36	2	34	L.O.A.	L.O.A.	M.	M.	2 14	3 3	Binovular	...	D.	
9252	19	P.	30	L.O.A.	R.O.P.	M.	M.	2 15	3 8	Uniovular	...	D.	
9105	32	1	39	R.O.A.	L.O.A.	F.	F.	6 8	6 0	Binovular	...	L.	
9210	37	2	36	L.O.A.	L.O.A.	M.	M.	5 11	5 11	Uniovular	...	L.	
809	33	1	40	L.O.A.	R.S.A.	F.	F.	4 14	6 2	Binovular	...	L.	
8871	30	P.	40	Brow	T. Lie	F.	M.	4 12	4 3	Binovular	...	L.	First twin : forceps ; second twin : version.
8976	34	P.	40	R.O.P.	L.O.A.	M.	M.	6 7	6 4	Uniovular	...	L.	
8971	35	4	36	R.O.A.	L.S.A.	F.	F.	4 8	4 14	Uniovular	...	L.	
9620	35	2	34	L.O.A.	R.O.A.	F.	F.	3 8	4 3	Uniovular	...	L.	
8265	31	P.	34	L.O.A.	R.O.A.	M.	M.	4 1	3 11	Uniovular	...	L.	Acute hydramnios.
BOOKED CASE													
9565	28	P.	36	L.S.A.	L.S.A.	F.	F.	3 15	3 9	...	...	L.	
TRIPLETS													
								3 15	3 9			L.	
								3 0	3 0			L.	

TRIPLETS  
3 15 3 9 3 0  
No Mother died.  
Of 90 babies, 17 were lost. Fœtal mortality 18%.



## VERTEX PRESENTATIONS

1,988 presentations of the Vertex occurred. The occiput was anterior in 1,885 cases, and posterior in 103 cases.

### TREATMENT AND RESULTS OF POSTERIOR POSITIONS

Method used	No. of Cases Mothers	Infants			
		L.	SB.	M.	D.
Spontaneous rotation and normal delivery ... ..	41	41	—	—	—
Spontaneous delivery face to pubis ... ..	15	15	—	—	—
Spontaneous rotation and forceps delivery ... ..	7	7	—	—	—
Manual rotation and forceps delivery ... ..	17	16	1	—	—
Forceps rotation and forceps delivery ... ..	2	2	—	—	—
Forceps delivery face to pubis ... ..	11	11	—	—	—
Version and breech extraction ... ..	2	2	—	—	—
Classical Cesarean ... ..	0	0	—	—	—
L.U.S. Cesarean ... ..	7	7	—	—	—
Perforation ... ..	1	—	1	—	—
Total ... ..	103	101	2	0	0

No Mother died.

2 Babies were stillborn, a foetal mortality of 2%.

## BREECH PRESENTATIONS

Breech delivery is classified in two main groups :—

- (1) Uncomplicated.
- (2) Complicated.

Uncomplicated Breech delivery is further sub-divided :—

- (1) Normal Breech delivery.
- (2) Difficult Breech delivery.

### 1. UNCOMPLICATED BREECH DELIVERY

#### SUMMARY OF RESULTS

57 CASES

		No. of Cases	Infants SB.	Mortality %
NORMAL BREECH :	Primigravidae ... ..	24	Nil	Nil
	Multiparae ... ..	25	Nil	Nil
DIFFICULT BREECH :	Primigravidae ... ..	8	Nil	Nil
	Multiparae ... ..	Nil	Nil	Nil

There were also 20 uncomplicated breech deliveries in multiple pregnancy.

A total of 77 cases with no maternal or foetal mortality.

#### A.—Normal Breech Delivery (49 cases).

A set technique is followed. The patient is in the lithotomy position, and for primigravida episiotomy is performed under local anaesthesia when the buttocks or feet are distending the perineum. The buttocks or feet are born by uterine action, or at most assisted by inserting two fingers into the vagina. Traction downwards is maintained, keeping the child's body sideways, until the anterior scapula appears under the symphysis. The arms are delivered, and the child's body allowed to hang to encourage the head to enter the pelvic brim. If this is not sufficient, supra-pubic pressure is applied. The child is left hanging until the nape of the neck appears in the sub-pubic angle. Delivery is then completed by exerting traction on the legs, lifting the child's body upwards and outwards through 180° over the mother's abdomen.



Reg. No.	Age	Grav. id.	Matu- rity	Variety	Weight lb. oz.	Result M. C.	Remarks
BOOKED CASES							
7890	26	P.	40	Extended legs	8 8	L. L.	
7914	34	P.	40	Extended legs	6 14	L. L.	
8990	27	P.	38	Extended legs	5 6	L. L.	
9243	25	P.	40	Extended legs	6 15	L. L.	
9206	28	P.	40	Extended legs	5 15	L. L.	
9205	33	P.	40	Extended legs	6 6	L. L.	
9555	22	P.	40	Extended legs	7 12	L. L.	
9637	21	P.	40	Flexed legs	5 7	L. L.	
8495	33	P.	40	Extended legs	6 6	L. L.	
8608	20	P.	40	Flexed legs	6 11	L. L.	
8660	31	P.	39	Flexed legs	6 8	L. L.	
8676	26	P.	40	Extended legs	6 4	L. L.	
8736	22	P.	40	Extended legs	8 0	L. L.	
8926	28	P.	40	Extended legs	6 1	L. L.	
7644	27	2	38	Extended legs	6 3	L. L.	
7772	25	1	40	Extended legs	6 11	L. L.	
3644	34	3	40	One leg flexed, one extended	7 12	L. L.	
7882	36	1	40	Flexed legs	6 11	L. L.	
7584	27	3	40	Flexed legs	6 8	L. L.	
7802	30	2	40	Extended legs	6 8	L. L.	
8002	23	1	40	Extended legs	7 6	L. L.	
8059	34	6	40	Extended legs	7 13	L. L.	
5672	27	1	40	Flexed legs	6 10	L. L.	
8262	25	1	40	Flexed legs	6 0	L. L.	
8330	24	1	40	Extended legs	7 5	L. L.	
6037	30	1	40	Extended legs	5 13	L. L.	
9317	41	3	40	Extended legs	6 10	L. L.	
8402	38	2	40	Extended legs	6 14	L. L.	
8547	37	4	40	Extended legs	5 6	L. L.	
8750	41	5	40	Extended legs	6 3	L. L.	
8809	37	1	40	Extended legs	5 11	L. L.	
889	33	2	36	Extended legs	5 5	L. L.	
8936	35	7	40	Extended legs	6 13	L. L.	
8829	28	2	36	Extended legs	5 9	L. L.	
8656	24	4	37	Extended legs	5 12	L. L.	
EMERGENCY CASES							
7961	25	P.	39	Extended legs	6 13	L. L.	
7922	20	P.	37	Extended legs	5 2	L. L.	
8425	25	P.	40	Extended legs	6 2	L. L.	
9255	22	P.	40	Extended legs	7 4	L. L.	
9431	29	P.	40	Extended legs	7 7	L. L.	
9623	35	P.	40	Extended legs	6 4	L. L.	
8655	26	P.	40	Extended legs	7 7	L. L.	
8684	30	P.	40	Extended legs	5 9	L. L.	
9088	20	P.	40	Extended legs	7 8	L. L.	
8542	30	P.	40	Extended legs	6 7	L. L.	
809	33	1	40	Extended legs	6 2	L. L.	
8548	27	1	40	Extended legs	6 7	L. L.	
8012	38	4	40	Extended legs	8 3	L. L.	
8260	31	4	37	Extended legs	5 4	L. L.	

## B. Difficult Breech Delivery.

Under this heading are included all cases in which further operative procedure was necessary.

There were 6 cases in which delivery was completed by the application of forceps to the after-coming head. In 2 cases the foetus was extracted for delay at the pelvic outlet.

Reg. No.	Age	Grav. id.	Matu- rity	Variety	Other Manipulations	Weight lb. oz.	Result M. C.	Remarks
BOOKED CASES								
8566	21	P.	40	Extended legs	Forceps to after-coming head	8 12	L. L.	
8747	28	P.	40	Extended legs	Forceps to after-coming head	5 15	L. L.	
9018	35	P.	40	Extended legs	Breech extraction	6 12	L. L.	
EMERGENCY CASES								
9239	29	P.	40	Extended legs	Forceps to after-coming head	7 13	L. L.	
9238	18	P.	40	Flexed legs	Forceps to after-coming head	6 12	L. L.	
9615	25	P.	40	Extended legs	Extended arms. Forceps to after-coming head	8 12	L. L.	
7900	24	P.	40	Extended legs	Forceps to after-coming head	6 4	L. L.	
8049	37	P.	38	Extended legs	Breech extraction	5 7	L. L.	



## 2. COMPLICATED BREECH (32 cases, 6 booked, 26 emergency)

Complicated breeches are those in which another obstetric abnormality is present

Reg. No.	Age	Gravida	Maturity	Complication	Treatment	Result	Weight lb. oz.	Remarks
<b>BOOKED CASES</b>								
8254	21	1	36	Prolapsed cord	Breech extraction	L.	4 12	
9256	35	5	38	Transverse lie. Prolapsed arm	Internal version. Breech extraction	L. SB.	7 10	A.R.M. Hand prolapsed. No fetal heart after version.
9534	23	P.	38	Shoulder presentation	Internal version. Breech extraction	L.	6 6	Second twin.
8263	25	1	40	Transverse lie	Internal version. Breech extraction	L.	5 7	Second twin.
7919	33	P.	34	Fetal abnormality	Nil	L. M.	4 10	Hydrocephalic.
8226	26	P.	34	Fetal abnormality	Nil	L. SB.	4 5	Anencephalic.
<b>EMERGENCY CASES</b>								
7824	34	3	32	Prematurity	Nil	L.	3 0	Normal breech delivery.
8160	30	P.	30	Prematurity	Nil	L. D.	2 0	Normal breech delivery.
8512	39	P.	37	Prematurity	Nil	L.	2 8	Twin. Extracted.
9108	22	P.	34	Prematurity	Nil	L.	3 8	Normal breech delivery.
8407	33	5	34	Prematurity	Nil	L.	3 6	Normal breech delivery.
8368	19	P.	30	Prematurity	Nil	L.	2 7	Normal breech delivery.
8858	32	2	28	Prematurity	Nil	L. D.	1 6	Normal breech delivery. Retained placenta.
7950	38	P.	40	Severe cardiac disease	Breech extraction	L.	5 3	Twin pregnancy. First twin forceps under local anaesthesia.
8149	43	4	38	Prolapsed cord	Breech extraction	L.	5 1	Toxaemia of pregnancy.
8430	32	6	40	Prolapsed cord	Version and breech extraction	L.	7 3	
8457	24	P.	38	Prolapsed cord	Breech extraction	L.	5 5	
7803	40	4	37	Fetal abnormality	Nil	L. SB.	3 0	Anencephalic.
8250	26	P.	34	Fetal abnormality	Nil	L. SB.	3 13	Anencephalic.
9120	25	1	38	Fetal abnormality	Nil	L. SB.	2 9	Anencephalic.
9448	34	2	33	Accidental haemorrhage	A.R.M.	L. SB.	3 11	
8026	32	2	40	Placenta praevia and transverse lie	Bipolar version. Leg brought down	L. SB.	7 0	Profuse haemorrhage at onset of labour.
8296	29	2	40	Placenta praevia and transverse lie	Internal version. Breech extraction	L. SB.	7 8	Admitted late in labour.
9503	38	3	34	Placenta praevia	Internal version. Breech extraction	L. SB.	3 6	
8065	23	P.	38	Transverse lie	Internal version. Breech extraction	L.	4 11	
7802	30	2	40	Transverse lie	Internal version. Breech extraction	L.	6 8	
9491	23	1	40	Prolapsed arm	Internal version. Leg brought down	L.	7 6	Subsequent difficult breech delivery.
9626	35	2	40	Prolapsed arm	Internal version. Breech extraction	L.	5 14	Subsequent normal breech delivery.
8560	31	3	40	Transverse lie; prolapse of hand and cord	Internal version. Leg brought down	L.	4 4	Second twin.
8871	30	P.	40	Transverse lie	Internal version. Breech extraction	L.	8 15	
9539	29	2	40	Persistent occipito-posterior	Internal version. Breech extraction	L.	9 2	
9588	21	P.	40	Persistent occipito-posterior	Internal version. Breech extraction	L.		

No Mother died.

12 Babies died or were stillborn, a fetal mortality of 37%.

Of these 5 had fetal abnormalities.



## FACE PRESENTATION

17 cases, 6 booked and 11 emergency

Reg. No.	Age	Gravida	Maturity	Position	Treatment	Result M. C.	Weight lb. oz.	Remarks
<b>BOOKED CASES</b>								
7672	33	P.	37	L.M.A.	Hydramnios, A.R.M.	... L. SB.	7 4	Anencephalic.
8081	42	2	42	R.M.A.	Hydramnios, A.R.M.	... L. SB.	6 2	Anencephalic.
9073	27	P.	40	R.M.A.	Hydramnios, A.R.M.	... L. SB.	4 3	Anencephalic.
9363	39	P.	31	R.M.A.	Hydramnios, A.R.M.	... L. SB.	2 1	Anencephalic.
9271	22	P.	40	R.M.T.	L.U.S. Caesarean	... L. L.	6 12	Flat pelvis.
8686	29	P.	40	R.M.A.	...	... L. L.	7 3	
<b>EMERGENCY CASES</b>								
8565	34	1	40	L.M.P.	...	... L. L.	7 3	Spontaneous rotation to anterior position of face.
9406	40	6	40	R.M.A.	...	... L. L.	8 4	
7951	38	3	40	R.M.A.	Forceps	... L. L.	8 15	Mid forceps delivery for delay in second stage.
7781	32	P.	35	R.M.A.	Hydramnios, A.R.M.	... L. SB.	3 10	Anencephalic.
7777	23	P.	36	L.M.A.	Hydramnios, A.R.M.	... L. SB.	5 10	Anencephalic.
7839	17	P.	36	R.M.A.	Hydramnios, A.R.M.	... L. SB.	3 6	Anencephalic.
9409	21	P.	35	R.M.A.	Hydramnios, A.R.M.	... L. SB.	2 15	Anencephalic.
9227	32	P.	35	R.M.A.	Hydramnios, A.R.M.	... L. SB.	3 4	
9245	25	P.	35	R.M.A.	Hydramnios, A.R.M.	... L. SB.	3 6	
9275	37	2	34	R.M.A.	Hydramnios, A.R.M.	... L. SB.	3 14	
9517	18	P.	35	R.M.A.	Hydramnios, A.R.M.	... L. SB.	3 8	

No Mother died.

12 Babies, all anencephalic, were stillborn: a foetal mortality of 70%.

## BROW PRESENTATION

1 case, emergency admission

Reg. No.	Age	Gravida	Maturity	Position	Treatment	Result M. C.	Weight lb. oz.	Remarks
8871	30	P.	40	Brow	Forceps	... L. L.	4 12	Delivered face to pubis with forceps.

