August 25, 1917 The British Journal of Mursing Supplement.

The Midwife.

THE MATERNITY NURSING REQUIRED OF MIDWIVES.

In her Report to the Local Government Board on the Provision of Midwifery Service in the County of London, Dr. Janet E. Lane-Claypon writes as follows on the subject of Maternity Nursing :---

There is no general standard of maternity nursing as practised by midwives, nor are those who may be regarded as competent judges agreed as to what should be considered to be the duty of a midwife in this respect. It is probable that if considerations of time and money were eliminated opinions might become more uniform.

There are some institutions and some midwives whose sense of the need for adequate maternity nursing is so great, that they devote full attention to this important work at the expense of much personal effort, time, and often actual cost.

In many cases, however, the standard appears to conform to what can be carried out by the existing staff or by the individual midwife, without additional expenditure of money or undue personal effort. The divergence of opinion and practice is frequently entirely based on finance.

If the staff of an institution is overworked, money must be found for additional staff or the nursing work neglected. If a midwife is overworked, she must either refuse cases, take an assistant, or diminish the amount of nursing of her cases.

There is substantial agreement among those practising the highest standard of maternity nursing, both among practising midwives and those connected with institutions. The chief items of difference are in regard to what is practicable in view of the conditions of the individual home, and not in regard to what should be considered the duty of a midwife.

The two persons concerned are the mother and the baby. The midwife under her rules is responsible for the well-being of them both during the ten days following the confinement, although specific directions are not laid down for her.

The aim of maternity nursing for the mother is to prevent the supervention of any septic condition during the puerperium, and to secure such conditions of cleanliness and general comfort as shall conduce to her speedy recovery. Cleanliness is essential, and the use of disinfectants for the mother is required. The highest standard enjoins daily, or in some cases more frequent, antiseptic washing, with general cleansing of the mother's body. Some wash the mother all over two or three times during the ten days, and wash the upper part of the body and brush the hair daily for the first few days, after which the mother

is usually well enough to perform this service for herself. Careful attention is also directed to the condition of the breasts. In order to ensure a satisfactory condition of cleanliness changes of clothing and of sheets are necessary, and the midwife should be responsible for the cleanliness and order of the bed if she does not actually make the bed at her daily visit.

127

The provision made by the mothers for these last matters are very generally stated to have shown marked improvement of recent years, partly, no doubt, owing to greater care on the part of the midwives since the Midwives Act came into operation, and also partly to the maternity benefit. It is stated that the complete absence of any sheets is now rare, and that some change of clothing is usually provided for both mother and child, while in a number of cases the provision is quite satisfactory.

Midwives who work in the poorest districts complain a good deal of the need for disinfection of the bedding, and even where the midwife would prefer to make the bed herself she may find the bedding too dirty and verminous to undertake it. The condition of the bedding should be inquired into before the confinement in order that the local sanitary authority may, if necessary, disinfect it before the confinement. If the midwife visited in the home beforehand this could be attended to if tact were exercised.

Attention is required for the infant for similar reasons as for the mother. Umbilical sepsis is stated not to be a rare cause of death in the early days of life, although the figures cannot be given.

Minor troubles, however, arise from inattention to the umbilical cord, and the frequency of umbilical hernia among infants in this country suggests that proper attention may not be paid to the condition of the cord in the early days of life.

It is unnecessary to bring forward any figures as to the prevalence of umbilical hernia; anyone who has attended the practice of a children's outpatient department, or an infant welfare centre, must have been struck by the great number of these cases.

There can be no question that the care of the cord is one of the duties of a midwife, and should be attended to personally by her. Inasmuch as the washing of the baby is closely connected with the care of the cord, the former must be included as a daty of the midwife, at least until the cord has fallen off and the scar healed. A high standard of maternity nursing requires that the midwife shall wash the baby during the whole period during which she is responsible for its well-being.

The above considerations show that the duties of a midwife as maternity nurse make large demands upon her time, and to the busy midwife time is money. It is easy to see how maternity nursing may amount merely to a cursory antiseptic



