

Dr. Barnum reports a wonderful case of a *rv. para*, in which the arm protruded into the vagina. The labour had lasted 28 hours, the membranes had ruptured several hours, ergot had been given by a midwife, and the uterus was tetanically contracted. All efforts to replace the arm failed, embryotomy or abdominal section were not practicable as the necessary instruments were not available. The woman was placed in a kneeling posture at the edge of the bed, her head and body bent forward as far as possible; within five minutes the arm began to recede, and in twenty minutes the child was born alive, the vertex presenting. One would like to know the dimensions of the pelvis and size of the child.

Dr. Murray cites two cases of mal-presentation, which were corrected by postural treatment, carried out by the patients; in both the transverse lie was spontaneously rectified while the patient was squatting during the act of micturition; he maintains that in bending forward the axis of the uterus is brought more nearly into line with the axis of the pelvis.

This new method is certainly worthy of trial; it is quite possible that some of the readers of the *BRITISH JOURNAL OF NURSING* have met with extraordinary cases of spontaneous rectification associated with a squatting posture of the patient; clinical reports would certainly be welcomed by Dr. King, to support his sound theory of the value of thigh pressure.

M. O. H.

The Midwives' Act Committee.

The eighth meeting of the Departmental Committee appointed by the Lord President of the Council to consider the working of the Midwives' Act was held at the Privy Council Office on Wednesday, March 24th.

The following witnesses attended and gave evidence:—Miss Wesley, Matron of St. George's-in-the-East Infirmary, on behalf of the Poor Law Infirmary Matrons' Association; Dr. C. T. Parsons, Medical Superintendent, Fulham Infirmary, on behalf of the Infirmary Medical Superintendents' Society; Dr. Henry Handford, F.R.C.P., County Medical Officer of Health, Nottinghamshire, on behalf of the Health Committee of the Nottinghamshire County Council.

Miss C. C. du Sautoy, Inspector of Midwives under the Somerset County Council, has drawn up an interesting summary of her work covering the period from March 1st, 1908, to February 28th, 1909.

The Training of Midwives.

The Fifth Annual Meeting of the Association for Promoting the Training and Supply of Midwives was held at Caxton Hall, Westminster, on Tuesday last. Sir Charles E. Schwann, Bart., M.P., presided, and moved the adoption of the report, which was seconded by Mrs. Wallace Bruce, Chairman of the Executive Committee, who referred to three harrowing cases in which deaths of lying-in women had recently occurred because medical assistance could not be procured. The Association had, she said, trained 72 candidates, and all but four had passed the examination of the Central Midwives' Board. They would have trained more, but for the lack of candidates. At the back of this lack was that women now knew that a living was not to be made by midwifery. It was being proved that to get a living a midwife must be a nurse as well. The two offices must in the future be largely combined. Nursing Associations were asking that their nurses should have a midwifery qualification, and training in nursing was being demanded of midwives.

Another point referred to by Mrs. Wallace Bruce was the statement sometimes made that the Examination of the Central Midwives' Board is too difficult. That was not the experience of the Association, provided the women were carefully chosen, and a sufficiently long training was given; the Association did not accept as candidates women who were illiterate, but did not ask for a high standard of education. Some county medical officers were asking for local examinations, but that would mean many different standards.

Sir Luke White, M.P., said that when the Midwives' Act came into full operation it would no doubt be found to require amendment in many particulars. Dr. Salaman thought that to combine the function of midwife and nurse was a wise and excellent step, which had been made possible by Lord Lister's magnificent work. The conclusion must be arrived at that in no other way was it possible to get the right type of midwife, one with several years' hospital training. The report was adopted.

The following Resolution was carried unanimously: "That in view of recent cases in which women have died in childbirth through want of medical attention, and the refusal of the services of a doctor, without an order from the relieving officer, involving needless delay, this meeting calls upon the Local Government Board to make *compulsory* instead of optional their recommendation to Boards of Guardians in 1907 to pay the fee of any medical man called in in an emergency."

On the motion of the Chairman, it was agreed to ask the President of the Local Government Board to receive a deputation to present the resolution.

Miss Breay said she hoped that when the Midwives' Act was amended, provision would be made for the representation of midwives on the Central Midwives' Board. She also pointed out that while midwives had definite status, and standards were maintained through a central examination, trained nurses had neither status nor standards.

[previous page](#)

[next page](#)