UNCERTIFIED MIDWIVES.

For the last two years, the British Medical Journal remarks, the second paragraph of the first clause of the Midwives Act has been in operation. That paragraph provides that "no woman shall habitually and for gain attend women in childbirth otherwise than under the direction of a qualified medical practitioner unless she be certified under this Act." It is clear that the words of the Act "under the direction of a qualified medical practitioner" must be strictly interpreted; they distinctly imply that such direction shall be effective and giver at the time of labour—the intention, in fact, would seem to be to permit an uncertified woman to act only as what is commonly called a monthly nurse. To what extent the practice of midwifery by uncertified women still goes on we do not know, but there is reason to believe that the Notification of Births Act has had some effect in embarrassing such law breakers, irasmuch as that Act requires any person in attendance on the mother at the time of birth to give notice in writing of the birth to the Medical Officer of Health of the district. The obligation on medical practitioners not in any way to countenance the practice of midwifery by uncertified women is both legal and moral, and we believe that it is almost universally accepted. There is, however, a danger that inadvertently a medical practitioner may so act as to render himself liable to a charge of aiding and abetting an unqualified midwife. The Council of the British Medical Association desires to warn members of the profession against this possibility, which could not be regarded otherwise than as a serious professional offence.

THE EFFECT OF THE NATIONAL INSURANCE ACT ON MATERNITY HOSPITALS.

Recently when a deputation representing the Dublin Hospitals waited on the Insurance Commissioners, to put before them certain points as to the influence the Act is likely to have upon the hospitals of Dublin, Dr. Henry Jellett, Master of the Rotunda Hospital. as reported by the Lancet, urged an important point with regard to the maternity benefit. He shewed that at present some 3,000 to 4,000 patients a year are attended in the Dublin maternities for their confinements. At least as many more are attended in their own homes by the students and pupil nurses of the maternities. Under the Insurance Act the maternity benefit will only be paid to women who remain at home and are attended by a qualified practitioner or a certified midwife. This condition directly affects the great majority of the 7,000 women attended by the Dublin maternities. It will probably deter many from seeking the aid of the maternities, and not at all improbably may so deplete the hospitals of clinical material as to render obstetric teaching

difficult or impossible. Moreover, the women will not receive as good attention at home as they now do in hospital. The Master of the Rotunda urged on the Commissioners that they should make it clear to the women affected that in case they entered hospital the benefit would be paid in full to their dependents; and that in case of confinement at home attendance by a student or pupil nurse under the direct supervision of the hospital officers should be regarded as attendance by a qualified person. The question of the insurance of hospital employees, nurses, and probationers was discussed. The Commissioners promised to take the various points into consideration and to discuss them with the deputation at a later date. Another important question is whether the public will be willing—through taxation—to provide for the payment of the maternity benefit and, also, support the voluntary hospitals as liberally as it has hitherto done, in order to pay for clinical material for obstetric teaching, especially when it is by no means certain that this clinical material will be forthcoming. There is no doubt that the Insurance Act, when in operation, will have a profound effect upon the hospitals. Furthermore it is open to question whether lying-in women in Scotland and Ireland will have the right to be attended by midwives other than those on the Midwives' Roll published under the authority of the Central Midwives' Board in London. The term "certified midwife," used in the National Insurance Act, is that applied to a midwife registered under the Midwives Act, which is only in force in England and Wales. At any rate under Clause 18, Section (1) of the Insurance Act, it seems clear that medical practitioners summoned to the assistance of midwives can only recover their fees "as part of the maternity benefit" when "summoned in pursuance of the rules made under the Midwives Act 1902. The position of midwives only holding certificates of Scottish and Irish Hospitals is not defined by statute, and presumably therefore, like that of trained nurses, cannot be recognised, or dealt with under the National Insurance Act. If this is the case the sooner Midwives' Acts are passed for Scotland and Ireland the better, or serious injustice will be done both to midwives and medical practitioners in those countries.

A TERRIBLE STORY.

It is reported from St. Petersburg that a young peasant woman after her confinement in one of the local hospitals in Irbit fell into a state of coma which the nurse in charge of the maternity section took for death. The "body" and that of the still-born child were taken to the mortuary chamber of the hospital and the door as usual was locked for the night. Next morning the woman was found dead of cold huddled against an empty stove, with her baby in her arms. She had wrapped up the baby in her sole garment, a nightgown.

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