THE
HISTORY
OF A
CHILD RETAINED IN THE MOTHER

FIFTY-TWO YEARS AFTER THE USUAL PERIOD OF
UTERO-GESTATION;

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THOSE functions of the animal economy which have for their object the continuation of the human species, although in many parts obscure, and therefore imperfectly understood, are yet on the whole sufficiently open to our observation and comprehension, to appear as the most signal examples of the wonderful powers, which animate the living body; and, if this be admitted concerning the ordinary and natural course of the generative process, it will hold, at least, equally good of those deviations from the usual chain of phænomena, which are occasionally brought

under our notice. We may assert without fear of contradiction, that the whole range of physiology and pathology does not afford a more striking instance of the resources of nature, than the effects consequent on an interruption of the natural passage of the ovum into the uterus.

The members of this Society are well aware, that if the germ, instead of arriving in the organ, which is destined to receive and retain it, until it has acquired a certain size, should pass into the abdomen, or be retained in the fallopian tube, it may still acquire the full growth, in which case it forms an extra-uterine foetus. The annals of midwifery furnish such numerous facts of this description, that I should have thought it an encroachment on the time and attention of this Society, to present them with another instance. But the history which I shall now relate, although it may in some respects be considered analogous to the extra-uterine cases, differs from them in many essential points; which indeed render it perfectly unique and unparalleled in the records of our art.

It exhibits a foetus, after arriving in the uterus from the seat of its original formation, remaining nine months, and acquiring the full size in that organ, on the point of being expelled from its cavity by the process of parturition, when it escapes in an almost incomprehensible manner, from the uterus, and becomes surrounded by a bony

covering, in which it is found at the end of fifty-two years, almost as perfect in its form, as we should have expected to find it, if it had been born at the natural period of utero-gestation.

In the month of December, 1738, Mrs. Cowles was taken in labour with her fourth child, having gone her usual time without any circumstance differing from her former pregnancies; the pains were lingering and went on for three days, but without any advances towards delivery, under the attendance of a female midwife, who had been with her on former occasions. The late Mr. Rogers, of Gloucester, an accoucheur of long established practice, and deserved eminence in his profession, was then called in, and upon examination declared that the child offered for the birth, but that he could not deliver it without instruments, as the pains were not sufficient to bring the child into the world. This kind of assistance Mrs. C. positively refused, under the idea that the child would be thereby sacrificed, and she firmly declared that if she could not be delivered without instruments, she and the child should die together.

For some days the pains seemed to return at intervals, but gradually abated, so that by the end of the week all prospect of delivery was over. Great uneasiness still continued in her belly, confining her to the room, and she suffered much mental anxiety from her situation. As the case appeared

so remarkable in many respects, Mr. Rogers was pressed for his sentiments on the probable termination of it; when he declared, that now the child would not be born, but that at some distant period, the bones of it would be found with the flesh, gone. This account I received from Mrs. Cowles's sister, who lived constantly with her, attended at her labour, and was alive at the time of her death.

In the year 1771, thirty-three years after her expected time of delivery, I was desired to meet Mrs. C. at the house of a very intelligent friend of hers, who had been fully acquainted with every circumstance of her former situation, and who then confirmed to me the foregoing relation.

At this time Mrs. C. requested, that, after her death, I would satisfy myself concerning the real nature of her case, about which so many doubts had been raised.

From herself I learned the following particulars:—

In the third year after the birth of her last child, she considered herself again pregnant, and felt in every respect as in her former pregnancies. The motions of the child were lively; she had milk in her breasts; and as her labour seemed to come on, she felt the same kind of pains as before, though in a slighter degree, and with less bearing

down, or effort for the birth. The pains of childbirth left her about the third day, and she continued in a very weak distressed state for full three months afterwards, when she gradually recovered her strength, and from that time had found but little diminution in size.

Upon inquiring particularly whether she ever afterwards menstruated, she informed me that she had had several appearances at different times, but they had not made a sufficient impression on her mind, to enable her to speak to such a circumstance with the necessary precision. She had frequently been sensible of a gentle motion within the abdomen, when she was in bed, but very seldom when she was up or walking about, never found any pressure upon her bladder, so as to excite particular inclination to make water, and that had it not been for her increased size, she had not felt any material cause for complaint. Her general health was very little affected, and to the last year of her life she employed herself busily with her family concerns.

