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Obstetrics

OXYGEN AND UTERINE PERFUSION Fifty normal pregnant women at term were divided into groups as follows: 14 patients ventilated with 100 per cent oxygen, 13 patients given the vasodilator xanthinal nicotinate, 3 patients given the vasodilator and 100 per cent oxygen, and 7 controls. Uterine perfusion, maternal P_{O_2} and pH , P_{CO_2} from the fetal scalp, and P_{CO_2} from the ectocervix were determined.

Uterine perfusion was measured by thermal dilution, and in all instances perfusion decreased, the greatest decrease being found in the group ventilated with 100 per cent oxygen. The authors interpret these changes in uterine perfusion as secondary to the vasoconstricting effects of oxygen on the uteroplacental circulation. (Tercila, L., and others: *The Effect of O_2 Ventilation and a Vasodilator on Uterine Perfusion, Fetal Oxygen and Acid-Base Balance*. *Acta Obstet Gynecol Scand* 52: 177-181, 1973.)