

condemned in no measured terms by their professional brethren all over the kingdom. There can be little doubt that the Bill will be rejected; and indeed one of its strongest supporters has already withdrawn his name from it. But much mischief has undoubtedly been done by the tactless impetuosity with which the Midwives' Institute and their adviser in the background have acted; and legislation—which is so much needed—has probably been thereby indefinitely delayed.

OBSTETRIC NURSING.

— BY OBSTETRICA, M.B.N.A. —

PART I.—MATERNAL.

CHAPTER VIII.—DEVIATIONS FROM NORMAL CONVALESCENCE.

(Continued from page 303.)

At their completion, this Course of Lectures will be published as one of the Series of "Nursing Record Text Books and Manuals."

PUERPERAL FEVER.

IT might appear at first sight that this formidable malady scarcely lay within the range of our work, but I think I can show my Obstetric Nursing readers that there is no portion of it where scientific Nursing shines with such peculiar lustre as in this, and hence we will enter somewhat fully into the subject. Like most students in Midwifery, I read much upon it, and confess with profound humility that the more I read the less I know, and a somewhat wide experience in practical Midwifery has not added very considerably to my knowledge of the matter.

What is puerperal fever? The Registrar General classes it with the zymotic or infectious fevers, but it is only recently that it has come within the range of the Notification of Infectious Diseases Act, and in my judgment not one hour too soon. For the want of some such stringent measures a most formidable disease slipped through the hands of the sanitary authorities, and precautions against its spread, that might have been taken in a case of sore throat, were utterly neglected here. It has been urged that puerperal fever is not dangerous to the general community, which is true; but the fact that it is dangerous to an important section of it—child-bearing women—is in my eyes quite a sufficient vindication of modern legislation with respect to it. Of the zymotics, it bears in some of its characteristics a resemblance to two: Asiatic cholera and typhoid—in its suddenness, severity, and rapid fatality to the former; in its oftentimes weary, protracted course and protean developments to the latter, and in some cases, as we

know, a lying-in woman has the seeds of typhoid in her system to start with.

But there is one great point that marks puerperal fever out as quite distinct from its kindred zymotics, sometimes modifying, but more often masking them, and that is the peculiar condition of parturient women, for without the puerperal state, we cannot have true puerperal fever, nor that without infection from without; for I think I may say that the idiopathic theory of the disease is scarcely tenable now, and every student of Midwifery knows that in former days that idea led to the most disastrous results as regards the treatment of the malady.

There are three formidable factors in the production of the disease—the zymotics, the cadaveric and sewer gas poison. The second, which in its day wrought awful havoc, is now extinct, for antiseptic precautions have made it innocuous; the last, which if not a zymotic may be regarded as a zymosis, has not yet been dealt with thoroughly; it is a matter of *household sanitation*, and every Obstetric Nurse, more especially those whose connection lies amongst the upper classes, knows the difficulties that beset our work from the want of it. We may palliate the evil by disinfecting closets and drains, as I have pointed out to you in a previous paper, but it can only be effectually met by two measures—scientific sanitary *engineering* and sound *plumbing* work, a brain to plan and hand to execute.

In a former paper I entered fully into the sources of water-pollution, and the way to overcome them. The tanks that hold the water for the closets should be perfectly distinct from those that supply the household needs for cooking and drinking, and this drinking-water should be *boiled* before it is put on the table or in the toilet bottles, if it is not drawn from the main. The water in closet tanks should be disinfected in the tanks, and *constantly*; there should be ventilating slits in every closet, so that air is admitted night and day.

(To be continued.)

COMMENTS ON

THE MIDWIVES' REGISTRATION BILL.

By R. H. HODGSON, M.R.C.S., L.R.C.P., L.M.

What do the supporters of the above Bill advance in its favour?

That Midwives have existed from the earliest times.—So has sin, but surely that is no reason for legalising it.

That this is the only country which has not given them a legal status.—But this country did

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