

The Midwife.

CENTRAL MIDWIVES BOARD.

REPORT OF STANDING COMMITTEE.

The Committee met on March 2nd, 1939, and recommended that—

The applications of State certified midwives for approval as teacher—the following applications be granted under the old and new training and examination rules of the Board:—

Bertha Murch, No. 77,778, Blackpool Municipal Maternity Hospital (Second period—intern.).

Lucy Beatrice Young, No. 87,979, Stoke-on-Trent City Hospital (First period—intern.).

Minnie Grayson, No. 43,110, Birch Hill Hospital, Rochdale (First period—intern.).

Dorothy Barber, No. 79,318, Guy's Hospital (First period—intern.).

Applications for Registration of Medical Practitioners were approved as Lecturers.

The Committee considered an application of the Oldchurch Hospital, Romford, for the purpose of providing instruction in the essentials of obstetric analgesia and in the use of a recognised apparatus, and that the application be granted.

The Secretary reported that he had placed on the Roll the names of 17 women holding the Certificate of the Central Midwives Board for Scotland, the Joint Nursing and Midwives Council for Northern Ireland, or the Central Midwives Board, Eire.

EXAMINATION PAPER.

February 9th, 1939.

1. What constitutes the pelvic floor, and what part does it play in labour?
2. Discuss the common infections that may develop in a child during the first week after its birth.
3. Discuss the special features of a twin pregnancy as regards (a) antenatal supervision, and (b) the conduct of labour.
4. What is meant by involution of the pelvic organs and tissues?
How can it be observed and assisted?
5. Describe in detail your conduct of a normal third stage of labour.
6. What drugs and other analgesics are commonly employed to diminish pain during labour?
Discuss in detail the indications, dosage, and regulations relating to those that may be administered by a midwife.

RESULT OF THE FEBRUARY EXAMINATIONS.

At the examination of the Central Midwives Board in February, there was a total of 1,270. Of these, 942 were first entries and 328 re-entries; 681 first entries and 179 re-entries were successful in passing the examination. The percentage of failures was first entries 27.7, re-entries 45.4. The percentage of failures of all candidates was 32.3.

MIDWIVES ACT, 1936.

Since the Midwives Act, 1936, became law, the Minister of Health has circulated to Local Supervising Authorities various circulars, and on February 25th, 1939, made a further Order to the Statutory Rules and Orders.

The Midwives (Certifying Hospitals and Institutions) Order (No. 2) 1939 (No. 211), applying proviso (c) to Section 6 (1) of the Midwives Act, 1936, to the additional hospital named in the Schedule to the Order.

The effect of this Order is that the proviso to subsection (1) of Section 6 of the Midwives Act, 1936, shall be applied to the Crumpsall Hospital, Crumpsall, Manchester, 8.

The effect of the Order is that after the Minister has made an Order applying Section 6 of the Act to the area of a Local Supervising Authority or to any County District contained therein, the prohibition contained in Section 6 (1) will not apply to a woman who before the 1st January, 1937, was certified by the authorities of the hospital to which the present Order applies to have been trained in obstetric nursing, if she have given notice in writing to the Local Supervising Authority that she has been so certified.

This exemption has therefore now been applied to the Crumpsall Hospital.

(Given under the official seal of the Minister of Health, this twenty-fifth day of February, nineteen hundred and thirty-nine, and issued to the Local Supervising Authorities concerned by the Minister's direction on March 2nd, 1939, by Mr. E. D. Macgregor.)

REPORT ON GAS AND AIR ANALGESIA.

Good work has been carried out at the Wellhouse Hospital, Barnet, in connection with gas and air analgesia in midwifery cases, and the East Barnet District Nursing Association have issued the first report on gas and air analgesia in district midwifery, a copy of which has been sent to the Central Midwives Board.

February to October, 1938.—Total number of cases, 22 (no doctor present at any of these cases). Primipara, 14; forceps, nil; still-births, nil; breech presentation, 2; ruptured perineums, 7; other abnormalities, nil. Felt no pain at all, 12; considerable relief, 9; some relief, but did not consider the mixture strong enough (this was a trained nurse), 1. Length of time gas was given, 30 mins. to three hours (average 1½ hours). From January to October, 1938, gas and air were given by doctors to 48 maternity cases with good results (three forceps deliveries).

The gas and air analgesia was greatly appreciated by the patients, several of whom said that it took away their anxiety of their confinements. There have been no ill effects of any kind on either mother or baby. In at least three cases the Association think the administration of gas and air prevented the need of a forcep delivery. They consider that gas and air analgesia is of great value in domiciliary midwifery, but that it cannot be of much practical use till midwives are allowed to give it single-handed. They find that the mothers co-operate extremely well, and they have had no cases of restlessness or excitement where it would be difficult for one midwife to manage alone.

The patients often need the gas and air for a longer period than given, but this is impossible at present while two nurses have to be present. The Association consider the mixture of 45 per cent. rather weak, and think it could safely be made stronger.

The Hertfordshire Public Assistance Committee have noted the report with satisfaction.

[previous page](#)

[next page](#)