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The Midwife.

To e Royal Maternity Charity of London.

The annual Tea Party of the members of the Royal Maternity Charity of London, held by the invitation of Major G. Lionel B. Killick and Mrs. Killick at the "Eustace Miles" Restaurant, in Chandos Street, Strand, on July 10th, was a most picturesque affair. The tasteful gallery was charmingly decorated with lovely flowers and garlands of smilax, and the tea tables, arranged to seat four, were laden with piles of rosy strawberries, and most delicious breads and cakes. There was a hostess at each table who, in conjunction with Major Killick, was most hospitable and kind. Mrs. MacDonald (Midwife-Nurse to H.I.M. the Empress of Germany) was happily at the table at which Sister Agnes Karll was seated, and nurses and guests enjoyed a very happy time.

The Royal Maternity Charity of London was instituted as far back as 1757 by some benevolent city merchants, in order to provide midwives, medical attendance, and medicines gratuitously for poor married women in their own homes, and to this day marriage and necessity are the only tests of eligibility.

The first year's work of the Charity shows that 35 poor women were helped through their time of trial. The utility and necessity of such a charity quickly made itself apparent, and in 1760 the number had grown to 135 cases treated in the year. After the Charity had been in existence ten years the number helped amounted to over 2,000, until in 1821 the "record" was reached of 5,733 cases in the year. Since then the average of over 3,000 cases a year has been fairly steadily maintained.

There is nothing narrow or sectarian about the work of this charity, and to meet the needs of the poor refugees, who flee from the horrors of Russia to our shores, many of whom are friendless and homeless, and unable to speak our language, the foresight of the Committee is specially commendable. It is for such as these that a certain number of Jewish midwives are kept on the staff who can speak Yiddish, German, and Russian. Also a medical man speaking these languages has lately been added to the medical staff.

The Charity works quietly and unostentatiously, mostly in the slums, and in out of the way nooks and corners, and it competes in no way with lyingin hospitals, but is intended to help those who, whilst in pecuniary distress, are unable for many reasons to leave their homes, and it is important to note that this system is comparatively inexpensive, as there are no large buildings to absorb the income. Every patient's home is a ward of the Charity's Hospital for the time being. In fact, the thousands that are benefited in this way could not be received into hospitals at anything like the same moderate cost.

e great advantage resulting from charity must not be overlooked, from One \mathbf{this} that is, that the patients and are tended chiefly under women's ministration, and a large staff of competent and highly trained midwives are employed, located in nearly every part of London. For this purpose London is divided up into districts, to each one of which there is a midwife, a large staff of doctors, and one or more druggists appointed to the Charity. It is pleasant to think of how many grateful women, helped and comforted through their pain and suffering by skilled womanly help, must have blessed the memory of those benevolent men who, close on a century and a half ago, founded the "Lying-in Charity," which now takes care of 3,000 mothers yearly under its present name of the "Royal Maternity Charity of London.'

The courteous Secretary's office is at 31, Finsbury Square, E.C., to whom all communications (preferably of a financial nature) may be addressed.

The Death of Princess Ibenrietta, Daughter of Charles I. of England.

In a paper read at a recent meeting of the Société de Médicine de Paris, says the *Lancet*, Professor Pozzi discussed some very interesting questions connected with the last illness of the Princess Henrietta, daughter of King Charles I. of England, and wife of the Duke of Orleans. He said that the principal explanations which had been suggested were poison or acute peritonitis which might have proceeded either from perforation of a gastric ulcer or from perforation of a gangrenous appendix. Professor Pozzi, however, from an examination of the clinical and anatomical

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