



A Handbook of Midwifery

William Radford Dakin

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This historic book may have numerous typos and missing text. Purchasers can download a free scanned copy of the original book (without typos) from the publisher. Not indexed. Not illustrated. 1897 edition. Excerpt: ...of survival to the child, and on this account Champetier de Kibes' bag (p. 359) will probably, after an extended trial, be found a better mode of treatment than turning. It can be inserted as soon as the smallest-sized Barnes's bag, and left in the uterus, where it will act as a complete plug until it has dilated the os to a sufficient size to allow of delivery of the child by the natural forces, or by the aid of forceps if necessary. The dangers of slow delivery by the breech are thus averted, and there is, if anything, less risk to the mother, since the manipulations necessary for turning are avoided. Supposing it is found impossible to do bipolar version at the stage recommended, the cervix must be further dilated so as to allow of the introduction of the hand inside the uterus to seek a foot. This dilatation may be necessary if Barnes's bags are used; but if the French dilator be used, the further danger arising from this severer operation is nearly always obviated. On account of the tendency of the woman, if her strength is drained by bleeding, to postpartum haemorrhage, great care should be taken to ensure complete retraction, and a close watch must be kept on her for some hours after delivery to prevent this. When the labour is over and all bleeding has stopped, if the patient has lost considerably during and before delivery, she may fall into a syncope, and sometimes die. If there seems from the woman's aspect and physical state any likelihood of this, she must be well supported with stimulants, her head kept low, external warmth maintained by hot bottles and blankets, and the injection of saline fluid resorted to at once, three or four pints being slowly run into the veins (see p. 360). The observance of strict antiseptic principles...

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