

ON SCARIFICATION OF THE VAGINA, TO PREVENT LACERATION DURING LABOUR.

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Professor Ritgen recommends, where the head of the child is long in producing dilatation of the vagina, so as to threaten laceration of the perineum, that the orifice of the vagina, and the strictured portions, should be slightly scarified. He alludes to a case where the child's head was a fourth or a third part born, but was embraced by the mouth of the vagina, on the outermost margin of which he made seven small transverse incisions right and left. These were not more than a line deep, and crossed each other, being separated by spaces of from two to four lines. By this means, the outer margin of the mouth of the vagina was suddenly expanded more than two inches in circumference. None of the wounds were lacerated by the passage of the head. They always healed readily, without inducing any permanent enlargement of the vagina; when the frænulum, indeed, is unhurt, the external mouth of the vagina, according to Professor Ritgen, is somewhat narrower, and the cicatrices from the incisions cannot be detected after a few weeks.

Laceration of the perineum is not a very common occurrence, and although the practice recommended by the author may enlarge the vulvo-uterine canal, where there is unusual stricture from any cause, we apprehend it cannot often be necessary.

¹Neue Zeitschrift für Geburtskunde; von Busch, d'Outrepoint und Ritgen. Dritten Bandes, erstes Heft, s. 65.