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Proposed Registration and Inspection of Still=born Children.

BY ROBERT R. RENTOUL, M.D.

(Continued from page 91.)

HAT is the earliest age at which still-born children should be registered? The *latest* age is easily fixed; all full-grown still-born children should be registered. As it is generally known that a child which has lived for four or four and a half months in the womb, may, when completely born, show a "sign of life," I would propose that all infants still-born, and who have attained the fourth month of intra-uterine life, should be registered. Such a definition would----for purposes of registration-suit, although I do not see why even younger infants should not be registered. A reference to some foreign laws may help us. In Italy, infants who die before being registered, are entered as still-births. In Spain, those which have reached the sixth month of intra-uterine life and one day. In France, and in Paris, by Municipal Decree, a four months' conception and upwards must be registered. But the custom varies in different communes, some registering a two months' conception. In Germany, there is no Statutory law, but seven months' conception and upwards must be registered, those failing to do so being fined \pounds_7 ros. In Austria, a six months' still-birth must be registered, and here it is to be carefully noted that every midwife who is present at a birth, must report every case to the Inspector of Dead Bodies, no matter what period of development the child has reached. A most important provision. In Denmark, infants which have attained the twentyeighth week and upwards must be registered. In Switzerland, conceptions of six months must be registered when still-born. In Sweden, conceptions of four months and upwards; and in Norway, four months and upwards. From these illustrations, I think, we should fix compulsory registration of still-births to take place from the fourth month and upwards.

Should still-births be registered as births; or as

deaths; or as births and deaths; or as still-births? In foreign countries the law varies. In Denmark they are registered in a special column in the register of deaths, as "still-births," the fact being noted particularly whether the child was "born dead," or died "during birth." In Switzerland they are registered both as births and as deaths. In Sweden as births. In Norway as still-births. In Greece as deaths. In Italy and in France and in Austria, any child which dies before the birth is registered. It is to be noted that in Italy births must be registered within 24 hours; in France within three days; and in Austria within seven days. In Belgium they are registered as deaths. I would suggest that they be registered as still-births, and in a special column in the register of deaths.

I shall now pass on to the second proposal in my paper, viz. :- the inspection of all still-born children before burial by a medical practitioner. I may first remark that in other countries no dead body can be interred until the fact of death, and the cause of death, and the identity of the deceased have been verified by an official medical officer. In England any body can be buried, even although there has been no medical certificate of the cause of death, or even although the death has not been registered. A truly delightful paradise for criminals! In order to explain what this proposed inspection is, I shall give an illustration of how bodies are inspected abroad. Still-births must be registered A still-birth having occurred, it is the duty of the relatives to notify this to the registration authorities. These give the relatives a form to fill in. At the same time the authorities inform the inspector of dead bodies that a stillbirth has taken place at a certain house. The nspector calls, verifies the fact, and the cause of still-birth, and, if satisfied, issues his permit for burial. If he has any suspicion of foul play, he refuses the permit, and instructs the police. No body can be interred until a permit from the inspector, or from the police, has been issued. Now, I would propose that a similar plan should be introduced into this country, only I would suggest that each medical practitioner, who has been present at the birth, should be called upon to act as verifier of the fact and cause of still-birth. In other words, a public verifier should be required only in those births at which no practitioner had been present. I do not think the country would object to the small cost of such a system, considering how far it would go to protect infant life.

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