Dr. Dakin, President of the Obstetrical Society of London, in his Inaugural Address on the Present Teaching of Practical Midwifery in England, opened his remarks as follows :--

Our late President, in his parting address, alluded to the fact that we, as a Society, had come to the end of our work as an examining body for midwives. The conception of the scheme of examinations and its carrying out to completion is a matter in which our Society may justifiably take the greatest pride. It is not too much to say that, regarding it from a national point of view, the work that this Society has done is a more useful one than has ever before been accomplished by any medical scientific society. I imagine there can be no two opinions as to the use these examinations have been to the whole country. They have elevated the name of midwife to something which had never been contemplated—in the British Isles, at all events—as likely to develop out of its former significance, or, rather, insignificance. Who would now, when the word "midwife" was mentioned, picture to himself the possessor of it as being in any way like the dist the possessor of it as being in any way like the dirty, snuffy old person with whom our fathers were satisfied? On the contrary, he would at once see before him a (usually) younger creature, the pink of elegitic grant of light or the pink of cleanliness and purity of linen, eager to carry out all the principles in which she has been trained-those of implicit obedience to the doctor's orders, consistent with the maintenance of strict asepsis; yet able at the same time to manage with success some of the emergencies of labour in the doctor's absence.

In achieving this, ladies and gentlemen, you have educated more than your midwives. There is the English public. For unless you had shown, in the persons of those women who were considered worthy to receive your certificate, what a midwife might be made, the public could not have been stirred to the pitch of discontent with the old type that rendered it necessary to legislate in the matter. It has been stirred, and by the devoted energy of certain Fellows of your Society whose names are too well known to all of you for me to need to mention them. And the result of their unselfish efforts has been the addition to the Statute Book of an Act of which the present Government may be as proud as of any that they have carried through the Houses of Parliament. For the passing of the Midwives' Act, whatever may be said in its disparagement by some who are not uninfluenced in their opinions by personal considerations, must infallibly lead to the diminution of septic death and septic illness in child-birth, and of ill-health in the after-lives of the mothers and children.

Dr. Lovell Drage, writing to the British Medical Journal, says that there recently appeared before him, when in the coroner's court, a registered midwife who certainly did not correspond to the charming picture drawn by Dr. Dakin of the modern Gamp. No fault, in Dr. Drage's opinion, could be found with the midwife on the ground of infecting the patient, but fault was found with her for nonobservance of the rules of the Midwives' Board. The jury quite recognised that her ignorance was colossal, and one of them summed up the matter

thus :--- "She might be a good 'char,' but she ain't no sort of good at a job like this."

It is not clear whether the midwife in question held the certificate of the London Obstetrical Society, or whether she obtained admission to the Midwives' Roll as having been in bond-fide practice as a midwife for a year previous to the passing of the Midwives' Act. There are at the present time 10,162 such women on the Roll, for, however imperfect their services may be, the British sense of justice which rules all legislation protects the vested interests of the past. Until the women have ceased to practise, therefore, the standard and personality of the modern midwife will not become apparent. Even in regard to the standard maintained by the London Obstetrical Society, 6,174 of whose certificated midwives are entered on the Roll, we are of opinion that the meshes of its net were considerably too large, and many slipped through who had better have been kept outside. It seemed impossible for the Society to understand that no human being can really absorb all the practical knowledge required of a good midwife, as well as the theory which is essential, in a period of three months.

The effect of the working of the Midwives' Act remains to be seen. Personally we could wish that midwifery and nursing had never been dissociated, but Parliament has decreed it otherwise, and has, we fear, arrived at this conclusion largely because of the apathy of the heads of the nurse training-schools in neglecting to realise the importance of obstetrical training in the curriculum for probationary nurses. We do not share Dr. Dakin's confidence that the lines on which the modern midwife works are those of "implicit obedience to the doctor's orders." This is the role of the modern nurse. The midwife regards herself as an independent practitioner, and already the cry is going up from the general practitioner that he will not employ the certified midwife as a private nurse, that she has unique opportunities of gaining the confidence of his patients, and is not backward in informing them that by law she is entitled to attend maternity cases on her own responsibility, and that "next time," if they secure her services, the attendance of a medical practitioner will be unnecessary. The whole situation is beset with difficulties. One thing, however, is plain, that a registered midwife who acts under a doctor at a private case does so as a nurse and not as a midwife, and she grossly abuses a position of trust if she endeavours to annex his practice.

A novel piece of furniture, on view at the Furnishing Trades Exhibition, at the Agricultural Hall, which is becoming popular in children's hospitals, is a new nursing chair. It is a low, comfortable, armless seat, under which are a series of deep and commodious drawers. There is no need to move a foot to complete every detail of baby s toilette—the drawers hold everything.



