

to readily glide forwards into the uterine cavity, where there may be frequently found a kink; due to the muscular body falling forwards on the relaxed lower uterine segment. The material of which this douche tube is made is generally glass. It is in consequence frequently liable to be broken in the bag. In general utility and ease of sterilisation I know none better than the lead or pewter one. It would appear impossible to imagine an instrument more easy of introduction than this douche tube, were it not that one has seen many bungling attempts to get its tip past the kink above mentioned.

THE BINDER AND ITS USES.

With weak pains—premature rupture of membranes, and, above all, pendulous abdomen, it may be of the greatest service. One has frequently seen a multipara with pendulous belly, after many hours' ineffectual contractions, deliver herself almost as soon as the axis of the uterus is brought into line with the axis of the sup. strait.

The use of the binder in the puerperium is much more doubtful, it probably prevents a certain amount of meteorism of the bowel if properly applied, may enable the patient to micturate with greater ease, but nothing will shake the view of your patient that its main use is to prevent the loss of her figure. On these grounds you will probably have to use it, and let me warn you to apply it yourself. It seems to be looked on as a piece of the most holy ritual of child-birth, and I have known very grave doubt cast on a man's professional merit for delegating this to a nurse. Above all, do not put it on too tight; very few men or nurses are able to do this fortunately, else retroversion of the puerperal uterus would be a great deal more common than it is. If you consider the mobility of the puerperal uterus, its ease of dislocation by the bladder, the recumbent position of the patient, it is remarkable that this complication is not more frequent.

MIDWIFERY FEES.

The Representative Meeting of the British Medical Association at Sheffield, discussed the difficulty of the position created by the operation of the Midwives' Act with regard to the assistance of medical practitioners to midwives and the memorandum issued by the Local Government Board giving the boards of guardians authority to pay the fees of medical men called in to assist midwives on a definite scale. The meeting approved of the suggestion that the local midwifery supervising authorities should have control of these matters, and that, in the interest of the patients, the co-operation of the

British Medical Association, the Central Midwives' Board, and other medical organisations, was desirable to effect an acceptable solution of the difficulties. It was further agreed that the meeting was of opinion that any lowering, which has been suggested, of the standard of registration of midwives would defeat the objects of public protection, which the Midwives' Act was adopted to carry out.

THE CENTRAL MIDWIVES' BOARD EXAMINATION PAPER.

August 5th, 1908.

1. How are the various organs in the pelvis arranged. Describe their positions, and draw a diagram if you can.

2. What are the causes of incontinence and retention of urine during pregnancy and the lying-in period.

3. What is the third stage of labour, and how would you conduct it in a normal case?

4. Describe the normal appearance of the infant's stools from birth to the end of the first week.

What changes in them would you think it necessary to report to the doctor?

5. How would you make the following?

Peptonised milk,	Normal saline solution,
Humanised milk,	A nutrient enema.
Albumen water,	

6. What must a midwife take with her to a confinement, according to the Rules of the Central Midwives' Board?

THE LIVERPOOL AND DISTRICT TRAINED MIDWIVES' ASSOCIATION.

The trained midwives of Liverpool and the surrounding district are showing great energy in the organisation of an Association for professional purposes. When the inaugural meeting was held on May 28th of this year, 45 trained midwives enrolled themselves as members. The membership has steadily increased each week, and at the present time there are 115 members on the Roll, who, realising the benefits to be derived from the Association, are giving it their loyal support.

The principal aims of the Association are to raise the standard of midwives by social intercourse, and discussion of professional subjects each week, to increase their knowledge of the practical side of their profession, to benefit financially and legally any member who becomes involved in a professional difficulty, to ensure fair remuneration to members for their work, and to help them to recover bad debts, to give "suspension pay" to members who may, from an unavoidable cause, be suspended from work, not having broken the rules of the Association or the Central Midwives' Board.

Only those midwives are eligible for membership who hold the certificate of a recognised training school of midwifery. There is an entrance fee of 1s. and the subscription is 3d. a week or 1s. every four weeks. The President is Mrs. Tharme, and the Secretary Mrs. H. Wood. We wish the new Association every success.

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