## ANTE-NATAL HYGIENE.

Lady Barrett delivered a lecture on Ante-Natal Hygiene at the College of Ambulance, Vere Street, on May 19th, under the auspices of the Infant Welfare Association.

The lecturer said she was glad to see that her audience contained so many nurses and midwives. Even the youngest there would recognise that ante-natal hygiene was a very modern note. Why was it necessary? Because of the loss of infant life and maternal life from preventible causes. In both cases an enormous proportion could have been saved if the causes which led to their death had been recognised in time and treated. Premature birth, specific diseases, atrophy, marasmus, in the infant could be traced to preventible causes.

The lack of resistance in the first year of life was stated by Dr. Newsholme to be due to its previous malnutrition, which referred to its ante-natal existence. With regard to maternal deaths, there was hardly one that could not have been prevented if taken in time. Every midwife should ask herself when first engaged, "Am I dealing with a perfectly normal case?" It was of the first importance "to know when you don't know" and to call in expert advice. Ante-natal clinics should help midwives enormously, and she felt that midwives had not welcomed them

as it had been hoped.

The greatest valuable experience was gained after being qualified, and if midwives would go with their patients to the clinics they would always be getting valuable instruction. These clinics were all to the advantage of the midwife for there they could get advice without the risk of losing their patient. All difficult cases should be able to obtain expert advice. It was the duty of the midwife to call in the general practitioner, who, in his turn, could obtain a specialist if necessary. In the vast majority the saving of a life depended on taking the first step, which fell to the part of the midwife.

Puerperal fever the lecturer instanced as illustrating the value of ante-natal care. Though no doubt, many women were exposed to infection from which no bad result followed, the ill-nourished, overworked woman would be more likely to succumb. Besides the actual saving of life, the preserving of health of the mother for future pregnancies, and for the efficient discharge of all

home duties, was all important.

The lecturer concluded her lecture by urging the gospel of cleanliness of person and the wearing of suitable clothes. Abdominal belts, when necessary, she considered ought to be provided in the pregnant state in the same way as any surgical appliances were provided for other conditions.

The next examination of the Central Midwives Board will be held in London, Birmingham, Bristol, Leeds, Manchester, and Newcastle-on-Tyne on June 19th.

## THE NEED OF WELSH SPEAKING MIDWIVES.

Mr. G. Arbour Stephens in a letter in the Western Mail draws attention to the very great need of Welsh speaking midwives, in the hope that something may be done to meet it.

He writes :--

"There are many Welsh women who are by practice quite capable of doing the work of midwives, but owing to the fact that they are required to attend lectures and pass examinations in midwifery in the English language they are unable to qualify themselves.

"At the present time, when doctors have their hands full, the problem becomes very pressing, and I think we in Wales ought to have a Welsh Midwives' Board for the control of the education and examination of candidates.

"Three years ago I tried to induce the authorities of the Welsh University to take an interest in the education of nurses in Wales, and by issuing a diploma help thereby to standardise the qualification throughout the Principality.

"For reasons which I could not appreciate the authorities refused, preferring to remain the Welsh University rather than the University of

Wales.

"Unsympathetic methods have brought the Welsh University to its present miserable condition, which has necessitated an investigation into its work by the recently-appointed Commission.
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"'What is the remedy?' is the question that naturally arises, and I would suggest that as the Insurance Commissioners have to do with the medical treatment of the people they might also deal with their nursing.

"This can be done by their appointing a small committee to act as a Welsh Midwives' Board, or, rather, a Welsh Nursing Board, whereby its functions might be made to embrace all nursing

matters connected with the Principality.

"There are several places in Wales where nurses are trained, but at present there is nothing to act even as a connecting link between them. Under such a Nursing Board, however, matters could be arranged whereby part of a nurse's training should include district and midwifery work, and in this way help to solve the problem of nursing in the more outlying districts."

The suggestion to make the Insurance Commissioners the authority on nursing and midwifery matters in Wales is obviously impracticable as the issues involved are much larger than the care of insured sick and maternity patients. So far as midwifery is concerned it must be remembered that a very limited number of examiners could lecture in Welsh, and so far as we know no text book on midwifery is published in that language. If, therefore, midwives are to have adequate instruction they must understand English, though we are of opinion that if their patients speak only Welsh it is important that the midwives should be able to speak to them in their mother tongue.

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