

so that, in the former case, she would become practically an Obstetric Physician, in the latter a Midwife-Nurse, each high and most useful positions, each well defined, and both entirely distinct from the low-class Midwife whom this Bill would create. Secondly, that a systematic Hospital training is imperative, of not less than one year's duration, during which the would-be Midwife should receive not only a thoroughly practical training, but also a complete course of theoretical instruction. This would lead to advance and improvement. The provisions we have criticised could only bring about retrogression and accentuate the evils of the present system.

OBSTETRIC NURSING.

— BY OBSTETRICA, M.B.N.A. —

PART I.—MATERNAL.

CHAPTER VII.—THE LOCHIAL PERIOD (DUTIES DURING).

(Continued from page III.)

OUR next point is to find out the deficiency in cream. For this purpose we require our test glass, cylindrical in shape, seven inches high, and two inches in diameter. At the top of the glass is a small graduated scale, consisting of five long, horizontal lines, having the Figs. 0, 5, 10, 15, 20 respectively placed on them, with sixteen short lines to mark intermediate distances. Assuming that the milk in the cylinder is rich in cream, the layer would extend from Fig. 20 to Fig. 0; if deficient, from Fig. 15 to 0, or 10 to 0, 5 to 0, and so on, becoming rare by degrees and beautifully less. The only peccadilloes of Mr. Chalk's that we can in a measure condone is the subtraction of a portion of the cream from our milk for commercial purposes; but the addition of water is an unpardonable offence in my eyes, for a very little reflection shows us how greatly it interferes with the natural and perfect proportions of the milk constituents; it deteriorates the food value of every one of them. Like a false note in a melody, it throws them all out of tune.

We have considered water, fruit, and milk: we have now come to eggs, an invaluable alimentary substance for our patients. In country houses we have no difficulty in getting them newly laid; in towns we must buy them, and remain in ignorance of the hens that laid them (which, in most cases, is "bliss"). When we have to buy eggs, our best chance to get them good is not to "haggle" about the price, for the dearest are most likely to be the best. What is an egg? It consists of four portions—the ovisac, or shell, the yolk, the germ, and the white. The

first is of no nutritive value, but it guides us as to quality, for it is only in well cared-for country hens that the shell is perfectly formed. It should be smooth in texture; white, brown, or brownish-pink in colour; and when broken the interior of the shell should be a delicate pinkish-white. It is lined with a beautiful fine tender membrane, called the synovial membrane, from which the shell is formed by having minute particles of phosphate of lime (a combination of oxygen and calcium) effused into the interstices or cells during the passage of the egg through the oviduct. The yolk, or *vitellus*, consists chiefly of oil globules and albumen, and floating in this fluid is a very distinct nucleus termed the germinal spot or germ, commonly called the "tread." The white or albumen, which is found in all the nutritive fluids of the body, and is analogous to the serum of the blood, contains a minute portion of sulphur, and, as you know, it coagulates by heat.

Eggs may be taken cooked or uncooked. We will take the last first, for I think we may conclude that the general consensus of medical opinion goes to show that they possess more nutritive properties for our sick in the raw state; and then, again, are we to give them plain, or mixed with something else? and, if so, what? Let us first consider under what conditions we have to administer them; in our case to renovate, or help to renovate, the tissues wasted by the fires of inflammation, and what we most rely upon is the tissue-forming albumen—the white of the egg—and it is this substance that undergoes such a remarkable change under the influence of heat, passing thereby from a soluble to an insoluble condition, and a little reflection will show us that the former is the more assimilable, and this point must be our guide in giving eggs as food for the sick. If we decide upon the uncooked egg, how shall we give it? and what will be the best time?

First, as to method. My own experience, personal and professional, leads me to the conclusion that a small quantity of pure cold water—distilled if you have it—is the best substance to mix the egg with, and I prefer to give it, or take it, on an empty stomach, and this is how to prepare it. Take a perfectly fresh egg, crack it into a clean breakfast cup; take out the "tread," beat the egg up to a froth, reducing the albumen to a state of fine division—you can hardly beat it too much. Get two ounces of pure cold water, and add a good pinch of salt to it, and pour it in gradually to the egg, beating it all the while, and give it to the patient in a foaming condition. There are not many women who will not take a raw egg in this wise. There is very little taste

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