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EDITORIAL.

THE KING'S STEADY IMPROVEMENT.

^r It is with heartfelt joy that the Nation has learnt that the King's medical advisers are able to sanction his removal to Craigwell House, Aldwick, near Bognor, in the near future, for this means a definite step forward on the road to convalescence, and we may hope, with some confidence, that the fine air of Bognor will act as an additional tonic and accelerate His Majesty's recovery, which must, however, under the best conditions, be protracted.

The statement published in the British Medical Journal of February 2nd is such that we may happily look forward to steady improvement in the future, and thank God for the hope that the petitions of the Empire, and indeed of Christendom, will be granted and that our well-beloved King will be restored to his people.

The statement above referred to is as follows :---

"We learn on the best authority that His Majesty during the past few days has continued to make slow but steady progress towards convalescence. Recent bacteriological tests confirm the clinical evidence that the right chest is now free from infection. The temperature has settled down, the pulse remains quiet, sleep is better, and solid food can be taken in larger amounts. Thus the gratifying improvement recorded last week has been maintained, and we may look for further news from time to time, of advances along the uphill road to recovery. Our profession and the nursing profession have every right to feel proud of the success so far achieved by those to whom the care of the King's life and health has been entrusted. Their skill and devotion, under wise leadership, have had full scope throughout, and for this the Nation owes a great debt to the Queen, whose courage has been an example to her people. It was fitting that the first public message from the King since he fell ill should have been given by Her Majesty at a hospital gathering : 'His illness has brought him to appreciate more deeply than ever before the value of medical science and of devoted nursing.'

We note with pleasure the increasing tendency of the medical Press to acknowledgethe indebtedness of medicine to the nursing profession, and to its share in results achieved. The two branches of the healing art are interdependent, and the work of both is most successful when this is fully recognised and acknowledged.

Until the passing of the Nurses' Registration Acts nurses had no definite position in the body politic, and the measure of their skill and knowledge was an unknown quantity. This is now changed, and the beneficent results are increasingly apparent.

A BAFFLING AND DISTRESSING PROBLEM.

The Right Honourable Neville Chamberlain, M.P., Minister of Health who was the principal guest at a luncheon given last week at Salters' Hall, E.C. by Lady Howard de Walden in connection with the national mother-saving campaign of Queen Charlotte's Maternity Hospital, when he described the maternal mortality rate as "one of the most baffling, and one of the most distressing problems that we have to deal with in my department."

He pointed out that £2,000,000 of public money is being spent each year on maternity and child welfare services in addition to a large sum of money spent out of voluntary resources, and he thought we were getting very good value for our money. "The number of deaths of children under one year of age per 1,000 births, show," he said, "a very remarkable drop since this service was initiated. In 1906 the figure was 132 per 1,000; in 1927 it had come down to 70, and last year it arrived at the record figure of 65 per 1,000.

"So much," said Mr. Chamberlain, "for infant mortality. When you come to maternal mortality, the story is very different. The maternal mortality for the last 20 years has remained about the samenamely, about four deaths per 1,000 births—indeed, it shows a slight tendency to rise.

"The first thing then that we have to do is to try and find out why it is that we cannot get these figures down. What is the reason for this persistent death rate? I am sorry to say that we are very ignorant about it. We do know that one of the principal causes is of what is called puerperal infection, but we do not know how that infection arises, and therefore we do not know how to prevent it. One of the difficulties is that these cases of puerperal infection are scattered and the result is that no one research investigator has in his hands sufficient material for him to be able to carry on a continuous and intensive study of the particulars. Therefore, I was very delighted when I saw in the paragraph that was published in the Press this morning, that Queen Charlotte's Maternity Hospital was going to include in its new plans, for a new hospital, the provision of an isolation block which would be devoted entirely to cases of this kind. That is a lead given by a voluntary hospital which, I think, shows the direction in which we must work if we are to obtain substantial and valuable results in our research into the cause of puerperal infection.'

Registered Nurses and Certified Midwives are keenly alive to the lamentable stationary position of the maternal death-rate, and ardently desire to do all in their power to help to decrease it.