## SHOULDER PRESENTATION

14 cases, 4 booked and 10 emergency

Reg. No.	Age	Gravida	Maturity	Complication	Treatment	Result M. C.	Weight lb. oz.	Remarks
<b>BOOKED CASES</b>								
9256	36	5	38	Prolapsed arm	Internal version	... L. SB.	7 10	Patient had A.R.M. Arm prolapsed at half dilatation. Version and leg brought down. Foetal heart not heard subsequently.
8211	35	P.	40	Placenta praevia	L.U.S. Caesarean	... L. L.	8 2	
8263	25	1	40	Nil	Internal version	... L. L.	5 7	Second twin.
9534	23	P.	38	Nil	Internal version	... L. L.	6 6	Second twin.
<b>EMERGENCY CASES</b>								
7764	30	P.	41	Delayed dilatation of Os	L.U.S. Caesarean	... L. L.	7 8	Patient had had a previous operation for Nulliparous prolapse
8065	23	P.	38	Prolapsed hand	Internal version and extraction	L. L.	4 11	Admitted at full dilatation with arm prolapsed.
8026	32	2	40	Placenta praevia	Bi-polar version and leg brought down	L. SB.	7 0	Profuse bleeding at onset of labour. Transfused.
8296	29	2	40	Placenta praevia	Internal version and Breech extraction	L. SB.	7 8	Admitted late in labour.
7802	30	2	40	Prolapsed hand	Internal version and Breech extraction	L. L.	6 8	Arm prolapsed shortly after admission.
9491	23	1	40	Prolapsed hand	Internal version and leg brought down	L. L.	7 6	Admitted at 3 fingers, subsequent difficult breech delivery.
9626	35	2	40	Prolapsed hand	Internal version and Breech extraction	L. SB.	7 6	Breech extracted before full dilatation.
8560	31	3	40	Prolapsed hand and cord	Internal version and leg brought down	L. L.	5 14	Subsequent normal breech delivery.
8717	39	P.	42	Flat pelvis	L.U.S. Caesarean	... L. L.	9 1	Very obese: not diagnosed till in labour.
8871	30	P.	T.	Transverse lie	Internal version and Breech extraction	L. L.	4 4	Second twin.

No Mother died.

4 Babies were stillborn, a foetal mortality of 28%.



PROLAPSE OF CORD  
12 cases, 7 booked, 5 emergency

Reg. No.	Age	Gravida	Maturity	Size of Os when diagnosed	Complications	Treatment	Result	Remarks
BOOKED CASES								
7828	37	5	40	Half dilated	Nil	Nil	M. C.	Cord not pulsating when seen.
7857	29	P.	38	Full	Nil	Forceps	L.	Had had an external version two days before.
8269	35	P.	40	Half dilated	Nil	Nil	L.	Cord not pulsating when seen. Subsequently delivered with forceps.
8046	30	P.	40	Three fingers	Nil	Nil	SB.	Had external version six weeks before.
8245	21	1	36	Three-quarter dilated	Breech presentation	Breech extraction	L.	Forceps delivery face to pubis.
8353	22	P.	40	Full	Nil	Forceps	L.	Membranes ruptured whilst being examined vaginally.
8170	33	2	40	Half dilated	Disproportion	Classical Caesarean	L.	
EMERGENCY CASES								
8149	43	4	38	Full	Breech presentation	Breech extraction	L.	
8430	32	6	40	Three-quarter dilated	Nil	Internal version and Breech extraction	L.	
8560	31	3	40	Three fingers	T. lie. Head prolapsed	Internal version and leg brought down	L.	
8457	24	P.	37	Full	Nil	Breech extraction	L.	Subsequent normal breech delivery.
9385	23	P.	40	Three-quarter dilated	Nil	Forceps extraction	L.	

No Mother died.  
3 Babies were lost : a foetal mortality of 25%.



## POST-PARTUM HÆMORRHAGE

(including Intra-Partum Third Stage Bleeding)

All cases are included in which the bleeding, however slight, was greater than usual.

45 cases during the year.

Treatment was by massage ergot, and pituitrin,

In 11 cases blood transfusion was given, 9 of these being admitted after the birth of the child.

In 2 cases the placenta was removed manually for the third stage bleeding; in 6 cases Crédé's method was used.

1 case died (see maternal death No. 7980).

## RETAINED PLACENTA

There were 9 cases of Retained Placenta—treated as shown below

Reg. No.	Age	Gravida	Maturity	Type of Labour	Length of 3rd Stage hours	Treatment	Result	Remarks
<b>BOOKED CASES</b>								
8592	35	1	40	Normal	4	Crédé's expression	M. C.	Three pints transfusion.
8841	30	P.	40	Forceps	N.	D. and C.	L. L.	Secondary hæmorrhage from retained cotyledon.
<b>EMERGENCY CASES</b>								
8491	44	6	40	Normal	6	Crédé's expression	L.	Admitted in 3rd stage. Transfusion before and after admission.
8506	32	2	40	Normal	7	Manual removal	L.	Admitted in 3rd stage, very collapsed. Transfused 6 pints.
8858	32	2	40	Normal	12	Manual removal	L. D.	Emergency admission in premature labour. Condition good throughout.
8930	20	P.	40	Normal	3½	Crédé's expression	L.	Admitted in 3rd stage. Transfused blood and plasma.
8924	26	P.	40	Normal	7	Crédé's expression	L.	Admitted in 3rd stage. Transfused before admission.
8295	37	1	36	Normal	6	Crédé's expression	L. L.	Admitted in 3rd stage after premature twin delivery. Very shocked; transfused.
8259	26	4	40	Normal	4	Crédé's expression	L.	Admitted in 3rd stage. Plasma and blood transfusion. Placenta expressed the later.

No Mother died.

1 Infant was lost: a foetal mortality of 10%.



# CONTRACTED PELVIS

215 cases : 118 booked, 97 emergency.

	No. of Cases	Mothers Died	Infants Died or were stillborn
<b>BOOKED CASES</b>			
Spontaneous delivery after trial of labour ...	35	—	1
Induction of labour and spontaneous delivery ...	1	—	—
Induction of labour and forceps delivery ...	—	—	—
Trial of labour completed with forceps ...	13	—	3
Cæsarean Section after trial of labour ...	11	—	0
Cæsarean Section—set operation ...	58	—	1
Craniotomy ...	—	—	—
	118	0	5
<b>EMERGENCY CASES</b>			
Spontaneous delivery after trial of labour ...	49	—	—
Induction of labour, spontaneous delivery ...	—	—	—
Induction of labour and forceps delivery ...	—	—	—
Trial of labour, completed with forceps ...	8	—	2
Cæsarean Section after trial of labour ...	18	—	3
Cæsarean Section, set operation ...	21	1	1
Craniotomy ...	1	—	1
	97	1	7
	215	1	12

1 Mother died, a maternal mortality of 0.46%.

12 Babies died or were stillborn, a foetal mortality of 5.5%.

# INDUCTION OF LABOUR

Induction of labour was undertaken in 158 cases : 94 booked, and 64 emergency.

No. of Cases	Indication	Method	No.	Infants				Remarks
				L.	SB.	M.	D.	
1	Disproportion ...	Medicinal induction ...	0	—	—	—	—	
		A.R.M. ...	0	—	—	—	—	
		Surgical induction ...	1	1	—	—	—	
61	Toxaemia ...	Medicinal induction ...	0	—	—	—	—	
		A.R.M. ...	53	50	4	1	1	Three pairs of twins.
		Surgical induction ...	8	7	1	—	—	
1	Obstetrical history ...	Medicinal induction ...	0	0	—	—	—	
		A.R.M. ...	1	1	—	—	—	
63	Maturity and Post Ma- turity ...	Medicinal induction ...	1	1	—	—	—	
		A.R.M. ...	62	61	—	—	1	
15	Hydramnios ...	A.R.M. ...	15	0	15	—	—	
6	Cardiac disease ...	A.R.M. ...	6	6	—	—	—	
2	Multiple pregnancy ...	A.R.M. ...	2	4	—	—	—	Two pairs of twins.
4	Eclampsia ...	A.R.M. ...	4	3	—	—	1	
2	Intra uterine death ...	Oestroform ...	2	—	—	2	—	
1	Asthma ...	A.R.M. ...	1	1	—	—	—	
1	Diabetic ...	A.R.M. ...	1	1	—	—	—	
1	Pyelitis ...	A.R.M. ...	1	1	—	—	—	
158		Total ...	158	137	20	3	3	

There were 5 pairs of twins.

No Mother died.

Of 163 Babies, 26 died or were stillborn, a foetal mortality of 16%.

Of these, 15 were anencephalic, and 2 dead before induction. The corrected foetal mortality rate is 6%.



## INDUCTION OF LABOUR. NORMAL DELIVERY

Reg. No.	Age	Gravida	Maturity	Indication	Type of Pelvis	Duration of Labour				Baby		I.D.I.	Result	Method	Surgical induction	Remarks
						1st St.	2nd St.	Length	Weight							
						h. m.	h. m.	ins.	lb. oz.							
BOOKED CASES	8054	40	2	Disproportion	Flat	20 0	0 5	19	5 9	...	...	36 hours	L.	Surgical induction	...	Twins
	7834	35	P.	Toxaemia	Normal	7 45	45	16	2 10	...	...	24 hours	L.	A.R.M.	...	...
	7578	22	P.	Toxaemia	Normal	3 45	1 15	19	5 13	...	...	6 hours	L.	A.R.M.	...	...
7838	26	P.	38	Toxaemia	Normal	4 15	1 15	20	6 5	...	...	6 hours	L.	A.R.M.	...	...
7701	40	3	36	Toxaemia	Normal	23 0	0 5	18½	5 0	...	...	48 hours	L.	A.R.M.	...	...
7739	40	2	36	Toxaemia	Normal	6 0	0 5	16	3 11	...	...	72 hours	L.	A.R.M.	...	...
7697	24	P.	37	Toxaemia	Normal	2 30	0 30	19	4 6	...	...	6 hours	L.	A.R.M.	...	...
7918	37	2	38	Toxaemia	Normal	3 0	0 30	19	6 3	...	...	5 hours	L.	A.R.M.	...	...
8099	39	7	40	Toxaemia	Normal	8 0	0 15	20	7 10	...	...	15 hours	L.	A.R.M.	...	...
7949	24	P.	38	Toxaemia	Normal	13 45	1 5	20	7 0	...	...	19 hours	L.	A.R.M.	...	...
7948	22	P.	38	Toxaemia	Normal	30 0	1 30	19	6 0	...	...	38 hours	L.	A.R.M.	...	...
8097	42	7	40	Toxaemia	Normal	2 0	0 15	21	8 15	...	...	2½ hours	L.	A.R.M.	...	...
8342	26	P.	37	Toxaemia	Normal	10 45	0 30	19	5 9	...	...	12 hours	L.	A.R.M.	...	...
7767	27	1	38	Toxaemia	Normal	12 30	0 15	19	5 11	...	...	15 hours	L.	A.R.M.	...	...
7805	30	P.	37	Toxaemia	Normal	12 0	2 0	19	5 9	...	...	18 hours	L.	A.R.M.	...	...
7808	36	2	37	Toxaemia	Normal	5 45	0 20	20	6 11	...	...	8 hours	L.	A.R.M.	...	...
1177	31	1	36	Toxaemia	Normal	11 15	0 15	20	6 14	...	...	18 hours	L.	A.R.M.	...	...
9012	37	P.	34	Toxaemia	Normal	13 0	35	14	2 8	...	...	48 hours	L.	A.R.M.	...	Uniovalar twins.
9032	24	P.	38	Toxaemia	Normal	22 0	1 10	20	7 5	...	...	24 hours	L.	A.R.M.	...	...
9287	20	P.	40	Toxaemia	Normal	8 30	0 30	20	7 2	...	...	48 hours	L.	A.R.M.	...	A.R.M.
8502	26	P.	36	Toxaemia	Normal	4 30	0 30	20	6 2	...	...	24 hours	L.	A.R.M.	...	...
9361	21	P.	38	Toxaemia	Normal	7 0	1 0	20	7 3	...	...	9 hours	L.	A.R.M.	...	...
9464	35	1	37	Toxaemia	Normal	6 0	0 15	19	6 1	...	...	7 hours	L.	A.R.M.	...	...
7483	22	1	40	Toxaemia	Normal	4 30	0 30	19	5 2	...	...	6 hours	L.	A.R.M.	...	...
9545	29	P.	36	Toxaemia	Normal	28 0	1 15	20	6 8	...	...	29 hours	L.	A.R.M.	...	...
8371	23	P.	38	Toxaemia	Normal	6 15	1 0	20	5 8	...	...	8 hours	L.	A.R.M.	...	...
8549	29	P.	38	Toxaemia	Normal	7 45	1 30	21	7 15	...	...	12 hours	L.	A.R.M.	...	...
8653	27	P.	38	Toxaemia	Normal	10 30	1 15	19	5 13	...	...	12 hours	L.	A.R.M.	...	...
8679	21	P.	39	Toxaemia	Normal	17 0	1 15	20	6 6	...	...	36 hours	L.	A.R.M.	...	...
8534	32	4	32	Toxaemia	Normal	7 30	0 30	18	5 7	...	...	12 hours	L.	A.R.M.	...	...
7780	28	P.	36	Toxaemia	Normal	49 0	0 15	19	6 8	...	...	50 hours	L.	A.R.M.	...	...
8609	21	P.	39	Toxaemia	Normal	8 30	1 15	20	7 11	...	...	12 hours	L.	A.R.M.	...	...
8777	25	P.	38	Toxaemia	Normal	25 30	2 0	19	5 4	...	...	28 hours	L.	A.R.M.	...	...
8703	25	P.	38	Toxaemia	Normal	24 0	1 0	20	6 7	...	...	29 hours	L.	A.R.M.	...	...
8573	29	P.	37	Toxaemia	Normal	11 15	1 0	20	6 14	...	...	16 hours	L.	A.R.M.	...	...
8460	28	1	38	Toxaemia	Normal	10 15	0 30	19	6 12	...	...	96 hours	L.	Surgical induction	...	...
1987	29	2	33	Toxaemia	Normal	36 0	0 30	18	3 15	...	...	40 hours	L.	Surgical induction	...	...
7780	28	P.	36	Toxaemia	Normal	49 0	0 15	19	6 8	...	...	50 hours	L.	Surgical induction	...	...
8081	42	2	42	Hydrannios	Normal	14 0	0 15	18	6 1	...	...	48 hours	L.	A.R.M.	...	Anencephalic.
8226	26	P.	34	Hydrannios	Normal	4 0	1 0	15	4 5	...	...	6 hours	L.	A.R.M.	...	Anencephalic.
9363	39	P.	31	Hydrannios	Normal	24 0	0 15	10	1 3	...	...	36 hours	L.	A.R.M.	...	Anencephalic.
9073	27	P.	34	Hydrannios	Normal	38 0	1 0	16	4 3	...	...	48 hours	L.	A.R.M.	...	Anencephalic.
8446	27	1	38	Cardiac	Normal	30 0	0 30	20	7 0	...	...	72 hours	L.	A.R.M.	...	...
9016	35	3	34	Cardiac	Normal	10 30	0 15	18	4 10	...	...	18 hours	L.	A.R.M.	...	...
9087	36	2	36	Cardiac	Normal	5 45	0 15	20	6 8	...	...	6 hours	L.	A.R.M.	...	...
9681	35	5	36	Cardiac	Normal	9 15	0 15	19	5 13	...	...	48 hours	L.	A.R.M.	...	...
8584	32	2	40	Multiple pregnancy	Normal	5 0	0 30	19	6 10	...	...	6 hours	L.	A.R.M.	...	...
7964	18	P.	38	Intra-uterine death	Normal	11 30	0 8	15	2 4	...	...	36 hours	L.	Oestrogen	...	...
3784	32	1	38	Bronchial asthma	Normal	7 30	0 10	19	6 2	...	...	12 hours	L.	A.R.M.	...	...
8324	30	2	38	Pylitis	Normal	29 0	1 30	20	6 15	...	...	48 hours	L.	A.R.M.	...	...
7669	35	1	40	Term	Normal	1 0	0 30	19	6 3	...	...	4 hours	L.	A.R.M.	...	...







