

FIBROID TUMORS COMPLICATING PREGNANCY.¹⁻²
A SHORT HISTORY AND REPORT OF ALL RECORDED CASES
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BY
J. H. CARSTENS, M. D.,
Detroit, Mich.

LOOKING over the reports of the cases of fibroid tumors complicating pregnancy, I notice that nearly all were subject to abdominal section. Only a few, especially of the older cases, reported obstruction during labor, and these were not subject to

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² Owing to lack of space it has been impossible to include in the Journal the text of five hundred and sixteen cases cited by Dr. Carstens. These case summaries will be included in the author's reprints and in the volume of "Transactions of the American Association of Obstetricians and Gynecologists" for 1908, in which the paper will appear in full.—ED.

operation. Sometimes hemorrhages or difficulties in removing the placenta were recorded; sometimes also mention is made that the tumor or tumors were removed at the time of birth or shortly afterward per vagina; in some cases virtually nothing is stated about the final outcome and results. Of these cases there are 18 also put on record, but I have not tabulated them.

Some of the reports are very imperfect, in not stating definitely the exact operation performed nor the result, and in others the age of the patient is not given nor the number of children she had had previously. It was quite a difficult task to put them under the correct heading. A few had to be left out altogether for this reason, but every single case is mentioned in the alphabetic list.

I have had the most thorough search made for every case to its original publication. I do not believe any case ever published has been overlooked, though it is possible that a few cases have escaped, but I am sure that this list of all cases ever published is as accurate as it is possible to get. It is remarkable how the last ten or fifteen years have increased the number of the reported cases and the large number some men have been able to see.

What interests us especially are the surgical cases, that is, those subjected to

ABDOMINAL SECTION.

The tabulated number of cases in my report is 516 and of these 498 were subjected to various abdominal operations. Of these there were 117

AT FULL TERM.

(or nearly so). Of this number eighteen died.

The number of living children of this class was eighty-nine. The number of children that died or that were dead at the time of the operation was eleven and in seventeen cases the result to children was not stated.

Forty of these cases were subjected to Cesarean section, and of these five died. Nearly all these cases had myomectomy also done, but the uterus was preserved by doing a classical Cesarean section. All the other cases were subjected to a Porro operation; that is, the uterus was opened, the child extracted, and then the uterus removed.

LESS THAN SEVEN MONTHS.

I had some trouble in deciding how I should classify the other cases according to the months they were pregnant—before three

months or before four and one-half months and those after this time.

In order not to make this paper too long, and as I could see no use in having this fine classification, it seemed to make no difference whether the patient was two, four or six months pregnant; I finally decided the best way would be to group them all under one head and tabulate those cases where the child was not viable, and so list all the rest of the cases at less than seven months.

Of this number 381 were subject to various kinds of operation. Of these 355 recovered and twenty-six died. One hundred and fifty were subjected to myomectomy with thirteen deaths; twenty-two aborted after the operation, but recovered all except three. The rest recovered and eighty-six of these were delivered at full term, one of which died as the result of confinement. In the other cases—that is, the thirty-two remaining cases—no record is made of the final outcome. Of the eighty-six cases—subject to myomectomy and then delivered at full term, it is most remarkable that there were *three cases of twins*.

I also had some trouble in classifying the operations. Some of them just stated that a Porro operation was done. Some of them never mentioned that, but stated abdominal section or superpubic hysterectomy and various other names. In some of these cases the child was extracted, and then the uterus removed. In other cases the pregnant uterus and tumor were removed *en masse*. In some instances, also of the latter kind, pregnancy had not been diagnosticated, and was only found after the uterus was opened.

Altogether I found fifty-eight cases under the heading of Porro operation. Of these five died. All the other cases—that is, 204—were put down as abdominal hysterectomies. In a very few cases total hysterectomy was performed. I did not think it was worth while to separate them. All the rest were amputated at the cervix. Nineteen of these cases died.

RARE CASES.

One was that of T. K. Holmes, who found tubal pregnancy complicating fibroids. Abdominal hysterectomy was performed with recovery.

An unique case was that of Wm. Jepson, where triplets were found. This was also subject to abdominal hysterectomy.

Also, cases of twins have been reported.

Several cases are reported as fibroids that absorbed or disappeared during pregnancy (or immediately afterward) which, however, must be taken with a good deal of allowance although there are only a few cases mentioned. I believe that most of such cases were mistaken diagnoses, and were probably pus tubes and exudates that were absorbed during pregnancy.

RESUME.

Total number of cases subject to abdominal section,		498	
Full term (or nearly so),			117
Recovered,	98		
Died,	17		
			<hr/> 117
<hr/>			
Children living,	89		
Children dead,	11		
Children not stated,	17		
			<hr/> 117
<hr/>			
Cesarean section,		40	
Recovered,	35		
Died,	5		
			<hr/> 40
Porro,			58
Recovered,	53		
Died,	5		
			<hr/> 58
Not stated positively,			19
			<hr/> 117
<hr/>			
Pregnant less than seven months, number of cases,			381
Myomectomy,	150		
Aborted,	22		
Died,	13		
Went to full term,	85		
Not stated,	30		
			<hr/> 150

Cases subject to abdominal hysterectomy sometimes preceded by a Porro, at other times tumor and uterus removed *en masse*. Exact operation not stated.

Total,	231
Abdominal hysterectomy (Porro),	204
Abdominal hysterectomy, died, 19	
Not stated,	27
	<hr/>
	231
Total number of cases,	498
Full term,	117
Less than seven months,	381
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	498

	Recovered.	Died.
Cesarean section or Porro full term,	99	18
Myomectomy,	137	13
Abdominal hysterectomy (Porro),	185	19
	<hr/>	<hr/>
	421	50
Not stated,	27	
	<hr/>	<hr/>
Grand total,		498

CONCLUSIONS.

From this large list of cases it seems to me we can safely draw the following conclusions:

1. Operations for fibroid tumors during pregnancy are not more dangerous than operations without that condition.

2. Operation during pregnancy is indicated in fibroids of the lower uterine segment, and should consist of enucleation of the tumor only.

3. Cases of fibroids at the fundus can be allowed to be undisturbed, unless rapid growth will cause interference with the functions of life.

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