The Midwife.

CENTRAL MIDWIVES' BOARD.

MONTHLY MEETING.

The Monthly Meeting of the Central Midwives Board was held at the Board Room, I, Queen Anne's Gate, Westminster, on Thursday, January 24th, Sir Francis Champneys, Bart., M.D., F.R.C.P., presiding.

CORRESPONDENCE.

A letter was received from Miss Puxley, of the Ministry of Health, stating that the Minister of Health approves the Rules, as now amended, for a period of one year from December 31st, 1923.

Delegate to Congress at Bordeaux.

In response to an invitation from the Royal Institute of Public Health to appoint a delegate to attend their Conference in the City of Bordeaux, Miss Olive Haydon was appointed.

Applications for Approval.

As Lecturers.—The applications of Dr. Ribton Gore Blair and Dr. Mary Scott were granted, and the application of Dr. Philip Claude Tresilian Davy, M.B., R.A.M.C., subject to conditions.

As Teachers.—The application of Midwife Gwynneth Maud Henery (No. 52,425) was granted, and the application of Midwife Rose Ellen Reeves (No. 5,644) subject to conditions.

RECIPROCITY.

Midwife Margaret Murphy, Certified Midwife, Ireland (in virtue of holding the certificate of the Coombe Lying-In Hospital, Dublin) was admitted to the Midwives Roll, and the Secretary further reported that he had placed on the Roll the names of Midwives Hilda Wood and Ethel Forbes Grant, holding a certificate of having passed the Examination of the Central Midwives Board for Scotland.

ANNUAL REPORT.

The Report of the work of the Central Midwives Board for the year ended March 23rd, 1923, contains many interesting details.

Sir Francis Champneys, Bart, M.D., who has been Chairman of the Board since its formation, has held office for the twentieth year in succession. We may add that during this time he has scarcely ever been absent from a meeting, and has conducted the business of the Board with courtesy and dignity.

On March 31st, 1923, the Midwives Roll contained the names of 54,403 women, a net increase of 2,838 on the total number appearing on the Roll for the previous year. Of the total number of those on the Roll, 36,097 have passed the Board's Examination, and 9,414 have been admitted in virtue of prior certificates under Section 2 of the Midwives' Act, 1902. Four hundred-and-forty-five midwives holding the Scottish and Irish Certificates have also been admitted to the English Roll under Section 10 of the Midwives' Act, 1918. The trained midwives are consequently 45,956 in number, and the untrained 8,447. The percentage of trained midwives who practise as such is estimated at 23.1 per cent. Of the untrained approximately 31 per cent. are in practice, though frequently to a small extent only.

The total number of midwives practising during 1922, as appearing by the returns made by Local Supervising Authorities, is 13,140, of whom 80.1 per cent. are trained, and 2,620, or 19.9 per cent., untrained. 14,921 notifications by midwives of their intention to practise were received by these authorities, but this is due to the fact

that some midwives work in the area of more than one Local Supervising Authority, and have to notify each.

TRAINING INSTITUTIONS.

There are 187 Institutions and Homes in England and Wales at which midwives may be trained, of which 60 are Poor Law Institutions. In addition there are 120 registered medical practitioners approved by the Board as Lecturers, and 60 practising midwives approved as Teachers.

The Board has decided to recognise the training undergone by midwives in New Zealand, and not to require such midwives to undergo further training in the event of their wishing to enter for the Board's Examination.

The levies on the Local Supervising Authorities to meet the deficiency in the Board's Revenue for 1922 amounted to $\pounds 5,280$ 11s., as against $\pounds 4,010$ 15s. 6d. for 1921. The increase in the deficiency for the year is due to the cost of publication of the Midwives' Roll, which was not published in the preceding year.

DIET IN PREGNANCY.

The scientific feeding of the expectant mother is a subject which so far has not received the attention it deserves, but it is of sufficient importance to merit the setting apart of endowments for scholarships for specially selected students, who will devote their whole time to studying and reporting upon this question.

There is a type of expectant mother of the poorer classes —a person with whom we are all familiar. With one child at the breast, and another due to arrive in the near future, anæmic, and underfed, she endeavours to add to the family exchequer by charing and other laborious work, in addition to doing her own house work, at a time when her more fortunate sister is surrounded by solicitude, and may even lead a pampered existence. The diet which the latter needs may, indeed, be also studied with advantage, but from a different view-point.

Underfeeding may arise from either insufficiency in the quantity of food taken, or unsuitability and deficiency of the food itself. Under both conditions the health of the mother is prejudically affected, and not her own health only, but the health of her unborn child. In due time the child is born, apparently healthy perhaps, but inevitably with a lowered resistance to disease which sooner or later becomes apparent, and not only the individual mother and child, or even the individual family are the sufferers. The nation at large whose very existence depends on the virility of its men, the capacity of its women to bear healthy children, is the ultimate sufferer.

When the diet required by the average expectant mother is authoritatively defined, it behoves the nation to see that it is within her reach. Not by a system of doles and charity, but by the provision of a supply of cheap, nutritious and easily accessible food.

Nor must it be forgotten that the instinct of a mother is to deny herself for the sake of her offspring, and to feed her family on the food intended for herself, and it is, therefore, important to ensure that the food brought within reach of the expectant mother is actually consumed by her.

Now that we have so many ante-natal centres, it should be easy for expectant mothers to be periodically examined from the point of view of nutrition, and for advice to be given to them as to what they need to maintain themselves in good condition. The question is so important not only from a humane point of view, but from that of national prosperity, that too much consideration cannot be given to it.

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