

year Dr. Ernest Hart published a series of articles on baby-farming in the *British Medical Journal*, and Lord Shaftesbury in the House of Lords endeavoured unsuccessfully to move the Government to do something about it.

The trial and execution, in 1896, of Mrs. Dyer, another baby farmer, who lived at Reading and disposed of the babies committed to her care by strangling them and throwing their bodies into the Thames led to the passing of the Infant Life Protection Act in 1897, followed subsequently by the Children Act, 1908, and the Children and Young Persons Acts, 1932 and 1933.

The development of a unified system of maternity services is, the author believes, the measure most needed for a further advance of the maternity and child welfare and for the prevention of the deaths and disablement resulting from childbirth, which, though known to be largely preventable, are not being prevented.

During the years preceding the passing of the Midwives Act the London Obstetrical Society did useful work by establishing an examination for midwives, and its diploma came to be recognised as the qualification to be obtained by those desiring to practise midwifery. The award of this diploma was, however, objected to by the opponents of the Midwives Bill, and in 1894 the General Medical Council issued a warning notice that in their opinion "certain documents issued by various societies or persons as diplomas of education and examination in midwifery are 'colourable imitations' of diplomas conferring a legal right to admission to the Medical Register, and both contravene the spirit of the Medical Acts and are calculated to deceive the public, hereby give notice that from the present date the issue of such 'colourable imitations' by registered practitioners will be regarded as conduct infamous in a professional respect."

The diploma awarded to midwives by the Obstetrical Society of London was regarded as "a document coming within the purview of the foregoing resolution," and this opinion was communicated to the President and the Council of the Obstetrical Society.

"This bombshell roused a strong letter of protest from the President of the Society," but after negotiation a form of certificate satisfactory to the General Medical Council was agreed upon.

That the Council were justified in their objection to the imposing diploma bestowed by the London Obstetrical Society is undoubted. We have before us one of these diplomas which measures 2 ft. by 1½ ft. At the top is an engraving of Juno, and the document is signed by seven leading obstetricians, including Dr. (afterwards Sir Frances) Champneys, Chairman of the Central Midwives Board. It states that the possessor is in their opinion a skilled midwife, competent to attend natural labour, and at the foot is a coloured reproduction of the seal of the Association. To award this imposing document to women with no previous nursing experience, and of little general education was certainly unwise. But the London Obstetrical Society in its day did useful work in establishing its examination for midwives, and acted correctly in discontinuing its examination when that of the Central Midwives Board was established under State authority.

## CENTRAL MIDWIVES BOARD.

EXAMINATION PAPER. MAY, 1935.

*Candidates are advised to answer all the questions.*

1. Describe the vagina and indicate what changes it undergoes during pregnancy, labour and puerperium.
2. What do you understand by the term "cracked nipple"?

How does this condition arise?

How would you treat it and what results may ensue if it is not treated?

3. Describe the changes that occur during the first stage of labour.

How long does the first stage last and what are the causes of its prolongation?

4. How would you diagnose a posterior position of the occiput?

What effects may this position have on the mother and child?

5. What conditions during delivery may interfere with the foetal circulation?

What may the consequences be to the foetus?

How would you treat a case of Asphyxia Neonatorum?

6. On paying a morning visit to your patient after delivery you find that she has a rise of temperature. Would this affect the times of your subsequent visits, and, if so, in what way?

In spite of Jubilee engagements, the Queen has found time to visit Queen Mary's Maternity Home at Hampstead. This is a restful retreat for mothers and babies in which the Queen takes much personal interest.

A gift of £30,000 for the Maternity Fund which is being raised in Melbourne in connection with the King's Silver Jubilee is announced. The donor is Mr. C. W. Connibere, a Melbourne merchant and importer. The fund now totals £120,000.

Village Nurse-Midwives working under County Nursing Associations affiliated to the Queen's Institute serve after training a term of agreement with a County Nursing Association. The inclusive salary is at the rate of £110, rising to £120 during this time, and subsequently is increased to £130 or more. A uniform pension scheme for Village Nurse-Midwives is available throughout the country.

## MATERNAL MORTALITY.

The question of maternal mortality has been well to the fore at recent conferences, both of the Women's National Liberal Federation and at the Conference of Labour Women.

A resolution was passed by the Liberal Women urging the Government, in conjunction with local authorities, to improve and strengthen maternity services to include the services of consultants and the free provision, where necessary, of anaesthetics, and to prosecute inquiries with a view to reducing the record of maternal deaths, especially in distressed areas.

The Labour Women's Conference passed a resolution urging the Ministry of Health to continue inquiry into maternal deaths and to institute inquiry into maternal morbidity, the incidence of ill-health associated with pregnancy and childbirth, and the question of the adequacy of training now given in gynaecology, the scope of the inquiry to include the question of the relation of nutrition to healthy pregnancy and healthy motherhood.

## THE FALLING BIRTH-RATE.

Recently in the House of Commons, in reply to a question:—

Mr. Shakespeare, Under-Secretary to the Ministry of Health, said that the birth-rates per 1,000 population in England and Wales were—for 1904, 28.0; for 1914, 23.8; for 1924, 18.8; and for 1934, 14.8, the last figure being provisional.

Viscountess Astor asked: Is it not true that, in spite of all the Government's efforts in Italy, coupled with the Pope, the birth-rate has gone down in that country? (Loud laughter.)

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