Instrumental delivery: Complex paternity and fading art

For Sir Thomas NA Jeffcoate (1907-1992), Professor of Obstetrics and Gynaecology at the Women's Hospital, Liverpool and President of the RCOG (1969-1972), the invention of the forceps was "probably the most important event in the history of obstetrics" (BMJ;4843:951-5). As he also stated "it was the first serious incursions of the medical profession into the realms of midwifery" and "it became hated by the midwives, who did everything possible to discredit it in the eyes of parturient women". Peter Chamberlen the Elder (1560 to 1631) "accoucheur" to Queen Henrietta (Charles 1st wife) is believed to be the inventor of the forceps (Hibbard B, Med Historian 1997;18:41-60). He went to great length to keep his forceps secret, bringing it to birthing-rooms in an ornate box, hidden from view, blindfolding his patients and never allowing anyone else in the room during the delivery. The Chamberlen' forceps remained under the attic floorboards in the family home at Woodham Mortimer hall until its accidental discovery in 1813.

Many different types of forceps were developed over the following centuries, including those by Willam Smellie (1697-1763, UK); John R Barton (1794-1871, USA); James Y Simpson (1811-1870, UK); Etienne Tarnier (1828-1897, France); Christian Kielland (1871-1941, Norway); and Arthur Wrigley (1904-1984, UK). In 1957, John Mann, an obstetrician in Toronto, Canada and inventor of a joint-locking forceps (Figure) noted that if the teaching and general use of obstetric forceps had greatly improved in the previous 50 years, the weakest point in the teaching was "a failure to grasp a few of the fundamental mechanical principles involved" (J Obstet Gynaecol Br Emp 1957;64:351-4).

The paternity of the "ventouse" is more complicated. John Yonge (1646-1721), a naval surgeon from Plymouth is believed to be the first to have used in 1706 a suction devise for delivery. James Y Simpson (1811-1870, UK) similarly developed of a suction "air-tractor" in 1849 but his instrument met very little success (Chalmers JA, J Obstet Gynaecol Br Emp 1963;70:94-100). The modern suction metal cup ventouse was designed by the French Obstetrician, Yves Couzigou (1910-1989) and used successfully for the first time in 1946 (He patented it in 1948) but its paternity was then attributed to the Swedish obstetrician Tage Malmstrom (1911-1995) who popularized its use. Malmstrom ended the dispute by writing to Couzigou recognizing his earlier contribution (www.infobretagne.com/couzigou-yves). By the 1970s, the vacuum extractor had almost completely replaced forceps for assisted vaginal deliveries in many European countries. By the end of the 1990s, the number of ventouse deliveries surpassed the number of forceps deliveries in the USA (Ali UA and Norwitz, Rev Obstet Gynecol. 2009;2:5-17).

Used by skilled operators both the forceps and the ventouse are safe. There are clinical situations where one instrument may be better than the other but the decision of which instrument to use dependent on the preference and experience of the individual care provider, As highlighted in a review of the trends in operative vaginal delivery 2005-2013 in the US (Merriam et al, BJOG 2017), the expertise in instrumental delivery is rapidly disappearing with the rising numbers of caesarean delivery.

47 Word count: 508

48 49

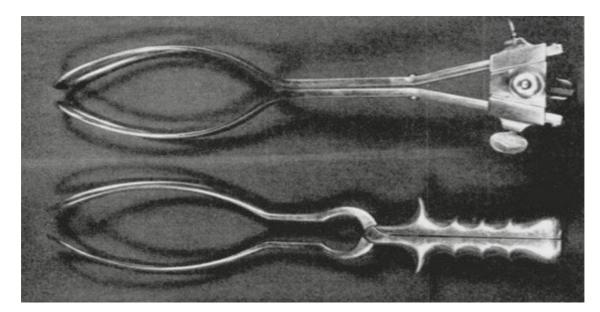
50

MC on MS2016-OG-18474 by by Merriam et al

515253

54

Figure: The Mann forceps (above) and a conventional forceps (below)



55 56

57

58

Disclosure of interests

The authors declare no conflicts of interest.

59

60

- 61 E Jauniaux, MD, PhD, FRCOG
- 62 Scientific Editor BJOG
- 63 Academic Department of Obstetrics and Gynaecology
- 64 Institute for Women's Health
- 65 University College London
- 66 London, UK.

67

- 68 John M Thorp
- 69 Deputy Editor-in-Chief BJOG
- 70 Department of Obstetrics and Gynaecology,
- 71 University of North Carolina at Chapel Hill, Chapel Hill, NC