

# The Midwife.

## THE CLAPHAM MATERNITY HOSPITAL.

Miss Aldrich Blake, M.D., M.S., presided at the annual meeting of the Clapham Maternity Hospital on June 15th, always a very interesting gathering, both because the finances of the hospital are so admirably managed, and cheery mothers and happy babies—taught to appreciate a maximum of fresh air and sunshine—evidently respond to the care lavished upon them. The training school for midwives and monthly nurses also turns out many pupils well-equipped for the responsibilities of those who act as the guardians of the race at the portals of life.

## MATERNITY CONDITIONS IN INDIA.

Dr. Margaret I. Balfour, M.B.Edin., W.M.S.I., writing in the *Lancet*, says it is difficult for dwellers in European countries to realise the amount of suffering endured by Indian women in childbirth, and the extent to which this is responsible afterwards for poor health, gynaecological trouble, and high infant mortality. Labour in India is not unusually difficult. Probably in normal circumstances it is easier and more rapid than in European countries. But in many parts serious abnormalities are common, and in every part, owing to the uncleanly and unhygienic practices which accompany labour, normal cases become abnormal. Osteomalacia is frequent in certain parts of the country, but is never found in others. The reason for this distribution would make a fascinating subject for research, and it is strange that the Indian Research Fund has not done more to elucidate information in a matter of such acute importance to a large part of the population of India. The frequency of eclampsia in some parts of India is another fact worthy of note which would probably repay skilled investigation.

### THE PREVALENCE OF PUERPERAL SEPSIS.

Septic infection in all its forms is rampant. This is not surprising seeing that nearly all the midwifery practice of the country is in the hands of the indigenous dais, who, are as a class, untrained and illiterate. In most parts of the country the profession is an hereditary one, the older women handing on their practices to their daughters or daughters-in-law. They are mostly low caste and of uncleanly habits, which is consistent with the Hindu belief that labour is an uncleanly affair. Like most Indian women they wear numerous silver rings and silver or glass bangles which are not removed while at work. Experiment has shown that from the rings especially abundant colonies of staphylococci can be grown. Their clothes are seldom washed, and although they remove most of their clothes when conducting a case of labour, their persons are equally filthy. When a woman begins to suffer from the symptoms of puerperal sepsis her dai examines her, and inserts some plugs of filth in the vagina. If relief does not

speedily follow other dais are called in, all examine, cleanse their hands perfunctorily, and go away to attend normal cases. It is not surprising that on occasion 80 per cent. of the labour cases in a town have been attacked with puerperal sepsis.

### THE TRAINING OF MIDWIVES.

There is no recognised standard for midwives training in India. Recently most of the Provinces have started State Medical Boards which hold examinations for midwives. This is a step forward, but it will not be productive of much good until measures are taken for inspecting the work of the passed and registered midwives, and punishing such as deliberately refrain from carrying out instructions given. Trained midwives frequently have stipends from municipalities, but although I have seen much of their work I have not so far come across one midwife who has been given rules to be followed in her practice, or one place where efforts have been made to see that she makes some attempt to carry out her duties.

The Victoria Memorial Scholarships Fund was founded 18 years ago with the object of improving the indigenous dai class. With an income of little over £2,000 a year it has done something in an experimental way, and has for some years past concentrated all efforts on public propaganda and the endeavour to secure the registration and supervision of the indigenous dai. But it should be recognised that a small charitable association with insufficient funds, until recently under lay control, cannot carry out the gigantic task of reorganising the midwifery practice of a country like India. The great obstacle to modern progress is ignorance on the part of the people, and this the Government, with its newly reformed Public Health Department, is now in a position to combat. But, since men are in almost all cases debarred from attending labour cases and penetrating into the zenanas, a medical woman should be appointed to assist the Commissioner for Public Health, and to organise measures for co-ordinating existing agencies and forming public opinion throughout the country.

## BABIES OF THE EMPIRE.

The annual report of the Mothercraft Training Society (Babies of the Empire), 29, Trebovir Road, Earl's Court, S.W.5, shows that it is carrying on a good work (a) in Mothercraft Training, (b) in Propaganda, (c) out-patient department, and in all three of these directions there is much useful work to be done.

Mothercraft training is given (1) to fully-qualified nurses (a three months' course), (2) to certified midwives (a four-six months' course), (3) to previously untrained women and girls (one year's course), (4) to young mothers, expectant mothers, and girls about to marry, for whom simple, short and practical courses in Mothercraft, accompanied by demonstrations, are arranged at regular intervals.