# INDUCTION OF LABOUR—NORMAL DELIVERY (continued)

Reg. No.	Age	Grav.	Matu- ridity	Indication	Type of Pelvis	Duration of Labour			Baby		I.D.I.	Result	Method	Remarks
						1st St.	2nd St.	h. m.	Length ins.	Weight lb. oz.				
8960	20	P.	37	Toxaemia	Normal	13 30	0 45	20	16	5 10	16 hours	L.	A.R.M.	
8981	31	P.	37	Toxaemia	Normal	27 30	0 30	19	20	6 6	72 hours	L.	A.R.M.	
8169	25	P.	40	Toxaemia	Normal	20 0	1 0	20	19	6 3	24 hours	L.	A.R.M.	
9314	37	P.	37	Toxaemia	Normal	3 30	0 30	18	20	7 8	8 hours	L.	A.R.M.	
9298	21	P.	37	Toxaemia	Normal	4 30	1 0	19	18	4 10	6 hours	L.	A.R.M.	
9862	30	P.	37	Toxaemia	Normal	16 0	0 30	18	18	6 1	20 hours	L.	A.R.M.	
9470	32	P.	37	Toxaemia	Normal	6 0	1 0	19	19	5 14	8 hours	L.	A.R.M.	
8536	31	P.	35	Toxaemia	Normal	10 0	0 45	15	15	4 13	12 hours	L.	Surgical induction	Stomach tube touched the placenta.
8050	33	P.	37	Toxaemia	Normal	9 0	0 45	16	16	5 10	24 hours	L.	Surgical induction	
7688	26	P.	38	Toxaemia	Normal	8 0	0 45	20	20	7 8	12 hours	L.	Surgical induction	
7639	29	P.	2	Toxaemia	Normal	16 0	1 30	18	18	5 6	24 hours	L.	Surgical induction	
8522	31	P.	38	Obstetric history	Normal	3 0	0 45	21	21	8 5	6 hours	L.	A.R.M.	Previous S.B. 39 weeks
7644	27	P.	38	Multiple pregnancy	Normal	2 30	0 10	17	17	6 3	4 hours	L.	A.R.M.	
7781	32	P.	35	Hydrannios	Normal	5 30	0 15	18	18	5 8	16 hours	L.	A.R.M.	Anencephalic
7777	23	P.	36	Hydrannios	Normal	26 45	0 45	14	14	3 7	36 hours	L.	A.R.M.	Anencephalic
7839	17	P.	36	Hydrannios	Normal	31 0	0 45	14	14	3 6	48 hours	L.	A.R.M.	Anencephalic
7803	40	P.	34	Hydrannios	Normal	5 0	0 15	14	14	3 8	12 hours	L.	A.R.M.	Anencephalic
8250	28	P.	34	Hydrannios	Normal	10 0	0 30	13	13	3 15	12 hours	L.	A.R.M.	Anencephalic
9227	32	P.	35	Hydrannios	Normal	5 0	0 30	12	12	3 1	6 hours	L.	A.R.M.	Anencephalic
9245	25	P.	33	Hydrannios	Normal	6 0	0 15	12	12	2 15	6 hours	L.	A.R.M.	Anencephalic
9275	37	P.	34	Hydrannios	Normal	12 0	0 5	13	13	3 7	14 hours	L.	A.R.M.	Anencephalic
9517	19	P.	35	Hydrannios	Normal	46 0	0 20	14	14	3 14	48 hours	L.	A.R.M.	Anencephalic
9409	21	P.	36	Hydrannios	Normal	34 0	0 10	15	15	4 0	36 hours	L.	A.R.M.	Anencephalic
9120	25	P.	38	Hydrannios	Normal	6 0	0 5	18	18	4 6	7 hours	L.	A.R.M.	Anencephalic
9311	31	P.	34	Cardiac	Normal	7 30	0 5	18	18	5 13	9 hours	L.	A.R.M.	Anencephalic
6174	26	P.	38	Cardiac	Normal	10 30	0 45	19	19	6 4	12 hours	L.	A.R.M.	Anencephalic
8629	23	P.	34	Intra-uterine death	Normal	23 0	0 30	18	18	4 6	28 hours	L.	Oestrogen	
9044	46	P.	37	Eclampsia	Normal	0 30	0 5	18	18	5 0	1 hour	L.	A.R.M.	
9435	32	P.	37	Diabetic	Normal	13 0	1 0	20	20	7 9	16 hours	L.	A.R.M.	
9153	38	P.	40	Term	Normal	6 30	0 15	20	20	7 14	12 hours	L.	A.R.M.	
9107	36	P.	40	Term	Normal	6 0	0 10	20	20	7 8	7 hours	L.	A.R.M.	
9511	29	P.	40	Term	Normal	14 0	1 15	20	20	6 1	46 hours	L.	A.R.M.	
8822	36	P.	40	Term	Normal	5 15	0 15	20	20	7 6	36 hours	L.	A.R.M.	
8800	42	P.	40	Term	Normal	3 0	0 15	21	21	9 11	4 hours	L.	A.R.M.	
3357	30	P.	40	Term	Normal	7 15	0 15	20	20	6 4	16 hours	L.	A.R.M.	
8452	34	P.	40	Term	Normal	3 0	0 30	20	20	7 13	4 hours	L.	A.R.M.	
8863	26	P.	40	Term	Normal	8 0	0 30	20	20	7 2	9 hours	L.	A.R.M.	
9013	42	P.	40	Term	Normal	15 15	0 30	20	20	7 10	16 hours	L.	A.R.M.	
4559	32	P.	40	Term	Normal	1 30	0 15	20	20	7 8	8 hours	L.	A.R.M.	
9051	33	P.	40	Term	Normal	3 0	0 30	21	21	8 1	4 hours	L.	A.R.M.	
7760	39	P.	40	Term	Normal	1 45	0 10	21	21	8 13	5 hours	L.	A.R.M.	
8126	38	P.	40	Term	Normal	4 30	0 20	20	20	7 2	6 hours	L.	A.R.M.	
147	28	P.	40	Term	Normal	8 0	0 30	20	20	6 12	16 hours	L.	A.R.M.	
8302	28	P.	40	Term	Normal	5 30	1 0	20	20	7 10	12 hours	L.	A.R.M.	
8343	27	P.	40	Term	Normal	15 0	3 0	20	20	6 12	24 hours	L.	A.R.M.	
8358	34	P.	40	Term	Normal	2 0	0 30	20	20	6 12	6 hours	L.	A.R.M.	
8418	27	P.	46	Term	Normal	10 30	1 0	21	21	8 0	48 hours	L.	A.R.M.	



# FORCEPS

Forceps were applied 141 times : 96 booked, and 45 emergency.

No. of Cases	Indication	Mothers		Infants			
		L.	D.	L.	SB.	M.	D.
BOOKED CASES							
43	Delay in second stage, due to poor pains	43	—	42	—	—	1
13	Delay in second stage, due to disproportion	13	—	10	3	—	—
21	Delay in second stage, due to malposition	21	—	19	1	—	1
3	Maternal distress	3	—	3	—	—	0
14	Foetal distress	14	—	13	1	—	—
2	Delayed labour	2	—	1	1	—	—
96		96	0	88	6	0	2
EMERGENCY CASES							
8	Delay in second stage, due to poor pains	8	—	8	—	—	—
8	Delay in second stage, due to disproportion	8	—	6	1	—	1
10	Delay in second stage, due to malposition	10	—	10	—	—	—
8	Maternal distress	8	—	7	1	—	—
2	Foetal distress	2	—	2	—	—	—
9	Prophylactic	9	—	9	—	—	—
45		45	0	42	2	0	1
141		141	0	130	8	0	3

There was no maternal death.

11 Babies died, or were stillborn, a foetal mortality of 7.8%.

Three were dead before the forceps were applied, a corrected mortality of 5.7%.



# FORCEPS DELIVERY—LABOUR NOT INDUCED

Reg. No.	Age	Grav-ids	Maturity	Indication for Forceps	Type of Pelvis	Duration of Labour			Weight lb. oz.	Length	Result	Remarks
						1st St. h. m.	2nd St. h. m.	3rd St. h. m.				
BOOKED CASES												
7748	30	P.	40	Delay in 2nd stage, due to poor pains	Normal	22 0	3 30	7 1	19	L.	D.	Low forceps.
7773	29	P.	40	Delay in 2nd stage, due to poor pains	Normal	31 45	3 45	6 4	20	L.	L.	Low forceps.
7921	38	P.	40	Delay in 2nd stage, due to poor pains	Normal	13 30	3 30	6 10	20	L.	L.	Low forceps.
7612	39	P.	40	Delay in 2nd stage, due to poor pains	Normal	29 0	2 0	8 6	21	L.	L.	Low forceps.
7846	32	P.	40	Delay in 2nd stage, due to poor pains	Normal	50 30	2 30	6 4	20	L.	L.	Low forceps.
7719	28	P.	40	Delay in 2nd stage, due to poor pains	Normal	34 30	2 30	9 7	21	L.	L.	Low forceps.
7865	21	P.	40	Delay in 2nd stage, due to poor pains	Normal	19 30	2 30	8 2	21	L.	L.	Low forceps.
7812	21	P.	40	Delay in 2nd stage, due to poor pains	Normal	58 0	3 45	8 11	21	L.	L.	Low forceps.
8007	25	P.	40	Delay in 2nd stage, due to poor pains	Normal	7 30	4 0	7 1	20	L.	L.	Low forceps.
8009	25	P.	40	Delay in 2nd stage, due to poor pains	Normal	22 0	3 30	7 12	20	L.	L.	Low forceps.
8121	22	P.	40	Delay in 2nd stage, due to poor pains	Normal	30 0	3 0	7 10	21	L.	L.	Low forceps.
8062	24	P.	40	Delay in 2nd stage, due to poor pains	Normal	37 30	3 30	7 12	21	L.	L.	Low forceps.
8143	22	P.	40	Delay in 2nd stage, due to poor pains	Normal	8 30	2 30	7 2	20	L.	L.	Low forceps.
8148	34	P.	40	Delay in 2nd stage, due to poor pains	Normal	17 30	3 45	6 12	20	L.	L.	Low forceps.
8237	30	P.	40	Delay in 2nd stage, due to poor pains	Normal	20 0	2 45	6 14	20	L.	L.	Low forceps.
8119	20	P.	40	Delay in 2nd stage, due to poor pains	Normal	82 30	3 15	7 10	20	L.	L.	Low forceps.
8400	27	P.	40	Delay in 2nd stage, due to poor pains	Normal	9 30	3 15	6 5	19	L.	L.	Low forceps.
8572	39	P.	40	Delay in 2nd stage, due to poor pains	Normal	17 30	3 0	6 0	19	L.	L.	Low forceps.
8399	33	P.	40	Delay in 2nd stage, due to poor pains	Normal	16 30	3 15	8 0	21	L.	L.	Low forceps.
8478	38	P.	40	Delay in 2nd stage, due to poor pains	Normal	18 30	2 0	7 7	21	L.	L.	Low forceps.
8355	27	P.	40	Delay in 2nd stage, due to poor pains	Normal	39 0	2 30	8 1	21	L.	L.	Low forceps.
7818	22	P.	40	Delay in 2nd stage, due to poor pains	Normal	11 30	4 0	7 7	20	L.	L.	Low forceps.
8841	30	P.	40	Delay in 2nd stage, due to poor pains	Normal	7 30	2 30	8 7	21	L.	L.	Low forceps.
8895	36	P.	40	Delay in 2nd stage, due to poor pains	Normal	33 15	3 0	7 9	20	L.	L.	Low forceps.
8953	24	P.	40	Delay in 2nd stage, due to poor pains	Normal	33 0	4 0	5 10	20	L.	L.	Low forceps.
8455	33	P.	40	Delay in 2nd stage, due to poor pains	Normal	23 0	4 0	7 15	20	L.	L.	Low forceps.
9015	41	P.	40	Delay in 2nd stage, due to poor pains	Normal	38 30	2 15	6 0	20	L.	L.	Low forceps.
9045	25	P.	40	Delay in 2nd stage, due to poor pains	Normal	20 0	2 30	7 14	20	L.	L.	Low forceps.
9122	27	P.	40	Delay in 2nd stage, due to poor pains	Normal	20 15	3 0	7 13	20	L.	L.	Low forceps.
9080	34	P.	40	Delay in 2nd stage, due to poor pains	Normal	22 0	3 15	7 2	20	L.	L.	Low forceps.
9173	34	P.	40	Delay in 2nd stage, due to poor pains	Normal	21 30	4 0	7 14	20	L.	L.	Low forceps.
9268	25	P.	40	Delay in 2nd stage, due to poor pains	Normal	4 45	2 0	6 5	20	L.	L.	Low forceps.
9306	29	P.	40	Delay in 2nd stage, due to poor pains	Normal	6 30	3 15	7 3	20	L.	L.	Low forceps.
9392	23	P.	40	Delay in 2nd stage, due to poor pains	Normal	26 15	2 0	6 11	20	L.	L.	Low forceps.
9376	29	P.	40	Delay in 2nd stage, due to poor pains	Normal	18 0	3 15	7 7	20	L.	L.	Low forceps.
9437	33	P.	40	Delay in 2nd stage, due to poor pains	Normal	40 15	3 30	8 7	20	L.	L.	Low forceps.
9457	34	P.	40	Delay in 2nd stage, due to poor pains	Normal	11 30	2 30	8 10	20	L.	L.	Low forceps.
9496	32	P.	40	Delay in 2nd stage, due to poor pains	Normal	21 0	3 15	6 10	20	L.	L.	Low forceps.
9458	31	P.	40	Delay in 2nd stage, due to poor pains	Normal	9 30	4 0	7 2	20	L.	L.	Low forceps.
9554	42	1	40	Delay in 2nd stage, due to poor pains	Normal	8 30	2 0	8 7	20	L.	L.	Low forceps.
9498	34	P.	40	Delay in 2nd stage, due to poor pains	Normal	34 0	2 30	7 15	20	L.	L.	Low forceps.
9495	32	P.	40	Delay in 2nd stage, due to disproportion	Flat	13 50	4 0	9 8	22	L.	L.	Low forceps.
9384	34	P.	40	Delay in 2nd stage, due to disproportion	Android	18 15	3 0	7 4	20	L.	L.	Mid forceps.
9382	31	P.	40	Delay in 2nd stage, due to disproportion	Generally contracted	18 0	3 30	9 9	20	L.	L.	Low forceps.
8885	34	P.	40	Delay in 2nd stage, due to disproportion	Generally contracted	61 0	-	7 6	20	L.	SB.	Mid forceps.
												Disproportion partly due to size of child.
												Patient herself had had operation for imperforate anus.
												Subsequent manual removal of placenta.
												Baby died, cerebral hemorrhage.

Disproportion partly due to size of child.  
 Patient herself had had operation for imperforate anus.  
 Subsequent manual removal of placenta.  
 Baby died, cerebral hemorrhage.



