

The Midwife.

REPORT ON MIDWIFERY CASES.

ATTENDED BY QUEEN'S NURSES AND VILLAGE NURSE MIDWIVES.

The Report just issued by the Queen's Institute of District Nursing on midwifery cases attended by Queen's Nurses and Village Nurse-Midwives during the year 1937 gives some interesting statistics.

The number of cases attended during the year in which no doctor was engaged for the confinement was 71,328, an increase of 3,876.

The total number of midwives employed in this work was 4,110, of which 1,273 were Queen's Nurses (an increase of 107) and 2,837 were Village and other nurse-midwives (an increase of 106).

Of the patients attended, 18,367 (25.7 per cent.) were primiparæ.

The number of maternal deaths was 143, a maternal mortality rate of 2.00 per 1,000 total births and of 2.06 per 1,000 live births.

Thirteen patients (1.8 per 1,000) died from non-puerperal causes, which reduced the maternal mortality from puerperal causes to 1.82 per 1,000. The rate in both urban and rural areas was 2.00 per 1,000.

Among the deaths 40 (28.0 per cent.) were primiparæ and 53 (37.1 per cent.) had had five or more pregnancies.

The causes of the 143 maternal deaths were sepsis, 29; accidents of labour, 49; eclampsia, 11; embolism, 15; complications, 22; cause obscure, 4; non-puerperal, 13.

Of the fatal cases, 53 (37.1 per cent.) were not delivered by the midwife, but by a doctor, as it was necessary to summon medical aid before birth. The report states that although it is generally thought that a midwife is mainly concerned with normal cases, it is still found that a large proportion of those who died were suffering when booked from various forms of ill-health or had a history of complicated pregnancies or confinements. In some cases the difficulty was in paying both doctor and midwife.

There were 45 such cases, 5 of whom refused to book a doctor or enter hospital for confinement, 4 did not report previous illnesses, 5 were emergency cases, 10 were booked on account of poverty, 4 were passed by a doctor as being suitable for a midwife, and 2 were booked at the request of a doctor, though abnormal.

It is satisfactory to note that the percentage of maternal deaths is slowly decreasing, being in 1935, 2.60 per 1,000 total births; in 1936, 2.58 per 1,000 total births; and in 1937, 2.00 per 1,000 total births.

PREVENTION OF ABORTION IN RUMANIA.

The *International Nursing Review* reports that in Rumania a Parliament Committee, which has been commissioned to draw up a new penal code, has decided on the following punishment for criminal abortion.

For the woman herself, if she is unmarried, from three to six months' imprisonment; if she is married, from six to twelve months' imprisonment.

The abortionist or accomplice is given from three to five years' imprisonment; if the woman dies, the punishment is increased to between seven and ten years.

Attempted abortion is also punished. The doctor is not punishable if he practises abortion in the case of a woman who has been assaulted or whose life is in danger. The necessity for this procedure must, however, be confirmed by the certificate of a second doctor.

The term abortion or miscarriage is defined by Dr. Galabin in his manual of midwifery as applied to "premature expulsion of the ovum when this occurs before

the time when the child becomes viable or capable of possibly surviving. After that date the term premature labour is used. The point of demarcation between the two may be taken as the end of the sixth calendar month, or about 183 days, although there is practically but little chance of the child being reared, if born before the end of the 28th week, or 196 days."

A decision as to whether or not abortion should be procured is always a very grave matter, and authority to make such a decision should be limited to members of the medical profession who are wise if, as is required in Rumania, their opinion as to its necessity is confirmed by a second doctor.

THE ANNIE MCCALL MATERNITY HOSPITAL.

Dr. Annie McCall, Director of the Maternity Hospital at 37-43, Jeffreys Road, S.W.4, in a brief history of the hospital which bears her name, gives some interesting views on Maternal Mortality and kindred subjects after 50 years' practical experience of maternity work. She writes: "In our first 20 years we had 12 septic cases among 20,000 patients, in the last ten years only 3 in 10,112 cases, *i.e.*, 1 in 3,370. I feel sure that our Maternity Nurses should be trained in more detail to be aseptic and I think more well-trained Maternity Nurses would do more to reduce the high rate of maternal mortality than any one thing—they deal with the patient for two to four weeks and have more effect than either doctor or midwife.

"*Influenza* should be wiped out and, if all held the same views as I do about the danger of infection from this epidemic disease, it soon would be; hence it is wiser to exclude visitors during the puerperal ten days—and every prospective mother should be sheltered from known infection.

"*Eclampsia* should be nearly non-existent if we duly recognised the pre-eclamptic signs in every case and prevented it by common-sense treatment—the administration of chloral hydrate and the avoidance of any form of irritation.

"Among some of the ordinary causes of maternal mortality are:—

Insufficiently trained maternity nurses.

Too much interference in labour.

Too much medical interference.

Too many internal examinations.

Want of common-sense hygiene.

"Diet during the last three months should be regulated; no meat or eggs, very little milk, much hot water and fruit, cooked or raw, in plenty.

"Regular exercise, walking three miles daily, and hill-climbing wherever possible.

"Perhaps another reason for our smaller maternal mortality is that no young assistant doctor has been allowed to do any operation or use forceps without first having taken the course of operative midwifery and being very carefully trained in the details theoretical and practical and then has operated under a trained and experienced senior officer. Our proportion of forceps is the low one of 3 per cent.

"Very few internal examinations are made."

The maternal mortality rate in February 1937 was 1 in 624, or approximately 1.6 per thousand. The Patron of the Hospital is the Lady Hermione Blackwood, herself a State Certified midwife, who succeeded to this position on the death of her mother, Harriot, Marchioness of Dufferin and Ava, whose outstanding work for the mothers of India is known and recognised all over the world.

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