In her 80th year she had a slight paralytic stroke. In February 1790, I was desired to visit her, as her friends were then alarmed at a change in the appearance of an ulcer on the toe, which had been of some standing, but not particularly troublesome. I found her in bed with a small fluttering pulse, cold and discoloured extre-

mities, and every sign of quick spreading mortification in the affected foot. Being desirous to ascertain the general state of the abdomen, I examined it carefully, and found a considerable emphysematous crackling within the cavity, but not the least tension ; so that a perfectly circumscribed tumor could be felt about two fingers breadth higher than the navel, but inclining to the right side. She died in a few hours.

Dissection.

The lymphatics of the affected leg and thigh, from the foot up to the groin, were more conspicuous from the inflammation they had undergone, than any I had ever before observed, the limb being entirely covered by a red network.

Upon exposing the cavity of the abdomen, a tumor immediately presented itself covered by the omentum, and small intestines, which adhered to it firmly. When these attachments were separated, it presented a complete bony surface, which yielded, upon striking it, the sound of a solid bone.

As the supposed nature of the case called for a careful examination into the state of the uterus, I searched for it in its usual situation (for the tumor would admit of being raised from the sides and brim of the pelvis on which it rested), but

could not distinguish it. Taking, therefore, the advantage of an examination per vaginam with one hand, while the other was in the pelvis, I at last met with a small firm substance, at the extremity of the vagina, lying flat at the bottom of the pelvis, but as it had not the usual plump and hardened feel of the os tinæ, I became the more anxious to take out the whole contents of the pelvis, together with the tumor, that I might not injure any part of consequence to the grand object of my research. This I effected with no small trouble, and brought it away with me for more minute examination at home. Extending my inquiries to the state of the other viscera, I found the liver of a very dusky hue, and particularly soft in its texture, but of its natural size. The gall-bladder had assumed the particular shape of a crescent, having both extremities filled with concretions of various sizes. There was likewise a quantity of thick viscid bile which filled an ounce measure. The ducts were so large, that, upon pressure, the bile as well as small calculi readily passed through the ductus communis. The kidneys were natural in size and appearance. The spleen, like the liver, was soft and deeply livid. The stomach and intestines were healthy.

As in the course of dissection, I found the greater arteries in a state of ossification, I took out the heart with its immediate ascending branches, and the aorta descendens, as far as the

iliacs within the abdomen, when the whole of these vessels proved more or less loaded with large deposits of earthy matter, particularly the emulgents, to their entrance into the kidneys, and the splenic artery even within the very substance of that viscus. The heart was soft and flaccid, without any other circumstance worth remarking, unless that the coronary arteries, for some length, were much hardened, but without any apparent deposit of earthy matter. The lungs, on the right side, adhered firmly and universally to the pleura; on the left, partially; but in general looked healthy.

The adhesions of the tumor rendered the natural distinctions of what I had reserved for my examination at home rather obscure; but I at last ascertained the following circumstances. The upper part of the vagina was in a natural state, but the *os tincæ* appeared nearly as much reduced, as at its dilation in a natural labour. Dividing, however, what was evidently the lower part of the uterus, I found its substance, though diminished in thickness, still retaining somewhat of its natural structure; its internal surface exhibited very clear remains of the plaited appearance which characterises the cervix, for about three inches, when it became contracted to an obtuse point, with an aperture which just admitted the round end of a probe to pass onwards in a strait direction. Upon laying this open, there

appeared a sulcus strongly marked with rising sides for about two inches, when they diminished gradually, till they were almost obliterated at its termination in a small round cavity just of a size to receive a full-grown pea. These circumstances are represented in plate I.