# FORCEPS DELIVERY—LABOUR NOT INDUCED (continued)

Reg. No.	Age	Grav. idia	Maturity	Indication for Forceps	Type of Pelvis	Duration of Labour			Length	Result	Remarks
						1st St.	2nd St.	Weight			
						h. m.	h. m.	lb. oz.		M. C.	
8685	28	P.	40	Delay in 2nd stage, due to disproportion	Generally contracted	28 15	5 0	7 13	20	L.	Local uterine sepsis.
8577	28	P.	40	Delay in 2nd stage, due to disproportion	Generally contracted	41 0	3 30	7 8	20	L.	To complete trial of labour.
7981	30	P.	40	Delay in 2nd stage, due to disproportion	Generally contracted	18 0	3 30	7 7	20	L. SB.	To complete trial of labour. Baby had a torn tentorium.
8569	27	P.	40	Delay in 2nd stage, due to disproportion	Normal	34 30	2 0	10 5	23	L.	Disproportion due to large size of child.
8814	23	P.	40	Delay in 2nd stage, due to disproportion	Flat	20 0	3 30	8 11	20	L.	
8216	24	P.	40	Delay in 2nd stage, due to disproportion	Flat	28 0	4 15	8 10	22	L.	
8263	27	P.	40	Delay in 2nd stage, due to disproportion	Funnel	33 15	5 0	7 6	20	L. SB.	
8048	36	P.	40	Delay in 2nd stage, due to disproportion	Normal	60 0	2 0	10 6	23	L.	Narrow outlet.
8179	26	2	40	Delay in 2nd stage, due to disproportion	Generally contracted	5 0	0 10	6 9	19	L.	Disproportion due to size of child. Has had 2 previous Casareans for disproportion.
7766	39	P.	40	Delay in 2nd stage, due to malposition	Generally contracted	14 0	1 45	5 13	18	L. SB.	R.O.P. position. Casarean considered, but not done.
7776	29	P.	40	Delay in 2nd stage, due to malposition	Normal	59 0	3 0	7 8	21	L.	Manual rotation and forceps delivery of R.O.P.
7666	32	P.	40	Delay in 2nd stage, due to malposition	Android	22 30	5 0	8 4	21	L.	Deep transverse arrest.
7652	34	P.	40	Delay in 2nd stage, due to malposition	Normal	25 30	3 30	6 10	20	L.	Deep transverse arrest.
7926	23	P.	42	Delay in 2nd stage, due to malposition	Normal	39 30	2 30	11 5	23½	L.	Delivered face to pubis with forceps.
8087	28	P.	40	Delay in 2nd stage, due to malposition	Normal	7 0	3 15	6 14	20	L.	Deep transverse arrest.
8190	38	P.	40	Delay in 2nd stage, due to malposition	Normal	36 0	3 0	6 13	20	L.	Manual rotation and forceps delivery of R.O.P.
8361	25	2	40	Delay in 2nd stage, due to malposition	Flat	5 30	2 0	8 0	21	L.	Forceps delivery face to pubis.
8189	26	P.	40	Delay in 2nd stage, due to malposition	Normal	33 30	4 30	6 7	20	L.	Manual rotation and forceps delivery of R.O.P.
8028	28	P.	40	Delay in 2nd stage, due to malposition	Normal	15 30	4 30	6 2	20	L.	Manual rotation and forceps delivery of R.O.P.
8591	24	P.	40	Delay in 2nd stage, due to malposition	Normal	10 30	3 30	7 4	20	L.	Manual rotation and forceps delivery of R.O.P.
8694	27	P.	40	Delay in 2nd stage, due to malposition	Normal	13 0	3 30	9 8	22	L.	Deep transverse arrest.
8628	25	P.	40	Delay in 2nd stage, due to malposition	Normal	10 30	3 0	6 8	20	L.	Forceps delivery face to pubis.
8828	37	P.	40	Delay in 2nd stage, due to malposition	Normal	53 0	3 30	8 4	21	L.	Forceps delivery face to pubis.
8464	29	P.	40	Delay in 2nd stage, due to malposition	Normal	54 0	3 30	7 1	20	L. D.	Deep transverse arrest. Baby died congestion and pneumonia, no cerebral hemorrhage.
9118	28	P.	40	Delay in 2nd stage, due to malposition	Normal	15 30	2 30	8 0	20	L.	Manual rotation and forceps delivery of R.O.P.
9097	29	P.	40	Delay in 2nd stage, due to malposition	Normal	32 0	3 0	7 5	21	L.	Deep transverse arrest.
9131	30	P.	40	Delay in 2nd stage, due to malposition	Normal	33 30	3 0	8 4	21	L.	Deep transverse arrest. Maternal toxemia.
9226	26	P.	40	Delay in 2nd stage, due to malposition	Android	54 0	2 30	6 11	20	L.	Deep transverse arrest.
9359	37	P.	40	Delay in 2nd stage, due to malposition	Normal	14 30	2 30	7 8	20	L.	Manual rotation and forceps delivery.
9526	25	P.	40	Delay in 2nd stage, due to malposition	Normal	27 30	2 30	6 6	20	L.	Forceps delivery face to pubis.
8725	22	P.	34	Maternal distress	Normal	20 30	0 5	3 9	18	L.	Low forceps.
5758	24	1	40	Maternal distress	Normal	28 0	2 0	6 15	19	L.	Low forceps.
8674	32	P.	36	Maternal distress	Normal	131 15	0 15	4 14	18	L.	Cardiac. Previous C.S. Inert uterus, mother very tired.



# FORCEPS DELIVERY—LABOUR NOT INDUCED (continued)

Reg. No.	Age	Grav. idia	Maturity	Indication for Forceps	Type of Pelvis	Duration of Labour				Length	Result	Remarks
						1st St.	2nd St.	Weight				
						h. m.	h. m.	lb. oz.				
9312	27	P.	40	Foetal distress	Normal	36 0	2 0	7 6		20	L. L.	Low forceps.
9416	22	P.	40	Foetal distress	Normal	14 0	0 15	6 14		20	L. L.	Low forceps. Foetal heart became irregular towards end of 1st stage. Complete tear of perineum.
9261	29	P.	40	Foetal distress	Normal	7 30	0 45	9 13		22	L. L.	Low forceps.
2286	31	1	40	Foetal distress	Normal	5 0	1 15	8 10		21	L. L.	Low forceps.
9190	32	P.	40	Foetal distress	Normal	8 30	1 0	8 13		21	L. L.	Low forceps.
9175	26	P.	40	Foetal distress	Normal	3 30	0 45	6 3		20	L. L.	Low forceps.
9142	24	P.	40	Foetal distress	Normal	42 30	2 0	8 7		21	L. L.	Low forceps.
8935	27	P.	40	Foetal distress	Normal	12 0	2 30	7 0		20	L. L.	Low forceps.
9026	39	P.	40	Foetal distress	Normal	8 15	2 10	6 10		21	L. L.	Low forceps.
8269	38	P.	40	Foetal distress	Normal	17 45	3 15	9 1		22	L. SB.	Mid forceps. Cord prolapsed at $\frac{1}{2}$ dilatation. Forceps subs. used to deliver dead child.
8186	26	P.	40	Foetal distress	Normal	10 15	1 15	6 14		20	L. L.	Low forceps.
8353	22	P.	40	Foetal distress	Normal	18 15	0 15	7 0		20	L. L.	Low forceps.
7857	29	P.	38	Foetal distress	Normal	12 30	0 15	5 0		18	L. L.	Low forceps. Prolapsed cord, external version for breech 4 days before.
7742	38	P.	40	Foetal distress	Normal	16 30	2 0	5 5		19	L. L.	Low forceps.
8758	34	P.	40	Delayed labour	Normal	39 30	-	7 13		20	L. L.	Mid forceps. Keiland's rotation.
EMERGENCY CASES												
6478	37	1	40	Delayed 2nd stage, due to poor pains	Normal	3 45	3 0	8 4		20	L. L.	Low forceps.
8630	22	P.	40	Delayed 2nd stage, due to poor pains	Normal	49 0	2 30	8 7		21	L. L.	Low forceps.
8235	36	P.	40	Delayed 2nd stage, due to poor pains	Normal	44 30	2 0	7 0		20	L. L.	Mid forceps. B. Coli septicaemia developed during labour.
8760	30	P.	40	Delayed 2nd stage, due to poor pains	Normal	28 30	2 15	7 10		20	L. L.	Low forceps. Failed forceps at $\frac{1}{2}$ dilatation before admission.
8524	36	P.	40	Delayed 2nd stage, due to poor pains	Normal	9 30	3 0	6 8		20	L. L.	Low forceps.
9124	25	P.	40	Delayed 2nd stage, due to poor pains	Normal	13 0	2 45	7 13		20	L. L.	Low forceps.
9408	22	P.	40	Delayed 2nd stage, due to poor pains	Normal	58 0	2 30	9 0		22	L. L.	Low forceps. Admitted late in labour; transfused.
9576	26	P.	40	Delayed 2nd stage, due to poor pains	Normal	5 45	2 15	6 11		20	L. L.	Low forceps.
9216	24	P.	40	Delay in 2nd stage, due to disproportion	Flat	29 30	1 0	7 15		20	L. L.	Mid forceps.
6649	27	P.	40	Delay in 2nd stage, due to disproportion	Generally contracted	16 30	2 0	8 0		21	L. D.	Mid forceps. Died 3rd day of intercranial haemorrhage.
9046	29	1	40	Delay in 2nd stage, due to disproportion	Flat	12 0	2 30	7 12		20	L. L.	Low forceps. Previous S.B. with forceps.
9199	23	P.	40	Delay in 2nd stage, due to disproportion	Generally contracted	14 30	2 0	7 15		20	L. L.	Mid forceps. Baby showed signs of intracranial damage, but recovered.
9058	27	P.	40	Delay in 2nd stage, due to disproportion	Generally contracted	18 30	3 30	9 15		22	L. L.	Mid forceps. Failed forceps before admission.
8838	27	P.	40	Delay in 2nd stage, due to disproportion	Generally contracted	33 30	6 30	9 0		22	L. SB.	Mid forceps. Bad facial paralysis, recovered.
8474	25	P.	40	Delay in 2nd stage, due to disproportion	Generally contracted	13 45	3 30	7 1		20	L. L.	Mid forceps. To complete trial of labour.
8218	22	P.	40	Delay in 2nd stage, due to disproportion	Flat	19 30	2 45	7 7		20	L. L.	Mid forceps. Face presentation, admitted late in labour.
7951	38	2	40	Delay in 2nd stage, due to malposition	Flat	20 0	6 30	8 15		22	L. L.	Mid forceps. Deep transverse arrest. Admitted late in labour.
8316	32	1	40	Delay in 2nd stage, due to malposition	Android	5 30	6 0	7 3		20	L. L.	Mid forceps. Manual rotation and forceps delivery of R.O.P.
8598	24	P.	40	Delay in 2nd stage, due to malposition	Normal	10 0	2 45	7 10		20	L. L.	Low forceps.



# FORCEPS DELIVERY—LABOUR NOT INDUCED (continued)

Reg. No.	Age	Gravida	Maturity	Indication for Pelvis	Type of Pelvis	Duration of Labour		Weight lb. oz.	Length	Result	Remarks
						1st St. h. m.	2nd St. h. m.				
8871	30	P.	36	Delay in 2nd stage, due to malposition	Normal	11 0	3 30	4 12	18	M. C. L.	Mid forceps. Brow presentation, delivered face to pubis with forceps.
8468	38	P.	40	Delay in 2nd stage, due to malposition	Normal	25 30	2 30	6 10	19	L. L.	Manual rotation and forceps delivery of R.O.P.
9095	24	P.	40	Delay in 2nd stage, due to malposition	Flat	19 0	6 30	7 9	20	L. L.	Admitted in 2nd stage. Forceps delivery face to pubis.
9334	22	P.	40	Delay in 2nd stage, due to malposition	Normal	58 0	2 0	7 8	20	L. L.	Manual rotation and forceps delivery of R.O.P.
9360	23	P.	36	Delay in 2nd stage, due to malposition	Normal	4 0	3 15	4 14	18	L. L.	Manual rotation and forceps delivery of R.O.P. Double uterus.
5805	28	P.	40	Delay in 2nd stage, due to malposition	Normal	3 45	3 0	7 5	20	L. L.	Forceps delivery face to pubis.
9446	26	P.	38	Maternal distress	Normal	9 0	2 0	5 7	19	L. L.	Acute respiratory infection. Substituted.
8773	37	P.	40	Maternal distress	Normal	14 0	1 15	8 4	20	L. L.	Low forceps.
7950	38	P.	40	Maternal distress	Normal	39 0	1 0	5 3	19	L. L.	Low forceps. Cardiac. Delivery under local anesthesia.
8202	23	P.	40	Maternal distress	Normal	13 30	1 30	8 1	21	L. L.	Low forceps. Cardiac.
8682	23	P.	40	Maternal distress	Normal	13 15	0 10	6 5	20	L. L.	Low forceps. Cardiac.
8512	39	P.	37	Foetal distress	Normal	21 30	2 0	5 3	18	L. L.	Severe maternal toxemia.
9385	23	P.	40	Foetal distress	Normal	32 40	-	8 2	18	L. L.	Prolapsed cord at nearly full dilatation.
8175	21	P.	40	Prophylactic	...	11 43	0 30	6 8	20	L. L.	Low forceps.
8230	32	P.	40	Prophylactic	...	33 0	-	5 12	19	L. L.	Low forceps.
8376	28	P.	40	Prophylactic	...	26 0	-	7 2	20	L. L.	Low forceps.
7730	33	P.	40	Prophylactic	...	19 30	0 15	6 4	20	L. L.	Low forceps.
9110	32	P.	40	Prophylactic	...	39 40	1 0	6 8	20	L. L.	Low forceps.
9365	33	P.	36	Prophylactic	...	71 30	-	4 1	18	L. L.	Low forceps.

## FORCEPS DELIVERY—LABOUR INDUCED

BOOKED CASES												
7554	29	P.	38	Delay in 2nd stage, due to poor pains	Normal	...	85 30	3 0	7 0	20	L. L.	A.R.M. for toxæmia.
7946	29	P.	40	Delay in 2nd stage, due to poor pains	Normal	...	60 30	3 0	4 1	18	L. L.	Stomach tube induction for toxæmia.
8015	36	P.	40	Delayed labour	Normal	...	111 0	-	9 4	22	L. SB.	A.R.M. for toxæmia. Foetal heart absent after 3 days. Forceps used to deliver dead baby.
EMERGENCY CASES												
7820	25	P.	38	Delay in 2nd stage, due to malposition	Normal	...	13 0	2 30	6 2	20	L. L.	A.R.M. for toxæmia. Manual rotation and forceps delivery of R.O.P. position.
8726	29	P.	39	Maternal distress : Eclampsia	Normal	...	17 30	1 0	6 1	19	L. SB.	A.R.M. for eclampsia.
8697	20	P.	40	Maternal distress : Eclampsia	Normal	...	3 15	0 45	6 10	20	L. L.	A.R.M. for eclampsia.
8757	27	P.	38	Maternal distress : Eclampsia	Normal	...	8 30	0 30	6 10	20	L. L.	A.R.M. for eclampsia.
6644	40	P.	40	Prophylactic	Normal	...	24 0	-	6 12	20	L. L.	A.R.M. Cervix divided and child extracted.
8967	31	P.	40	Prophylactic	...	...	10 0	1 0	7 0	20	L. L.	Medicinal induction. Complete tear with recto-vaginal fistula.
9106	24	P.	40	Prophylactic	...	...	10 30	0 15	7 0	20	L. L.	Medicinal induction.



## FORCEPS FAILED BEFORE ADMISSION

6 cases, all emergency.

Reg. No.	Age	Gravida	Maturity	Method of Termination	Result M. C.	Remarks
8760	30	P.	40	Forceps delivery ...	L. L.	Forceps applied at half dilatation outside, re-applied at full dilatation.
8838	27	P.	40	Forceps delivery ...	L. SB.	No foetal heart on admission. Delivery effected with axis traction forceps.
8264	32	P.	40	Lower segment Caesarean	L. L.	Flat pelvis, forceps applied before full dilatation.
8516	34	1	40	Lower segment Caesarean	L. SB.	Forceps delivery in previous pregnancy.
7902	26	P.	40	Normal delivery ...	L. L.	Forceps applied before full dilatation.
8643	33	2	40	Normal delivery ...	L. L.	Forceps applied before full dilatation.

## VERSION

Version was performed during labour in 16 cases, 3 booked and 13 emergency.  
In 15 cases the operation performed was internal version, in 1 bi-polar version.

