

THE MATERNITY BENEFIT.

In the House of Commons last week Mr. Charles Bathurst asked whether the Health Insurance Commissioners had issued or proposed to issue provisional regulations for the uniform administration of maternity benefit under the National Insurance Act, or whether it was open to each Insurance Committee to make its own arrangements and regulations in reference thereto. Mr. Masterman said that the Commissioners were not authorised to issue such regulations, but they proposed to issue model rules for the administration of benefit by Insurance Committees to deposit contributors. The maternity benefit of members of approved societies was administered by the societies.

The *British Medical Journal* reports that it is uncertain as yet how far the working of the Midwives Act in Manchester may be modified by the administration of maternity benefit under the Insurance Act, as it is probable that a very large proportion of the women dealt with under the Midwives Act will be either insured themselves or the wives of insured persons, and so will be eligible for maternity benefit. At present the town council pays the fees of medical practitioners summoned to the assistance of midwives in the case of women whose family income is below a fixed limit, but when maternity benefit comes into force such fees will be payable out of the insurance funds under Clause 18 (1) of the Act, and in this way there will be a saving to the city rates of several hundred pounds a year. Thus the above figures are of interest.

During 1911 there were 18,583 births registered in a population of 716,734. This is a birth-rate of 25.93, which is the lowest on record. Of these, 10,937 were attended by midwives, and, of the remainder, most were attended by general practitioners, though probably some only received attention from neighbours and relatives, and a considerable number of births occurred in institutions, such as the workhouse infirmaries. The number of cases in which medical practitioners were summoned to the assistance of midwives in accordance with the rules of the Central Midwives Board was 2,729, of which 1,514 were in the private practice of midwives and 1,215 were in connection with the various lying-in charities.

During the year 135 cases of puerperal fever were notified, of which no fewer than 24 occurred after abortion or premature labour. The date of onset of the fever was in 88 cases within the first four days after delivery, while in 39 cases the attack began from the fourth to the tenth day, and in 8 on or after the tenth day. In 44 cases midwives alone were present at the confinement, in 63 doctors alone, and in 28 both doctors and midwives were present. During the year two special nurses were appointed to assist medical practitioners and midwives to attend to the mothers and infants, and also two other special nurses to visit cases of ophthalmia neonatorum.

CENTRAL MIDWIVES' BOARD.

EXAMINATION PAPER.

October 22nd, 1912.

The following are the questions set at the recent examination of the Central Midwives Board:—

1. What are the measurements of the foetal skull? What is the importance of each of them in relation to the pelvis?
2. How would you make sure that a woman is six months pregnant? Describe your examination of such a case in detail.
3. What is the average duration of the first stage of labour (a) in a primigravida; (b) in a multigravida? Under what circumstances may the first stage of labour be (a) shorter; (b) longer than the average?
4. What is the position of the uterine fundus: (a) directly after the child is born; (b) directly after the placenta is delivered; (c) twenty-four hours after the confinement?
5. Describe the umbilical cord; what abnormalities of it may you find, and how may any of them affect the mother and the child?
6. What is "Ophthalmia neonatorum"? What are its causes, and how may it be prevented? What are you ordered by the rules of the Central Midwives' Board to do (a) to prevent it; (b) in case it arises?

MEDICAL FEES IN MIDWIVES CASES.

Dr. Major Greenwood draws attention in the press to the letter sent by the National Health Insurance Commissioners to Clerks of Boards of Guardians throughout the country, stating that the Commissioners desire to avail themselves of the experience of these Boards as to the existing practice as to the payment of fees to a medical practitioner when summoned by (it should more accurately be, on the advice of) a midwife, to attend a confinement case. Dr. Greenwood thinks this application may be regarded by the medical profession with just suspicion, particularly as both the recent reports of the Royal Commission on the Poor Laws severely commented on the general inadequacy of the payment in the Poor Law Medical Service.

HEALTH REQUISITES.

MRS. EVALINE'S HEALTH REQUISITES for ladies deserve the attention of nurses and midwives, as these Towellettes are noted for their comfort, their perfect softness and their high absorbent qualities. They are sold in a variety of sizes in packets of one dozen from size E1 at 1s., to E4 at 2s., and E6 at 2s. 6d., which are provided with an additional hank of specially absorbent cotton. They can be obtained from all leading drapers. The hospital or accouchment sheets from 1s. to 2s. are also to be commended.

[previous page](#)

[next page](#)