

benign examiner who had no exalted standard for a midwife, she might gain her certificate, but it was ill gotten, for the mass of knowledge rapidly and ill-assimilated would be readily forgotten, and unless she happened to be a very exceptional woman the "little knowledge" would prove a "dangerous thing."

In regard to the midwives as supervisors the speaker said that the personal factor played a considerable part. They signed the pupil as having conducted and nursed her cases to their satisfaction, the degree of efficiency that satisfied the various supervisors varying very greatly. A pupil who could not keep her hands surgically clean in conducting a delivery was no phenomenon. That was a point which needed inculcating at every delivery. She would rather a patient delivered herself without assistance than be delivered by a pupil whose hands were not surgically clean.

The work of supervision was no sinecure. It needed the vigilance, persistence, and resource of a Suffragette, the enthusiasm of a Florence Nightingale, the devotion of an Elizabeth Fry, the understanding of an Elizabeth Barrett Browning, and the patience of a mother. Supervisors should set before themselves high ideals and agitate for larger opportunities and wider education for pupil midwives.

In regard to the midwife as coach, Miss Haydon pointed out that this was often a self-imposed task, as the only responsible teacher was the medical man approved by the Board. Midwives attached to training schools were generally given a capitation fee for coaching, which was only just.

The coach was to-day merely a "crammer." There was no help for it unless the present ridiculously short period of training were lengthened but midwives acting as coaches should see to it that they did their part in keeping up to date, and developing the reasoning powers of their pupils, in stimulating them to scientific study, in raising the standard of their profession, and in reducing human suffering and misery.

#### OPHTHALMIA NEONATORUM.

On Thursday afternoon, April 24th, Mr. Bishop Harman, F.R.C.S., gave an address on "The Ophthalmia of the New Born." Miss Macdonald of Salford presided.

The speaker said that of 12,000 children born in London the eyes of one in every hundred are affected, and one in every thousand damaged by this disease. He pointed out that ophthalmia neonatorum was not due in all cases to venereal disease in the parents, though this was so in much the greater proportion of cases.

If pus appeared in the eye or eyes of a newly born babe, it was the duty of the midwife to obtain medical treatment without delay. She should also remember that it was very contagious and could be contracted either by the midwife herself or other members of the family. The speaker mentioned one case in which the eyes of a mother,

the baby, and three other children were affected, and the girls had vaginitis as well.

The disease could be dealt with in two ways, by prevention and by prophylaxis. In this connection it should be remembered that the baby's towels must be kept separate, and the mother's towels. Credé method, as used in the lying-in wards at Leipsic was described, the speaker reminding his audience that silver nitrate had an irritating effect on the eyes.

Treatment consisted of washing out the eyes frequently and repeatedly, and the Medical Officer of Health should be notified. The speaker looked forward to the time when every case would be removed to hospital, in the first place because the child's eyes needed constant attention day and night, and in the second because the mother usually needed treatment also.

#### VENEREAL DISEASE.

Dr. J. S. Fairbairn gave the second lecture of the session, the subject being "Venereal Diseases," which he sub-divided into the three classes of gonorrhœa, syphilis, and local ulcer or soft sore. He described gonorrhœa as principally a local infection, in women of the vagina, cervix, and deep glands. It might spread to the uterus, and up to the Fallopian tubes, and so to the abdominal cavity, giving rise to abscess. It was a serious disease in women, and might cause sterility. It did not, however, get into the blood or be passed on from one generation to another.

Describing syphilis, the lecturer mentioned the difficulty of recognition in a chronic stage. When it was acute and recent there was no difficulty whatever about it. It caused a general constitutional disturbance, but infection did not show itself for three or four weeks.

The speaker emphasised the importance of prolonged treatment for the cure of syphilis, and the difficulty of getting patients to present themselves for it when the acute symptoms had subsided. At least two years' treatment was necessary to be effective.

#### THE LONDON COUNTY COUNCIL.

The Midwives Act Committee of the London County Council have elected Mr. L. Courtauld to be their chairman, and Dr. Annie McCall to be their vice-chairman for the ensuing year.

The Committee has reported to the Council that in December last they reported to the Central Midwives Board that a *prima facie* case of malpractice, negligence and misconduct had been established against a midwife pursuing her calling within the Administrative County of London. At the next penal meeting of the Central Midwives Board the name of the midwife was removed from the Roll.

Legal proceedings were instituted against a woman for habitually and for gain practising midwifery contrary to the provisions of the Midwives Act, and a conviction secured.

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