

is the delivery of a living child with safety to the mother, the vertex presenting. Sir J. Y. Simpson: The head alone presenting, and labour terminated in twenty-four hours. Schroeder: Normal parturition is the expulsion of the fœtus at term from the uterus through the maternal passages by natural forces. Parvin: When parturition is effected by the sole power of the natural organism. Spiegelberg: From the point of view of frequency, the vertex presenting is the only normal labour—all others are abnormal, and must be considered as pathological occurrences. Barnes: Eutochia (easy labour) is labour proceeding smoothly, and terminating favourably under natural forces. Ramsbotham: When the head presents: when the child is born within twenty-four hours after the commencement of true uterine action, and when nothing of a dangerous or alarming nature happens. Hippocrates: When either the head or breech presents. Smellie: When uterine action alone accomplishes delivery. Baudelocque: All cases which terminate by the natural powers, and when either the head, breech, or feet present. Davis: When the head presents. Blundell: Where the head presents, and labour is completed in twenty-four hours. Mauriceau: When the child is born alive. Merriman and Burns: A vertex presentation with face turned into the hollow of the sacrum. Cooper: Labour terminated in twelve hours. Power: Labour completed in six hours. Denman: Where the head presents, no artificial aid required, and labour over in twenty-four hours. Conquest: Where occipito-vertex presents; when there is sufficient room in the pelvis to admit of easy descent of the head; when the occiput emerges under the pubic arch; when no manual interference is needed; when labour is completed in a moderate time, and when mother and infant are well. Cazeau and Tarnier: The expulsion of the fœtus by the efforts of nature alone.

A great many of the above take little or no heed of the lives of the mother or infant, and are thus clumsy and barbarous.

The following factors should be taken into account when defining the term "natural labour."

I. *Time occupied in Labour.*—The following tables are taken from Churchill:—

No. of cases.	Terminated in 6 hours.	In 12 hours.	In 18 hours.	In 24 hours.	Above 24 hours.
500	206	398	442	450	—
15,850	13,012	15,034	15,346	15,586	264
893	347	647	734	793	36
1,182	577	953	—	1,114	69
1,285	365	760	—	1,119	165
640	—	515	—	—	104
6,638	3,882	5,280	5,706	5,852	269

II. *The Presentation of the Child* (Churchill and various authors):—

No. of cases.	Head Presentations.	Breech Presentations.	Inferior Extremities.	Superior Extremities.
20,517	19,810	372	238	80
15,652	14,677	349	255	68
10,387	9,748	61	184	48
2,947	2,735	78	40	19
640	619	2	3	1
2,452	2,225	17	8	4
839	786	—	21	4
691	645	14	7	4
16,414	15,912	242	187	40
1,182	1,105	28	15	4
4,665	4,266	59	29	12
1,640	1,119	35	22	9
6,634	5,815	140	61	23
13,784	11,874	309	181	60

Churchill adds that in 327,802 labours the head presented 321,503 times

Spiegelberg gives the following table:—

97.3	per cent. of all labours are head presentations.
3	" " " face "
1.59	" " " pelvic "
.78	" " " transverse "

III. *As regards the Position of the Head.*—Neeagle says that the first position (occiput anterior) occurs in 69 per cent. of all head presentations. Lachapelle, 77 per cent.; Bovin, 80 per cent.; and Halmagrand, 74 per cent.

IV. *As regards the Proportion of Natural to Abnormal Labours.*—Smellie calculated that 990 of every 1,000 labours are natural; Leake, 900 in every 1,000; Bland, 1,792 in 1,897; Clarke, 9,748 in 10,199; Merriman, 2,607 in 2,734; Lew, 4,266 in 4,666; Assalini, 205 in 269.

V. *Mortality Statistics.*

	Mortality in Mothers.	Mortality in Infants.
In natural labours	about 6 per 1,000	—
In cases of turning	1 in 15	1 in 2½
" forceps	1 in 38	1 in 4½
" craniotomy	1 in 5½	—
" face presentation	1 in 60	1 in 7
" occiput posterior	—	1 in 5
" breech presentation	—	1 in 3½
" transverse "	1 in 9	1 in 2
" cord	—	1 in 2½
" flooding	1 in 6	1 in 3
" convulsions	1 in 4½	—

VI. *Death-rate of Mothers in successive Pregnancies.*—

Matthews Duncan has said "the bearing of the first child is well-known to be dangerous and often fatal to the mother." In his work on "Fertility, Fecundity, and Sterility," he gives a table showing that of 3,722 women in their first confinement 6.82 per cent. or 1 in 15 died, in the thirteenth confinement 11.77 per cent. or 1 in 8 died, and in a woman's fifteenth confinement 16.66 per cent. or 1 in 6 died. I think no midwife should be allowed to attend a woman in her first confinement nor in any confinement beyond the eleventh.

Taking the above factors into consideration, I think the following would be a fairly accurate definition of natural labour:—

Labour at the ninth calendar month in a woman free from organic disease of the heart, kidneys, lungs, brain and other organs, and from febrile complaints; when there is no impediment in the parturient canal either of a hard or soft nature to the passage of the child; where there is only one child in the womb; where the vertex alone presents in the first or second occipito anterior position, and when the child's head is delivered with the occiput emerging under the pubic arch; where labour is completed within twelve hours from the first occurrence of pains; when the mother is delivered of a full-time live infant, without either manual or instrumenta aid; when there is no laceration of any portion of the parturient canal; when the placenta comes away without the use of any force or manual interference other than gentle pressure from above, within twenty minutes after the birth of the infant, and when there is no hæmorrhage before, during, or after labour.

Let me just add: Dr. Hugh Woods has done good service by calling attention to the serious statement of Engelmann that a large proportion of the heavy death rate among lying-in women is due to the fact that so many consider a woman in "natural labour" wants as little attention as the lower animals. Such opinion to be put into force with the poor only, but never with our wives and daughters. Such is the spirit of nineteenth century medical philanthropy!—I am, Sir, yours, &c.,
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