

# The Midwife.

## MATERNAL MORTALITY.

The following circular has been issued to the Clerks of Councils of local Authorities and Town Clerks by the Ministry of Health signed by the Assistant Secretary:—

SIR,—I am directed by the Minister of Health to draw the attention of the Council to the Interim Report of the Departmental Committee on Maternal Mortality and Morbidity which has recently been published by H.M. Stationery Office.

The Government have considered the recommendations made by the Committee for removing the causes of preventable maternal death, and have decided to undertake the necessary negotiations with the various authorities concerned, with a view to formulating a scheme on a national basis for the care of maternity which would provide the services suggested by the Committee. But the Report makes it clear that two of the essential measures for securing a reduction in maternal mortality are (1) general and sustained efforts to enlighten the women of the country as to the importance of ante-natal supervision, and (2) the improvement and expansion, where necessary, of the maternity services of Local Authorities, which must form an important part of any national scheme.

The Minister recognises that in many areas the Local Authorities and Voluntary Associations have already realised the importance of fully exercising their powers for the care of maternity, but there is still much to be done if the preventable maternal deaths are to be prevented. He desires to commend to the earnest attention of all Councils the suggestions in the accompanying Memorandum for improving and developing their maternity services, and for securing that the women most in need of these services are persuaded to make use of them.

The Minister feels sure that the Council will be anxious to do all that is reasonably possible in this matter. The additional expenditure involved in any area will be small in comparison with the advantages that would result from the provision of the necessary facilities, and their full use by those for whose benefit they are provided, and I am to remind the Council that the development of the maternity and child welfare services is one of the extensions of local services in consideration of which an additional amount of £5,000,000 was included in the General Exchequer Contribution for each year in the first fixed grant period under the Local Government Act, 1929.

## MATERNITY AND CHILD WELFARE.

The Memorandum to which the above Circular refers (Memo 156.M.C.W.) says in part:—

### ANTE-NATAL SERVICES.

The Departmental Committee on Maternal Mortality and Morbidity, which was appointed by the Minister of Health in June, 1928, have submitted an Interim Report, which was published in July of the present year. This Report has furnished both the Government and the public with many new facts and conclusions in regard to the subject. As a result of their investigation into 2,000 deaths of women in childbirth during the two years, the Committee came to the conclusion that there were *four primary avoidable causes* in the train of events which led up to the fatal issue. First, there was absence of ante-natal care in 17 per cent. of the deaths; secondly, there were errors of judgment in practice or treatment by doctors or midwives in another 17 per cent.; thirdly, there was lack of reasonable facilities available for effective medical care in 5 per cent. of the

cases; and fourthly, in 9 per cent. there was negligence of the patient, or her friends, to adopt or carry out medical advice offered to them. Thus not less than 48 per cent. of the total deaths from childbirth into which inquiry was made seemed to the Committee to have been avoidable. In the remaining 52 per cent. of the records of death examined no preventable factor actually emerged, but in some cases, owing to incompleteness of the records, it was not possible to come to a definite conclusion.

In summary, the Committee found that of the cases of death brought to their notice *not less than one-half were directly preventable* under suitable conditions. These findings not only confirm previous impressions that much mortality and morbidity associated with childbearing might be prevented, but indicate the kind of unsatisfactory conditions which must be removed or ameliorated if we are to secure, as we must, a reduction in the relatively high maternal mortality rate of the country, not only in those districts where the maternal mortality has been highest over a number of years, and in which little decline, if any, has occurred, but in the country as a whole.

Generally speaking, it is clear from cumulative experience of the work of the maternity services in their present form that the solution of this complex problem is most likely to be found in an all-round tightening up as well as strengthening of each link in the chain of obstetric supervision, and an increased watchfulness over all stages of pregnancy and labour rather than in any single arresting or comprehensive remedy.

## MIDWIFERY IN BENGAL.

Miss E. L. Gillings, F.B.C.N., writes from Chanraghore, Chittagong Hill Tracts, East Bengal:—

We have many bad midwifery cases. Only yesterday we went to one very inaccessible place. It was a transverse presentation, with body presenting, head and buttocks being at the fundus and bandle's ring. After much difficulty we got the baby away by cutting it into bits, and we hope the woman may get better. Even if she dies, we have the satisfaction of knowing it will be an easy death compared to what she would have suffered if we had not gone.

A case came in recently without much explanation. The nurses gathered from the patient's friends that the head was inside. I smiled and said, "Of course, if the baby is inside, the head is," but I discovered to my horror that the head *only* was inside and the uterus torn. We took the woman to the theatre and eventually the head was removed, but the doctor confirmed by report that the uterus was badly torn, he feared into the abdomen. They decided to operate, and found that the uterus was torn to the fundus. The intestines had within a very few hours become adherent to one another. The uterus was removed, but the poor woman died of general peritonitis the next day.

What India needs is an army of English nurses who would be willing to rough it, not to go gadding around in society, but to settle in various villages, and teach the people the commonplaces of life. They will learn, but they are mostly very ignorant, and the darkness of centuries is hard to penetrate, and the number of English-trained nurses out here is appallingly small for the size of the country.

At the November, 1930, Examination of the Central Midwives Board 862 candidates were examined and 730 passed the examiners. The percentage of failures was 15.3.

[previous page](#)

[next page](#)