

The Midwife.

THE INCIDENCE OF CONGENITAL SYPHILIS AMONG THE NEWLY-BORN.

Dr. S. M. Ross, D.P.H., Bacteriologist to the Derbyshire County Council, and Dr. A. F. Wright, late Bacteriologist to the Staffordshire County Council, have presented to the Medical Research Council a Report on the Wassermann reaction of placental blood in a series of 340 unselected cases in a Midland county, which is published in the *Lancet* of February 12th. The particular interest of the Report to midwives is that in both areas in which the research was conducted, midwives were utilized to collect the material for investigation. The authors write in part:—

"The object of this investigation was to determine if possible the incidence of congenital syphilis among the newly born in a mining town and an industrial town in one of the Midland counties. The cases were entirely unselected, and in no instance had either parent been treated for recognised syphilis. It must be generally admitted that our knowledge of the transmission of syphilis is very incomplete, and that the term 'congenital syphilis' is very loosely applied. Cases are dubbed congenital syphilis on the flimsiest of data, while others are missed through want of proper appreciation of symptoms slight in themselves, but the only visible manifestations of this insidious disease, where a Wassermann reaction might have enlightened the practitioner as to the true state of affairs.

"John A. Kolmer, of Philadelphia, who has published much original work on syphilis, holds:

"Every untreated or inadequately treated syphilitic of either sex, and particularly the woman of child-bearing age, is potentially capable of transmitting the disease, and that the number of such persons must be appallingly large, and secondly, that 'it would appear that the foetus possesses no natural resistance to infection with *Treponema pallidum* in so far as its own tissues are concerned, and that it may be infected through the mother at any time from conception to late in pregnancy.'"

After stating that "any figures based upon the examination of placental blood alone will give a probable under-estimation of the amount of congenital or pre-natal syphilis," the authors continue:

COLLECTION OF MATERIAL.

"For the collection of the material employed in this investigation, for the mining area two midwives with a large working-class practice were chosen, whose technique in midwifery and trustworthiness in carrying out instructions could be relied on. They were instructed that the cases were in no way to be selected, and that with each case a few essential particulars were to be sent.

"The particulars demanded were as follows: Name, age, address; date of marriage, number of pregnancies, abortions or miscarriages and period; patient's health, husband's occupation, and husband's health.

"The blood was taken from the placental end of the umbilical cord immediately after it was severed from the infant. Sterilised collecting tubes were supplied from the county laboratory, and it was impressed upon the midwives that strict aseptic precautions should be taken in the collection of the specimens. These specimens were then posted to the county laboratory, and after removal of sufficient serum for S.M.R. were forwarded to the Central Hospital, Lichfield, for A.F.W. The period of time covered by the investigation was 16 months (1918-19)."

In the mining area the result of the investigation into the 300 cases collected was that in 284 cases or 94.6 per cent. the results of both workers were identical. Ten cases, or 3.5 per cent. were definitely positive.

INDUSTRIAL AREA: SUMMARY OF RESULTS.

"A similar investigation was also carried out amongst the patients of a large charity practising midwifery in an industrial town in the Midlands, but owing to circumstances over which the investigators had no control only 40 specimens were sent. In this series one case was found positive by both observers, a percentage of 2½. Unfortunately, owing to the difference in the numbers of specimens from the two towns no sort of comparison into the infection of the two areas can be deduced."

It is evident that if scientific investigators are to depend upon midwives for the material they need, such midwives must be very carefully instructed in the special duties required of them, and, moreover, suitably remunerated. We learn from the report that the incidental expenses of the research were defrayed by a grant from the Medical Research Council; we hope, therefore, that remuneration of the midwives concerned was included in these expenses. One other point—surely numbers, and not names and addresses, should be sent with specimens.

CENTRAL MIDWIVES BOARD FOR SCOTLAND.

At the first meeting of the newly constituted Board, held recently, Dr. James Haig Ferguson, F.R.C.S.E., &c., was appointed Chairman, and Dr. A. Campbell Munro, D.Sc., &c., was appointed Deputy-Chairman.

The following results of the examinations held simultaneously at Edinburgh, Glasgow, Dundee and Aberdeen, were reported:—

	Candidates		
	Appeared.	Passed.	Rejected.
Edinburgh ..	42	37	5
Glasgow ..	53	44	9
Dundee ..	14	14	0
Aberdeen ..	7	6	1
	116	101	15

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