

The Midwife.

CENTRAL MIDWIVES BOARD.

The Midwife-Teachers Certificate Examination, Part II., has been fixed to take place on December 16th, and if necessary on December 17th. Forms of application can be obtained from the Secretary of the Board, 73, Great Peter Street, Westminster, London, S.W.1.

SUPERVISION OF MIDWIVES—MOTOR CAR ALLOWANCES.

The London County Council has agreed that the allowances paid under rule 75 of the General Purposes Committee to officers who use their own cars for official purposes have been increased from January 1st, 1940, and in these circumstances it is considered that the car allowances payable to staff employed on the supervision of midwives should be correspondingly increased from £15 to £18 15s. a quarter. Additional expenditure will be involved of approximately £15 in 1939-40, and £45 in each subsequent year. There is provision for the expenditure in the current financial year. And that from and including January 1st, 1940, the allowance to assistant medical officers on the medical central administrative staff in the Public Health Department engaged in the supervision of midwives and allied work who agree to use their private motor cars when necessary in connection with their official duties and the allowance granted to non-medical supervisors of midwives in that department in respect of the use of their own motor cars in connection with their official duties, be increased to £18 15s. a quarter.

The L.C.C. has contributed towards the expenses of the Central Midwives Board the sum of £897 for the year 1939-40.

A CASE OF CONGENITAL PYLORIC STENOSIS.*

BY MISS H. A. STANTON.

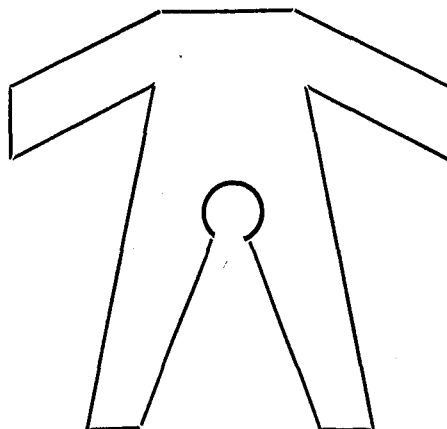
Baby N, a male child, was born in the Lady Curzon Hospital, Bangalore, on December 7th, 1939. He was a third child, the labour was normal, his birth weight being six pounds twelve and a quarter ounces, and he was breast-fed three-hourly without difficulty. On January 14th, 1940 his mother brought him to hospital complaining that he had been vomiting for ten days, that he was constipated, his bowels only being opened every three to four days, and that he was passing very little urine. He was still entirely breast-fed. On examination he was found thin but not emaciated, his weight being six pounds twelve and a half ounces, he was bright, his colour good, and no visible peristalsis was seen nor pyloric tumour felt. It was decided that he should be admitted for observation. He was given a mixture containing belladonna, potassium citrate and sodium bicarbonate q.i.d. before feeds. The vomiting which had never been projectile was not relieved and he was given a daily stomach lavage of normal saline. He was again examined on January 18th, 1940, having lost a further three ounces. Visible peristalsis was observed and a pyloric tumour felt; immediate operation was advised to which the parents very unwillingly gave their consent.

An hour before the operation was due he was given 25 c.c. of 25 per cent. glucose with normal saline into the fontanelle. He almost immediately collapsed, becoming cyanosed and having stertorous breathing. He was given oxygen and kept warm, and his condition improved, but it was decided

to postpone operation for twenty-four hours. At 1 a.m. next day he was given ten ounces of 2 per cent. glucose with normal saline into the pectoralis muscles and into the thighs subcutaneously.

The abdomen was prepared for operation with rectified spirit and 2 per cent. picric acid. His arms and legs were covered with wool and bandaged, and his whole body bandaged on to a special cross splint with a pad underneath the stomach. The splint was left on for twenty-four hours. His last feed was given two hours before operation, and a stomach lavage given one hour before operation.

Rammstedt's operation was performed, the time taken being twenty minutes. After operation the baby looked rather pinched and cyanosed but his pulse volume was good and its rate 140. He was put into a well warmed cot with the foot raised and given oxygen for four hours. Four ounces of 2 per cent. glucose with saline were given subcutaneously into the thighs. His temperature was taken hourly for six hours after operation as these babies are



SPECIAL SPLINT THAT WAS USED DURING OPERATION AND FOR 24 HOURS AFTERWARDS.

liable to get hyperpyrexia. Feeding was begun six hours after operation when a drachm of 7.5 per cent. glucose in normal saline was given. Half an hour later he was given another drachm, and half an hour after that half a drachm of saline with half a drachm of breast milk. Then he was given gradually increasing breast-milk feeds, at gradually increasing intervals, until forty-five hours after operation he was having two-ounce breast-feeds every three hours. He was fed thus for four days, and then the feeds were gradually increased until he was having the normal amount according to his weight.

He made steady progress, there was no vomiting, and the bowels were opened naturally. On the eighth day after operation the stitches were removed. On the tenth day after operation the baby had a sharp attack of diarrhoea, having green stools with mucus in them, six to eight in the twenty-four hours. His temperature was elevated for forty-eight hours but not beyond 101°. He was treated with bacteriophage, one ampoule every three hours, and bowel lavages of Condy's. The condition gradually cleared up, and he was discharged from hospital twenty-two days after operation, weighing seven pounds ten and a half ounces, fourteen and a quarter ounces above birth weight. When seen a week later he was very well and had gained a further six ounces.

* Reprinted from "The Nursing Journal of India."

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