Reg. No.	Age	Gravida	Maturity	Indication	Weight of Infant lb. oz.	Result M. C.	Remarks
<b>BOOKED CASES</b>							
9256	36	5	40	Transverse lie with prolapsed arm	7 10	L. SB.	Patient had had A.R.M. for toxæmia. Leg brought down.
9534	23	P.	38	Transverse lie ...	6 6	L. L.	Second twin. Breech extracted.
8263	35	1	40	Transverse lie with prolapsed arm.	5 7	L. L.	Second twin. Breech extracted.
<b>EMERGENCY CASES</b>							
8065	23	P.	40	Shoulder with prolapsed arm	4 11	L. L.	Admitted at full dilatation.
7802	30	2	40	Shoulder with prolapsed arm	6 8	L. L.	Internal version and breech extraction.
9491	23	1	40	Shoulder with prolapsed arm	7 6	L. L.	Leg brought down at $\frac{1}{2}$ dilatation. Subsequent normal breech delivery.
9626	35	2	40	Shoulder with prolapsed arm	7 2	L. SB.	Breech extracted through incompletely dilated cervix.
8871	30	P.	40	Shoulder ...	4 4	L. L.	2nd twin. Version and breech extracted.
8560	31	3	40	Shoulder with prolapsed hand and cord	5 14	L. L.	Leg brought down at $\frac{1}{2}$ dilatation. Subsequent normal breech delivery.
8430	32	6	40	Prolapsed cord ...	7 3	L. L.	Cord prolapsed at $\frac{1}{2}$ dilatation. Breech extracted.
7756	35	5	40	Delayed labour ...	8 1	L. SB.	L.O.P. in flat pelvis, difficult breech extraction.
9588	21	P.	41	Delayed labour ...	9 1	L. L.	R.O.P. normal pelvis.
9539	29	2	40	Delayed labour ...	8 15	L. L.	Posterior parietal presentation.
9503	38	3	34	Placenta prævia ...	3 6	L. L.	Breech extracted.
8296	29	2	40	Placenta prævia ...	7 8	L. SB.	Version performed at full dilatation.
8296	22	2	40	Placenta prævia ...	7 0	L. SB.	Bi-polar version. Subsequent normal breech delivery.

No mother died.

5 babies were stillborn, a foetal mortality of 33%.



# CÆSAREAN SECTION

Cæsarean Section was performed 173 times.  
85 were booked, and 88 emergency operations.

## SUMMARY OF RESULTS

No. of Cases	Indication	Mother		Infants			
		L.	D.	L.	SB.	M.	D.
BOOKED CASES							
69	Disproportion	69	—	68	—	—	1
4	Cardiac disease	4	—	3	—	—	—
2	Placenta prævia	2	—	2	—	—	—
3	Obstetric history	3	—	2	—	—	1
2	Breech presentation	2	—	2	—	—	—
0	Toxæmia	0	—	0	—	—	—
1	Ovarian cyst	1	—	1	—	—	—
1	Fibroids	1	—	1	—	—	—
1	Accidental hæmorrhage	1	—	1	—	—	—
1	Bronchitis	1	—	1	—	—	—
1	Previous colporrhaphy	1	—	—	1	—	—
85	Total	85	0	81	1	0	3
EMERGENCY CASES							
39	Disproportion	38	1	35	4	—	—
2	Cardiac disease	2	0	2	—	—	—
12	Placenta prævia	12	0	7	—	—	5
4	Obstetric history	2	2	3	—	—	1
3	Breech	3	0	3	—	—	—
5	Toxæmia	5	0	4	1	—	—
5	Inertia	3	2	6	—	—	—
	(One pair of twins)						
1	Previous colporrhaphy	1	—	1	—	—	—
5	Fibroids	5	—	4	—	—	1
2	Ovarian cyst	2	—	2	—	—	—
2	Double uterus	2	—	2	—	—	—
2	Accidental hæmorrhage	2	—	0	2	—	—
2	Diabetic	2	0	1	—	1	—
4	No indication given	4	0	4	—	—	—
	Total	83	5	74	7	1	7

5 Mothers died, a mortality of 2.8%.

19 Babies were stillborn or died, a foetal mortality of 11%.

There were 150 lower segment operations (3 died), 19 classical operations (1 died), 4 Cæsarean hysterectomy (1 died).

General anæsthesia was used in 138 cases.

Spinal anæsthesia was used in 13 cases.

Local anæsthesia was used in 22 cases.







# CÆSAREAN SECTION (continued)

Reg. No.	Age	Gravida	Maturity	Indication	Obstetric History	Pelvis	Duration of Labour			Child		Result	Type of Operation	Anæsthetic	Remarks
							1st St. h. m.	2nd St. h. m.	lb. oz.	Weight ins					
912	29	2	40	Disproportion and contracted pelvis	2 C.S. ...	Generally contracted	—	—	8 3	21	L.	L.U.S.	G.	Sterilisation.	
8983	34	P.	40	Disproportion and contracted pelvis	1 C.S. ...	Generally contracted	—	—	8 3	21	L.	L.U.S.	G.	Stitch abscess.	
9156	21	P.	40	Disproportion and contracted pelvis	1 S.B., 2 C.S. ...	Flat	18 0	—	7 4	20	L.	L.U.S.	G.	Sterilisation.	
4763	32	3	40	Disproportion and contracted pelvis	1 S.B., 1 C.S. ...	Generally contracted	—	—	7 14	20	L.	L.U.S.	G.	Operation performed partly on account of age.	
9279	30	P.	40	Disproportion and contracted pelvis	1 S.B., 1 C.S. ...	Flat	—	—	8 5	21	L.	L.U.S.	G.	Face presentation developed in a flat pelvis.	
1847	33	2	40	Disproportion and contracted pelvis	1 S.B. ...	Flat	—	—	5 14	19	L.	L.U.S.	G.	Sterilisation.	
9302	40	P.	40	Disproportion and contracted pelvis	1 S.B. ...	Flat	—	—	7 14	20	L.	L.U.S.	G.	Very small stature.	
5346	32	1	40	Disproportion and contracted pelvis	2 C.S. ...	Generally contracted	10 0	—	5 6	19	L.	L.U.S.	G.	Previous classical section.	
9271	22	P.	40	Disproportion and contracted pelvis	1 C.S. ...	Flat	—	—	6 12	20	L.	L.U.S.	G.	Appendectomy scar and dense adhesions prevented access to L.U.S.	
7690	39	2	39	Disproportion and contracted pelvis	2 C.S. ...	Flat	—	—	5 6	19	L.	L.U.S.	G.	Vesico-vaginal fistula after forceps.	
3886	22	1	40	Disproportion and contracted pelvis	2 C.S. ...	Flat	4 0	—	6 12	20	L.	L.U.S.	G.	Burns on abdominal wall made high incision necessary.	
1397	41	2	38	Disproportion and contracted pelvis	1 S.B., 1 C.S. ...	Generally contracted	—	—	6 14	20	L.	L.U.S.	G.	Complicated by acute toxæmia: sterilisation.	
7586	30	P.	40	Disproportion and contracted pelvis	1 C.S. ...	Asymmetrical	—	—	7 0	20	L.	L.U.S.	G.	Severe decompensation but recovered well: sterilisation.	
4425	33	2	40	Disproportion and contracted pelvis	1 C.S. ...	Flat	—	—	5 6	19	L.	L.U.S.	G.	Sterilisation: baby died at 3 days.	
7873	21	1	40	Disproportion and contracted pelvis	1 C.S. ...	Flat	—	—	7 0	20	L.	L.U.S.	G.	Dyspnoea and cyanosed: improved after operation.	
3540	28	1	40	Disproportion and contracted pelvis	1 C.S. ...	Generally contracted	—	—	7 12	20	L.	L.U.S.	G.	Transverse lie. Diagnosed abdominally plus cystogram.	
7801	32	1	40	Disproportion and contracted pelvis	1 C.S. ...	Flat	—	—	7 13	20	L.	L.U.S.	G.	Incomplete placenta prævia.	
7970	36	1	40	Disproportion and contracted pelvis	1 C.S. ...	Flat	—	—	6 4	19	L.	L.U.S.	G.	Patient had hypertension. Baby not growing in utero.	
4405	34	1	40	Disproportion and contracted pelvis	1 C.S. ...	Flat	—	—	7 1	20	L.	L.U.S.	G.	Dermoid removed from broad ligament.	
7998	30	1	40	Disproportion and contracted pelvis	1 S.B., Forceps	Flat	—	—	6 12	20	L.	L.U.S.	G.	White leg.	
5536	37	1	40	Disproportion and contracted pelvis	1 S.B., Forceps	Flat	—	—	8 7	21	L.	L.U.S.	G.	Operation on account of age plus large child.	
3613	39	2	40	Disproportion and contracted pelvis	1 S.B., Forceps, 1 C.S.	Generally contracted	—	—	7 13	20	L.	L.U.S.	G.	Cæsarean followed by hysterectomy for fibroids.	
4939	29	1	40	Disproportion and contracted pelvis	1 C.S. ...	Generally contracted	—	—	6 12	20	L.	L.U.S.	G.	Delayed dilatation of cervix following Manchester operation.	
9345	29	P.	38	Cardiac disease mitral stenosis	...	Normal	—	—	6 4	19	L.	L.U.S.	L.	Breech with mild accidental hæmorrhage.	
9007	29	P.	36	Cardiac disease, mitral stenosis and reflux	...	Normal	—	—	4 15	18	L.	L.U.S.	L.	Sterilisation.	
5089	27	4	40	Cardiac disease, mitral stenosis and aortic reflux	3 S.B., 1 C.S. ...	Normal	—	—	6 1	19	L.	L.U.S.	L.	Sterilisation: baby died at 3 days.	
8445	24	P.	38	Cardiac disease, mitral stenosis and aortic reflux	...	Normal	—	—	6 11	20	L.	L.U.S.	L.	Dyspnoea and cyanosed: improved after operation.	
8211	25	P.	40	Placenta prævia	...	Normal	—	—	8 2	21	L.	L.U.S.	L.	Transverse lie. Diagnosed abdominally plus cystogram.	
8766	25	P.	40	Placenta prævia	2 S.B. ...	Normal	—	—	7 4	20	L.	L.U.S.	L.	Incomplete placenta prævia.	
9544	26	2	40	Obstetric history	1 S.B., 4 Miscarriages	Normal	—	—	6 8	20	L.	L.U.S.	G.	Patient had hypertension. Baby not growing in utero.	
7731	34	1	36	Obstetric history	3 S.B. ...	Normal	—	—	4 12	17	L.	L.U.S.	L.	Dermoid removed from broad ligament.	
3012	37	3	40	Obstetric history	...	Normal	—	—	4 10	17	L.	L.U.S.	G.	White leg.	
9094	25	P.	40	Ovarian cyst	...	Normal	—	—	6 8	19	L.	L.U.S.	G.	Operation on account of age plus large child.	
8441	21	P.	40	Breech and inertia	...	Normal	44 0	—	6 11	20	L.	L.U.S.	G.	Cæsarean followed by hysterectomy for fibroids.	
8163	37	P.	40	Breech	...	Normal	—	—	9 1	22	L.	L.U.S.	G.	Delayed dilatation of cervix following Manchester operation.	
8946	31	P.	36	Fibroid uterus	...	Normal	—	—	6 2	18	L.	L.U.S.	G.	Breech with mild accidental hæmorrhage.	
8555	40	10	40	Rigid cervix	...	Normal	48 0	—	6 2	19	L.	L.U.S.	G.	Sterilisation.	
8098	21	P.	40	Accidental hæmorrhage	...	Normal	—	—	8 2	21	L.	L.U.S.	G.	Sterilisation.	
7761	32	3	40	Bronchiectasis	3 N.D.	Normal	—	—	6 12	20	L.	L.U.S.	L.	Sterilisation.	



## CÆSAREAN SECTION (continued)

Reg. No.	Age	Grav. Mat- ridity	Indication	Obstetric History	Pelvis	Duration of Labour		Child		Result	Type of Operation	Anæsthetic	Remarks
						1st St. h. m.	2nd St. h. m.	Weight lb. oz.	Length ins.				
8238	28	1	Disproportion and contracted pelvis	1 C.S. ...	Generally contracted	—	—	7 12	21	L.	L.U.S.	G.	Failed forceps before admission.
8264	32	P.	Disproportion and contracted pelvis	1 S.B. ...	Flat ...	35 0	—	7 13	21	L.	L.U.S.	G.	Admitted in labour.
9490	38	1	Disproportion and contracted pelvis	1 S.B. ...	Flat ...	11 30	—	7 5	20	L.	L.U.S.	G.	See maternal death 7659.
8113	26	P.	Disproportion and contracted pelvis	1 S.B. ...	Generally contracted	—	—	6 15	18	L.	L.U.S.	G.	Admitted obstructed labour. Large hydrocephalic. C.S. considered safer than craniotomy.
7659	29	P.	Disproportion and contracted pelvis	1 S.B. ...	Flat ...	36 0	—	7 14	20	D.	S.B.	G.	
7848	29	P.	Disproportion and contracted pelvis	1 S.B. ...	Flat ...	—	—	9 0	23	L.	S.B.	G.	
7859	28	1	Disproportion and contracted pelvis	1 C.S. ...	Generally contracted	—	—	8 2	21	L.	L.U.S.	G.	Sterilised.
7966	26	2	Disproportion and contracted pelvis	2 C.S. ...	Generally contracted	—	—	8 6	21	L.	L.U.S.	G.	Small stature.
8053	37	2	Disproportion and contracted pelvis	2 C.S. ...	Generally contracted	—	—	5 6	18	L.	L.U.S.	G.	Admitted in strong labour.
8031	29	P.	Disproportion and contracted pelvis	1 C.S. ...	Flat ...	12 0	—	8 10	21	L.	L.U.S.	G.	Set op. on account of age.
8790	39	P.	Disproportion and contracted pelvis	1 C.S. ...	Flat ...	—	—	8 2	20	L.	L.U.S.	G.	Fœtus dead on admission. C.S. considered safer than craniotomy.
8906	33	P.	Disproportion and contracted pelvis	1 C.S. ...	Generally contracted	2 0	—	5 15	19	L.	L.U.S.	G.	
9056	36	P.	Disproportion and contracted pelvis	1 C.S. ...	Generally contracted	60 45	—	7 3	20	L.	S.B.	G.	
8793	32	2	Disproportion and contracted pelvis	2 S.B. ...	Flat ...	—	—	6 5	20	L.	L.U.S.	G.	Puerperal pyrexia: chest.
8554	32	P.	Disproportion and contracted pelvis	1 C.S. ...	Flat ...	—	—	7 10	20	L.	L.U.S.	G.	Retraction ring on admission.
8618	23	P.	Disproportion and contracted pelvis	1 C.S. ...	Generally contracted	96 0	—	7 14	21	L.	L.U.S.	G.	Admitted late in labour.
8691	29	P.	Disproportion and contracted pelvis	1 C.S. ...	Generally contracted	39 0	—	8 7	22	L.	L.U.S.	G.	Cæsarean after failure to deliver with forceps before admission.
8516	34	1	Disproportion and contracted pelvis	1 Forceps, Alive	Generally contracted	12 30	—	8 1	20	L.	S.B.	G.	White leg.
8539	36	2	Disproportion and contracted pelvis	1 S.B. Forceps, 1 prem., died	Generally contracted	—	—	7 6	20	L.	L.U.S.	G.	
8600	38	P.	Disproportion and contracted pelvis	1 C.S. ...	Flat ...	16 0	—	7 3	20	L.	L.U.S.	G.	Admitted late in labour.
8654	24	P.	Disproportion and contracted pelvis	1 C.S. ...	Generally contracted	72 30	—	7 5	20	L.	L.U.S.	G.	Repeat classical.
8546	35	1	Disproportion and contracted pelvis	1 C.S. ...	Flat ...	6 30	—	9 1	23	L.	L.U.S.	G.	V. fat. Admitted in strong labour with transverse lie.
8717	39	P.	Disproportion and contracted pelvis	2 C.S. ...	Generally contracted	41 30	—	6 1	20	L.	L.U.S.	G.	Sterilised.
8714	31	2	Disproportion and contracted pelvis	1 S.B., Forceps	Flat ...	9 0	—	6 3	20	L.	L.U.S.	G.	Admitted late in labour. Disproportion partly due to size of child.
8791	19	P.	Disproportion and contracted pelvis	2 Forceps S.B., 2 C.S. alive	Flat ...	—	—	10 3	23	L.	L.U.S.	G.	Failed trial of labour.
9402	24	P.	Disproportion and contracted pelvis	1 S.B., Forceps	Flat ...	—	—	7 8	20	L.	L.U.S.	G.	
9441	31	P.	Disproportion and contracted pelvis	1 S.B., Forceps	Flat ...	—	—	7 1	20	L.	L.U.S.	G.	
3609	31	1	Disproportion and contracted pelvis	2 Forceps S.B., 2 C.S. alive	Flat ...	—	—	7 1	20	L.	L.U.S.	G.	
9433	38	P.	Disproportion and contracted pelvis	1 S.B., Forceps	Flat ...	36 45	—	5 10	19	L.	L.U.S.	G.	Admitted after 12 hours' labour and several eclamptic fits. C.S. after fits had been controlled by sedatives.
6338	33	4	Disproportion and contracted pelvis	2 Forceps S.B., 2 C.S. alive	Flat ...	12 0	—	8 10	21	L.	L.U.S.	G.	
9410	25	P.	Disproportion and contracted pelvis	1 S.B., Forceps	Flat ...	—	—	7 6	20	L.	L.U.S.	G.	
8768	40	1	Disproportion and contracted pelvis	1 S.B., Forceps	Flat ...	—	—	6 4	20	L.	L.U.S.	G.	
9167	40	6	Disproportion and contracted pelvis	3 N., 3 S.B.	Flat ...	72 0	—	8 10	22	L.	L.U.S.	G.	Admitted late in labour with a posterior parietal presentation.
9218	40	1	Disproportion and contracted pelvis	1 S.B., Forceps	Flat ...	—	—	7 5	20	L.	L.U.S.	G.	
9071	38	P.	Disproportion and contracted pelvis	1 S.B., Forceps	Flat ...	—	—	8 12	21	L.	L.U.S.	G.	
9253	30	P.	Disproportion and contracted pelvis	1 S.B., Forceps	Flat ...	—	—	8 8	21	L.	L.U.S.	G.	
9248	27	P.	Disproportion and contracted pelvis	1 S.B., Forceps	Flat ...	108 0	—	7 6	20	L.	L.U.S.	G.	
9113	35	P.	Disproportion and contracted pelvis	1 S.B., Forceps	Flat ...	—	—	7 5	20	L.	L.U.S.	G.	
9188	21	P.	Cardiac disease	1 S.B., Forceps	Normal	24 0	—	7 4	20	L.	L.U.S.	G.	Admitted late in labour. Fibrillated for 24 hours.
8521	36	P.	Cardiac disease	1 N., Forceps	Normal	—	—	7 14	20	L.	L.U.S.	G.	C.S. partly on account of age.
8966	20	1	Placenta prævia	1 N., Forceps	Normal	—	—	3 14	15	L.	D.	L.	Repeated small hemorrhages.



