

## The Midwife.

### Midwives and the National Insurance Scheme.

Midwives should lose no time in drawing the attention of the Chancellor of the Exchequer and of the Members of Parliament, in whose constituencies they reside, to the fact that though a large proportion of poor women engage midwives for their confinements, and the qualification of certified midwives is tested and registered by the State, yet no provision is made for their employment under Mr. Lloyd George's National Insurance Scheme. Unless the Bill is amended in this respect in the Committee stage we fear that many midwives will find themselves deprived of their present meagre means of self-support, as women entitled to free medical attendance, through the insurance societies, will not pay midwives to do this work. If the voice of the voteless woman worker is to be heard on this question her protest must be raised without delay.

### Practical Text-book of Midwifery for Nurses.

An excellent text-book for midwives is that by Dr. Robert Jardine, Professor of Midwifery in St. Mungo's College, Glasgow, and Obstetric Physician and Gynaecologist to the Maternity and Women's Hospital, Glasgow, published by Henry Kimpton, 263, High Holborn, W.C., price 5s., a new edition of which has just been issued. The book is based on the lectures which Dr. Jardine has been in the habit of delivering to the nurses in the above hospital, and is dedicated to the Matron and Nurses of that Institution "in recognition of the zeal and devotion with which they perform their duties."

The author states in his preface that in the Glasgow Maternity Hospital the nurses who have had three years of general training in medical and surgical nursing are now required to take a course of training for four months, and those women who have not had any training in nursing are required to take a six months' course before they are qualified to enter for examination for a diploma.

"Probably," he proceeds, "it will be urged that there is too much in the book for nurses, but I do not think so, and I speak from an experience of the training of nurses of close upon twenty years. In England, midwives are now legalised practitioners of midwifery within certain limits, and before long the same will probably be true of Scotland. It is therefore the duty of those responsible for the training of these women to see that they have a thorough knowledge of their work. A little knowledge is always a dangerous thing, and this is as true of midwifery as of anything else. The midwife who is to be dreaded is the one who knows little, and is quite incapable of recognising anything

abnormal, and not the one who knows her subject thoroughly. Throughout the book I have endeavoured to indicate the conditions in which a midwife would be justified in acting on her own responsibility, and when she should send for medical assistance. I have also tried to indicate what she should do in the event of her being placed in the unfortunate position that she could not obtain such assistance. In common humanity she is bound to do the best for her patient, and to enable her to do this she should be thoroughly trained."

In his introduction Dr. Jardine deplors the fact that while "the course of training for medical and surgical nursing usually extends over a period of three years, to the training of midwives only as many months are usually devoted; yet a midwife who attends cases alone undertakes a much graver responsibility than any medical or surgical nurse, who never works except under the direction of a doctor. The time spent in obtaining experience in midwifery nursing is far too short."

#### ANTISEPTICS AND ASEPSIS.

The scheme of all books on midwifery for nurses and midwives is to a great extent identical, but it is, of course, worked out in various ways. The chapter on antiseptics and asepsis in Dr. Jardine's book is specially admirable. He not only defines the procedure to be carried out, but explains at length the underlying principles which a midwife must understand if her work is to be intelligent. After stating that Semmelweis made the important discovery that puerperal fever was nothing more nor less than blood poisoning in a puerperal woman, the author shows that the microbes causing blood poisoning are, unfortunately, present nearly everywhere, and especially where there is any dirt, and if once they gain access to any part of the body through a wound they quickly multiply, poison the system, and set up fever. The tissues of the body, when in a healthy condition, are able to overcome the action of these microbes to a certain extent. If the resistant powers of the body are below par the introduction of septic material, or microbes, into the system is fraught with very great danger to the patient. During labour, and the puerperium or child-bed period, a woman's system is very much below par, and therefore every endeavour must be made to prevent the introduction of any septic material.

Writing of the advantage of the *aseptic method*, by which organisms are prevented from entering a wound, over the *antiseptic method*, by which one strives to destroy or get rid of any organisms which may find their way into a wound, the author writes: "Can the aseptic method be applied to midwifery work? We believe it can, and from a large personal experience can say that it is the much better method."

"In aseptic midwifery, just as in aseptic surgery, everything which touches the patient in the field of operation must be sterilised or rendered

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