Major changes in obstetric practice have occurred in the ten years since the publication of the first edition of *Operative Obstetrics*. Prospective clinical studies have improved clinical practice, and better techniques for antenatal fetal evaluation have been introduced. Yet, there are also less desirable trends. There has been a relentless increase in the rate of cesarean delivery, and persisting medicolegal and societal pressures continue to demand faultless performance. Our recognition of recent improvements in clinical practice and acknowledgement of the continuing challenges and limitations inherent in modern clinical management have prompted a new edition. This updated edition includes chapters on the important subjects of cesarean delivery, common surgical complications, ectopic pregnancy, birth injury, and instrumental delivery, among other topics. It features a new discussion of surgical procedures performed by non-physicians and a review of fetal surgery. The text also considers complicated and controversial subjects such as cervical insufficiency, pregnancy termination, and shoulder dystocia. In recognition of the realities of current practice, each of the four sections of the book has a chapter with an in-depth analysis of the legal issues underlying practice. An expanded appendix reviews general legal concepts pertinent to the practice of obstetrics.

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To JO: His son finally did become a surgeon. And to Molly for support and encouragement.

JPOG

For my family, Herakliusz, Stefania, Alexandria, and Madeline, for their patience and support during this endeavor.

LBZ

To Arlene, Alexis, and Matt. For your love and support.

MLG

To Marge and Bill, who sacrificed so much on my road to becoming an attorney.

KG

Looking back over a long clinical lifetime, one tends to forget or take for granted one’s successes; it is the failures which stand out like keloid scars, never to be forgotten and, hopefully, a warning to others. I have to recognise that if there is any classic mistake which I have not myself made it is simply because of the lack of time in which to commit it. It makes one wondrously sympathetic toward others in trouble. No apology is therefore made for the highly personal emphasis in this book.

Ian Donald (1910–1987)

Practical Obstetric Problems

Note to Readers

The advancement of medical science brings continuous changes in management, methods of diagnosis and evaluation, and drug therapy.

The editors of and contributors to Operative Obstetrics Second Edition, have closely reviewed the information included in this textbook, consulted appropriate literature, and conferred with experienced clinicians in the effort to provide accurate information and practice recommendations in accordance with the generally accepted standards of medical practice. The reader is cautioned, however, that owing to the rapid changes in the science of medicine and the possibility of human error, the authors of the various chapters, the editors, and the publisher cannot guarantee that all information included in this text is in every respect complete or accurate. We do not accept responsibility for errors, omissions, or results obtained from the use of these data. For these reasons, the reader is encouraged to confirm our practice suggestions with other standard sources. Relying on his or her experience, education, and unique knowledge of the individual patient, the attending physician or certified nurse midwife must determine the best treatment for a specific obstetric condition.

Recommended drugs and dosing schedules for various medical conditions do appear in this text. Before a drug is administered, however, clinicians should review standard compendia of drug information and package inserts for any changes in drug use or additional warnings of potential adverse reactions or other precautions. To ensure patient safety, caution is especially necessary when the drug in question is new to the practitioner, infrequently administered, or has the potential for serious side effects.

– The Editors
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Foreword

THE PROCESS OF EVOLUTION affects not only the characteristics of a species but also the adaptive technology between a species and its environment. The practice of obstetrics is devoted to maximizing the ability of each human being to confront the environment and to be part of the creative, modulating path of evolution. It is almost, if not totally, impossible to discern evolutionary human changes within our own lifetimes; however, it is a different story with the technology of our interactions. Obstetrics has changed, and it has changed rapidly.

If the earth’s lifetime were compressed into a single 24-hour day, humans would have appeared only 30 seconds ago. I cannot imagine what nanocalculation would be required to measure the history of operative obstetrics, yet that incredibly short measure of geologic time is packed with a geometrically increasing collection of events and stories. The interesting and comprehensive chapter on the history of operative delivery alone is worth the price of this book. Every contemporary obstetrician should know and learn from the history of obstetrics. Some might argue that this history is truly the past, and that operative obstetrics today is a matter of a few simple choices. Even that judgment, however, must be based on a critical analysis of the operative choices. Only then can the individual obstetrician understand the reasons behind modern decisions.