# CÆSAREAN SECTION (continued)

Reg. No.	Age	Grav. idia	Maturity	Indication	Obstetric History	Pelvis	Duration of Labour			Child		Result	Type of Operation	Anæsthetic	Remarks
							1st St. h. m.	2nd St. h. m.	3rd St. h. m.	Weight lb. oz.	Length ins.				
8049	42	6	34	Placenta prævia	5 N., 1 D.	Normal	...	...	...	4 13	17	L.	D.	L.	Central placenta. Wound sepsis.
8728	30	4	34	Placenta prævia	4 N.	Normal	...	...	...	4 6	17	L.	L.	G.	Central placenta.
8574	35	P.	36	Placenta prævia	...	Normal	...	...	...	6 12	20	L.	L.	G.	High lateral.
8124	28	P.	40	Placenta prævia	...	Normal	...	...	...	8 10	21	L.	L.	G.	Incomplete. Acute brouchitis before and after admission.
8344	34	3	40	Placenta prævia	3 N.	Normal	...	...	...	6 1	20	L.	L.	L.	Central. Abdominal diagnosis and cystogram.
9370	36	1	40	Placenta prævia	1 N.	Normal	...	...	...	6 11	20	L.	L.	L.	Central.
9510	40	P.	40	Placenta prævia	...	Normal	...	...	...	6 5	19	L.	L.	G.	C.S. partly on account of age.
8706	33	P.	35	Placenta prævia	...	Normal	...	...	...	5 13	18	L.	L.	G.	Two fibroids removed by myomectomy.
9466	22	1	38	Placenta prævia	1 N.	Normal	...	...	...	5 14	19	L.	D.	G.	Severe bleeding. Transfused before operation.
8952	31	3	37	Placenta prævia	3 N.	Normal	...	...	...	5 14	19	L.	L.	L.	Central. Placenta prævia.
1342	27	3	32	Placenta prævia	1 S.B., 2 N.	Normal	...	...	...	2 10	16	L.	D.	Spinal	Central. White leg in puerperium.
7874	44	3	40	Obstetric history	3 N.	Normal	...	...	...	5 10	17	L.	D.	L.	Baby a mongol.
916	36	1	40	Obstetric history	4 S.B.	Normal	...	...	...	9 3	22	L.	L.	G.	...
8239	39	P.	40	Obstetric history	4 Miscarriages	Normal	...	...	...	6 15	20	D.	L.	G.	See maternal death 8239.
9112	36	3	37	Obstetric history	3 S.B.	Normal	...	...	...	6 3	20	D.	L.	G.	See maternal death 9112.
8823	35	P.	40	Breech...	...	Normal	24 0	...	...	7 7	20	L.	L.	G.	Slow dilatation.
6648	35	P.	40	Breech...	...	Normal	...	...	...	6 12	20	L.	L.	G.	...
8543	42	P.	40	Breech...	...	Normal	...	...	...	7 1	20	L.	L.	L.	C.S. on account of age.
6057	41	1	40	Toxæmia	1 S.B.	Normal	...	...	...	7 1	20	L.	L.	L.	...
7587	40	P.	40	Toxæmia	...	Normal	...	...	...	5 15	18	L.	L.	L.	C.S. on account of age.
7850	41	P.	39	Toxæmia	...	Generally contracted	...	...	...	4 2	19	L.	L.	L.	Patient very small stature.
9067	28	P.	30	Toxæmia	...	Normal	...	...	...	2 6	16	L.	L.	G.	Acute toxæmia, not suitable for induction.
9077	26	P.	30	Toxæmia	...	Normal	...	...	...	3 0	18	L.	L.	G.	Severe toxæmia did not respond to treatment.
9614	24	P.	40	Delayed labour and inertia	...	Normal	150 0	...	...	4 11	18	L.	L.	G.	Twins. Retraction ring present.
6897	33	1	40	Delayed labour and inertia	...	Flat	36 0	...	...	4 13	18	L.	L.	G.	See maternal death No. 6897.
7833	37	P.	40	Delayed labour and inertia	1 C.S. for inertia	Normal	42 45	...	...	8 9	21	D.	L.	G.	L.O.P. position. Admitted in delayed labour. C.S. partly on account of age.
8859	38	P.	40	Delayed labour and inertia	...	Normal	132 0	...	...	7 3	20	L.	L.	G.	Admitted late in labour.
9047	34	2	32	Delayed labour and inertia	...	Normal	72 +	...	...	3 15	17	D.	L.	G.	See maternal death No. 9047.
7764	30	P.	40	Previous Manchester	...	Normal	24 0	...	...	7 8	20	L.	L.	G.	Transverse lie. Previous op. for nulliparous prolapse. No L.U.S.
8204	37	P.	40	Cervical fibroid	...	Normal	24 0	...	...	9 7	23	L.	L.	Spinal	Admitted in labour.
7849	39	P.	40	Fibroids	...	Normal	...	...	...	6 7	20	L.	L.	G.	Classical
8756	36	P.	40	Fibroids	...	Normal	26 0	...	...	8 5	21	L.	L.	G.	Cæsarean
5017	42	1	32	Fibroids	1 C.S.	Normal	...	...	...	3 2	17	L.	D.	G.	Spinal hysterectomy
9162	36	1	40	Fibroids	...	Normal	...	...	...	7 0	20	L.	L.	G.	Classical
9049	33	P.	40	Ovarian cyst	...	Normal	12 0	...	...	8 0	21	L.	L.	G.	L.U.S.
9577	21	P.	40	Ovarian cyst	...	Normal	...	...	...	8 11	21	L.	L.	G.	L.U.S.
7782	28	1	34	Double uterus	1 N.	Normal	48 0	...	...	3 9	18	L.	L.	G.	L.U.S.
6647	26	P.	40	Double uterus	...	Normal	...	...	...	6 13	20	L.	L.	G.	L.U.S.
8041	45	P.	40	Accidental hæmorrhage	...	Normal	4 0	...	...	6 0	20	L.	SB.	G.	Classical
8962	28	P.	34	Accidental hæmorrhage	...	Normal	...	...	...	3 12	16	L.	SB.	G.	L.U.S.
9480	28	1	40	Diabetic	1 Normal	Normal	...	...	...	8 7	20	L.	L.	Spinal	L.U.S.
9114	36	P.	38	Diabetic	...	Normal	...	...	...	8 10	21	L.	L.	G.	L.U.S.
8917	38	4	40	No indication stated	4 Normal	Normal	...	...	...	8 0	20	L.	L.	G.	L.U.S.
8991	38	2	38	No indication stated	2 Normal	Normal	...	...	...	7 1	20	L.	L.	G.	Classical
8568	36	P.	40	No indication stated	...	Normal	...	...	...	6 14	20	L.	L.	G.	L.U.S.
8378	28	P.	40	No indication stated	...	Normal	...	...	...	7 0	20	L.	L.	G.	Classical



## OTHER ABDOMINAL OPERATIONS

B. or E.	Reg. No.	Indication	Result to Mother
E.	8821	Hysterotomy for toxæmia	L.
E.	3215	Hysterotomy and sterilisation for toxæmia	L.
E.	8201	Hysterotomy and sterilisation for toxæmia	L.
E.	7804	Hysterotomy and sterilisation for toxæmia	L.
E.	7899	Hysterotomy and sterilisation for epilepsy	L.

## EMBRYOTOMY

3 Cases. 1 Booked, 2 Emergency.

Reg. No.	Age	Grav. ida- rity	Indication	Treatment	Duration of Labour			Weight of Child lb. oz.	Result to Mother	Remarks
					1st St. h. m.	2nd St. h. m.				
BOOKED CASE	32	P.	40	Hydrocephalus	...	...	19 15	3 30	8 0	L.
EMERGENCY CASES										
8088	20	P.	40	Hydrocephalus	...	...	17 30	1 0	7 6	L.
7756	35	S	40	Disproportion	...	...	9 30	1 45	8 1	L.
				Perforation and evisceration	...	...	No Mother died.			Abdominal puncture not sufficient. Flat pelvis. Admitted late in labour. Version performed.



## ABORTIONS

### A.—Spontaneous Abortions

B. or E.	Reg. No.	Parity	Maturity	Causation	Mother	Remarks
B.	7667	P.	27	Unknown	L.	
B.	8000	P.	16	Unknown	L.	
B.	7953	1	26	Maceration	L.	Twins
B.	8288	P.	26	Accidental hæmorrhage	L.	
B.	2617	3	24	Repair of ventral hernia	L.	
B.	8959	5	27	Maceration	L.	
E.	6268	1	16	Unknown	L.	Inevitable abortion.
E.	7250	1	12	Unknown	L.	Inevitable abortion. D. & C.
E.	8518	1	12	Unknown	L.	Inevitable abortion. D. & C.
E.	7892	1	8	Unknown	L.	Incomplete abortion. D & C. Transfusion.

### B.—Induced Abortions

B. or E.	Reg. No.	Parity	Maturity	Indication	Method	Mother	Remarks
B.	8993	3	22	Hydronephrosis	Stomach tube...	L.	Only one kidney present.
E.	8916	P.	14	Toxæmia	Abdominal hysterotomy	L.	Chronic nephritis.
E.	3215	7	26	Chronic hypertension	Abdominal hysterotomy	L.	Burst abdomen, stitched.
E.	8201	1	20	Toxæmia	Abdominal hysterotomy	L.	Sterilised.
E.	7864	1	20	Toxæmia	Abdominal hysterotomy	L.	Sterilised.
E.	7899	5	16	Epilepsy	Abdominal hysterotomy	L.	Sterilised.

### ADMITTED AFTER DELIVERY

B. or E.	Reg. No.	Reason for Admission	Mother	Remarks
B.	9407	Baby born in ambulance	L.	
B.	7973	Baby born in ambulance	L.	
B.	7977	Baby born in ambulance	L.	
E.	8090	Baby born in ambulance	L.	
E.	9148	For repair of perineum	L.	Complete perineal tear.
E.	8903	For repair of perineum	L.	Complete perineal tear.
E.	9035	For repair of perineum	L.	Complete perineal tear.
E.	6646	With premature baby	L.	
E.	9116	Urinary infection	L.	
E.	8930	Retained placenta	L.	Crédé's expression. Transfused.
E.	8924	Retained placenta	L.	Crédé's expression.
E.	8506	Retained placenta	L.	Manual removal. Transfused.
E.	8491	Retained placenta	L.	Crédé's expression. Transfused.
E.	7980	Post partum hæmorrhage	D.	See Maternal Death 7980.
E.	7979	Post partum anæmia	L.	Transfused.
E.	7978	Post partum hæmorrhage	L.	Transfused.
E.	8295	Retained placenta	L.	Crédé's expression. Premature twin delivery at term. Transfused.
E.	8259	Retained placenta	L.	Crédé's expression. Transfused before and after admission.

### MATERNAL MORBIDITY

All fatal cases and all cases in which a temperature of 100.4° F. (38° C.) or more is sustained for a period of 24 hours or recurs during that period (Ministry of Health standard).

#### Booked Cases

Treated in Hospital	...	...	...	...	1,480
Deaths	...	...	...	...	2
Pyrexial cases	...	...	...	...	28
Deaths and pyrexial cases	...	...	...	...	30
Morbidity	...	...	...	...	2.03%



**Emergency Cases**

Treated in Hospital	...	...	...	...	...	670
Deaths	...	...	...	...	...	6
Pyrexial cases	...	...	...	...	...	46
Deaths and pyrexial cases	...	...	...	...	...	52
Morbidity	...	...	...	...	...	7.76%

**Total for Hospital**

Treated in Hospital	...	...	...	...	...	2,150
Deaths	...	...	...	...	...	8
Pyrexial cases	...	...	...	...	...	74
Deaths and pyrexial cases	...	...	...	...	...	82
Morbidity	...	...	...	...	...	3.81%

**CASES OF MATERNAL MORBIDITY**

Mode of delivery	Causation	No. of cases	
		Booked	Emergency
Natural forces	Local uterine sepsis	2	3
	Urinary infection	5	6
	Mastitis	5	1
	Intercurrent infection	2	6
	Local sepsis	3	5
Forceps delivery	Mastitis	1	1
	Urinary infection	3	5
	Phlegmasia alba dolens	1	2
	Intercurrent infection	1	2
	Local sepsis	3	8
Caesarean section	Urinary infection	1	1
	Intercurrent infection	0	2
	Phlegmasia alba dolens	1	2
	Local sepsis	—	2
Admitted after delivery	Local sepsis	—	2
Total		28	46
		74	

**MATERNAL MORTALITY**

Of the 1,480 patients admitted from the Ante-Natal Department, 2 died, a mortality of 0.13%.

