

The Midwife.

DOCTORS' FEES IN MIDWIVES' CASES.

It will be remembered that, at the last meeting of the Central Midwives Board, Miss A. M. Taylor, an Enfield midwife, applied to the Board, through its Secretary, for advice respecting a communication which she received from the Hon. Secretary of the Enfield Medico-Ethical Society, stating that the Society had unanimously agreed that a midwife calling in a medical practitioner in any stage of a confinement must guarantee a fee of not less than a guinea and a half, and that the case must be entirely taken over by the doctor.

Miss Taylor's letter was forwarded by the Central Midwives Board to the Privy Council, and Sir Almeric FitzRoy wrote, in reply, "I have to observe that the medical interests of the Society in question appear to be more prominent than its ethical pretensions, and, that, in my opinion, the correspondence discloses a most improper imposition on the midwife, and one which it is her duty to ignore."

Dr. R. Haldane-Cook, Hon. Secretary of the Enfield Medico-Ethical Society, has sent to *The British Medical Journal* the following letter, which he has addressed to Sir Almeric FitzRoy, Clerk to the Council:—

[COPY.]
Enfield,

23rd October, 1911.

SIR,—My society has asked me to remind you of a communication which you sent recently to the Central Midwives Board concerning Miss A. M. Taylor, a midwife, in which you adverted rather severely on the action of the Enfield Medico-Ethical Society in sending a circular letter to the midwives of this district. There is no doubt that grave censure is well merited in some quarter for the present situation as created by the Midwives Act in most poor districts, and the Central Midwives Board, in its letter of October 12th, "regrets that the Government has not made provision for such cases."

You will probably agree that no work better deserves payment than that of a doctor called by a midwife to conduct a difficult labour. A summons in the night to a slum bedroom to spend possibly two or three hours in hard physical labour, involving a high degree of responsibility, is not a welcome invitation.

The doctors in poor districts are always poor men, and the probability of their obtaining a fee for the services in question may be gauged from Miss Taylor's letter.

One would think that the average person would be enraged that a doctor, called to give aid under

these circumstances, and by sentiments of humanity compelled to give it, should actually in most cases receive no payment whatever. A fee which public opinion would consider adequate is never obtained.

You may say—Yes, I agree that doctors should be paid; but that gives your society no justification for your demand that the midwife should undertake the responsibility of seeing that your fee is paid. Our reply is, that our action in sending the circular is fully justified by its results. The medical profession has tried for years to obtain payment from the local boards of guardians, which have the statutory power to make it in such cases. The indignant cry of a solitary midwife, calling out before she is hurt, at once echoes in the Privy Council!

I am, Sir,
Yours faithfully,

Honorary Secretary, Enfield Medico-Ethical Society.

Sir Almeric Wm. FitzRoy, K.C.V.O.,
Clerk to the Privy Council.

Every one will agree that medical practitioners should be paid, and well paid, but to demand that failing the payment of their fees by the patient or her husband, or by a public authority, the midwife must pay, is neither equity nor justice. Incidentally we may ask: what about the payment of the midwife who is constantly summoned in the night to a slum bedroom to spend hours in hard physical labour. Surely the labourer is worthy of her hire, which should be considerably greater than the pittance she usually receives.

THE STRIKE AND THE DEATH RATE.

MEASURES FOR THE PROTECTION OF INFANT LIFE.

The Special Sanitary Commissioner of *The Lancet* writes in that journal:—

What the population of Liverpool has suffered in consequence of the recent widespread strikes has not been fully explained or realised. Indeed, the after-consequences are still making themselves felt and the death-roll is not yet closed. The pity of it is that it seemed, on the contrary, as if the effort of years was about to receive a well-merited reward. When the number of deaths resulting from epidemic diarrhoea during the first weeks of this year's remarkable summer were compared with the figures of the exceptionally hot seasons of 1897 and 1904 it seemed as if Liverpool would escape the usual consequences of very high temperature. Though the heat this summer was greater than that of the two hottest years of recent times the number

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