The Midwife.

Diet in Pregnancy.

The subject of diet in pregnancy is very summarily treated by most authors of works on Obstetrics and on Diet; the same old, familiar words occur in each—the advisability of plain, nourishing, easily digestible, laxative food, non-alcoholic beverages, and more frequent and smaller meals, is insisted upon. There is but little attempt to treat the matter scientifically, or to solve the knotty points which are associated with it. These are numerous; for example, Is there any relation between the strength and diet of the mother and the course of pregnancy and labour?

Is there any relation between the condition of the child at birth and the dieting of the mother?

Can inability to nurse the child be overcome by judicious dieting?

What is the relation between the weight of the mother and weight of the child *in utero*? Does increase in weight of the mother result in increased weight of child, and *vice versa*?

Has food any influence on sex?

Do very stout women have more difficult labours?

All these questions open a wide field for investigation to those interested in the science of Eugenics or well-begetting. All the time the child is *in utero* it derives material for the building up of its body from the mother's blood and tissues. It, therefore, seems natural to think there is connection between the general condition of the mother and the general condition of the child; but more data must be patiently collected before laws can be formulated. One of the first to give attention to dieting was a chemist, named Rowbotham; whose wife had had two difficult labours. When she was seven months advanced in her third pregnancy, she adopted, at the suggestion of her husband, a diet consisting largely of acid fruits. On waking, she took an apple, orange, and the juice of one lemon; for breakfast, baked apples and bread and butter; mid-day, two oranges and apples; dinner, fruit, a little fish or meat, potatoes, and grains; later, apples, grapes, and lemon juice. The idea was that the acids dissolved the phosphates, which are bone-making; it was hoped thus that the skull would be less ossified, and the labour consequently easier. This hope was realised, the child was born at term, and was normal and well-proportioned; the bones resembled gristle, but this in no way had any adverse effect on the after-progress of the child.

An American homœpathist, Dr. Stockholm, warmly advocated dieting in pregnancy in her book on "Tokology" (Gr., tokos—childbirth), and her experience led her to regard it as of value. The great feature of the *régime* suggested by her was the liberal use of fruits. She writes: "The pregnant woman's motto should be 'Feast on fruits freely.'" All foods developing bone, condiments, fat, and sweets were to be avoided, as little fluid as possible was to be taken, and that little half-an-hour before meals; she deprecated, also, the too liberal use of salt.

The greatest authority on diet and its value in pregnancy is Prochownik, of Hamburg, who published his observations in 1899. He proved thereby that it is possible by diet to modify the fœtal skull, so that labour is less difficult, without any injurious effect upon the child. The degree of ossification of the bones is a great factor in difficult labour. Sufficient stress is not laid upon this in the text books. In Prochownik's cases the cranial bones were notably mobile, the skin of the head lax, and the children lean. The measurements, however, were average, and the gain in weight after birth was for the most part normal.

In the last two months of pregnancy the ossification of the skull and the weight of the child increase rapidly. The special diet is, therefore, begun twelve weeks before term; it aims at restricting the mother's food, so that the earthy matter required for ossification is precipitated more slowly, and yet provides sufficient nourishment for the child's healthy development. Biology and chemistry prove this possible. The careful, painstaking, and scientific experiments of Prochownik and his disciples declare it successful. Records of over sixty cases bear witness to its value in cases of contracted pelvis.

The amount of fluid and carbohydrates normally taken is reduced to a minimum; in order to counteract the thirst induced, a liberal supply of green vegetables is allowed; soup, potatoes, farinaceous food, sugar, spirits, and beer are absolutely forbidden. The diet table is as follows:—Breakfast, small cup of black coffee 3.3 oz.; bread with a little butter 4.5 oz.; lunch, any kind of meat or fish, eggs, green vegetables, salad, cheese; dinner, same as lunch, with addition of bread and butter 1 to

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