Of the 670 patients admitted as emergencies, 6 died, a mortality of 0.80%.

The mortality of the whole Hospital is therefore 0.37%.

The deaths were due to the following causes :—

**Booked Cases :**

1. Pulmonary Embolus.
2. Sub-acute endocarditis. Mitral stenosis.

**Emergency Cases :**

1. Post-partum hæmorrhage.
2. Inhalation, broncho-pneumonia.
3. Paralytic ilius. Caesarean hysterectomy for intra partum sepsis.
4. Broncho-pneumonia.
5. Staphylococcal septicæmia.
6. Pulmonary embolus.



## DETAILS OF THE 8 MATERNAL DEATHS

### BOOKED CASES

#### No. 9322 Pulmonary Embolus.

E.P., aged 29. Primigravida. Booked case.

Attended the ante-natal clinic regularly, and the pregnancy and labour were normal. Episiotomy was performed and repaired under general anaesthesia. The puerperium was normal during the first week. On the ninth day she complained of pain in the left leg, which was very slightly swollen. There was a low irregular temperature for the next week, which then subsided, and the swelling in the leg resolved. On the twenty-sixth day the patient suddenly complained of pain in the chest, became extremely dyspnoea, and died in a quarter of an hour.

Post-mortem showed an embolus of the main pulmonary artery, arising from a thrombus in the left common iliac vein. The pelvis and genital tract were normal.

#### No. 1447. Sub-acute Endocarditis. Mitral Stenosis.

B.S., aged 28. Multipara 1. Booked case.

The patient received ante-natal care from the Hospital, and was sent to convalescent hospital on 18th April, 1942, at the twenty-sixth week of pregnancy, with mitral stenosis showing slight decomposition, cyanosis and dyspnoea. She improved with rest, and was discharged 30th April, 1942. She attended the clinic, and on 20th May, 1942, was admitted to Hospital with albuminuria, marked cyanosis, and some dyspnoea. Her condition remained stationary in spite of rest in bed, and on 28th May, 1942, she went spontaneously into premature labour. She stood the labour fairly well, and delivered herself normally. During the puerperium she deteriorated rapidly, showing pallor, tachycardia, and great weakness. She died on the ninth day after delivery.

Post-mortem showed advanced mitral stenosis, with recent vegetations on the valves.

### EMERGENCY CASES

#### No. 7980. Post-partum Hæmorrhage.

A.McW., aged 42. Multipara 8. Emergency admission.

This patient had had eight previous pregnancies, with normal labours and deliveries. Ante-natal case was carried by a Corporation clinic, and the patient booked her own midwife. She was delivered spontaneously at home, 10 p.m. on 24th March, 1942, but the birth of the child was followed by severe third stage bleeding. Medical aid was called at 11 p.m., and the placenta was expressed. Blood transfusion was attempted during the night, but was unsuccessful, the bottle being returned to the bank three-quarters full. The patient was sent to Hospital 16 hours after delivery. She was moribund on admission—ensanguinated, the pulse imperceptible, with shallow stertorous breathing. The uterus was well retracted and bleeding had ceased. Transfusion of blood and plasma was set up, but the patient died within the hour.

Post-mortem showed complete ensanguination. There was no other pathological lesion.

#### No. 7659. Inhalation Broncho-pneumonia.

C.Q., aged 39. Multipara 1. Emergency admission.

The patient was sent to Hospital at full term because the breech was presenting with the legs extended, and the pelvis was contracted. As the previous pregnancy had ended in a still-birth and the maternal condition was good, delivery by Cæsarean Section was advised. During induction of general anaesthesia (nitrous oxide, ether and oxygen) the patient became cyanosed and distressed. Operation was abandoned, and the patient returned to bed. Next morning her condition was improved, but she went into labour, and Cæsarean Section was performed under spinal anaesthesia. She became rapidly worse, and died 24 hours later.

Post-mortem showed septic broncho-pneumonia of both lungs, proceeding to abscess formation.

#### No. 9047. Paralytic Ileus. Cæsarean Hysterotomy for intra-partum sepsis.

M.L., aged 34. Multipara 2. Emergency admission.

This patient had had intra-uterine radium for menorrhagia in 1934. In 1936 she delivered herself of a macerated foetus of seven months' gestation, and in 1938 she was delivered of a living child by Cæsarean section at term. The patient was sent to Hospital on 14th September, 1942, at the 32nd week of the third pregnancy in premature labour with ruptured membranes. Pains continued for three days, but on 17th September, 1942, the temperature rose to 104° F., the uterine discharge became offensive, and she had two rigors. Pelvic examination showed that the



cervix was only dilated to admit a finger tip, and was tense and spastic. As vaginal delivery was impossible, the abdomen was opened under general anaesthesia. The lower segment was tense, ballooned and full of blood clot. A living child was delivered and the uterus removed by sub-total hysterectomy. The tissues were all friable and infected, and the uterus and its contents very offensive. At the end of the operation, the cervical stump was dilated to provide drainage. The puerperium was stormy, the patient developed a severe ileus and died on the fifth day.

Post-mortem showed an extensive ileus, with cellulitis of the stumps and pelvic peritonitis. Blood and splenic culture were sterile, and culture from the pelvis grew *B. Coli* and a few colonies of *Staph. albus*. The case was judged to be one of cervical stenosis following the intra-uterine application of radium.

**No. 8239. Broncho-pneumonia.**

V.M., aged 39. Primigravida. Emergency admission.

The patient was sent to Hospital at full term, with a history of four miscarriages. Because of the great desire for a living child, Caesarean section was done at the onset of labour under general anaesthesia—nitrous oxide, oxygen and ether. There was considerable difficulty with the anaesthetic, owing to the regurgitation of stomach contents. The patient developed broncho-pneumonia after the operation, and died on the third day.

Permission for a post-mortem was refused.

**No. 6697. Staphylococcal Septicæmia.**

R.C., aged 33. Multipara 1. Emergency admission.

The patient's first pregnancy was in 1941, when she was sent to Hospital after four days in labour, and a lower segment section was performed for inertia. During this pregnancy ante-natal care was given by her own doctor, and she was booked for home delivery. She became post mature, and was in labour at home for 36 hours with membranes ruptured for 48 hours. She was then transferred to Hospital. On admission, the patient was having strong pains, the child was large, and lying in a posterior position. The cervix was thick and not dilating the lower segment thin, and the retraction ring well marked. Repeat lower segment was performed under general anaesthesia, and a living child, 8 lb. 9 oz., delivered. The patient was shocked after delivery, but responded to transfusion with blood and plasma. The puerperium was pyrexial, and the patient died on the thirtieth day with symptoms of generalised infection and meningitis.

Post-mortem showed a gangrenous endometritis, and the pelvic veins contained much septic blood clot. The peritoneum was normal, and so were the adnexa. The heart valves were the site of friable vegetations, the lungs showed septic infarcts and the brain a diffuse purulent meningitis. Blood culture grew *Staphylococcus aureus*.

**No. 9112. Pulmonary embolus.**

J.B., aged 36. Multipara 3. Emergency admission.

This patient was sent to Hospital because of a history of still-births in two previous pregnancies. Classical Caesarean section was performed at the thirty-eighth week, and a healthy child, 6 lb. 3 oz., delivered. The puerperium was normal for the first week, but from the eighth day there was intermittent pyrexia. She complained of pain in the left leg, and there was slight swelling of the ankle. On the twenty-first day there was sudden acute pain in the chest, accompanied by dyspnoea, which became steadily worse, and the patient died ten hours later.

Post-mortem showed two large pulmonary emboli, one on each side and thrombosis of the left iliac vein. The uterus was normal and the scar well healed.



## PAEDIATRIC SECTION

This section of the Report deals with the portion of the work under the control of the Honorary Consulting Pædiatric Physician (Dr. N. B. Capon), assisted by the Pædiatric Clinical Assistant (Dr. Helen M. Duvall). It includes all the infants born in the Hospital.

### INFANT MORTALITY

Infants born (alive 2,015, stillborn 107)	...	...	2,122
Infants survived	...	...	1,965
Stillbirths	...	...	<del>107</del> 107
Neo-natal deaths	...	...	50
Total infant deaths (neo-natal deaths and stillbirths)	...	...	157

The total infant mortality rate (neo-natal deaths and stillbirths) equals 7.3 per cent of infants born, excluding abortions.

### STILLBIRTHS

The stillbirths are divided into two groups :—

- (1) Premature or immature, weighing  $5\frac{1}{2}$  lb. or less.
- (2) Full time or mature, weighing over  $5\frac{1}{2}$  lb.

In this way some indication is given of the correlation between the various maternal conditions associated with the stillbirths and the maturity of the foetus. Owing to the war it has not been possible, as in former years, to perform an autopsy on every stillborn infant: this accounts for the more frequent use of the term asphyxia.

There were 107 stillbirths, 4.8 per cent of the total births. 52 were premature, and 55 full time; 27 were macerated.

### Analysis.

Cause	No. of Cases	Per-centage	Pre-mature	Full term
Toxæmia of pregnancy	32	29.9	23	9
Obstetrical difficulties and complications of labour	24	22.4	—	24
Monsters and malformations	30	28.1	21	9
Concurrent maternal disease—				
Acute	—	—	—	—
Chronic	4	3.7	1	3
No apparent maternal or foetal cause	17	15.9	7	10
	107	100.0	52	55

MATERNAL		PREMATURE		FOETAL		FULL TIME	
Albuminuria	10	Macerated	5	Asphyxia	...	...	2
		Asphyxia	2	Macerated	...	...	1
			7				3
			—				—
Accidental hæmorrhage	17	Asphyxia	8	Macerated	...	...	2
		Macerated	3	Asphyxia	...	...	4
			11				6
			—				—
Eclampsia	5	Asphyxia	4				
		Macerated	1				
			5				
			—				—



MATERNAL			FOETAL		
			PREMATURE		FULL TIME
Hydramnios ... ..	17		Anencephaly (3 macerated and 3 with spina bifida)	14	Hydrocephaly and spina bifida ... ..
			Hydrocephaly, spina bifida and talipes ... ..	1	
			Hydrops foetalis ... ..	1	
				<u>16</u>	
Diabetes ... ..	2				Asphyxia ... ..
					Macerated ... ..
					<u>2</u>
Epilepsy ... ..	1		Talipes (macerated) ...		
Anæmia ... ..	1				Macerated ... ..
Disproportion ... ..	11				Cerebral hæmorrhage ...
					Cerebral hæmorrhage and tentorial laceration ...
					Asphyxia ... ..
					Cerebral congestion ...
					Perforation... ..
					<u>11</u>
Prolonged labour ... ..	3				Cerebral hæmorrhage ...
					Cerebral hæmorrhage and tentorial laceration ...
					<u>3</u>
Malpresentation... ..	3				Asphyxia ... ..
Prolapse of cord ... ..	3				Asphyxia ... ..
Placenta prævia ... ..	4				Asphyxia ... ..
					Macerated ... ..
					<u>4</u>
					<u>10</u>
Cause unknown ... ..	30		Twins (1 macerated) ...	2	Asphyxia ... ..
			Anencephaly ... ..	3	Macerated ... ..
			Anencephaly and spina bifida ... ..	2	Hydrocephaly and spina bifida ... ..
			Asphyxia ... ..	3	Anencephaly ... ..
			Macerated ... ..	2	
				<u>12</u>	<u>18</u>

### NEONATAL DEATHS

There were 50 neonatal deaths out of a total of 2,015 live births, a mortality rate of 2.4 per cent. Of the 50 deaths, 21 (42 per cent) were full time infants, and 29 (58 per cent) were premature or immature, *i.e.*, birth weight of 5½ lb. or less.

#### Birth Trauma.

Reg. No.	Age	Birth Weight lb. oz.	Delivery	Parity	Nature of Injury
6649	36 hours	8 0	Forceps ...	P.	Signs indicative of intracranial injury.
*7606	40 hours	34 wks.	Normal ...	M.	Cerebral hæmorrhage.
		by dates			
*7748	2½ days	7 0	Forceps ...	P.	Cerebral hæmorrhage and tentorial laceration.
*8128	39 hours	8 0	Normal ...	M.	Cerebral hæmorrhage and tentorial laceration.
*8464	6 days	7 1	Forceps ...	P.	Cerebral congestion, terminal pneumonia.
8519	16 hours	5 8	Normal ...	M.	Signs indicative of intracranial injury.
*8556	2 days	6 10	Normal ...	M.	Cerebral hæmorrhage.
*8726	3 days	6 1	Forceps ...	P.	Cerebral hæmorrhage. Fracture of skull.
*9586	28 hours	6 4	Willett's forceps...	M.	Cerebral hæmorrhage and tentorial laceration.
*9589	36 hours	6 5	Normal ...	M.	Cerebral hæmorrhage and tentorial laceration.
9055	12 hours	Full time	Normal ...	P.	Signs indicative of intracranial injury.

#### Atelectasis and Asphyxia.

Reg. No.	Age	Birth Weight lb. oz.	Remarks
*3012	12 hours	4 10	Cæsarean section. Atelectasis.
*3257	3 days	5 5	Accidental hæmorrhage. Inhalation of blood.
*5089	1 day	6 1	Cæsarean section. Atelectasis. Cerebral œdema.
7652	18 days	3 4	2nd twin. Atelectasis.
*7941	4 days	6 7	Atelectasis and inhalation of meconium.

\* Denotes that an autopsy has been made.



### Placenta Prævia.

Reg. No.	Age	Birth Weight lb. oz.	Mode of Delivery
1342	A few hours	2 15	Cæsarean section.
*8706	A few hours	5 13	Cæsarean section (fibroid uterus).
8966	A few hours	3 14	Cæsarean section.
9049	A few hours	4 13	Cæsarean section.
*9466	A few hours	5 14	Cæsarean section.

### Maternal Toxæmia.

Reg. No.	Age	Birth Weight lb. oz.	Maternal State
7611	18 days	4 10	Albuminuria.
8361	4 hours	2 12	Albuminuria.
	5 hours	2 13	
*8508	28 hours	6 12	Accidental hæmorrhage.
9063	7 days	2 11	Albuminuria.

### Fœtal Malformation.

Reg. No.	Age	Birth Weight lb. oz.	Malformation
5017	4 hours	3 2	Spina bifida.
5800	10 days	6 4	Spina bifida (meningo-myelocoele).
7652	10 hours	3 5	Spina bifida and talipes, first twin.
7840	4 days	5 6	Spina bifida (meningo-myelocoele). Hydrocephaly.
7874	5 days	5 10	Mongoloid defect.
8349	7 days	8 0	Spina bifida, hydrocephaly, talipes.
8415	2 days	6 7	Spina bifida, talipes.
8746	3 days	4 9	Multiple deformities.
9020	11 days	8 4	Spina bifida, hydrocephaly.

### Infections.

Reg. No.	Age	Birth Weight lb. oz.	Remarks
7824	10 hours	3 0	Congenital syphilis (maternal Wassermann + +).
*8280	2 days	6 1	Pneumococcal septicæmia.
*2893	11 days	5 12	Pneumococcal broncho-pneumonia.

