The Midwife.

MATERNITY BENEFIT AND OBSTETRIC for in-patients), but three of them now ask or propose to ask payment. The general result

Mr. Edgar S. Kemp read a paper in May before the Council of the Charity Organization Society in which he analysed the results of an inquiry into the effects which the receipt of maternity benefit by patients had had upon the various institutions which dealt with lying-in women in London. The paper has been published in pamphlet form, and contains some information of importance in respect of the working of the maternity benefit part of the Insurance Act. It was found that there were nineteen institutions in London (apart from Poor Law infirmaries) which provided treatment for women in childbirth as in-patients or out-patients; of these five were lying-in hospitals, treating both inpatients and out-patients; two were maternity charities with out-patients only; and twelve were general hospitals with medical schools and with in-patients and out-patients in some instances, and with only out-patients in others. The five lying-in hospitals were the institutions most affected by the maternity benefit section of the Insurance Act; in 1913, as compared with 1912, the in-patients showed a reduction of 12 per cent., and the out-patients of no less than 41 per cent.; it is to be noted that in each of these hospitals the money charge was increased, or one was imposed where none had been previously demanded. Further, three out of the five made a fixed charge. To whom have the women who have left the hospitals gone? The answer is that district midwives attached to hospitals are now treating privately numbers of women who are in receipt of the 30s., and who would previously have applied to the hospitals. With regard to the two maternity charities, one showed a drop of 61 per cent. in its patients, whilst at the other about as many cases were dealt with in 1913 as in 1912. At the latter the women always paid according to their means, but after the benefit became available they were charged more (ros. 6d. or 12s. 6d.); in the former no charge at all had been or was made, but the production of a "letter" was demanded. The explanation of the big falling-off in the numbers treated at this charity was, however, easily found; no women in receipt of maternity benefit were given treatment in The committee has, however, reconsidered its policy, and insured women are now dealt with free of charge on the production of a "letter." With regard to the twelve general hospitals, there was found to be a falling-off of 13 per cent. in the out-patients in 1913, but the in-patients varied only slightly. None of the twelve made a charge before the Act came into operation (except St. Thomas's, which made a small charge

or propose to ask payment. The general result is that nine out of nineteen institutions are now making a charge; in three, it is a fixed charge; in three, payments are assessed after inquiry by an almoner; and in the three others, payments are invited and accepted without inquiry. In the majority of the cases the contributions are paid by the patient or her husband; but in some instances payments are made direct by the approved societies, sometimes with the help of an almoner who assesses the amount. There would seem, however, to be doubt as to the strict legality of some of the ways in which moneys have been handed from the society to the hospital. Some of the secretaries of institutions which exacted no payments stated that many of the women were quite unable to part with any of the 30s., for "it was often ear-marked already for back-rent, redemption of clothing from pawn," &c. With regard to the three methods of exacting or soliciting payment (the fixed charge, assessed payment after inquiry, and the simple invitation of contributions), Mr. Kemp does not state his preference, although he quotes one matron who reported very favourably on the third. After all, a good deal depends upon the necessities of the institution itself; if it has to supply cases for medical students and midwife pupils and is finding difficulty in so doing it will be tempted to make no charge and to exercise no discrimination. Mr. Kemp thinks it is doubtful whether the plea of keeping up the medical school is a sufficient excuse for some of the methods employed to attract cases; he is of opinion that a preferable plan would be the better allocation of the ground to be covered between the various competing institutions. He mentions the fact that a few square miles to the north of Oxford Street are served by four general hospitals, by a lying-in hospital, a maternity charity, the out-patient midwives of another lying-in hospital, and a women's hospital; certainly it would be well if these various institutions were not jostling each other closely. The report is of considerable value, and it seems to show that the coming of the maternity benefit has had a serious immediate influence upon maternity hospitals and the maternity departments of general hospitals; that the best way of adjusting these institutions to the new conditions has not yet been discovered, and that, in particular, the money difficulty has not yet been got over in a perfectly satisfactory way. It is doubtful if the money difficulty can be got over at all without a recasting of some parts of the Act.—British Medical Journal.

Benger's Food, Otter Works, Manchester, for infants, invalids and the aged is to be commended as highly nutritious and easily digested.

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