

ing to note that one case has occurred in this hospital, but unfortunately, not knowing that such cases were so rare, I did not keep notes of the case as fully as I should do now.

The patient (Mrs. G.) was admitted at 6 p.m. on September 18th, 1906, in a state of collapse, being cold, pallid, and pulseless, with the history of several hæmorrhages at different periods of the pregnancy. As far as she remembered, the first occurred about the first week in June, she then being at about the fifth month of pregnancy, the second occurring three weeks later, and the third shortly after, but no hæmorrhage since then up to time of admission.

On the afternoon of admission, patient said she was seized with a deadly cold turn, and felt herself getting gradually weaker; a neighbour, finding her in a collapsed condition, put her into a cab, and brought her to the hospital, where she was already booked to come a month later.

Our doctor ordered patient to be put to bed and one-fortieth of a grain of strychnine to be given immediately, but restoratives had to be resorted to before she rallied. Upon vaginal examination, dilatation was found to be full, and a right occipito-posterior position of fœtus diagnosed.

Two hours later (during which time patient's condition improved) a dead fœtus was born, followed immediately by profuse hæmorrhage. On the vaginal examination the fœtal head being hard and firm, a dead fœtus was not anticipated, but at birth arms were rigidly flexed, and knees came with abdomen, the whole being quite rigid. We tried artificial respiration, but found it impossible to relax limbs.

As child was removed within a few hours, I cannot say whether it relaxed later or not.

## The Central Midwives' Board.

### EXAMINATION PAPER.

October 23rd, 1908. From 2—5 p.m.

Candidates are advised to answer all the questions.

1. Describe the symptoms and signs of pregnancy at the end of the fourth month.
2. What are the common causes of delay in the first stage of labour?

For what abnormalities must a midwife advise that medical assistance be sent for during this stage?

3. Name the common causes of retention during the third stage of labour.
  - (a) of the placenta;
  - (b) of the membranes.
4. What do you understand by "the involution of the uterus"?

How much should the uterus involute daily during the first week?

What causes will lead to an arrest of this process?

5. What malformations may be found in newly-born children, and what signs or symptoms would call your attention to each?

6. (a) What is the rule of the Central Midwives' Board regarding the administering of drugs by a Midwife?

(b) What is the definition of "a still-born child" according to the rules of the Central Midwives' Board?

## Midwifery in Cornwall.

At the quarterly meeting of the Cornwall Midwives' Committee, held last week at Truro, Mrs. Heywood Johnstone presided, and made an application on behalf of the Cottage Nursing Homes' Association for a grant towards the support of emergency midwives for districts which are supplied with village nurse-midwives. They had, she said, five or six already covering a large area, and with the assistance of an emergency nurse they could be greatly helped in sparsely-populated districts which could not otherwise afford a nurse. The present districts were worked so economically that they could get on with a little outside help. The difficulty to be dealt with was the great expense in emergency cases; for if midwives did not belong to the particular place it was almost impossible to provide them. One emergency nurse could go from one to the other at these places as required, and as the Association had worked so well in Cornwall without any grant, she hoped the committee would be able to recommend the Education Committee to grant their appeal. The expense would be about £50, and she asked for a grant of £25.

In reply to Mr. C. L. Cowlard, the Chairman, Mrs. Johnstone, said the Education Committee had in no way recognised the association by grant, though an application was favourably considered, the grant, however, going to the County Nursing Association. The places where the Cottage Nursing Association operated were those too poor to support a county nurse.

Captain Morrish moved, however, that the Education Committee be applied to for a grant of £25 towards the cost of training in the Heywood Johnstone Memorial Home midwives as emergency nurses for the area covered by the places previously named, which formed a district not at present covered by any other nursing association.

Mr. J. M. Thomas seconded, and it was carried.

The Clerk notified that in framing the Act and mapping out the districts the Scilly Isles had been omitted, and they were under no jurisdiction. He thought they might assume that the Isles of Scilly belonged to Cornwall, and recognise them.—This was agreed to.

The return of the medical officers showed that there were 252 midwives registered in the county of Cornwall.

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