

The Midwife.

THE CENTRAL MIDWIVES' BOARD.

At a recent Meeting of the Central Midwives Board a letter was read from the Matron of Queen Charlotte's Maternity Hospital enclosing a letter sent to her by Mr. A. W. Bourne, Senior Obstetric Surgeon of the Hospital, in which he stated that after discussion and consultation with the Bacteriologist of the Hospital, the Medical Staff of the Hospital have decided to abolish the use of antiseptics for swabbing the vulva, during the lying-in period, in normal cases.

It was also stated that apart from being of little or no value in the prevention of infection, the continual use of antiseptics causes soreness and irritation which may actually favour the development of the septic condition of the skin.

The Board decided that the Matron of Queen Charlotte's Maternity Hospital be informed that whilst the Board has no desire to prescribe the technique at the Hospital it has to be borne in mind that the Hospital is an Institution at which the training of pupil midwives is approved, and that whatever technique is employed the pupil midwives must receive adequate instruction in the Rules of the Board regulating the practice of midwives, including of course Rule E.8, to which they have to conform in practising domiciliary midwifery.

NOVEMBER EXAMINATION.

At the Examination of the Central Midwives' Board in November 881 candidates were examined and 728 passed the Examiners. The percentage of failures was 17.4.

MIDWIFE TEACHERS' EXAMINATION.

List of Successful Candidates.

The following is the list of successful candidates at the recent Midwife-Teachers' Examination conducted by the Central Midwives Board.

PASSED WITH DISTINCTION.

Joan Lambert, Charge Nurse at St. Thomas' Hospital Maternity Ward.

PASSED.

Elizabeth Alletta Clark-Kennedy, Sister-in-Charge, Maternity Department, Radcliffe Infirmary, Oxford. Josephine Alice Cook, Sister Tutor at Jewish Maternity Hospital. Gertrude Hughes, Chief Midwife at Selly Oak Hospital, Birmingham. Annie Macdonald Hutchins, Staff Nurse and District Sister at General Lying-in Hospital, Post Certificate School. Florence Gladys Olive Moorcroft, Night Sister at St. James' Hospital, Balham. Mary Louisa Pope, District Sister at St. John's Home, Deptford. Edith Ellen Sansbury, Sister at Southmead Hospital, Bristol. Ethel May Skrimshire, Sister Tutor at St. Mary's Hospitals, Manchester. Eleanor Mary Tickle, Clerical and Teaching Assistant, Birkenhead Maternity Hospital. Ethelwyn Mary Tindall, District Sister at University College Hospital.

Generations of Nurses and Midwives will regret to learn of the death of Miss Marion Ritchie, for 43 years Hon. Secretary of the Clapham Maternity Hospital, at the age of eighty-five. Under her fostering care, and that of Dr. Annie McCall, her close friend of many years, the hospital has been enlarged until it has grown from an ordinary house to the present substantial building.

ADVENTURES AND PERADVENTURES IN MIDWIFERY.

BY MISS PHYLLIS LOFTS, S.R.N., F.B.C.N.

Member of the Baptist Missionary Society, Yakusu, Belgian Congo.

To be initiated into the mysteries of midwifery among these African folk is indeed a revelation. Many and curious are the customs, superstitions and rites connected with it, and these are gradually changing, yielding place to new.

A pregnant woman has not a little to fear, for should certain circumstances over which she may have no control, such as malpresentations, arise, she will be blamed for some wrong act.

It is a custom for her to go to the forest, throw a nearly-burnt-out log of firewood and call, "Come and kill me! Come and kill me!" to the spirit of a departed friend or relative. Should difficulties attend labour, the old women helping her place salt at the disposal of the spirit saying, "There now, take this salt, leave this woman alone and allow her child to be born safely." Only recently a patient suddenly demanded whether six weeks had elapsed since the death of the husband of our midwife had taken place—for just before that time she had been to the forest and she feared he might have heard!

At the onset of labour the patient calls her helpers. No sick or pregnant woman may be present, nor a woman whose child is teething. Often her mother and her mother-in-law are present. The mother-in-law takes precedence—the mother retires to weep and show fear—in hospital she is often to be found under the labour bed! Should the patient's husband appear she disappears, it is taboo for them to meet!

Sometimes an enema is given with a calabash; then one woman sits behind the patient, who sits on a log leaning back against her, and, during pains, entwines her arms around this long-suffering helper's neck and pulls. Two others are at the knees, while a fourth squats in front of her, ready with two dirty big toes to place on the perineum, and two dirty hands for manipulation. She sometimes thrusts camwood powder and herbs into the vagina, and smears the abdomen with herbs. This last process to the accompaniment of a solemn incantation, while someone else emits loud grunts—communications with the ever-present spirit world! From the very beginning the patient is ordered to "push," and she suffers accordingly.

If she has married without her parents' ready consent, then the old women sit around and spit violently on her abdomen. Spitting as a rule is a blessing, but in this case it means, "Well, we didn't force you into your marriage, and now that you are suffering, don't cry; we will help you—but—!"

If she had married as her parents wished, she receives more sympathy and attention, much massage and bating. Under certain circumstances she is massaged with pebbles! Should she be long in labour a woman takes the bone of a chimpanzee, smears it with native medicine, smokes it, and waves it over her, chanting the while. Various friends rush to the forest and shout with the usual African vocal ability to the spirits.

The husband may be called in, and with his foot upon the abdomen of the patient, swears that he is the father of the child.

Labour proceeds with cajolings and exhortations with

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