## The Midwife.

## TOXÆMIA OF PREGNANCY.

On March oth Mr. Gordon Ley delivered a lecture to the pupils and midwives of the City of London Lying-in Hospital, City Road, on Toxæmia of Pregnancy.

He said that only a few years ago Albuminuria of Pregnancy, Eclampsia, and Pernicious Vomiting of Pregnancy were regarded as entirely separate diseases.

The exact nature of the poison had not yet been found out, but it originates in the ovum either in the baby or placenta, and never apart from pregnancy. Toxæmia was more likely to occur in multiple pregnancy, and was far more common in first pregnancies, probably in 96 per cent. of the cases. If occurring in a second pregnancy it was probably with twins.

it was probably with twins. Most people considered that eclampsia was due to albuminuria, but that was hardly the right way to look at it.

In a large number of cases the poison attacked the kidneys, in the same way that the bacillus of pneumonia might attack some other structure, but almost invariably attacked the lung. Eclampsia was probably due to brain trouble.

He hoped that midwives always examined the urine of their patients. In the last three months this should be done monthly, and in the case of a primipara fortnightly. If this were done there would be fewer deaths from eclampsia. He held that if the urine were to be examined in the three stages of labour, albumen would be found in one of them. The French doctors say that it is always present during labour. This condition was due to the high pressure and straining causing congestion of the kidneys.

He divided the Albuminuria of Pregnancy into five classes. The first three of labour, and the last two of pregnancy. In the first three classes some cases started during labour and some two or three days previously.

Some had merely cedema of the feet and face, and some had the serious additional symptoms of headache, vomiting, misty sight, flashes of light and spots before the eyes. These latter symptoms would lead one to suspect eclampsia. It meant that the poison had flooded into the circulation and that all the organs as well as the kidneys were infected.

The majority of the cases clear up rapidly after delivery if they do not get eclampsia.

Albuminuria of pregnancy generally starts about the twenty-fifth or twenty-sixth week. Treatment may do a good deal for these cases, but if they do not improve, but on the contrary continue to get worse, the labour should be terminated.

If a woman with chronic kidney disease becomes pregnant, as a rule she does not become much worse, though some do.

The lecturer described a case of a woman under his care whose urine he himself examined one hour before a fit, and found it to be normal. She had a fit, one hour and a half afterwards her urine was solid.

The fits were of short duration, and rarely lasted more than half a minute, and rapidly passed from the tonic stage to twitching, and the patient was always deeply cyanosed. The fits might succeed each other rapidly or at long intervals. They were produced by any kind of manipulation. After the first one or two patient usually regained consciousness, but afterwards remained unconscious. The best course for a medical man was to do a Cæsarian section, unless delivery was possible under two hours. The results were generally excellent.

The lecturer gave detailed directions for the nursing in these cases. The prognosis for the infants was bad, as the poison affected them.

Severe vomiting of pregnancy was extremely rare. It generally started in the twelfth to fourteenth week. There was every variation of vomiting, from the common early morning to an almost continuous condition. In severe cases the patient may become emaciated with rapid pulse, dry tongue, and foul breath, and is very ill.

Other rare results of toxæmia were severe jaundice and severe anæmia. It was thought by some that puerperal insanity was also due to this condition.

## THE JEWISH MATERNITY HOME.

Her Majesty the Queen, attended by the Lady Isobel Gathorne-Hardy, paid an informal visit last week to the Jewish Maternity Home, Sick Room Helps, and District Nursing Society, 24, Underwood Street, Whitechapel.

Her Majesty appeared greatly interested in the Society, even to the most minute details of the original scheme of the "Sick Room Helps," founded twenty-one years ago, and the new and progressive work of the "Pre-Natal" classes in hygiene, and instruction in making suitable and modern garments for the expected little ones, and the "Baby" consultations which are held twice weekly, to advise mothers as to the health, feeding and clothing of their children, at which two doctors attend.

The Queen paid a visit to the babies nursery, and to the office where the scheme of "Sick Room Helps," the origin of 'Home Helps," is supervised and carried on. The District Cupboard, containing dressings, drugs and clothes for charitable purposes used and distributed by the Q.V.J.I. nurses, was next an object of interest.

262



