

washing of the mother, a glance at the condition of the bed, a hasty sponging of the face and lower parts of the infant, and perhaps a rapid survey of the condition of the cord, the rest being either left entirely or relegated to the untrained handy-woman.

It is evident that, owing to a call to another confinement, the midwife occasionally cannot devote full attention to her maternity nursing. This, however, is another matter, and is outside the considerations advanced above.

The amount of time required for the adequate maternity nursing of a case will depend a good deal upon the amount of preparation made for the midwife by the handywoman, in the way of hot water, &c., and also upon the period after the birth, since more attention is required in the early days.

Experts with great experience will not, for these reasons, specify any definite time for the performance of these duties, and a good deal also will depend upon the individual midwife. All are, however, agreed that in the early days the work cannot be properly done in less than three-quarters of an hour, and may take as long as 1½ hours a day for several days.

The importance of maternity nursing is being increasingly realised both by experienced midwives and by the mothers, and there seems little doubt that many women are willing to pay rather higher fees to the midwife who is known to give good maternity nursing.

### THE PREVENTION OF DISEASES OF INFANTS AND CHILDREN.

Miss Ellen C. Babbit presented a paper on the above subject of practical interest to midwives as well as to trained nurses, at the twentieth annual meeting of the American Nurses' Association. She said in part:—

The subject as assigned, presents an interesting picture to the mind's eye. In the background there is the venerated Dr. Jacobi establishing, in 1860, the first clinic in America for the study of the diseases of infants and children. In the middle distance, nurses are at work in the homes taking care of sick children during the summer months. In the immediate foreground the scene is decidedly changed. Instead of physicians and nurses working over the individual sick children, there are mothers bringing well babies to health centres, there are nurses going into the homes teaching there the laws of health. "Keep us well" is on the banner under which thousands of children march.

The preventable diseases of infants and children which make special demands on the graduate trained nurse fall into four general classes: (1) The congenital diseases; (2) the intestinal disorders; (3) diseases of the respiratory system; (4) the communicable diseases.

The modern demands on the graduate nurse who wishes to devote her energies to the congenital diseases are demands based on the splendid

success which has followed upon the earnest and devoted efforts of those nurses who have been doing prenatal work. Not only has the mortality in the first weeks of life been lowered wherever the expectant mothers have had intelligent care, but the babies who have lived have been stronger, healthier babies, the percentage of breast-feeding appreciably higher, and the still-birth rate has been lowered. There are no terms by which the kindly service may be measured which the nurses have given, and yet this has been of incalculable value to many a mother. A trail has been blazed by the nurses who have done this prenatal work, and there is urgent need of more nurses trained to carry on this work. The work that has gone forward in supervising babies' feeding has been so successful that the problem of the high summer mortality can be solved where a sufficient number of nurses can be employed to instruct the mothers. The death rate from gastro-enteritis, compared with varying scales of living, shows that in the years 1905 to 1909 the mortality from these diseases among the rich was 0, among the fairly well to do 5.9, among the poor 33.8, while among the very poor it was 60.3. The nurses took to the homes of the very poor some of the elements that saved the babies of the rich, and now the death rate is very, very much lower among the three latter groups. The modern graduate nurse must know how to work with various tools—the equipment of the kitchen in the alley is not at all like that of the exquisite diet kitchen in which she learned how to prepare formulas. Her knowledge of food values must be adjusted to an actual family budget of strange proportions. The nurse must be able to help the mother select proper foods, and also to teach her how to prepare them and this, too, with make-shift utensils.

The graduate nurse who is willing to cast in her lot with those who work for the prevention of disease amongst infants and children must have imagination, and an "understanding heart." She must have a redeeming sense of humour, for with the precious ointment of mirth many difficulties may be overcome. She must be brave in meeting the disappointment that comes when a family fails to live up to a standard she thinks she has established. The nurse who takes upon herself the yoke of the prevention of disease in infants and children meets not only modern demands, she was described long, long ago by Paul, she "suffereth long and is kind. She is not easily provoked. She beareth all things, believeth all things, hopeth all things, endureth all things."

For a number of years the maternity nursing in connection with out-patients at Charing Cross Hospital has been undertaken by Ranyard nurses. As we announced last week the Committee of the hospital has now appointed a resident Midwife Sister, who, with the assistance of a staff nurse, will undertake the District maternity work, and will attend students' cases, a system which no one welcomes more heartily as a rule than medical students themselves.

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