

27-1-40. 6th day.

All treatments continued. Maximum temp. 99.8 at 4 p.m.

28-1-40. 7th day.

Perineal pads soaked with urine—continuously. The patient had obviously developed a vesico-vaginal fistula. Our fears had not only been justified, but now they were realised. Whether even the insertion of the cod liver oil dressing had been a contributing factor or not, we cannot tell—it is our usual practice in cases with lacerations and sloughing of the vagina—but under existing circumstances it was decided to stop the cod liver oil dressings, but to continue the iodine douches, etc. Considering the freshness of the wound it was now decided to follow the same line of treatment that we should carry out had operative measures been taken for repairing a vesico-vaginal fistula—trusting, in this instance, that the raw edges of the wound would heal without sutures.

Accordingly, a self-retaining catheter was inserted in the bladder, through the urethra and connected to a drainage bottle by connecting tubes.

The Gatch frame was removed and the patient made to lie on her abdomen—to prevent the edges of the fistula being irritated by urine and thereby given a maximum chance to heal.

Patient made strenuous objections for about 24 hours and then settled down quietly and co-operated wonderfully.

Patient was turned *very gently* on to her back for wash downs and perineal dressings q.4.h. and douches b.d., and then turned back.

Temp. was normal all day long, and from this day until a few days before her discharge, when it subsided after an adequate trial of quinine.

2-2-40. 12th day.

Lochia, nil. Stopped douches.
General condition satisfactory.

5-2-40. 15th day.

Perineal sutures removed. Wound healed. Liq. paraffin stopped.

Patient quite cheerful and non-complaining.

9-2-40. 19th day.

Patient suddenly began complaining of acute discomfort from catheter.

Fearing cystitis, bladder was gently irrigated with boric lotion and mercurochrome 4 per cent. instilled at the close of the treatment. Alkaline mixture was given.

R.
Soda Bicarb. $\mathfrak{z}\text{ii}$.
Pot. Citrate $\mathfrak{z}\text{i}$.
Pot. Acetate $\mathfrak{z}\text{i}$.
Tr. Lavand. Co. $\mathfrak{z}\text{i}$.
Aqua ad 6 doses. Sig. $\mathfrak{z}\text{i}$ t.i.d.

10-2-40. 20th day.

All day patient complained bitterly—crying aloud—but never attempting to remove the catheter herself, though she begged us to do so.

Bladder wash with boric lotion and instillation of mercurochrome repeated.

Patient's bed was reported to be wet after this treatment, which raised the question whether, if the bladder wash had leaked through the wound was it worth while keeping the patient any longer on such rigorous treatment? If it had not, we felt certain that another week would greatly strengthen the healing wound and was advisable, before removing the catheter and allowing the wall of the bladder to expand with urine.

11-2-40. 21st day.

Patient had now been on drainage for 14 days, and it was decided to venture an experiment. If this treatment was to prove successful the wound should have made sufficient progress by this time to permit the patient to lie on her back or side. The catheter should be left in. If the wound leaked—we had failed—and all was in vain. If not—the catheter should be left in for one more week, and we would still hope for success.

The patient was greatly encouraged and relieved by the change of position and made no more complaints of any kind. And there was no leakage of urine, save that through the catheter.

15-2-40. 25th day.

Temp. went up to 99.8 at 4 p.m.
No complaints.

16-2-40. 26th day.

Temp. 98.2 at 8 a.m. Maxim temp. 102.6 at 8 p.m.
R. Quin., Sulph. grs. v given at 9 p.m. and 3 a.m. 17-2-40.

17-2-40. 27th day.

Temp. 101 at 8 a.m. Maximum temp. 103.8 at 4 p.m.
R. Quinine pills, grs. iii, 5 a day. Given q. 2 h.
Alkaline mixture was stopped and the following substituted:—

R.
Urotropine $\mathfrak{z}\text{i}$.
Acid Sod. Phosphate $\mathfrak{z}\text{i}$.
Aqua ad. 6 doses. Sig. $\mathfrak{z}\text{i}$ t.i.d.
Patient cheerful and uncomplaining.

18-2-40. 28th day.

Catheter removed at 8 a.m. No leakage of urine.
The fistula had healed spontaneously.
Quinine and urotropine mixture continued.
Maximum temp. 101° at 4 p.m. Temp. 99.8 at 8 p.m.

19-2-40. 29th day.

Temp. normal. Patient all smiles.
Discharged—with advice

LITTLE MOTHERS OF MEN TO BE.

Attributed to Ella Wheeler Wilcox.

Whether you frolic with comrade boys,
Or sit at your studies or play with toys;
Whatever your station or place or sphere,
For just one purpose God sent you here;
And always and ever you are to me
Dear Little Mothers of Men to be.

So would I guard you from all mean things;
From the dwarfing of wealth and from poverty's
stings;
And from silly mothers of fuss and show
And from dissolute fathers whose aims are low.
I would take you and shield you and set you free,
Dear Little Mothers of Men to be.

And then were the wish of my heart fulfilled,
Around about you the world should build
A wall of Wisdom, with Truth for its Tower,
Where mind and body would wax in power
Till the tender twig was a splendid tree,
Dear Little Mothers of Men to be.

It is only a dream; but the world grows wise,
And a mighty truth in the dream seed lies
That shall gladden the earth in its time and place:
We must better the Mothers to better the race!

—From the Quarterly Bulletin.

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