

human skill and a little common sense would save them.

The Hon. Harry Lawson, M.P., said that he was obsessed by the national shame, and the national loss, evidenced in the facts and figures of infantile mortality. The impairment of vitality was also terribly revealed in the figures of the Board of Education in regard to children attending the elementary schools.

It was decided to refer the question to a committee for consideration and subsequent report.

Dr. Goring has said "Within dwells the potentiality for growth, but without stands the natural right of every child born into the world—the right to possess every opportunity of growing to his full height." It is for the adult community to see that the babies are not deprived of their rights.

### THE NEEDLESS LOSS OF INFANT LIFE.

Dr. F. Truby King, speaking last week at the University of London on the health of the women and children of New Zealand, quoted the rate of infant mortality in various capitals of Europe as follows:—

- London slightly over 11 per cent.
- Paris 12 per cent.
- Berlin 15 to 20 per cent.
- Vienna 15 to 20 per cent.
- St. Petersburg over 25 per cent.
- Moscow over 25 per cent.

He stated his experience that the further one travelled eastwards the greater was the exclusion of fresh air from the houses, and the higher the temperature at which they were kept, and this high temperature was a most potent factor in undermining and enervating the health of the children, and making them fall a ready prey to disease. Some of the cities which seemed so magnificent to the passing visitor had no proper sanitary arrangements. The houses did not breathe.

It is satisfactory that Dr. Truby King commented on the amazing improvement of the sanitation in London during the last twenty years, especially in the slum areas.

The speaker gave some details of the Society for the Health of Women and Children, known as the Plunket Society, in New Zealand. Unlike most societies with similar objects in this country which generally began with the submerged classes, the Plunket Society began with the more cultured people and worked down. It had forty nurses going about the country helping the ignorant mothers, and no woman in New Zealand was left without a nurse during the babyhood of her children. He was of opinion that by the adoption of a similar system in this country the infantile mortality might be reduced by one-third in six years.

Nothing is of greater importance in the care of an infant than its feeding, for food is required to build new tissue, as well as to replace tissue waste, and to supply warmth and energy.

### THE CENTRAL MIDWIVES BOARD.

#### EXAMINATION PAPER.

The following is the examination paper set to candidates for the examination of the Central Midwives Board on December 12th.

1. How would you diagnose a third vertex presentation? What difficulties may arise, and how might you foresee them?

2. Describe in detail your management of the third stage of labour. Give an account of the process whereby a placenta is normally (a) separated; (b) delivered.

3. What is meant by (a) Retention of urine, (b) Incontinence of urine?

How would you ascertain the causes of the latter in a patient during the first days of the puerperium?

4. What is the cause of after-pains? Under what circumstances do they occur, and how would you recognise and treat them?

5. What rashes may a baby develop during the first ten days of its life? Are any of these serious, and how would you distinguish and deal with them?

6. For two months a patient has had frequent slight hæmorrhages from the vagina. On abdominal examination there is a tumour the top of which reaches  $4\frac{1}{2}$  inches above the symphysis pubis. How would you decide if this tumour were the pregnant uterus, and, if it were, what period of pregnancy would the patient have reached, and what would you do under such circumstances?

### A MATERNITY ALMONER.

The Committee of the London Hospital propose to appoint a maternity almoner, with the New Year, to be responsible for the giving out of letters, and to settle with the patient the proportion of the insurance benefit to be handed over to the hospital as a contribution.

### PRE-NATAL CARE.

In the last annual report of the Victorian Order of Nurses, the Chief Superintendent urged strongly that provision be made by each local association for more pre-natal visiting, and for the continuation of visits to the babies to the end of the first year at least. No means can be more effective in the child welfare campaign than those two suggested.

In this connection *The Canadian Nurse* draws attention to a concise monograph entitled, "Pre-Natal Care," by Mrs. Max West, the first of a series on the care of children which is being issued by the Children's Bureau, Washington, D.C.

The Ladies Committee of the Glasgow and Women's Hospital are appealing for gifts of old linen which will be gratefully received and acknowledged by the Matron at the Hospital, Rotten Row.

[previous page](#)

[next page](#)