

The Midwife.

MATERNAL MORTALITY AND MORBIDITY.

FINAL REPORT OF DEPARTMENTAL COMMITTEE.

The Final Report of the Departmental Committee on Maternal Mortality and Morbidity, which, with Sir George Newman, K.C.B., M.D., F.R.C.P., as Chairman, was appointed in June, 1928, by the Minister of Health (then Mr. Neville Chamberlain) "to advise upon the application to maternal mortality and morbidity of the medical and surgical knowledge at present available, and to enquire into the needs and direction of further research work has now been submitted to Sir Hilton Young, G.B.E., Minister of Health. It is a document of far-reaching importance.

It is published by His Majesty's Stationery Office, Adastral House, Kingsway, London, W.C.2., price, 2s. 6d. net, and should be read and studied by every medical practitioner and certified midwife. The basis of the Report was, we are told, "an investigation into the actual circumstances of a large number of maternal deaths, an inquiry not before attempted on so large a scale. The Committee did not focus their attention primarily on the immediate cause of death: What they set themselves to discover, if possible, was the underlying causes which set up the train of events to which death was ultimately due. This was a new method of research and the results appear to furnish a valuable contribution to our knowledge."

The Primary Avoidable Factor.

"It was found that more than one factor was often concerned, but in many cases a definite defect in a reasonable standard of maternal care was clearly the starting point in the downward progress of the case. This defect was termed by the Committee 'The Primary Avoidable Factor.' The factors so estimated fell into four distinct groups. (1) Omission, or inadequacy of ante-natal care of the expectant mother; (2) A want of skill or sound judgment in the management of the case; (3) Neglect by the patient or her friends to make reasonable preparation for the confinement, or even deliberate refusal to follow the advice of doctor or midwife; (4) Lack of provision of reasonable facilities for the proper treatment of a woman in childbirth, such as lack of skilled attendance, careful nursing, or hospital accommodation. "On these grounds the Committee formed the considered opinion that reform was necessary in the education of the Student in obstetrics, in the supervision of pregnancy, in the standard of medical practice, and in the completion of an effective maternity service." The Committee were able, "with a reasonable approach to certainty, to draw the broad conclusion that *at least one-half of the maternal deaths occurring in this country were preventable.*"

The 5,805 maternal deaths investigated by the Committee are divided into two classes:

Class I.—Deaths directly due to childbearing.

Class II.—Deaths not primarily due to Pregnancy.

The first class (which includes abortion and ectopic gestation) comprises 4,655 cases. These are divided into the following sub-classes: sepsis, eclampsia, operative shock, antepartum hæmorrhage, post partum hæmorrhage, other toxæmias, including chorea and mania, embolism, abortion, and extra uterine gestation.

Of the 4,655 cases due directly to child bearing, 1,727 or 37.1 per cent. were due to sepsis.

"The opinion has been expressed recently by various bodies and individuals that the holding of a compulsory inquest or post mortem examination or both, in all cases of maternal death would be a useful measure in the interests

of maternal safety. The Minister of Health also has been approached by several social and political bodies with the request to take early and definite action in this direction and the question was referred by him to the Committee for their consideration." The Committee invited an expression of opinion from the Medical Officers of Health who have served on their special Sub-Committees, and state that the replies were generally unfavourable to the proposal and indicated the belief that the advantage likely to accrue would not justify the introduction of special legislation. The Committee express the opinion that as a routine in cases presenting no special features an inquiry such as that now carried out by Medical Officers of Health is preferable to an enquiry in a Coroner's Court, and advise that the Minister should take appropriate steps to encourage local authorities to continue inquiries into maternal deaths as part of the routine work of a Public Health Department.

The Committee define what in their opinion are the essentials of sound midwifery service, laying special stress on the provision of ante-natal and post-natal services, on the education of public opinion. They also suggest the preparation of girls for marriage and motherhood by suitable teaching during school life and adolescence.

The Role of the Midwife.

"In relation to the problem which has been engaging the attention of the Committee, there is (they say) no more important matter than the provision of an adequate service of trained midwives to act both as midwives and as maternity nurses working with doctors."

Midwifery Organisation Abroad.

The argument is brought forward that in the Netherlands, Sweden and Denmark, the number of midwives trained each year is strictly limited, and "the opportunities for instruction are reserved for women who intend to practise as midwives and not wasted as too often in England in the training of women who have no intention of taking up midwifery work."

We disagree with that word "wasted," and are of opinion that just as medical practitioners qualify in medicine, surgery and midwifery, so training in medical, surgical and midwifery obstetric nursing, should be required of all nurses, although they may not propose to practise exclusively as midwives, for a nurse may at any time be called upon to deal with an obstetric emergency though not nursing an obstetric case, and should have the knowledge to enable her to do so adequately.

Considerations as to Maternity Services.

The Committee state that the recommendations as to betterment of the provision for maternal care throughout the country, which were the result of their earlier deliberations, were summed up in their Interim Report in the form of suggestions for an improved maternity service, which should expand, supplement and co-ordinate the services already provided by local authorities, voluntary bodies, and private medical practitioners and midwives. The general outlines of such a scheme were accepted, and preliminary steps were taken to give them practical effect. It has since become evident, however, that the financial position of the country precludes substantial expenditure for this purpose.

Essentials of Satisfactory Service.

The Committee, therefore, gave renewed consideration to the best means of improving the existing services without

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