The spermatic vessels were very evident on the right side, attached to the superior part of the elongated uterus, but no trace of the ovarium could be discovered; and it was only after a very attentive search that I found a cordlike substance, about the size of a crow-quill, in its external appearance not unlike the vas deferens. Upon discovering that this was tubular, I slit it up, and found, by the elegantly plaited appearance of its internal surface, that it was undoubtedly the fallopian tube. On the left side, the fallopian tube possessing in every respect its natural course and appearance, and terminating as usual in its fimbriated extremity, was very obvious. I could not, however, satisfactorily ascertain the existence of the ovarium. The close adhesions to the neighbouring parts, and the pressure occasioned by the tumor, will sufficiently account for this circumstance.

On separating the soft parts, the bony surface was found perfectly complete, except at that point, where the cavity terminated; and here, for about the size of a sixpence, the ossification was deficient, and the aperture filled up with a steato-

matous or sebaceous matter, which readily suffered a probe to pass within the tumor, about half an inch, when it was prevented from going further by a firm resisting substance. The bony mass, now divested of every thing connected with it, very much resembled a human cranium of a middle size, but round rather than oblong, weighing with its contents, three pounds, one ounce, four drachms. See plate II. fig. 1.

Though the circumstances first mentioned were sufficient to support an opinion that a foetus might be inclosed in this bony case, yet the possibility of its being an enlarged ovarium, or some substance of a glandular nature in a state of ossification, determined me to divide it through the middle with a fine amputating saw, which would but slightly derange its contents. If it proved to contain a foetus, the divided parts might be re-adapted so as to shew their natural connections, and such means pursued as would best assist any further inquiries.

A longitudinal section was therefore carried through the middle of the bony mass, and the divided surfaces, on a superficial inspection, very much resembled the kind of tumor, frequently met with in the different viscera, and composed apparently of cartilaginous layers, whose interstices are filled up with steatomatous matter. I soon however discovered that it consisted of an

osseous cyst, containing the body of a full-grown fœtus, generally speaking, in a state of wonderfully perfect preservation. The course of the saw had been very favourable to the subsequent examination of the parts. It had passed obliquely through the head and trunk in a direction from before backwards, commencing on the right side of the head, continued through the right shoulder, and the same side of the chest, which cavity was just exposed; then slanting from the right hypochondrium through the middle of the pelvis. Of the extremities, the left leg only was cut through; one half of the tumor contained the greatest part of the head, with the whole of the neck, nearly the entire chest and abdomen, the left upper extremity, and the thigh and upper portion of the leg of the same side. In the other division, I had a slice of the right part of the face and chest, the whole right upper and lower part of the left leg, with the foot of the same side. The cut surface of the latter is represented in plate II. fig. 2.

From the very close manner in which the parts were compacted together, I was still at a loss how to unfold this curiosity; when I determined to unravel the portion containing the head and trunk, by removing the bony case. By thus breaking open the walls of its prison, I was enabled to raise the head from the chest, and to ascertain the rest of the body. The child as it appeared when unrolled in this way, is represented in plate III. fig. 1 :

where, however, the left arm and thigh are not exhibited, as they were destroyed in the investigation. Neither are the parts of generation seen, as these perished in the same manner. I had originally designed to preserve the opposite half in an entire state, when I considered that a further examination of this half might disclose more completely the condition of the extremities: by this means the right arm and leg were brought into view by a careful removal of the left foot and right side of the face. See plate III. fig. 2. The position of the child in the cyst was very similar to that which it holds in the uterus; in which the body and limbs are brought nearly into a globular form. The spine was incurvated; the head bent forwards upon the chest, and the pelvis upon the abdomen, and the limbs folded between the pelvis and head. All the parts were most forcibly compressed, and as it were closely squeezed together by the bony cyst; hence the limbs were all distorted and deformed, and the figure of every part variously affected. Towards the middle of the tumor, the body and limbs, when carefully separated, were found in the most complete state of preservation: the skin, adipous substance and muscles retained much of their natural consistence, and characteristic appearances; but parts were much less distinct on the circumference, from the strong adhesion of the bony covering to the whole surface of the mass. The cyst grew so firmly to the child, that it could only be separated by very

forcible means ; by the employment of which the soft parts attached to the internal surface of the tumor were necessarily sacrificed, and they presented a very imperfect and mutilated appearance when this separation was accomplished. It seemed that the cyst had absorbed the integuments and muscles of the parts which were situated in contact with it ; thus, in one of the arms, which occupied this position, I found that half of the limb, which was turned towards the centre, as full and plump as usual ; while the other portion lying towards the circumference, had lost all the soft parts, down to the bone, which was in contact with the cyst, and firmly compressed by it through its whole extent. The scalp, on which there were some trifling remains of hair, had lost its firmness and consistence, so as to separate from the cranium on the slightest touch. The integuments of the face, body, and limbs, still retained so much of their natural plumpness, that, by the compression, the contiguous parts were reciprocally indented.

