

CHAPTER IV.
PREGNANCY.

SECTION I.

THE SIGNS OF PREGNANCY.

WHEN impregnation has taken place, certain changes are usually produced in the female system and generative organs. It is very important that the accoucheur should be able to *distinguish these changes* from others which resemble them, and to determine whether the female be *pregnant or not*; because her reputation, as well as the *moral reputation of the female*, will frequently depend on a correct or incorrect diagnosis of a supposed case of pregnancy. Young women who are illegitimately pregnant, when suspected, will generally *deny the fact*, and that with great warmth, declaring that they are slandered, if he concur in this opinion; so that we must depend upon the accuracy of *our own knowledge*, and expect no assistance from the female under such circumstances.

We shall find others who are not pregnant, who suppose themselves to be so, or are supposed to be so by others, in consequence of suppressed menses, enlarged abdomen, &c. And we shall doubtless

find that it will take all the tact and judgment we can possess, to enable us sometimes to form a correct opinion on a case of supposed pregnancy. The following amusing anecdote, which occurred in this city some years ago, may serve to illustrate the importance of knowing whether a woman is pregnant or not, perhaps better than any argument which we could advance :—

A lady, aged forty-seven, who had been married since her thirtieth year, had entertained a most anxious desire to become a mother, but had not succeeded in her wishes, and was about abandoning all hope, when, of a sudden, she noticed that her abdomen began gradually to enlarge, and she really imagined herself pregnant. In addition to the ordinary symptoms of gestation, she thought she distinctly felt the motion of her child. She received the congratulations of her friends, was complimented on her prowess and the final accomplishment of her hopes after years of fruitless effort, and commenced making the necessary preparations for her approaching accouchement. Her physician was sent for, and was informed that his services would be required, &c. In the course of a few months, the labor commenced; a messenger hastened to admonish the doctor that the lady's time had come, with a request that he would lose no time in reaching the bedside of his delighted patient. The doctor arrived—all in the house was confusion—the nurse was enchanted—the husband could scarcely realize the advent of this long-expected era in his life—the patient was in actual labor—the pains frequent and distressing. The physician was entreated to lose no time in assisting madam: he instituted an examination—the silence of death now pervaded the lying-in chamber to hear from the lips of the oracle the exact facts of the case. They were soon made joyful by hearing from the doctor that all was right—that the labor was quite advanced, and in a very short time would be completed. The sufferings of the patient increased—she was requested to make the most of her pains—to *bear down and assist nature*—when, lo! in the midst of one of those powerful efforts to “assist nature,” there was heard an explosion, which struck terror into the hearts of all present, the doctor included. The patient immediately exclaimed, “*Oh! dear doctor, it's all over. do tell me if it is a boy!*” The explosion was nothing more than an escape of air from the bowels, the patient having mistaken flatulence for pregnancy, and the rumbling of the gas in the intestines for the motions of the fœtus. Comment is here unnecessary; let this case, however, admonish all of the necessity of caution.

It is a well-known fact that Dr. Clarke, physician to the queen of England, pronounced one of her maids-of-honor pregnant, and occasioned great affliction, both to herself and all her friends: and it was afterward proved that she labored under disease, and not pregnancy. Physicians, without great care, may on this subject make many very unpardonable mistakes. One which came to light a short time ago, in the neighborhood of this city, we may relate, as a warning to all to take care how they give an opinion on this subject without indubitable evidence. The anecdote is now annually repeated in one of our colleges in this city by the professor of midwifery, as a warning to all students and others who may be present :—

