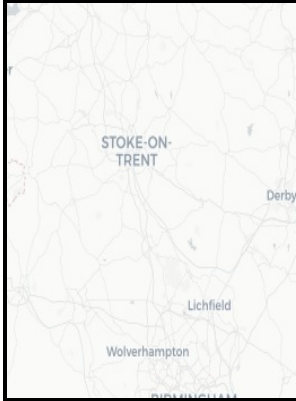


Evolution of obstetric medicine.

s.n.) - Evolution of the human pelvis and obstructed labor: new explanations of an old obstetrical dilemma



Description: -

-

United States -- Claims

Bills, Private -- United States

United States. -- Congress -- Private bills

Family violence -- Prevention

Family violence

Obstetrics -- History. evolution of obstetric medicine.

-evolution of obstetric medicine.

Notes: Repr. from Brit. med.J., 1912, June 15.

This edition was published in 1912



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Historical Book of the Week: Evolution of Medicine (1927)

This joint Canadian and U. The authors discuss how social medicine in the 1930s, 40s, and 50s was related to social hygiene, sanitary engineering, public health, and preventive medicine.

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Wikipedia, Accessed December 20, 2018.

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The Evolution of Obstetric Analgesia

Newsholme used his knowledge and experience from his public health career in order to write this book.

The Evolution Of Obstetric Medicine: With Illustrations From Some Old Midwifery Books on JSTOR

Instead, bipedalism may have primarily constrained the flexibility of the pubic symphysis during pregnancy, which opens much wider in most mammals with large fetuses than in humans. On the Mode of Communication of Cholera, 2nd Ed, John Churchill, New Burlington Street, London, England, 1855.

Evolutionary obstetrics

Because he used historical sources throughout, this book relates to multiple topics that had already been recognized as important in the history of medicine.

Evolutionary obstetrics

Prescribing in pregnancy Appendix A. In many modern medical contexts there is a mismatch between the evolved emotional needs of women and the clinical environments in which many births take place; this can be corrected with social and emotional support during labor and delivery such as that offered by doulas. This, as regards inhalation anesthetics, is carried out almost entirely by medical students and.

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A third appendix has therefore been added as a ready reference for clinicians not familiar with effective contraception. We argue that the birth canal is mainly constrained by the trade-off between 2 pregnancy-related functions: while a narrow pelvis is disadvantageous for childbirth, it offers better support for the weight exerted by the viscera and the large human fetus during the long gestation period.

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