The Clinical Observation of Habitual Abortion and Miscarriage due to Old Cervical Laceration

Chung Soon Kim

Department of Obstetrics and Gynecology
Graduate School of Soo Do Medical College

Director Professor, W. H. Shin

Conclusion

I took 58 cases of old cervical laceration by vaginal examination from January 1958 to November 1959 and came upon the conclusion under consideration of their exact medical histories and clinical courses.

1. 83.3 per cent of them aborted and miscarried after suffering from cervical laceration.

2. The occurrence of natural abortion and miscarriage due to old cervical laceration was frequently found in the middle period of pregnancy (63.9 per cent). Particularly in habitual cases, this was observed in 77.8 per cent during pregnancy. In other words, main causes of persistent abortion and miscarriage that occurred after the middle period seemed to me old cervical laceration.

3. The causes of old cervical laceration are as follows.
   a. due to artificial abortion 65.6 per cent
   b. due to operative measures in delivery 17.2 per cent
   c. due to natural delivery 17.2 per cent

I thought more than half of these were due to the artificial abortion increased recently, and especially artificial abortion during of the former period was the causes of 24 cases among 38 (63.2 per cent) Besides these, forceps delivery, condition of operation and misdiagnosis of indication could be causes of the old cervical laceration.

In half number of natural delivery, these were due to the misuse of pitocin, Therefore, I
presume that abortion and miscarriage resulting from cervical laceration could be substantially decreased if we considered these facts.

4. Abortion and miscarriage due to cervical laceration depended upon the extent of cervical laceration. Particularly laceration on supravaginal portion could easily lead to habitual cases. Laceration of vaginal portion (external uterine orifice and lower portion of cervix) even externally slight cervical laceration could easily brought about habitual cases, if it injured internal uterine orifice or internal cervix. This kind of cases could be considered as the unknown cause of habitual cases in the past.

5. The characteristics of habitual cases are as follows.
   a. Medical histories of artificial measures to uterus especially artificial abortion during pregnancy or delivery.
   b. Comparatively resistant in character
   c. Comparatively many cases of abortion and miscarriage after middle period
   d. Natural delivery after a few days of abrupt early rupture of membrane without any inducement and pain
   e. In many cases, fetus, alive and healthy

6. 6 cases of 10 supravaginal laceration were succeeded in trachelorrhaphy but 4 were failed. Examining the causes of failed, 2 were due to the pregnancy within 2 months. Therefore, control of conception is necessary within 6 months.

The other cases were resulted from incomplete adhesion of upper portion which seemed externally adhered. For this reason, I presume complete suture of upper portion is greatly important for the prevention from habitual cases.