# The Midwife.

# THE DAWN OF A NEW ERA IN OBSTETRICS.

The report of the proceedings of the Section of Obstetrics and Gynaecology at the eighty-eighth Annual Meeting of the British Medical Association recently held at Cambridge, published at length in the *British Medical Journal* of August 21st (the official organ of the Association) is not only extremely important but of absorbing interest.

The President of the Section, Dr. Herbert Williamson, F.R.C.P., in opening the session said in part :----

"Our Meeting this year is one of peculiar importance, for we see on the horizon the dawn of a new era in obstetrics. . . The State is awakening to the fact that in the past it has failed to discharge its debt to the mothers of the race, and has grossly neglected the things which make for their safety and happiness; there is to-day a sincere desire to correct these errors, and the questions involved are receiving an earnest and disinterested consideration such as has never been accorded them before.

" I will indicate briefly why the subject of puerperal sepsis has been chosen for our discussion this morning. In the first place we have come to realise that obstetrics is essentially a branch of preventive medicine. I do not think it is speaking too strongly to say that it is the most important branch of preventive medicine. The dangers of childbirth are to a great extent preventable, and the more clearly this idea is grasped and acted upon by the medical profession and the general public the lower will be the puerperal mortality and morbidity. . .

"In the second place from amongst the horrors of war there has emerged a clearer conception of the principles of wound infection, and particularly of muscle infection, than we have ever had before. It is essential that we should, without delay, apply the knowledge we have gained to the treatment of that infected muscle the septic puerperal uterus."

### DISCUSSION ON PUERPERAL SEPSIS.

The introductory paper on Prevention and Treatment was presented by Dr. Victor Bonney, M.S., B.Sc.Lon., F.R.C.S.Eng., from which we extract some of the points of interest to nurses and midwives, but strongly advise those who are able to read the paper in its entirety. Prevention is a point with which they are intimately concerned.

## PREVENTION AND TREATMENT.

The solution of the problems how to prevent and how to cure septic infection of the puerperal uterus necessitates the correct answering of three fundamental questions:

1. What is the original source of the organisms ?

How do they get into the uterus ?
What is their exact situation by the time they have produced symptoms of sepsis ?

#### THE ORIGINAL SOURCE OF THE ORGANISMS.

In nearly all severe cases of puerperal sepsis the streptococcus, either alone or in conjunction with *B. coli communis*, is the predominant organism. The infection may be either autogenous or heterogenous—that is, the organisms may have been resident in the patient before the confinement, or may have been introduced from without during its course or afterwards. Which of these two happenings, infection from extrinsic sources, or infection from intrinsic sources, is the commonest? A consideration of the facts leads me to hold very strongly that the infection in most cases originates from an intrinsic source, but this is not the view which up to now has been generally held.

INFECTION FROM EXTRINSIC SOURCES.

Infection from extrinsic sources was no doubt the cause of the epidemics of puerperal sepsis which in the past periodically decimated lying-in hospitals, and which the introduction of antiseptic midwifery has succeeded in abolishing, and at the present day it is certainly still operative in those instances where a series of cases of puerperal fever occurs in the practice of a midwife or doctor. But, speaking broadly, the occurrence of the disease at the present day is sporadic, not epidemic, my experience being that the case to which one is called in consultation is most often the first disaster of the kind that has befallen the doctor after many years of successful obstetric work.

The conveyance of septic organisms from one patient to another in the practice of homeconducted midwifery requires a degree of carelessness, or rather dirtiness, which is surely uncommon nowadays, and moreover such conveyance postulates special circumstances of propinquity and time which only generally obtain in institutions where a number of patients are gathered together under one roof. Thus between the attendance on a septic case yesterday and a confinement to-day the morning bath and several washings of the hands intervene, quite apart from any active antisepsis. The streptococcus of high virulence is a delicate organism which dies rapidly in the open air, and which is easily overgrown in an incubator by other organisms even at the temperature of the body, and still more readily at room temperature. For its experimental inoculation to be likely to be successful it requires to be transplated direct from one culture medium to another, and this is probably true of the accidental inoculation which causes puerperal fever. Further, the prevention of infection from without is a relatively simple matter, for the wearing of boiled gloves and the sterilizing of all

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