

speaking, the result, the final result, of gastric and intestinal disorder. The fatal attack is the final expression of pathological processes which have been going on for some weeks, very often for months past."

To return to the Boston Floating Hospital. There is a thoroughly modern food laboratory on board, where the feedings are prepared by prescription and delivered to the wards punctually by an orderly. The milk is kept in a refrigerator at a temperature of 34 degs. Forty quarts are used daily, besides eight quarts of cream, whey, buttermilk, and forty-eight quarts of barley-water made fresh every day. It is not pasteurised nor sterilised, because the Massachusetts law says that milk containing not more than 50,000 bacteria per cubic centimetre is good milk. The hospital is supplied by the Walker Gordon Company, where the most scientific methods are used, and the milk daily tested contains as low as from 600 to 1,000 bacteria per cubic centimetre.

The "house officer" told me, says Miss Simpson, that some time ago all of the babies were running a very high temperature and vomiting without any apparent cause. At last they thought of the milk, which was not tested so frequently, and found it had increased in bacteria enormously within forty-eight hours. After changing to the Walker Gordon people, every baby returned to its nipple with renewed vigour and a normal temperature.

The moral is the all importance of purity in the milk supply, and this midwives, who have so many opportunities of teaching the mothers of young infants, cannot emphasise too greatly. They should teach (1) that the chances of life and health are far greater for a breast-fed baby than for one fed by hand, and, secondly, if it is essential to bring up an infant by hand not only should the purity of the milk supply be above suspicion, but the milk, when delivered, must be kept under conditions which will neither favour the multiplication of such bacteria as it may contain—that is to say, it should be kept at a temperature of 40 degs. Fahr., and, secondly, it should be protected from infection by flies and other agencies. Under such conditions sterilisation, which detracts from the nutritive qualities of milk, is best avoided. Clean milk is safe milk. Dirty milk remains dirty even if sterilised, but in the latter case the bacteria are dead, and in the former living.

The Need of Midwives.

At the Annual Meeting of the Notts Nursing Federation, held at Nottingham, at which Lady Elinor Denison presided, Mr. E. W. Enfield drew attention to the paragraph in the report relative to the training of midwives. He understood from Dr. Handford, the County Medical Officer of Health, that there were a number of women ready to undertake the work if they were only trained. If they waited until the County Council undertook any additional expense there would be delay and he therefore suggested that they should raise a fund for the training of suitable candidates. The suggestion was cordially received.

The Central Midwives' Board.

A NEW MEMBER.

The Royal College of Surgeons has appointed Mr. C. H. Golding-Bird, F.R.C.S., Surgeon and Lecturer on Clinical Surgery at Guy's Hospital, to succeed Mr. J. Ward Cousins, F.R.C.S., as the representative of the College on the Central Midwives' Board.

EXAMINATION PAPER.

The following is the Examination Paper set to candidates at the examination of the Central Midwives' Board on April 1st:—

1. What would make you suspect the occurrence of concealed hæmorrhage before the birth of the child, and what would you do in such a case?

2. What can be found by making internal examinations? What possible dangers must be guarded against?

What rules of the Central Midwives' Board bear on the subject?

3. What are the premonitory signs of eclampsia? How would you treat a woman with eclamptic fits pending the arrival of the doctor?

4. What are the signs before delivery that the child's life is in danger? What would you do in such a case, and how would you treat a baby born apparently lifeless?

5. What swellings may be found on the child's skull at birth? How are they produced and where would you expect to find them?

6. Under what conditions in the case of a lying-in woman must medical help be sent for according to the rules of the Central Midwives' Board?

How many copies of the "Form of Sending for Medical Help" should be made, and what should be done with each of them?

How should the fact of having sent for medical assistance be entered in the "Register of Cases"?

The Resuscitation of Still-Born Children.

Dr. Arthur Keith, F.R.C.S., who delivered a series of lectures on "The Mechanism Underlying the Various Methods of Artificial Respiration Practised Since the Foundation of the Royal Humane Society in 1774," mentioned, as reported in the *Lancet*, that "The Royal Humane Society has always taken a close interest in the resuscitation of still-born children. In 1802 it presented its medal to Mrs. Ann Newby, Matron of the City of London Lying-in Hospital, for 500 cases of successful resuscitation. Unfortunately, no mention is made of the method employed, but I have reason to believe that mouth-to-mouth inflation was part of the means. In 1816 her successor, Mrs. Widgeon, had a similar honour conferred on her, and in 1857 Mrs. Mary Widgeon also received a medal. She employed the same means 'as her late mother'—chiefly warmth and friction."

previous page

next page