A minister and his daughter, a young lady aged eighteen, emigrated to this country; and, before leaving England, an attachment was formed between her and a respectable attorney, which resulted in a matrimonial engagement. Soon after this, her health began to decline. There was loss of appetite, irregularity in her menses, and swelling of her abdomen; she was, in short, suspected of pregnancy. The lawyer, hearing of these reports, immediately wrote to her father, and begged to be released from the contract, which was acceded to. Her physician likewise pronounced her pregnant. But her father, feeling indignant at this imputation against her virtue, requested an additional consultation, which resulted in the same opinion. The father and daughter now set sail for America; and on the passage she became very ill, vomiting from sea-sickness. A physician on board, concurring in the previous opinions given, apprehended a premature delivery. On her arrival in this country, and becoming located near New York, a physician was sent to visit her, and, upon examination, pronounced her *not pregnant*; and gave his opinion that the lady was afflicted with a tumor in the uterus, and that she was laboring under the last stage of consumption: which proved to be the case, and she survived but a short period. The same physician held a *post-mortem* examination, and found that the lady had been laboring under a cal-

careous tumor of the womb, which had given rise to all the symptoms resembling pregnancy. This instance shows still further the necessity of exercising great caution in giving our opinion in a supposed case of pregnancy.

Numerous cases are on record, where a false diagnosis in women convicted of capital offences, has led to most lamentable results, and where dissection of the body after death has shown that she was pregnant. Dr. Evory Kennedy has recorded an interesting case of this sort which occurred at Norwich, England, in 1833, when a pregnant woman was on the point of being executed through the ignorance of a female jury. We may also mention a dreadful case of this nature which occurred to the celebrated Baudelocque, at Paris, during the horrors of the French revolution. A young French countess was imprisoned during the revolution, being suspected of carrying on a treasonable correspondence with her husband, an emigrant. She was condemned, but declared herself pregnant; two of the best midwives in Paris were ordered to examine her, and they declared that she was not pregnant. She was accordingly guillotined, and her body taken to the school of anatomy, where it was opened by Baudelocque, who found twins in the fifth month of pregnancy!

In many instances the character and happiness of the individual must depend upon the judgment which the practitioner pronounces; and, painful as will be the task of communicating an opinion which implies guilt and loss of honor, how infinitely revolting and inexcusable must that step be considered which turns out to have been founded upon an incorrect diagnosis! Hence the importance of separating those symptoms of pregnancy which may be considered certain, and therefore trustworthy, from the crowd of others, which, although collectively they may warrant a suspicion, yet never can justify a decision that pregnancy exists, more especially in cases where so much is at stake. No two symptoms have led more frequently to this cruel error, and therefore to the most unjust suspicions, than the cessation of the menses with swelling of the abdomen, and yet from how many different causes may they arise besides that of pregnancy! Putting even the impulse of common feeling aside, we would ask how a practitioner can dare recklessly to incur the responsibility of injuring a woman's character by hazarding an opinion which involves so much, and is based upon symptoms which, by themselves, prove so little? Whether he exercise his profession in town or country, cases of doubtful pregnancy will constantly come under his notice. We can not, therefore, too strongly urge the importance of ascertaining how many of the certain symptoms are present, before we allow ourselves to be influenced by those which are uncertain.

In speaking of the enlargement of the abdomen as a sign of pregnancy which is extremely equivocal, Dr. Dewees well observes: "But little reliance can be placed upon this circumstance alone, or even when combined with several others; for I have had the pleasure in several instances of doing away an injurious and cruel suspicion, to which this enlargement had given rise. Within a short time, I relieved an anxious and tender mother from an almost heart-breaking apprehension for the condition of an only and beautiful daughter on whom suspicion had fallen, though not quite fifteen years of age: this case, it must be confessed, combined several circumstances which rendered it one of great doubt, and, without having had recourse to the most careful and minute examination, might readily have embarrassed a young practitioner. This lady's case was submitted to a medical gentleman, who, from its history and the feel of the abdomen, pronounced it to be a case of pregnancy, and advised the sorrow-stricken mother to send her daughter immediately to the country as the best mode of concealing her shame. Not willing to yield to the opinion of her physician (a young man), and moved by the positive denials of her agonized child, the mother consulted me in this case. The menses had ceased, the abdomen had gradually swelled, the stomach was much affected, especially in the morning, and the breasts were a little enlarged. On examination, it proved to be a case of enlarged spleen."

