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The Midwife.

POST GRADUATE WEEK AT THE GENERAL LYING - IN HOSPITAL, YORK ROAD, S.E.

(Continued from page 455.)

TUESDAY, MAY 18TH.

On Tuesday evening Sister Olive showed a number of beautiful lantern slides, and explained each briefly and concisely. She began by saying that both she and Dr. Fairbairn were great believers in teaching by pictures. The slides included illustrations of contracted pelves, the muscles of the pelvic floor, uterus at term, ruptured uterus, the bacillus coli, tubercle in milk, some interesting charts, and many others.

WEDNESDAY, MAY 19TH.

BABY CLINICS.

' On Wednesday the day's programme began at 11.30 with baby clinics by the Ward Sisters. Sister French, who is well known by her work on "Babies" conducted one party.

She began by discussing the method of threehourly, as against two-hourly feeds for the newly born infant. She said that she was of opinion that a vigorous type of baby did very well on three-hourly feeds, but she did not recommend it where the child was not robust. All babies in the York Road Hospital were allowed to sleep for six hours undisturbed every night. At the end of a month any baby should be able to do on three-hourly feeds.

on three-hourly feeds. All "Cæsar" babies were breast fed, unless of course some condition existed that made it inadvisable.

Some infants, she said, when they appeared to have indigestion would do well if put on stronger feeds. She was more and more convinced that angry or sore buttocks were an indication of intestinal indigestion; the gastric indigestion of course, was indicated by vomiting.

Speaking of peptonised milk and its value in some cases, Sister French said that she had observed that weight did not increase, on this diet. Cow and Gate milk was useful to discharge an infant with, when it could not digest cow's milk, as it was easily prepared and not very expensive. Her objection to condensed milk under the same circumstances, was that the mothers could not be induced to discontinue it once it was begun.

All infants artificially fed were also on orange juice.

Sister French does not believe in an infant who refuses the breast being starved into taking it, as it merely becomes more disinclined for food. Patience and perseverance are her remedies.

Premature twins were shown in a tent by the

fire, where the temperature could easily be kept up to 80 degrees. A blanket formed the tent lining. This she preferred to an incubator, as everything could be done for the infants without taking them out of their surroundings.

She spoke of her increasing conviction, in the air. Dealing with I, the class had the benefit of a demonstration on changing a baby. Everything for each infant is kept separate, and is prepared on a low table ready for use. Unless the baby is very dirty soap and water are not used, but the buttocks are smeared with olive oil. After changing, the nurse washes her hands in the basin in readiness and attends to the eyes, &c. Before changing another baby, the table is cleared of every article, the nurse washes her hands thoroughly and the table is re-laid with fresh requirements. Patent napkinettes have been discontinued in the hospital, as it was estimated that their cost was £300 yearly. There is now a home laundry which deals with napkins only and this has proved successful. The washing out of the bowel for intestinal indigestion was the next demonstration, the ordinary saline mixture being used.

The two methods of the senior obstetric physicians in treating the cord was explained.

Dr. Fairbairn prefers to have the infants bathed in the usual manner; and Dr. Darvill Smith does not allow them to be placed in the bath till after the separation of the cord. Sister French considered there was little difference in the result.

PREGNANCY AND THE NERVOUS SYSTEM.

In the afternoon, Sister Olive lectured on Pregnancy and the Nervous System.

She began by giving an outline of the nervous system generally, and of its various functions. She pointed out some of their most interesting characteristics, and instanced how, in craniotomy, the operator would always first attempt to destroy the medulla oblongata, and it was the centre of co-ordinated movement. In a case where this had failed to be accomplished, she had herself seen movement, even after the head was crushed.

She spoke of the different poisons which affect the respiratory centre, and the effect of morphia on cases of eclampsia. In the Rotunda Hospital, they push this treatment by large doses, the respirations having been known to fall to twelve. The preparation of morphine, which is said to effect painless labour, useful as it certainly is in certain cases, passes through the placental circulation to the infant, and, causes depression of its respiration, which often means an anxious time for the midwife. The lecturer pointed out the effect of forceps pressure on the facial nerve,



