

of whose ignorance from the physiological standpoint there is no doubt. We sympathise with their demand for a high moral standpoint, and of course—with the means of self-disinfection to hand—this high moral standpoint should always be persistently inculcated.

The vehement opposition should be met by an explanation of the reason for the course adopted. The opposition to what was known as the "State Regulation of Vice" was opposition to one sex being humiliated and penalised for the self-indulgence and protection of the other. That policy failed as it deserved to fail.

The present proposition is that those—whether men or women—who expose themselves to infection shall, in the interests of the community, have the means to disinfect themselves at the earliest possible moment. That policy should commend itself to sensible people.

To come down to bed-rock. One human being is not permitted to poison another without paying the penalty of the law, for either manslaughter or murder. And when a man or woman deliberately or ignorantly poisons another with the virus of venereal disease, causing untold suffering and perhaps death, the law should take the matter in hand.

The only remedy for this crime—for crime it is—is that the Government should bring in a Bill making the communication of venereal disease by one human being to another, a criminal offence. In our opinion, the sooner this is done the better.

OUR PRIZE COMPETITION.

WHAT ARE THE CAUSES OF SWELLING OF THE LEGS (1) DURING PREGNANCY, (2) AFTER LABOUR? HOW WOULD YOU DEAL WITH SUCH CASES?

We have pleasure in awarding the prize this week to Miss Reda M. Wilson, Queen Mary's Maternity Home, Cedar Lawn, Hampstead.

PRIZE PAPER.

1. One of the questions always asked by a midwife at an ante-natal examination is directed to finding out whether the patient has noticed any swelling of her legs or feet—if so the cause must be carefully investigated.

a. If the patient reports that her legs are swollen at night, but that the swelling has disappeared after the night's rest, then this swelling is purely mechanical, and results from the pressure on the veins from the enlargement of the uterus. This will naturally be more marked in cases of hydramnios, or twins, or where the pregnancy is complicated by pelvic tumours. There will be no accompanying swelling in other parts of the body and apart from the discom-

fort caused to the patient, there is no need for worry. The patient should be advised not to stand about more than is necessary, and, if possible, to rest once a day with her feet raised.

b. *Kidney disease* may prove to be the origin of the swelling, when the urine, on being tested, will be found to contain some albumen. The patient will then be carefully examined for swelling in other parts of the body, particularly of the hands and face. If there is found to be puffiness of the face and hands, severe frontal headache and gastric disturbances, the "pre-eclamptic state" may be feared, and medical advice should be sought immediately in time for the patient to be treated before the convulsions appear.

Should the swelling of the lower extremities result solely from the albuminuria, the patient should be put to bed, kept on milk diet till the urine has cleared, kept as warm as possible, and the pores of the skin kept open.

c. *Heart disease* might be the cause of the swelling of the legs, and if there is nothing else in the patient's condition to account for it, and the swelling does not disappear after the night's rest, then medical advice should be sought.

2. After labour, swelling of the legs is one of the symptoms of "phlegmasia alba dolens," commonly called "white leg," so rarely seen now-a-days, and the more common complication of the puerperium femoral thrombosis. In both cases the swelling, which is accompanied by fever, pain and tenderness of the leg, occurs during the second week of the puerperium.

In cases of "white leg," when the swelling first commences it pits on pressure with the finger, but later on the swelling becomes too hard. This combined lymphatic and venous obstruction is, however, scarcely ever met with.

Femoral thrombosis, or clotting in the femoral vein generally follows some septic trouble, or severe ante or post partum bleeding. The swelling commonly begins in the parts farthest from the trunk, and the side of the foot or leg lying on the bed will show it first. The midwife will advise that a doctor be sent for, and until he arrives she will keep the patient in bed with the affected limb at rest on a pillow.

HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss R. Thompson, Miss M. James, Miss J. Taylor, Miss T. Robinson.

QUESTION FOR NEXT WEEK.

What do you understand by anti-typhoid inoculation? What is its value? Mention the principal abdominal complications of enteric fever, and state how they should be treated.

[previous page](#)

[next page](#)