The contents of the thorax and abdomen, as far as their exposure by the longitudinal section would enable me to judge, retained much of their natural appearance, and not the least tendency to putrefaction could be observed in any of them.

The brain was rather more firm than in its recent condition, and nearly of its natural colour. The lungs were in a compact state. The liver

was of a dark brown or umber colour, and the intestines deviated but little from their usual membranous appearance, though compressed together into an irregular mass.

Although the body of the child was in a very complete preservation, and all its component parts could be readily distinguished, yet it exhibited a very different appearance from that of a subject lately deceased. It was very firm and compact as if condensed by great pressure; hence it seemed completely deprived of its fluids, and formed therefore a contrast to the juicy state of a body recently deprived of life; of blood, either in a fluid or coagulated state, (with an exception that I shall notice directly) or of that colour, which results from this fluid being contained in the vessels of a part, there was not the slightest appearance. The muscles, instead of being of a bright red, and fleshy, were of a brown hue, and the integuments possessed a very light brown, or yellowish tint; the colour in both cases was somewhat like that produced by long immersion in spirits of wine. The bones were brown, and drier than usual; they separated very easily from the periosteum and epiphyses.

Of the membranes, placenta, or navel-string, I could not discover any remains, excepting the insertion of the latter into the body of the child.

Near the upper part of the cyst internally, was a coagulum of blood, apparently in as recent a state, as if it had not been extravasated from the vessel an hour before; it was full in colour and firm in its substance; but on exposure to the air it soon dried, leaving little more than a mere stain on the part.

The extraordinary circumstances of this case raised some doubts, among my professional friends, as to the original situation of the child. Some eminent men supposed it extrauterine, but a variety of circumstances destroy this idea in the present case, and convince us that the child was contained originally in the uterus, and remained in that situation the usual term of gestation: the state in which I found both the Fallopian tubes, shews clearly that the fœtus could not have grown in either of those organs, while the appearance of the uterus deviating so widely from its ordinary condition, proved sufficiently that that viscus had been materially implicated in the processes that occurred, and had consequently suffered great derangement in its structure. Independently of these considerations, furnished by the examination of the parts, as I now possess them, the testimony of Mr. Rogers would be sufficient to prove that the case was not extrauterine. The declaration of this gentleman, that he could deliver the child with instruments, affords the most complete conviction that it was in the cavity of the uterus, and

within his reach, at the time of his examination. We cannot therefore but conclude, that the usual action of the uterus, and the powers necessary for parturition, were by some means or other so diminished in the opinion of Mr. Rogers, that nature alone could not accomplish the birth.

In the representation of the parts when separated from the bony case, as seen in plate I. are to be discovered the remains of the internal surface of the divided cervix uteri; the same texture in the sides of the substance leading from the os internum to the tumor, and an uninterrupted continuation of the sinus or cavity, in a straight line, through which the probe passed from the os internum into the cavity of the swelling. When to this we add the situation of the appendages, at the extremity of the elongation, we can have no reason to doubt, that the whole of the substance leading from the vagina to the bony tumor, was the uterus originally containing the child, and drawn into this elongated shape by the gradual advance and protrusion of the child through its yielding fundus, till it was received and retained by an extension of the peritoneum forming a kind of hernial sac. This idea struck me on my first examination of the case, but was afterwards supported by the following observation of Dr. Baillie in his *Morbid Anatomy*: "The peritoneum, covering the womb, sometimes remains whole, and there is a large mass of black coagulated blood,

lying between it and the uterus, where the rupture has taken place. This black appearance is occasionally mistaken for mortification." P. 377.