The modern focus on “evidence-based medicine” all too often fails to recognize the broad base of knowledge that is the foundation of clinical decision making. This book is an excellent example of the fact that medical knowledge is more than what we read in the literature. Although medicine tests the worth of specific procedures with appropriately designed clinical studies, physicians also learn from each and every clinical experience and modify their decisions according to an understanding of the individual patient’s needs. Nowhere is this more important than in operative procedures. The authors of this book have solidified their recommendations with a comprehensive survey of the literature, but they have filtered this knowledge through the valuable experiences of multiple clinicians, finally offering clinical advice that is meaningful and useful.

Obstetric decisions today are not simpler. They are actually more complex, requiring an ever-expanding knowledge base. This book provides a knowledge base of operative obstetrics derived from the accomplishments of the past and the experiences of the present. In so doing, it serves an important purpose: to assist obstetricians in achieving the objective of a successful pregnancy and a healthy newborn.

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Preface

Obstetrics is not one of the exact sciences, and, in our penury of truth we ought to be accurate in our statements, generous in our doubts, tolerant in our convictions.

James Young Simpson (1811–1870)

MUCH TO OUR SURPRISE, more than ten years have passed since the publication of the first edition of Operative Obstetrics. Since the initial text appeared in 1995, new tests, surgical procedures, and novel methods of medical education have been introduced to the practice of obstetrics. In addition, there has been an expansion of roles for non-physician personnel in the provision of care to pregnant women. There remain important unresolved controversies in the specialty, including elective or patient-choice cesarean delivery, trials of vaginal birth after cesarean, patient safety during hospitalization, pregnancy termination, and the recruitment and training of new practitioners, to list only a few. The influx of new ideas and the development of new techniques over the last decade have accompanied increasing demands by institutions, third-party payers, and governmental agencies for evidence-based, cost-efficient, and safe practice. Clinicians are thus pressured from many directions to rapidly incorporate new scientific advances into their management, rethink traditional concepts of best practice, follow increasingly restrictive protocols and practice guidelines, and even revisit basic ethical concepts. Because of the unresolved issues concerning appropriate practice and the risks associated with adverse outcomes, it is inevitable that medicolegal risks in obstetrics remain high and that increasingly few clinicians, with a decade or more of active practice, now escape litigation.

The stated goal of all recent textbooks is to define best practice by employing the techniques of evidence-based medicine. In fact, there is now a growing body of evidence-based data concerning obstetric practice, much to the improvement of the specialty; however, many areas of management have never been subjected to such systemic study. Experienced practitioners rapidly discover that there are obstetric and surgical practices and clinical problems that have not proved amenable to the rigid demands of evidence-based analysis. These observations emphasize the limitations of current methodologies and serve as a constant reminder of the incompleteness of physicians’ knowledge and the need for continuous improvement through appropriately designed prospective studies.

This new edition required the amalgamation of data derived from quite different sources. Working with the editors, our many collaborators have strove to reconcile current scientific knowledge and data from evidence-based clinical studies with the rich heritage available from the past. Philosophically, the editors remain unrepentant advocates of combining essential elements of the art of traditional obstetrics and the accumulated experience of our predecessors with new concepts and methods of management derived from meta-analysis and other prospective and randomized clinical investigations. Reflecting the realities of modern practice, this new edition includes legal commentaries on areas of...
special concerns, with recommendations for appropriate actions to help to avoid difficulty.

It is the editors’ earnest anticipation that this new edition of Operative Obstetrics fulfills the demanding requirements of clinicians struggling with the many pressures of contemporary practice. Our aim is both to challenge and instruct our readers. The success of this endeavor will be measured by the extent to which we have constructively critiqued established ideas, fused the traditionally accepted with the scientifically proved aspects of practice, and sustained the reader’s interest. Our measure of success is simple. If this textbook proves helpful in the management of a single case, our original expectations will be met, and we will consider our intense labors and those of our coworkers to have been amply rewarded.

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