

The Midwife.

THE CENTRAL MIDWIVES BOARD.

At the Examination held by the Central Midwives Board (England) on August 1st, in London and the provinces, 494 candidates were examined and 400 passed the examination. The percentage of failures was 19.

HOSPITAL TREATMENT FOR INFANTS AND YOUNG CHILDREN.

The Mansion House Council on Health and Housing, of which the Lord Mayor is president, has recently instituted an inquiry as to the adequacy of hospital accommodation and treatment for infants and young children in London.

The general conclusion is that there is an insufficiency in most districts for the institutional treatment of infants and young children. Except in a few instances that deficiency cannot be made good by existing hospitals, save at the expense of the older children. In some cases additional accommodation could be provided in new buildings if funds were forthcoming.

To meet the need it has been suggested to the committee that wards should be set aside for infants and young children in existing hospitals, or small local wards set up for minor ailments; that each infant welfare centre should have attached to it a residential home or observation ward for delicate babies; that open-air schools should be provided for the prevention and cure of consumption; that minor operation cases ought not to be discharged so quickly as now; that delay in performing operations should be prevented and long waiting at the hospital curtailed; and that facilities should be available for daily attendance for simple treatment on the lines of school clinics.

In regard to Poor Law Infirmaries facilities the Council consider the results unsatisfactory in the case of delicate babies. They think the Local Government Board and Boards of Guardians might consider whether the arrangements could not be improved.

OPHTHALMIA NEONATORUM.

By a new order of the Scottish Local Government Board cases of ophthalmia neonatorum become compulsorily notified in Scotland from November 1st, next. The Board advises local authorities to take counsel with their Medical Officer of Health so as to ensure skilled attendance for every case so notified.

VENEREAL DISEASES.

Much attention is just now being directed to the question of venereal diseases, owing to convictions under Clause 40D of the Defence of the Realm Act, and it is well that nurses and midwives should be well informed as to their chief symptoms. These were well described recently

by Mr. Leonard Myer, F.R.C.S., in his course of lectures at St. Paul's Hospital, Red Lion Square.

Gonorrhoea, he said, ran a rapid and acute course, the incubation being three days, and it was a local disease.

Syphilis, on the other hand, was always chronic, its incubation was three weeks. The secondary stage began when the glands unconnected with the sexual organs became enlarged, *e.g.*, those in the bend of the elbow.

In regard to the early complications in both sexes, syphilis had very few complications, though its existence predisposed the patient to other diseases, *i.e.*, phthisis, malaria, diabetes and Bright's disease, the existence of the last-named also precluded the patient from treatment by mercury.

In gonorrhoea there were a whole host of complications, some affecting the male or the female only, and some common to both sexes.

Some of those common to both sexes were cystitis, ophthalmia, joint affection, meningitis, proctitis, flat-foot and blood poisoning.

In the male, orchitis, acute stricture, prostatic abscess.

In the female Bartolin's gland became enlarged and inflamed.

USE OF ABORTIFACIENTS.

The Local Government Board, in their Circular on Maternity and Child Welfare, addressed to County Councils and Sanitary Authorities, state that a report was published by the Privy Council Office in 1910 on the practice of medicine and surgery by unqualified persons. For the purpose of that Report the Board obtained some particulars from Medical Officers of Health, which showed that the sale of drugs intended to procure abortion and practice by abortion-mongers was prevalent in many parts of the country. From information obtained by Medical Inspectors of the Board in connection with their inquiries into Maternity and Child Welfare work and from other material, the Board have reason to fear that these practices continue. One of the drugs most commonly employed for this purpose is diachylon, and on April 27th, 1917, an Order in Council was made adding to the list of poisons for the purpose of Part I of the Schedule of Poisons "lead in combination with oleic acid, or other highly fatty acids, whether sold as diachylon or under any other designation (except machine spread plasters)." The Board would urge every Local Authority to bring this order to the notice of the druggists and of the practising midwives in their area, to explain to their Health Visitors and to the midwives the risks to life and health involved in the use of diachylon, and in every other way to do what they can to stop the traffic in abortifacients and the practice of abortion-mongers in their districts.

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