The time in which this process was effected cannot be well ascertained ; the pains were at times exquisite for weeks after parturition was checked, and months elapsed before the patient was able to move about with any degree of comfort. It is therefore reasonable to suppose, that the event took place very gradually, and perhaps it was materially assisted by the remaining power in the lower part of the uterus, as described in cases of the hour-glass contraction.

The circumstances attending a rupture of the uterus have not been uniformly the same, in all the recorded instances of that occurrence. In some the most agonizing pains have been felt in a particular part, where the rent has afterwards been found ; and the instant of laceration marked by a sense of somewhat bursting within, whilst in others, the only notice of its having taken place has been the retiring of the child from its former presentation.

The very perfect condition in which the child was found, has attracted the attention of all the gentlemen to whom I have shewn it. Attempts to explain this circumstance have naturally followed, and they generally terminated in one of

three opinions. Some have supposed that the child did not die when the efforts towards parturition ceased ; but that it continued to live until the mother's death. The analogies of all cases in midwifery, which bear any resemblance to the present, oppose this supposition, which is also immediately overthrown by considering the state in which the body was found. Others have thought that the contact of living parts would keep up a kind of vitality in the foetus. They argue that the child, continuing in the same medium, and the same kind of substance it had ever been accustomed to, was very differently circumstanced from what it would have been, when forced through a rupture of the uterus into the cavity of the belly. It still was in a degree of harmony with the parts to which it had always been from its first existence habituated, and probably retained a sufficient portion of its vital principle to keep up the bond of union, and prevent its decomposition. This explanation like the former proceeds on the supposition of the child retaining some spark of life, which can, I think, hardly be reconciled to the condition in which it was found on dissection. Lastly, it has been supposed that the absence of those agents, which produce decomposition, would be sufficient to preserve the child from dissolution ; that it had not been exposed to the causes of such a change ; but was preserved, like the matter of an abscess, or the fluid of dropsy, by the exclusion of atmospheric air.

Many other curious circumstances remain to be explained, such as the reduction of the tumor; the remarkable diminution in the weight of the child, and the time at which the bony cyst was formed. These are points which perhaps can only be elucidated by observations drawn from future and similar cases.

I therefore waited till this period for the event of two instances, which appeared likely to assist in these inquiries, but I have been disappointed in them. One of the women is still living: in the other, no application could overcome the obstinate prejudices of the husband against an examination of the parts after death. But, as the circumstances which occurred during the life of this latter woman, were not a little singular, I shall here add some particulars of her case from minutes made by Mr. Newell, an eminent surgeon, at Cheltenham, with whom I paid her several visits.

Jane Hawes, a healthy well made woman, about twenty-five years of age, was the mother of two very fine children. Her labours had taken place at the proper periods, and were natural in every respect. The last child was born after a very quick labour, and the mother in each instance got well, in a short time, without the occurrence of any thing worthy of remark,

In the summer of 1795, when her youngest child was about two years old, she became again preg-

nant, and I was desired to attend her. She went her full time without the smallest inconvenience, and at the end of nine months, was seized with pain, which was supposed to be labour, and I was sent for. When I entered the room the pain appeared to me to be so acute, that I concluded her delivery would shortly take place, as had happened in the former instances.

Upon examination however, *per vaginam*, I was surprized to find no disposition to dilatation of the os tinæ. The neck of the uterus was quite obliterated, and I could plainly feel the child through its substance, but though the pain was strong, there did not appear to be any forcing power accompanying it, and it had not that peculiar striving on the part of the mother, so familiar to those who have been in the habit of attending cases of midwifery. As she had no disposition to fever, and felt no inconvenience during the remission of her pains, I contented myself with directing an anodyne medicine, and thought it most prudent to wait patiently, and observe what course the efforts of nature would take.

These pains, however, continued for nearly three days, during which time no further advances were made to delivery; and they were, from time to time, mitigated by opium and other antispasmodic remedies, with fomentations applied to the whole region of the abdomen.

During this period, I had frequent opportunities of satisfying myself that the uterus had undergone that change which an ordinary pregnancy produces; and I could not but conclude, that at this time the child was in its cavity. In the beginning there had been a small discharge, which increased on the third day in quantity, and became coloured with blood.