We occasionally observe certain conditions of the female system which put on a most striking resemblance to pregnancy, both functionally as well as organically, without at all depending on the actual presence of pregnancy. The abdomen begins to swell from the pubic region exactly in the same gradual manner as in pregnancy; the breasts become painful, swell, and secrete a lymphatic fluid, frequently resembling milk; the digestive organs become disordered; there is irregular appetite, nausea, and incli-

nation to vomit; constipation, muscular debility, change in the color of the skin, and frequently of the whole condition of the body; the nervous system suffers, and even the mind itself frequently sympathizes; the patient is sensible of movements in the abdomen like those of a living fœtus, then bearing-down pains running from the loins to the pubes; at last actual labor-pains come on as with a woman in labor, and if by chance her former labors have been attended by any peculiar symptoms, these, as it were, to complete the illusion, appear likewise.

In the early part of my practice, females have frequently applied to me, professing to labor under some diseased irregularity of the menses; when, on investigation, I discovered and pronounced some of them pregnant: and although it was strenuously denied at the time, I have afterward been called to attend them in labor. While, on the other hand, I have frequently known various diseases of the womb, complicated with disease in other parts of the system, *so closely to resemble pregnancy*, as to deceive many. Hence the necessity of great caution and accuracy. I believe I have never yet given a wrong opinion on this subject. In making up our minds, we should not be too positive, *unless indubitable evidence be present*. If we are doubtful, let us say so. Our opinion must not be formed on one, but on the concurrence or the assemblage of reliable symptoms. The following are the principal symptoms of pregnancy:

1. **THE MENSES.**—If the menses are arrested, and the female had previously been both regular and in good health, and there is no other evidence that she has taken cold—and, more than all, if, added to this, there is *no dizziness of the head*—there is a very strong probability that she is pregnant. If the female, after sexual intercourse since her last menstruation, has experienced any sudden excitement, or change of the system, as chills, lassitude, &c., without any known adequate cause, it affords additional evidence that she has conceived.

2. **MORNING SICKNESS.**—In most cases, not in all, a very distressing nausea or sickness, resembling sea-sickness, is experienced, especially in the morning.

3. **SALIVATION.**—There is sometimes in pregnancy a preternatural disposition to secrete saliva, and especially to spit what some term an "*English shilling*."

4. A short time after conception, there is often a preternatural fulness of the abdomen in the *evening*; but in the morning there is a perfect subsidence, and the abdomen then appears even less than natural.

5. The breasts or mammary glands become larger than usual, the small papillæ become elongated, and the areola or circle around it becomes of a darker hue. The milk is sometimes secreted early in pregnancy, and toward the end it often escapes from the nipple.

6. The urine is generally more abundant, and more pale and limpid.

7. **NECK OF THE UTERUS.**—In the early part of pregnancy, the neck of the womb becomes *lower in the vagina*, and the os is closed by coagulable lymph. As pregnancy advances, *the neck shortens*.

8. A gradual and prominent enlargement of the abdomen, of a peculiar rotundity, and a globular-like form, imparting a peculiar appearance and gait, easily recognised.

9. The appetite is very capricious—sometimes the patient eating enormously; at others, scarcely able to eat at all.

10. **NERVOUS SYSTEM.**—In most cases of pregnancy there is great irritability of the nervous system. Cramps and numbness of the lower extremities are sometimes accompaniments of pregnancy.

If these symptoms generally are present, in the great majority of cases the female is pregnant, but not in all cases when present. The only *infallible* signs of pregnancy are—

1. **THE MOVEMENT OF THE CHILD**—not the woman's fancies—for many women have been deceived on this point. To ascertain the movement of the child, place the woman on her back, with the legs a little flexed; bare the abdomen, and dip the hand in some very cold water, and apply it suddenly over the tumor: and the motions of the child will infallibly, if alive, declare its existence.

2. **BEATING OF THE FETAL HEART.**—By the stethoscope, or even by the naked ear, applied to the abdomen of the mother, the fœtal heart can be heard to beat, at the rate of one hundred and thirty to one hundred and forty per minute. When this is heard, of course it is *infallible*; but we should never forget that a female may be pregnant, and neither of these signs be present, because neither of them are

available until after *quickeniug* : and even then the child may die. So that, although these last are infallible signs when they are present, yet their absence does not as certainly prove the negative : since the *child may be dead*, or it may not have arrived at the age at which the test is available.
