

WEDNESDAY, APRIL 24th.

SECOND SESSION.

MIDWIVES AND THE PREVENTION OF DISEASE.

On Wednesday, April 24th, Dr. Marion Andrews presided over the afternoon meeting, and at once introduced the first speaker, Miss Steen, Inspector of Midwives for the County of Nottingham. The speaker began by pointing out that nothing is so costly as disease, and that if midwives could succeed in lessening it, they would have done a great thing. She referred to the emphasis laid by Herbert Spencer on the importance of vigorous health and its accompanying high spirits; and consequently of the importance of teaching on health subjects. She said that the work of midwives lies amongst the poorest—those who are mostly engaged in work, and have no time to acquire knowledge for themselves, who come under the charge of midwives at a time when they are most open to conviction; and that it is the coming generation, more even than the present one, which may, and should be influenced by midwives. If the Midwives Act had been in force ten or twenty years ago, would so many school children need attention to-day?

Cleanliness is, she said, the foundation of all the efforts of midwives—the great safeguard—it is placed first and foremost in the rules of the Central Midwives' Board, and without it the Midwives Act would be a dead letter.

Mothers should be instructed that any delay in obtaining treatment, in cases of ophthalmia neonatorum may result in blindness, or at least in a miserable condition of vision for life; and in other simple hygienic measures. The key-note of the science of hygiene is that it makes life more vigorous, and death more remote. Prenatal influence on the child is so great that mothers should have this fact impressed upon them. They should be taught to avoid stimulants, and that stays should not be worn after the fourth month; stays cause pressure from above, and there is consequently a danger of prolapse; a belt gives support where it is required. Midwives should also advise their patients as to the necessity for the cleanliness of their surroundings. Before a confinement the walls of a room should be washed, or lime-whitened. If there is a carpet, it should be removed; and air should be freely admitted, as the windows in cottages admit only light and not air. The services of the husband can often be requisitioned to attend to these details. Pure air is essential to health, and to live in foul air means a lowering of the vital functions. It is noticeable how many people habituate themselves to a vitiated atmosphere, and in a crowded railway carriage, for example, will close all the windows. It is, however, noticeable, that school children are beginning to prefer open windows. Other points on which patients should be instructed are the method of the disposal of refuse, which should be burnt on the kitchen fire; and the danger of infection by flies; the midwife should acquaint herself with the state of the drains, and, if necessary,

report unsatisfactory conditions to the inspector of nuisances. Defects in the spouting round the roof should be noted. Every house should have a damp-proof course, as if not, damp ascends, and dampness makes a house cold.

One of the audience enquired whether ophthalmia neonatorum could always be prevented?

Miss Steen was of opinion that with thorough care it could be.

Miss Breay enquired whether it was proposed that midwifery pupils should receive instruction in sanitary science during the three months they were preparing for the examination of the Central Midwives' Board, and whether it was considered desirable that that course should be lengthened?

The speaker replied that such simple sanitary matters as she had mentioned only needed a little common sense.

Miss Elsie Hall said that she had had a good deal of experience in training pupils, and what was usually called common sense might be more aptly described as rare sense.

In reply to a question from Miss Steen, the chairman said that the most prominent complication subsequent to child-birth, as seen in the out-patient department of women's hospitals, was chronic pelvic inflammation, which was always due to infection. There was such a thing as auto-infection, but it was not common, and in the days when puerperal fever was rife, the women who escaped were those who had the "good luck" to deliver themselves.

ORGANIZATION.

The next speaker was Mrs. Margaret Lawson, President of the National Association of Midwives, who said that the Conference had considered the duty of midwives to their patients and she proposed to speak of their duty to themselves, which might be comprehended in the word "Organize." Before the passing of the Midwives Act in 1902 midwives had, she said, no social status and no political status. She pleaded with them now to organize and combine. All were inclined to stand aloof from one another. The trained nurse-midwife would not know the woman trained only in midwifery, and the trained-midwife held aloof from the *bona-fide*. Let them take to heart the example of doctors and lawyers, who had the strongest trade-unions and the best organized professions. When midwives were as well organized they would get most of the things they asked for. She instanced the position accorded to women doctors under the National Insurance Act on the Advisory Committee. That was because they belonged to a well organized profession.

Mrs. Lawson said that when she attended the Conference last year it was afterwards stated in a nursing paper that "Mrs. Lawson was the only critic." That was grossly unfair; she was present, she asked the audience to remember, as the delegate and as representing, not her own views only, but the views of 2,000 women in the North of England, and if she did not do so she would soon be called to account. She hoped, however, that when she

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