

ON RETROVERSION OF THE UTERUS, AND ITS TREATMENT BY INFLATION.

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THE Number of THE LANCET for July 25th contains a continuation of the valuable series of "Illustrations of Inflammation and Ulceration of the Uterine Neck," by Dr. J. H. Bennet. The case described in the following statement is one of exceedingly great interest in a practical point of view. The case is headed, "Ulceration of the cervix uteri a cause of abortion;" and further, it is described as "Ulceration existing previous to impregnation; retroversion of the uterus occurring during treatment, without any appreciable cause; flooding simulating menstruation; abortion."

I shall not enter into the question of impregnation taking place during the existence of an ulcer on the cervix uteri, further than to observe, that we have no evidence before us in this case to show that the cervix uteri was in a state of ulceration coincident with the period at which impregnation took place; for it appears, from the dates, that this patient had conceived two months prior to her first application to Dr. Bennet, when he discovered the ulcerated state of the part; and again, I do not think we are warranted in giving our assent to the proposition laid down by Dr. Bennet, that in this case the "ulceration was a cause of the abortion," for we find that it was complicated with retroversion of the uterus, unreduced, or, according to Dr. Bennet, "irreducible;" and we know that abortion is the almost inevitable consequence of this malposition of the womb. Having made these few remarks, I shall proceed to consider the case as one of retroversion of the uterus, simply; and my chief object in doing so is to point out to the attention of Dr. Bennet and the profession a method of correcting this malposition of the uterus, which suggested itself to me some years ago, and which has since been found competent by others in the profession to effect this object, after every other known means of reduction had been tried, and found unavailing—I mean, inflation of the pelvis.

In December, 1839, I was called into consultation in a case of retroverted uterus, which for a period of seven days resisted our best directed endeavours to rectify. Inflation of the pelvis suggested itself to me; we acted on the suggestion, and the uterus was restored almost instantaneously to its normal position. Nor had we the slightest trouble with it afterwards.

I communicated this case to the Obstetrical Society of Ireland on the 2nd of January, 1840, in a paper which I read before them, and which was subsequently published in *The Dublin Journal of Medical Science* for March, 1840, (vol. xvii. page 68.)

This method of treating retroversion of the uterus has been found equally successful in other hands. The accompanying note I received from Dr. Brunker on 20th October, 1844:

"Dundalk, 18th Oct. 1844.

"SIR,—As I am sure you will be gratified to hear of the success of the mode of treatment proposed by you, to remedy a retroverted uterus, I beg to inform you, that I tried inflation of the vagina in a patient in the County of Louth Infirmary a few days ago, whose case was a very urgent one, and I am happy to say, with almost immediate success, and relief of all the urgent symptoms—though all the usual manœuvres to rectify the uterus were diligently made use of previously, but with no avail. I certainly should not hesitate, at once, to inflate the vagina in a similar case, without having recourse to any other expedient.—Your obedient servant,

"E. G. BRUNKER, M.D.,

"Surgeon to Louth Infirmary.

"To Dr. Halpin, Cavan."

I believe it is pretty certain that Dr. William Hunter first aroused the attention of the profession to this affection, in a paper on the subject, published in the fifth volume of "Medical Observations and Inquiries;" he termed it retroversion of the uterus. Yet, undoubtedly, it was well known previous to the date of the case on which his observations were founded. This will be seen by the perusal of two cases which I now quote, from "Smellie's Treatise of the Theory and Prac-

tice of Midwifery." Contrary to his usual practice, this author has omitted appending dates to those cases; but the second volume of his work, in which they occur, was published in the year 1754, just seventeen years prior to the appearance of Dr. Hunter's paper, which was published in 1771. I had not seen these cases when I compiled my paper on retroversion of the uterus. I have copied the greater part of them, containing, as they do, an accurate description of the disease, because I do not find any reference to them in any work to which I have access; and as I believe the work itself, now becoming scarce, may not be within reach of a great body of my readers, I here transcribe portions of the cases:—

Volume II., Collection X., Number II., Cases 1 & 2.—Being called to a woman, who, in her first child, had a total obstruction of urine about the end of the fourth month, I found her in great pain from a distention of the bladder,—for the suppression had continued full thirty hours,—and immediately gave her ease, by drawing off the urine with the catheter. For several days she made water but with some difficulty, and but a very little at a time; and when I examined, I found the uterus lower down than usual. Next morning, I found her in the same condition. I examined the state of the uterus, and found it forced still lower by the pressure of the overcharged bladder; indeed, so low, that I could feel the length of the neck, and the stretching of the fundus, which seemed to fill up the whole pelvis. I likewise examined the rectum; when, finding it press strongly against the sacrum, as well as the pubes. . . . When I pressed my finger against the os uteri, so as to raise it up, some urine was discharged; but this being in small quantity, I was fain to have recourse to the catheter. The treatment consisted in "drawing off the water with the catheter once in twenty-four hours, which he was obliged to do for eleven days, before she could pass it the natural way;" bleeding, purgative glysters, with cupping and bathing; by which means her complaints abated, and then she went on to her full time. At her next pregnancy, she began to be troubled with this suppression about the same time; but by bleeding, and keeping her body open, it was prevented from becoming total.

Two other patients were troubled with the same complaint about the same period of gestation, which continued fourteen days, and was overcome by the same method—namely, by repeated bleedings and glysters, together with the assistance of the catheter.

In Case 2, he states—I was lately called to a woman in the fifth month, and felt the fundus uteri forced down backwards to the lower part of the vagina, the os uteri being forward, and above the inside of the left groin. The neck and under part of the bladder were so pressed, that the patient had not urined for several days; the vesica was stretched up to the scrobiculus cordis, and a fluctuation was felt as in ascites. The male catheter was used, because the other was too short, and emptied a great quantity of urine, so that the distention of the abdomen considerably diminished.

Next day, after the same operation, she miscarried; consequently, the obstruction was removed.

Cavan, August 4, 1846.