The Midwife.

The Elderly Primapara.

The question, Does age affect the course of first labours? has received considerable attention from obstetricians. The following statistics of 177 consecutive full-term labours, extending over 25 years, confirm the points insisted upon by most writers-namely, that women over thirty years of age have some-what longer labours, and that artificial delivery is more frequent than in younger women; other statements, such as the increased tendency to eclampsia and adherent placenta, the higher mortality of the children, the frequency of twin presentations, are unproven. It is fallacious to draw conclusions from what is comparatively a small number of cases, but, on the whole, they show that there is not greater risk for the elderly primapara than for the young mother, and that many of the fears aroused by the traditions of both medical and lay people are unwarranted. All cases where the child was premature, or there was marked contraction of the pelvis, have been left out; the twin labours also have been omitted for obvious reasons. These were four in number (2.2 per cent.); the lie, weight, and sex of the children were as follows:---

lb. oz.					lb. oz.			
Breech Vertex			$\frac{11\frac{1}{2}}{4}$	Female. Male.	Vertex 5 Vertex I. 5	-	Female Female	
Vertex Vertex	IV.			Male. Male.	Vertex I. 5 Transverse 4	3 1	Female	

The analysis of the ages in the 177 cases under consideration is instructive: 124 were between the ages of 30 and 35, 39 between 85 and 40, 13 over 40, 1 over 45. It is generally agreed that the likelihood of a woman bearing children diminishes with increasing age, late marriages are often sterile.

The patient, who was 46, had a natural labour, lasting 21 hours 25 minutes (second stage, 1 hour 25 minutes); the child, a boy, presented in the fourth vertex position, and weighed 6 lb. 1 oz. The placenta was partially adherent, hæmorrhage 15 ounces.

weighed 6 lb. 1 oz. The placenta was partially adherent, hæmorrhage 15 ounces. There were 121 natural labours; in 56 cases (31.6 per cent.) forceps were applied. This percentage is peculiarly high, but the frequency with which instruments were considered indicated, varied with the practice of the physician in charge. At one time it was the rule to apply forceps if the second stage lasted two hours and advance was slow. It is interesting to compare these figures with those of Tarnier—in 111 cases, 30 (27 per cent.) were instrumental—and of Edgar—in 47 cases, 17 (36.1 per cent) were instrumental. The indications for forceps were as follows:—

	.eeps ne		.0110 11 1	
Tedious labour				15
Uterine inertia				9
Rigidity of perineun	n and so	oft par	ts	6
Delay at brim		F		5
Rigid os				2
Syncope			•••	$\overline{2}$
Delay on perineum	•••		•••	2
Persistent occipito	nostorior			1
Albuminuria	posterior	•••	• • •	
	•••	• • •	•••	1
Badly-flexed head	•••	•••	•••	1
Eclampsia	•••	•••	•••	-
Ankylosed coccyx .	• • •	•••	•••	1
After-coming head	• • •	•••	•••	
Not stated	•••	•••	• • •	9
			-	

In three of these deliveries (5.3 per cent.) the children were still-born; in the natural labours there were five still-births (4.1 per cent); in one there was apparently no cause, the others were due to obstructed arm presentation (decapitation), delay in the aftercoming head, eclampsia, and prolapse of the cord, one of the two cases in which this accident occurred.

The presentation was vertex in 173 cases (97.7 per cent.), breech in 3 (2.8 per cent.), transverse (arm) in 1.

The sex of the children was not stated in 11 cases, there were 95 males (57.2 per cent.), and 71 females (42.8 per cent.). This bears out the statement that the child of an elderly primapara is more often a boy than a girl, but since the former sex always preponderates, it is true whatever may be the age of the mother. The average weight was 6 lb. 13 oz.; this cannot be considered high. Only one weighed over 10 lb. (10 lb 10 oz.), two weighed over 9 lb., the lighest was 4 lb. 2 oz.

The duration of the first stage of labour varied from 72 hours to 20 minutes; the average was 18 hours; the two most prolonged were due to rigidity of the os.

The average duration of the second stage of labour was 2 hours 53 minutes; excluding forceps cases, it was only 2 hours 15 minutes; these would have been considerably less had it not been for several cases of secondary uterine inertia; the longest duration was 28

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