

OF THE CÆSAREAN OPERATION.

THIS operation, when performed in Great Britain, has been in almost every instance fatal to the mother. Records of *twenty-two* cases are to be found, and *twenty-one* of the mothers perished. The solitary case of recovery is related by *Mr. Barlow* of Blackburn, in the *Medical Records and Researches* (1798); but doubts have been entertained, whether in this case the incision was actually made into the *uterus**. Of the children, *ten* were born dead; and of the *twelve* extracted alive, *four* survived only a few days. The whole number of lives preserved does not therefore exceed *nine*.

A very astonishing case is stated to have occurred in Ireland†. The patient's name was Alice O'Neal, and the operator was an illiterate midwife, one *Mary Dunally*; the instrument used was a razor, with which she first cut through the containing parts of the *abdomen*, and then the *uterus*. "She held the lips of the wound together with her hand, till some one went a mile and returned with silk and the common needles which tailors use. With these she joined the lips in the manner of the stitch employed ordinarily for the hare lip, and dressed

* *Mr. Barlow*, the operator, maintains, that he did make an incision into, and extract the child from, the cavity of the *uterus* itself. And I must confess, that the weight of evidence is, in my opinion, greatly in his favour.—See *Hull's Defence*, p. 72, and *Observations*, p. 70.

† *Edinburgh Medical Essays*, vol. v.

the wound with whites of eggs." The woman recovered in twenty-seven days.

However incredible this story may appear, there seems no reason to doubt its truth. It is related by *Mr. Duncan Stewart*, surgeon, in Dungannon, who saw the patient some days after the operation; and the account is confirmed by *Dr. Gabriel King*, of Armagh, who says, that he drew out the needles, which the midwife had left to keep the lips of the wound together.

On the continent the Cæsarean operation has been more frequently performed, and has been less fatal to the mothers than with us; how often it has been successful in preserving the lives of the children, has not been recorded with so much exactness, as the subject requires.

It has often been an object of inquiry, why this operation should have been more successful upon the continent than in this country. Some writers have attributed it to the climate of England; but this cannot possibly have had sufficient influence to prevent a recovery; nor can it very well be attributed to the want of skill in our surgeons, since they succeed in other operations, apparently as hazardous. Two other causes are obviously more probable. 1st. That many of the patients have been in a previous ill state of health, suffering under the ravages of the *Mollities Ossium* at the time of the operation:—2dly. That too great a length of time has been allowed to elapse before the operation was performed; so that the patient, having undergone a long and ineffectual labour, has been operated upon, when worn out with fatigue, languid and feverish*.

* References to all the known cases of Cæsarean operation in England, will be found in the Appendix, No. 33.

The continental accoucheurs are evidently more familiarized with the idea of the *Cæsarean operation*, than the British. Some of the most approved writers on midwifery have sanctioned and recommended it, and have even laid down rules, calculated upon accurate, or supposed accurate admeasurements of the *pelvis*, as to when the *vectis* should be employed, when the *forceps*, when the *perforator*, when the *Section of the Symphysis pubis*, and when the *Cæsarean operation**.

But the consideration of the propriety of performing this awful operation, has not been left solely to the judgment of medical men; it has been made the subject of ecclesiastical discussion, and the doctors of the *Sorbonne*, and the heads of theological schools and colleges have freely given decisions upon it.

By these authoritative teachers it has been ruled, that the *Cæsarean operation* ought to be performed, whenever it is known that the child is living, and it is impossible by other means to extract it alive; for they assert, that it is a deadly sin (*Péché mortel*) to perforate the head of a living child in the womb. The clergy are instructed, in the event of a mother refusing to submit to the operation, to omit no means of persuading her: they are to point out all its advantages, and to intimate, that the operation is not so cruelly painful as might be thought: they are directed to speak of submission to it, as an act of the greatest love to GOD, and resignation to his will, that can possibly be shewn: it is even suggested, that under some circumstances, the patient might be forcibly confined, and the operation be performed against her will. It is further declared, that physicians or surgeons refusing to recommend, or to perform the operation, when they should

* See Appendix, No. 34.

think it necessary, would thereby render themselves guilty of a deadly sin, and ought to be reprimanded by the magistrates; and praise is given to an edict, in force in Sicily, which declares, that no person shall be admitted to practise as a surgeon, till he has been carefully examined as to the manner of performing the *Cæsarean section* on the living mother*.

These causes combined will explain the reason, why this terrific operation is more readily acceded to on the continent, than in this country; and a very cursory inspection of the various cases that have been published will shew, that the operators have not always been very nice in making their selection; for in many instances, the operation was resolved upon very rashly, and unnecessarily, as *M. Baudelocque*, a supporter of this method, himself admits.

It cannot be matter of much surprise, that, with so little success as has attended the *Cæsarean operation* in England, the British accoucheurs should be reluctant to propose or adopt it; and therefore recourse is never had to it, except in such deplorable cases only, as preclude the possibility of delivery by any other means. Such instances have been met with, and a specimen is now to be seen in the museum of my friend *Mr. Charles Bell*, in which the distortion of the *pelvis* is so extreme, that a marble, measuring less than one inch in diameter, cannot be made to pass through it in any direction. In this case, and some others of a similar nature, the *Cæsarean section* was the means of preserving the child.

* See *Cangiamila Embryologia sacra*, passim. *Raynaud de ortu Infantis contra Naturam. Peu Pratique des Accouchemens*, &c.

It hardly need be observed, that in the event of a woman, near the full time of pregnancy, dying undelivered, the *Cæsarean operation* ought always to be performed, with as little loss of time as possible; since by this measure a chance of preserving the child will be afforded, and several cases of such an operation, after the death of the mother, have been recorded, with the desired effect of saving the infant*.

How long, after the death of the mother, the child may survive *in utero*, it is perhaps impossible to say; some authors mention twenty-four or forty-eight hours! In the late *Dr. S. H. Jackson's Cautions to Women* (1798), mention is made of a child extracted by the *forceps*, which, by the very praise-worthy and persevering exertions of *Dr. Jackson*, was restored to life, though the mother had been dead full half an hour before it was born.

The dreadful sacrifice of life, which necessarily attends the use of the *Perforator* or the *Cæsarean section*, has led to many laudable inquiries, whether some means could not be adopted, to prevent the frequency of these operations, in cases of pelvic deformity; and the three following methods have been proposed, at various times, for the consideration of obstetric practitioners with this view:—

* “ Wednesday, July 15th, at Eddescastle, Staffordshire, the wife of Mr. Prescott, an exciseman, being killed by a flash of lightening, was opened, and a living male child taken out, which was immediately christened Jonah, and is like to live.” *Gentleman's Magazine*, 1747. — See also *Spence's Midwifery* (1784), — p. 495. *Viardel*, cap. xxiv. — *Embryologia sacra*. *Schurigii Embryologia*, p. 122.

1. *The Division of the symphysis pubis, for the purpose of enlarging the pelvis.*
 2. *The prevention of the full growth of the foetus in utero, by abstinence and other depleting measures.*
 3. *The inducement of premature labour.*
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A
S Y N O P S I S
OF THE
VARIOUS KINDS
OF
DIFFICULT PARTURITION,
WITH
PRACTICAL REMARKS
ON THE
MANAGEMENT OF LABOURS.

BY
SAMUEL MERRIMAN, M. D. F. L. S.
Lecturer on Midwifery ;

Physician-Accoucheur to the Middlesex Hospital, and to the Parochial Infirmary
of St. George, Hanover Square ; and Consulting Physician-
Accoucheur to the Westminster General Dispensary.

*Da spatium tenuemque moram, male cuncta ministrat
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