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## The Midwife.

## Our Schools of Midwifery.

## THE BIRMINGHAM MATERNITY HOSPITAL.

Birmingham is a progressive city. Another new hospital has been added to its already long list of charitable institutions. Twentyfive years ago the old Maternity Hospital in Broad Street, which is now (but only for a short time longer) the Children's Hospital, was discarded owing to the terrible death-rate. Since then the Committee, under the title of The Lying-in Charity, has been doing excellent work on the District plan, the patients being attended by midwives in their own homes, and medical help called in whenever necessary.

But it has long been felt that a Hospital where abnormal cases could be treated was very sorely needed.

The Midwives' Act of 1902, requiring midwives to have Institution as well as District work, stirred with fresh zeal those who were most interested in the subject, and with little delay Birmingham rose to the occasion, and the sum of  $\pounds 15,000$  was raised.

On November 22nd, 1907, the new building was opened by Mrs. Barrow Cadbury, who had given the site. The stone had been laid 18 months previously by Mrs. Beale, who has always been deeply interested in all questions relating to the good of poor women, and has done much towards raising the necessary funds.

The Hospital is of a charming elevation, situated in Loveday Street, in a very poor neighbourhood. There are twenty-five beds, each with 2,000 cubic feet of air. The wards have six beds each, and there is one special ward. The labour rooms are fitted up like operation rooms, and are quite up-to-date. The walls throughout are pale grey, and perfectly flat; solid oak doors are a great feature of the building. The administrative part is on the top storey, and consists of kitchens, nurses' dining-room, servants' dining-room, bedrooms, etc. The Matron's and nurses' sitting-rooms are on the ground floor.

The Hospital wisely possesses its own laundry, which is situated in the basement.

Miss Faulkner, who has been Superintendent Midwife for two years, is now the Matron of the new Hospital. She was trained at the Birmingham Infirmary, and had charge, for some years, of the large Maternity wards of that institution. She is, and has been, most successful with her pupils. The six pupils now under her charge are to be congratulated on gaining part of their training in such a perfectly up-to-date building, while experience in other directions is being acquired on the District in the poorest part of a large city.

The fee for trained nurses exclusive of examination fee, is £20. The first examination held in Birmingham took place recently.

We thoroughly explored the Hospital from fourth storey to basement, and made the acquaintance of "David and Jonathan," two dear twins of three days old. Each baby has a dainty white-frilled cot at the side of the mother's bed. We were then kindly invited to tea in the Matron's sitting-room. The primrose-tinted walls, black oak furniture, pink tulips, and glowing fire-light made it difficult to realise that we were really in the heart of dear, dirty Birmingham.

K. R.

## Premature Infants.

Dr. T. N. Kelynack, on Tuesday last, began a series of four lectures on Babies, at the Infants' Hospital, Vincent Square, S.W., the first being on "Premature Infants." The lecturer said that one of the objects of the hospital is to study the conditions which make for wastage of infant life. The infant who comes into the world before its time is one of the most important of the weaklings. Premature birth is unquestionably often due to preventable causes, and this constitutes a plea for a more scientific care of the pregnant mother. There is no doubt that in the future we shall have scientifically directed institutions for the study of pre-natal life.

The premature infant has little grip of life, little resistive force, and when steered through infancy it is not stable. It lacks anatomical completion, and nearly all the physical processes are imperfectly established, and is altogether at a low level of vitality. In seeking to give such an infant the best chance we must think of what it has been deprived, and so far as possible reproduce intra-uterine conditions, although certain organic alterations. have to be accepted. The two chief points are the maintenance of a suitable environment, and the regular supply of suitable food.