### Prematurity.

Reg. No.	Age	Birth Weight lb. oz.	Remarks
9565	5 weeks	3 9	3rd triplet.
9620	19 days	4 3	2nd twin.
961	5 days	4 2	1st twin.
7903	24 hours	3 15	
8160	4 days	2 0	
8812	4 hours	3 13	
8858	21 hours	1 0	Accidental hæmorrhage.
9012	4 days	2 8	1st twin (2nd, SB.).
9159	12 hours	{ 2 14 3 3 }	Twins.
9252	{ 19 hours 11 hours }	{ 2 15 3 8 }	Twins.

\* Denotes that an autopsy has been made.

### AUTOPSIES

There were 17 performed, *i.e.*, on 34 per cent of the infants who died.

Reg. No.	Age	Ante-mortem diagnosis	Post-mortem findings
2893	11 days	Septicæmia ... ..	Broncho-pneumonia.
3012	12 hours	Atelectasis ... ..	Atelectasis.
3257	3 days	Broncho-pneumonia ... ..	Inhalation of blood into lungs.
5089	1 day	Atelectasis ... ..	Atelectasis, cerebral œdema, unilateral supra-renal hæmorrhage.
7606	40 hours	Intracranial injury ... ..	Cerebral hæmorrhage.
7748	3½ days	Intracranial injury ... ..	Cerebral hæmorrhage, tentorial laceration.
7941	4 days	Inhalation broncho-pneumonia	Atelectasis with inhaled meconium.
8128	39 hours	Intracranial injury ... ..	Cerebral hæmorrhage, tentorial laceration.
8280	2 days	Intracranial injury ... ..	Pneumococcal meningitis, pneumonia and pleurisy.
8464	6 days	Intracranial injury, pneumonia	Cerebral congestion and œdema, acute pleurisy.
8508	28 hours	Atelectasis ... ..	Atelectasis.
8556	2 days	Intracranial injury ... ..	Cerebral hæmorrhage and hæmorrhage middle lobe right lung.
8706	23 hours	Atelectasis ... ..	Cerebral hæmorrhage. Atelectasis.
8726	3 days	Intracranial injury ... ..	Cerebral hæmorrhage. Fracture of skull.
9466	36 hours	Atelectasis ... ..	Atelectasis.
9586	28 hours	Intracranial injury ... ..	Cerebral hæmorrhage, tentorial laceration.
9589	36 hours	Intracranial injury ... ..	Cerebral hæmorrhage, tentorial laceration.



## CONGENITAL DEFORMITIES.

### Congenital Morbus Cordis.

Reg. No.	Birth Weight lb. oz.	Type	Remarks
5686	6 11	Cyanotic	Loud basal systolic bruit.
8166	5 6	Cyanotic	Soft basal systolic bruit.
8756	8 5	Cyanotic	Loud basal systolic bruit.
8624	6 7	Acyanotic	Mongoloid defect, basal systolic bruit.

### Mongoloid Defect.

Reg. No.	Birth Weight lb. oz.	Sex	Age of Mother	Parity	Remarks
7874	5 10	M.	44	4	Lived 5 days. No evidence of cardiac abnormality.
8624	6 7	F.	36	3	Typical facies; basal systolic bruit.
8799	6 15	F.	45	5	Typical facies. No evidence of cardiac abnormality.
9501	4 12	M.	43	2	Slight degree. No evidence of cardiac abnormality.

### Head and Spine.

Reg. No.	Birth Weight lb. oz.	Deformity	Remarks
5800	6 4	*Spina bifida, meningo-myelocele	Lived 10 days.
8723	6 13	*Spina bifida, meningo-myelocele	Slight case.
6012	8 10	*Spina bifida, meningocele	Slight case.
9053	7 10	Cervical meningocele (pedunculated.)	
9285	6 10	Cervical meningocele.	
9416	6 14	Hydrocephaly.	
9585	7 6	*Spina bifida, meningocele.	

\* Situated in lumbo-sacral region.

### Minor Deformities.

Malformation	No. of Cases
Talipes equino-varus	7
Pes calcaneo-valgus	3
Syndactyly (toes)	2
Microdactyly (third, fourth and fifth toes)	1
Supernumerary digits (hand)	3
Supernumerary auricles	1
Deficient ossification of skull	5
Hare-lip	1
Cleft palate	1
Split pinna	1
Ranula	1
Tongue tie	2
Premature eruption of lower incisor	1
Cavernous naevus scalp	1
Angioma (large) of thigh	1
Capillary naevi	2
Hypospadias	3
Ichthyosis	1
Cutis navel	2
Neurenteric pore	1

## BIRTH TRAUMA.

### Intracranial Injury.

11 fatal cases (see under Deaths).

6 cases survived. The treatment given was rest, quiet, sedatives and oxygen inhalations. Feeding was expressed breast milk, and they were only allowed to go to the breast when recovery was judged to be adequate. Case No. 8106 developed marked hydrocephaly.

Reg. No.	Birth Weight lb. oz.	Symptoms	Delivery	Parity
7661	7 4	Cyanosis, twitching	Normal	M.
7715	6 4	Cyanosis, pyrexia, coma	External version. 41 hours labour...	P.
8060	6 12	Convulsions, cyanosis	Normal	P.
8106	7 5	Twitching, pallor, vomiting, tense fontanelle and cephalic cry	Normal	P.
8718	7 7	Coma, vomiting...	Forceps	P.
9058	9 5	Pallor, twitching, vomiting, head retraction, pyrexia	Forceps	P.



## Injuries to Scalp.

### Cephalhæmatoma.

20 cases, 0.9 per cent of live births. 17 were first babies. All but 1 were normal deliveries. In 10 cases the right parietal area was affected, in 7 the left parietal, in 1 the left temporal, in 1 both parietals, and in 1 not stated.

### Laceration.

1 case (No. 7960) due to application of Willett's forceps in lower segment Cæsarean Section.

## Injuries to Nerves.

### Facial Paralysis.

12 cases, all first babies, and all transient. 9 were instrumental, and 3 normal deliveries.

### Erb's Paralysis.

1 case (No. 8435), face presentation, normal delivery.

## Fractures.

### Skull.

1 case (No. 8726). See under Deaths.

## Miscellaneous.

### Sterno-Mastoid Hæmatoma.

3 cases.

### Subconjunctival Hæmorrhage.

6 cases.

## DISEASES OF NEWBORN.

### Hæmorrhagic Disease.

No cases.

### Erythroblastosis Neonatorum.

Reg. No.	Birth Weight lb. oz.	Type	Maternal Blood	Infants' Blood	Treatment	Remarks
*9411	7 0	Icterus gravis	Rh. negative, Rh. antibody +	Rh. positive, slight erythroblastosis	100 cc. Rh. negative, Gp. IV, blood I.V.	Recovered, on-set 1st day.
*1459	6 12	Anæmic	Rh. negative, Rh. antibody +	Rh. positive, severe macrocytic anæmia	100 cc. Rh. negative, Gp. IV, blood I.V.	Recovered.
8434	7 7	Anæmic	Not investigated	Severe macrocytic anæmia, slight erythroblastosis	100 cc. blood I.V.	Recovered.
District	Large Infant	Anæmic	Rh. negative, Rh. antibody +	Rh. positive, marked erythroblastosis	None	Died on 12th day.

\* After transfusion, both these infants became extremely restless with frequent screaming, a condition which persisted for many weeks.

### Inanition Fever.

5 cases. All responded to treatment with extra fluids.

### Atelectasis.

10 cases. 5 cases recovered, and 5 cases died.

### Genital Crisis.

#### Mastitis.

4 cases, 3 in males.

#### Menstruation of Newborn.

1 case.

#### Bilateral Hydrocele.

2 cases.



## Infections.

### Pneumococcal Septicæmia.

5 cases, all in one ward during April and May. Sudden onset of grave illness and collapse in infants not previously showing signs of illness. In the 3 non-fatal cases, recovery was slow but complete.

Reg. No.	Birth Weight lb. oz.	Age of Onset	Symptoms	Treatment	Result
*8280	6 1	36 hours	Coma, pallor, twitching	...	Died 5 hours after onset.
8257	6 1	1st day	Twitching, coma	M. & B. soluble, followed by M.&B.693. Total 4.125 gm.	Recovered.
8278	7 1	7th day	Convulsions, coma, physical signs of pneumonia	M. & B. soluble, followed by M. & B. 693. Total 4.75 gm.	Recovered.
*2893	5 12	10th day	Coma, twitching, pallor, physical signs of pneumonia	M. & B. soluble	Died in a few hours.
3631	7 3	12th day	Coma, pallor and dyspnœa	M. & B. 693, 4 gm. Blood transfusion	Recovered.

Disease	No. of Cases	Remarks
Gastro-enteritis	1	Severe, but recovered.
Pyelitis	1	B. coli; recovered.
Otitis media	1	Recovered.
Conjunctivitis	44	14 Staph. aureus, 15 Staph. albus, 1 Diphtheroids, 14 no organism cultured.
Gonococcal ophthalmia	3	Neissers' organism present in smear and culture.
Septic pustules	14	
Pemphigus neonatorum	5	One severe case only.
Paronychia	4	
Breast abscess	2	
Boil	2	
Buttock abscess	1	
(Vitamin K injection)	1	
Stomatitis	3	

### Congenital Syphilis.

1 case (No. 7824). Infant lived nine hours; weighed 3 lb. Maternal W.R.++

## INFANT FEEDING

Breast alone	...	...	...	...	...	1,669
Breast and complementary	...	...	...	...	...	165
Breast and supplementary	...	...	...	...	...	44
Artificial	...	...	...	...	...	91

84.7 per cent of all infants discharged were entirely breast-fed.

40 of the babies receiving supplementary feeds were twins; 2 were triplets, and 1 whose mother had a breast abscess.

### Reasons for Artificial Feeding.

In all but 2 of the 91 cases, the cause of artificial feeding was maternal. 22 of the infants were under 5 lb. birth weight.

Uncomplicated Cæsarean section	...	...	...	...	...	1
Cæsarean section and albuminuria	...	...	...	...	...	2
Cæsarean section and placenta prævia	...	...	...	...	...	1
Cæsarean section and fibroid uterus	...	...	...	...	...	1
Cæsarean section and pyelitis	...	...	...	...	...	1
Cæsarean section and uterus didelphys	...	...	...	...	...	1
Albuminuria	...	...	...	...	...	5
Phthisis	...	...	...	...	...	2
No milk	...	...	...	...	...	15
Inverted nipples	...	...	...	...	...	4
Cracked nipples	...	...	...	...	...	2
Acute mastitis	...	...	...	...	...	6
Cardiac	...	...	...	...	...	3
Accidental hæmorrhage	...	...	...	...	...	3
Tachycardia (twins)	...	...	...	...	...	2
Post-partum hæmorrhage (twins)	...	...	...	...	...	2
Pyelitis	...	...	...	...	...	2



No stated reason	...	...	...	...	...	...	21
Mother died	...	...	...	...	...	...	6
1 case each of cerebral thrombosis, septicæmia, elderly primipara, submaxillary abscess, placenta prævia, diabetes, refusal to feed, adoption	...	...	...	...	...	...	9
Asthenic infant...	...	...	...	...	...	...	1
Mongol	...	...	...	...	...	...	1
							<hr/> 91 <hr/>

### MULTIPLE DELIVERIES

Triplets.—1 set.

No. 9565 :—

- 1st, 3 lb. 15 oz., female ; 5 lb. 12 oz. on discharge.
- 2nd, 3 lb., male ; 5 lb. 3 oz. on discharge.
- 3rd, 3 lb. 9 oz., female ; died at 5 weeks.

Twins.—44 sets, 26 binovular.

- In 4 cases one infant was stillborn.
- In 4 cases both infants died.
- In 2 cases one infant died.
- In 1 case one infant died, and one was stillborn.
- In 1 case one infant was a foetus papyraceous.

61 of the twin infants weighed  $5\frac{1}{2}$  lb. or less. 18 sets were entirely breast fed on discharge.

### OVERWEIGHT INFANTS.

14 infants were born weighing 10 lb. and over, *i.e.*, 0.65 per cent of total births. 5 only regained their birth weight before discharge. 9 were entirely breast fed.

Reg. No.	Parity	Maturity	Sex	Birth Weight		Length	Delivery	Remarks
				lb.	oz.			
7926	P.	40 weeks	M.	11	5	23½ in.	Forceps	2 days in labour.
7844	P.	40 weeks	M.	11	2	22 in.	Normal.	
7913	M.	41 weeks	F.	10	7	21 in.	Normal.	
7911	P.	40 weeks	M.	10	6	22 in.	Normal.	
8751	P.	43 weeks	M.	10	5	?	Cæsarean section.	
8569	P.	40 weeks	M.	10	5	21 in.	Forceps.	
9157	P.	42 weeks	M.	10	3	21 in.	Normal.	
9419	M.	40 weeks	M.	10	3	20 in.	Normal.	
3892	M.	41 weeks	M.	10	2	23 in.	Normal.	
428	M.	42 weeks	M.	10	1	23 in.	Normal.	
8896	M.	41 weeks	M.	10	1	20 in.	Normal.	
7779	M.	40 weeks	M.	10	0	22 in.	Normal.	
7827	M.	40 weeks	M.	10	0	21 in.	Normal.	
8506	M.	42 weeks	F.	10	0	?	Normal.	

### PREMATURITY.

Any infant whose birth weight is  $5\frac{1}{2}$  lb. or less is considered premature or immature.

Of 2,015 infants born alive, 191, or 9.4 per cent, were premature. 55 of these were twins, and 3 were triplets. 29 premature infants died, *i.e.*, 15.0 per cent. 11 lived less than 24 hours, and 3 had malformations incompatible with any but a brief existence.

The smallest baby discharged alive weighed 1 lb. 15 oz.

91 were not completely breast fed. Whenever possible, milk was withdrawn from the mother and given to the baby until it was strong enough to take the breast. If the milk of the mother of a very premature or feeble infant was not available, pasteurised milk from other mothers was given until the child was well established.



### Analysis of Premature Deaths.

Birth Weight	Number Born	Died
Under 3 lb. ...	14	9, or 64.2 per cent.
Between 3 and 4 lb. ...	30	10, or 33.3 per cent.
Between 4 and 5 lb. ...	70	7, or 10 per cent.
Between 5 and 5½ lb. ...	77	3, or 3.8 per cent.

### Apparent Causes of Prematurity.

	Total	Multiple Preg- nancy	Album- inuria	Accidental Hæmorr- hage	Placenta, Prævia	Mal- formation	Mother Cardiac	Cæsarean	Cause Unknown	Various
Under 3 lb.	14	7	2	2	1	—	—	—	2	—
Between 3 and 4 lb.	30	15	2	3	2	—	1	2	3	2
Between 4 and 5 lb.	70	21	9	3	2	1	3	3	24	4
Between 5 and 5½ lb.	77	15	9	1	1	2	1	2	43	3
	<u>191</u>	<u>58</u>	<u>22</u>	<u>9</u>	<u>6</u>	<u>3</u>	<u>5</u>	<u>7</u>	<u>72</u>	<u>9</u>

In 9 cases the Wassermann reaction was tested and was only once positive.

In 6 cases labour was brought on by artificial rupture of membranes.

### INFANT CLINICS.

(1) **Infant Clinic**, held each Monday at 1-30 p.m.

Total attendances for the year	...	...	...	3,094 infants
New attendances for the year	...	...	...	351 infants

(2) **Special Infant Clinic**, held each Thursday at 2 p.m., by the Assistant Pædiatrician. Special groups of cases, such as twins, premature infants, birth injury, diseases of the newborn, infections and malformations are followed up, and records kept. The medical students and pupil midwives attend for instruction.

Total attendances for the year	...	...	...	393 infants
New attendances for the year	...	...	...	200 infants







