

MARCY (W. H.)

CÆSAREAN SECTION.

BY

W. H. MARCY, M. D.,

Surgeon to Ingleside Home; Chief Surgeon, Railroad Men's  
Hospital, Buffalo, N. Y.; Surgeon, West Shore Rail-  
road and the New York Central Railroad.

REPRINTED FROM THE

**New York Medical Journal.**

*for July 16, 1898.*

LIBRARY  
SURGEON GENERAL'S OFFICE

DEC.-10-1898

621.



*Reprinted from the New York Medical Journal  
for July 16, 1898.*

## CÆSAREAN SECTION.

By W. H. MARCY, M. D.,

SURGEON TO INGLESIDE HOME;  
CHIEF SURGEON, RAILROAD MEN'S HOSPITAL, BUFFALO, N. Y.;  
SURGEON, WEST SHORE RAILROAD AND THE NEW YORK CENTRAL RAILROAD.

IN May, 1897, I was called to see Mrs. G., aged thirty years; height, four feet three inches; a dwarf who was eight months pregnant. Upon examination I found the pelvis very small and took the following measurements: Spinae ilii, twenty-five centimetres; crestæ ilii, twenty-four centimetres; external conjugate, fifteen centimetres; internal conjugate (diagonal), eight centimetres; true conjugate (estimated), five centimetres and three quarters.

The child was in breech presentation L. A. S. The abdominal walls being thin, the approximate measurements of the child's head were easily taken with the pelvimeter, which subsequently proved to be true by comparison with the accurate measurements obtained after birth, which were as follows: Biparietal, eleven centimetres; fronto-occipital, twelve centimetres and a half; fronto-occipital circumference, thirty-eight centimetres.

After ascertaining these measurements I saw normal labor was impossible. Two weeks before her expected time I transferred her to the hospital, deciding to do Cæsarean section.

I allowed labor to progress sufficiently to dilate the os uteri to the size of a silver dollar. The bags of water

COPYRIGHT, 1898, BY D. APPLETON AND COMPANY.

LIBRARY  
SURGEON GENERAL'S OFFICE

DEC.-10.-1898

were unruptured. The patient was anæsthetized in bed and taken to the operating room.

*Operation.*—An abdominal incision was made from just above the umbilicus to the pubes. The uterus was



thrown outside the abdominal wall. The skin along the line of incision was clamped close to the uterus to protect the abdominal viscera from amniotic fluid and blood clots. At the lower segment of the uterus was placed a rubber tube, mainly as a safeguard should hæmorrhage be excessive, and around this was a strip of gauze to re-assure protection to the viscera. Constriction was exerted through the rubber tubing only as hæmorrhage showed itself.

*Concerning the Technique.*—It is of great importance to diagnosticate the site of the placenta and avoid its injury, but not to avoid incising the uterus over the placental site, as suggested by many authors. I wish to emphasize this point. I diagnosticate the site of the

placenta and try to make my incision over its centre, cutting only a buttonhole in the uterus, inserting my finger as a guide, and making a five-inch uterine incision. The back of the hand at the same time compresses the placental site. Immediately on removing the hand the intra-uterine pressure forces the placenta through the incision, and all one has to do is to use gentle pressure so that the placenta and uterine contents do not come



out with a rush. The placenta pops out, with the aid of intra-uterine pressure and at the same time aided by uterine contraction, like a cauliflower. I was able in this case to lift the placenta with membrane intact from

the uterus. The hæmorrhage did not exceed two ounces. The patient was immediately given a hypodermic injection of ergotine. The child was not asphyxiated and began to cry immediately. The uterus contracted normally.

Silk was used for the intramural stitches, which did not penetrate the peritonæum or mucosa. A second line of sutures (Lembert's) united the peritoneal coat outside of the intramural sutures. The omentum was drawn down over the peritoneal sutures in the uterus. The peritonæum proper was united with continuous suture of catgut. The abdominal fascia and integument were sutured separately with catgut.

The mother made an uninterrupted recovery. The lochia were normal, and she did not suffer more than from an ordinary labor.

The baby tipped the scales at eight pounds and a half. To-day (March, 1898) both mother and baby are in perfect health.

Appended are photographs of the mother before operation, and after operation with her babe in her arms.

1148 MAIN STREET.

# THE DISEASES OF INFANCY AND CHILDHOOD.

*For the Use of Students and Practitioners of Medicine.*

By L. EMMETT HOLT, A. M., M. D.,

Professor of Diseases of Children in the New York Polyclinic; Attending Physician to the Babies' Hospital and to the Nursery and Child's Hospital, New York; Consulting Physician to the New York Infant Asylum, and to the Hospital for Ruptured and Crippled.

With 7 Full-page Colored Plates and 203 Illustrations. Cloth, \$6.00; sheep, \$7.00; half morocco, \$7.50.

---

SOLD ONLY BY SUBSCRIPTION.

---

"This work is in every sense of the word a new book; for while the best work of other authors in this and other countries has been drawn upon, especially that in the form of monographs and in the files of pædiatric literature, the majority is derived from the author's own clinical observations. Obsolete dicta handed down from text-book to text-book are here conspicuously absent, and nothing has been accepted which has not been carefully tested. . . . It is not venturing too much, after a careful perusal of these pages, to predict for this volume a pre-eminent and lasting position among the treatises upon this subject. We heartily recommend that it find a place not only in the library of every physician, but wide open at the elbow of every man who desires to deal intelligently with the problems which confront him in the treatment of infants and children intrusted to his care."—*American Medico-Surgical Bulletin*.

"This magnificent work is one of the most valuable recent contributions to medical literature. It will rapidly win its way to a front rank with other standard works upon kindred subjects. It is as nearly complete as a treatise upon this subject can be."—*Nashville Journal of Medicine*.

"When one recalls the teachings of a decade or two ago and compares the inculcations of to-day, he can scarcely help recognizing that 'old things have passed away, and all things have become new.' The volume before us is practically the record of information obtained by the author from eleven years of special study and practice, so that nearly every subject is presented from the standpoint of personal observation and experience. The information given is therefore reliable, for Dr. Holt is a close observer and a careful student of his ripe experience. . . . In short, this book appears to us to be the best all-round, up-to-date book for practitioners and students of children's diseases that we know of."—*Virginia Medical Semi-Monthly*.

"The work before us is one which reflects great credit upon the distinguished author. Dr. Holt has long been known as a most industrious and painstaking investigator, and in this volume he sustains that reputation. The work, we may say in a sentence, is fully up to the requirements of the times, and there is no advance known to pædiatrics which has not been fully dealt with according to its merits."—*Medical Progress*.

---

D. APPLETON AND COMPANY, NEW YORK.

