

The Midwife.

A MINISTRY OF HEALTH.

There are indications that the Ministry of Health, so long needed, will soon become a reality. At the Annual Conference at the Central Hall of the Faculty of Insurance, Approved Society officials, and members of Insurance Committees, Mr. Kingsley Wood, a member of the National Insurance Advisory Committee, announced that legislation of a far-reaching character will shortly be introduced, greatly extending the scope of National Insurance, by providing bigger maternity benefits, and additional provision for insurance work. It was Mr. Lloyd George's ideal when he launched the insurance scheme that it should be the foundation of a great Ministry of Public Health unassociated with any department connected with the poor law. Six million pounds has already been paid in maternity benefit, and Mr. Kingsley Wood considers that the Maternity Benefit will have to be raised to £5, and this and other necessary and desirable suggestions have already been placed before the Government.

Mr. J. H. Thomas, M.P., in his address as President of the Association of Approved Societies, on March 31st expressed the hope that the Ministry of Health would be a real Ministry, and not a mere appanage of the Local Government Board.

It is suggested that the Local Government Board should be renamed, which, it is believed would coincide with Lord Rhondda's wish that his department should become the great health department of the country.

STERILIZING FACILITIES FOR MIDWIVES.

Miss M. Christoffersen, certified midwife, expresses in *Maternity and Child Welfare* her own wish and that of a great many other district midwives for some arrangement by which they may be able to get things thoroughly sterilized for their professional use. She writes:—"It is evident that no district midwife would ever be able to run to the expense of a high-pressure sterilizer; but it seems to me that the Public Health people would be able to help us over the difficulties, if only someone would take it in hand and make a start.

"On a recent visit to my native country, Denmark, I had the opportunity of seeing how the Danish district midwives are managing. On starting or taking over a district practice the midwife receives from the Public Health Department two good-sized sterilizing drums; she fills them with the things required, and they will then be fetched either on request, or she can arrange that they shall be called for regularly every week or once a month, according to the size of her district; they are then delivered to her within

twenty-four hours. This, of course, is done free

"The particular midwife whom I visited took great advantage of the arrangement. She had any amount done, as, for instance, all the cotton wool she used, pads, cord-dressings, case-bag linings, towels for use in forceps delivery or for use in specially dirty houses, white overalls neatly done up in small jaconet bags so as to keep them in the patients' houses—one separate for each patient—and so on.

"Now, I do not see why we should not be able to have a system worked on the same principles here in England. I feel sure that every district midwife, whose interest it is to keep her work at the highest standard, would be very pleased for the advantage it is to have sterilized material to work with."

The plan seems an admirable one, and we commend it to the notice of Local Supervising Authorities.

THE TREATMENT OF PUERPERAL SEPSIS BY THE CARREL-DAKIN METHOD.

The following interesting communication has been made to the *British Medical Journal* by Dr. John Campbell, F.R.C.S. Eng., Surgeon to the Samaritan Hospital for Women, Belfast; late Surgeon to No. 5 British Red Cross Hospital, B.E.F., France:—

During my period of service in France I was much impressed by the success attained in the treatment of large septic wounds by the Carrel-Dakin method, and it occurred to me that a similar kind of treatment would probably be useful in many cases of puerperal sepsis. A tube or tubes of suitable length could be introduced into the uterine cavity, and once they were in position it would only be necessary for the nurse to undo the clips, and inject an appropriate quantity of Dakin's solution every hour or two hours. The only disturbance of the patient would be that required for the introduction of the tubes. The subsequent treatment could then proceed with the minimum of discomfort to the patient and without any manipulation of the uterus.

I am convinced that in this method we have the possibility of a great advance in the treatment of a condition which has hitherto baffled medical and surgical resources.

CENTRAL MIDWIVES' BOARD FOR SCOTLAND.

The next examination of the Central Midwives Board for Scotland will, if a sufficient number of candidates enter at each centre, take place at Edinburgh, Glasgow, Dundee and Aberdeen, on Monday, April 30th, 1917. Schedules may be obtained from the Secretary, Mr. D. L. Eadie, 50, George Square, Edinburgh.

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