

The Midwife.

THE MIDWIFERY CONFERENCE.

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THURSDAY, APRIL 25th.

THIRD SESSION.

Dr. R. Murray Leslie presided over the Midwifery Conference on Thursday, April 25th, and, in introducing the first speaker, Dr. Dingwall Fordyce, said that he had the practical experience of a physician to one of the largest hospitals in Scotland, the Royal Hospital for Sick Children, Edinburgh.

INFANT FEEDING.

Dr. Dingwall Fordyce said that at the present day everything to do with baby feeding and the care of babies has become fashionable, and that a great multiplicity of detail has gathered round the subject which is unscientific, and which the leaders know to be unscientific. The human baby is a mammal dependent on its mother's milk for sustenance. The young of the human species is very undeveloped, and for months and years needs extreme care from women. The first point emphasised by the lecturer in this connection was that, though the question of feeding is extremely important, right feeding is practically useless unless the child is adequately cared for by some woman. The problem before the medical practitioner called to treat an infant a few months old with digestive disturbance is that if looked after by some woman it may receive the care it needs, but the directions as to feeding will probably not be carried out. If taken into hospital the feeding will be all right, but the nursing will be insufficient, because the nursing staff is not large enough. In Germany and America the proportion of nurses may be larger.

A baby loses heat very rapidly, it is excitable, its power of resistance to infection is slight. The lining membrane of the stomach and intestines is very delicate, and there is a danger lest prejudicial organisms contained in infected milk should find entrance to the glands and bones, causing tuberculosis: 75 to 80 per cent. of infantile tuberculosis is of bovine origin.

In the case of an infant deprived of its natural nourishment the important thing is to give it something as nearly resembling mother's milk as possible, and also to prevent indigestion. The speaker emphasised the tremendous changes which take place at the time of birth, and said that the first essential is rest, for the first day or two the less artificial food an infant gets the better.

In the case of breast feeding the mother needs advice; often the reason for failure is that she is not feeding the child properly. It should never be put to the breast more often than every two

hours. The amount of milk given at a feed is also important; a rough rule, is to give the same amount of ounces as the baby's age in months; thus for a child of one month the right amount for a feed is one ounce. An ordinary healthy baby may be brought up in many ways, but the sooner a hand-fed baby is put on scalded milk the better.

A nurse who goes to a children's hospital gets a scientific training. One cannot, said the lecturer, speak too strongly against this. She comes away impressed with the importance of citrated milk, and peptonised milk, but there are many much more important things which she ought to learn. It is important that she should possess common sense and be *en rapport* with the patient. Training develops powers of observation and tact.

In reply to questions the lecturer said he should be sorry to trust many of the nurses who go out from children's hospitals with babies. He expressed a preference for the scientific woman who can develop herself along common-sense lines.

Miss Breay doubted whether the training of nurses in the care of infants had as yet received sufficient consideration. As a rule they are admitted to wards with older children; the only hospital with which she was acquainted which specializes exclusively in the care of infants is the Infants' Hospital in Vincent Square, Westminster. If a trained person were not more competent than an untrained one the fault could not be in the fact of training, but rather in its being wrongly directed.

The Chairman said the alternative was whether the balance was in favour of an untrained woman with common sense, or the scientific nurse, but this Dr. Dingwall Fordyce repudiated.

Questions were asked as to the right way to deal with constipation caused in infants by a diet of boiled milk and water, also as to whether infants fed on scalded milk were not likely to develop rickets. The lecturer replied that the cause of rickets is unknown, therefore because a child fed on scalded milk develops rickets this cannot be regarded as cause and effect. But as the danger of contracting tuberculosis through un-boiled milk is a real one he advocated choosing the lesser of two evils, and thought that in the case of rickets versus tuberculosis there can be no question which is the least evil.

MIDWIVES AND THE NATIONAL INSURANCE ACT.

Dr. Marion Andrews, N.I.A., who was the next speaker, explained the National Insurance Act in its relation to midwives. The Act, she emphasised, is now law, whether we like it or not. As Health workers, midwives are only concerned in the first part. In addition to the compulsory insurance there is the voluntary side of the scheme whereby people working for themselves, such as

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