On the third day, fever and symptoms of inflammation took place; and these spasmodic pains, which had at times been very violent, by degrees subsided, and were succeeded by tenderness of the belly, and pain arising evidently from a new condition of parts. These symptoms were controuled by an antiphlogistic plan, and in the course of ten days, the inflammatory symptoms began to subside, and were succeeded by considerable discharges of a very foetid and purulent matter.

In the progress of this case, during the following six months, great emaciation with hectic fever came on, and her strength was supported as well as it could be, by bark, wine, opiates, and other tonic medicines; together with as generous a diet as her stomach was capable of bearing. About this time the discharge began to diminish, and her general health improved; and in about fifteen months from the beginning it had entirely ceased, and she regained her usual flesh and strength.

During this time, her size had gradually diminished ; and she was left with an enlargement of her belly, about equal to the size of a woman six months gone with child. She resumed her usual occupation, which was that of keeping a grocer's shop, and continued perfectly well till the autumn of the year 1800, when, to my great surprise, she told me she suspected she had again become pregnant.

Upon inquiry, I found that menstruation had regularly taken place, for more than a year before this time ; and upon hearing all she had to say, I was satisfied that her conjecture concerning herself was well founded. She went on without any thing remarkable happening, till the December of that year, when she was taken regularly in labour.

Upon examination I found a round solid substance, occupying the upper part of the pelvis ; and extending from the base of the sacrum, to within less than three inches of the upper rim of the pubis.

At first I was deceived and took this substance for the head of the child ; but a more minute examination convinced me that it was a solid bony tumor, immovable, appearing to be firmly fixed to the base of the os sacrum. On passing my fingers as high as I could, between the anterior sur-

face of this tumor, and the pubis, I plainly discovered the os tincæ, in a state of dilatation ; and I could distinctly feel the foot of the child *. As her pains were not very rigorous, and her strength and spirits were unexhausted, I waited, and allowed the labour to take its usual course. It was evident however that there was not room enough to save the child, and at a proper time I proceeded to deliver her by the feet.

This proved to be a work of great difficulty, and it was impossible to succeed without diminishing the size of the head by the crotchet.

The whole of the child was brought away, and the usual discharges took place. I apprehend that some violence might have been done to this bony tumor, which was so much in the way ; for symptoms of very extensive inflammation came on, shortly after her delivery. Suppuration followed, with immense discharges of foetid matter, with hectic fever and great emaciation. She lingered on in this wretched state, till ulceration took

* At this time I was desired to see her with Dr. Briggs and Mr. Newell. The cæsarian operation was mentioned, but rejected from the too probably diseased state of neighbouring parts. It was therefore determined to quiet general irritation by opiates, and to guard against any inflammatory tendency in the uterus by cold spirituous applications over the abdomen. These means were pursued for two days with every apparent success ; and on the third Mr. Newell, finding some further advances towards the exclusion of the child, proceeded to give her every assistance.

place, which extending downwards, in the course of a few months, destroyed the vagina and rectum, and her stools, urine, and discharges came, seemingly, out of one great cavity. During the progress of this wretched case, various bones of the former foetus were discharged, and after lingering in the most cruel sufferings for about ten months, the unfortunate woman died.

It is very much to be lamented, that no entreaties could prevail with her friends to allow an examination of the body. The fact of the reality of the former impregnation was sufficiently proved by the discharge of foetal bones; but dissection would doubtless have thrown much light upon this very singular case.

Explanation of the Plates.

- Pl. I.* A. The cervix uteri.
B. B. Contracted canal, leading from the cervix uteri to the bony tumor.
C. The right appendages of the uterus.
D. The left ditto.
E. The bony tumor.
- Pl. II. fig. 1.* The bony tumor separated from all the soft parts.

Pl. II. fig. 1. A. Place at which the bony case was deficient.

fig. 2. Cut surface of the tumor.

A. Section of the head.

B. ————— chest.

C. ————— abdomen.

D. ————— os innominatum.

Pl. III. fig. 1. Body of the child disengaged from the bony case.

fig. 2. Extremities of the child developed by the examination of the section, represented in *pl. II. fig. 2.*

Fig. 2.

Fig. 2.