

AN UNEXPECTED INCREASE

By

Sister M. Ella Stewart

THERE were six in the family to begin with, living, about three miles away from Holy Family Hospital, Bandra. They lived in Bombay proper, across the Mahim Causeway from where one can see the hills, or the Western Ghats on one side, and the beauty of our Lady of the Mount, on the other. Thomas and Bertha were both nearing forty years of age, with two boys and two girls making up the rest of the family, ranging in ages from 9 to 17—all in school. Thomas was employed in an office—but with careful planning was able to care for, and educate his little family.

Bertha first reported to one of our doctors at Holy Family Hospital early in February. Examination revealed little more than the fact of her pregnancy. Her only complaint was generalised pain. Her answers to the doctor's questions supplied little information except that the doctor observed an error between findings about the date of her pregnancy and what Bertha thought it should be. A fortnight later, I had the pleasure of meeting Bertha for the first time at the Antenatal Clinic. From that time onwards I was filled with compassion for her. Life seemed truly to be a burden for her and yet I could not imagine why. Her husband was a cheerful, courteous gentleman; her children were doing satisfactorily at school. At every visit when I asked Bertha how she was the only answer I received was "pain, pain". Perhaps her lack of going into detail concerning her difficulties resulted from a limited knowledge of English. Nor, was my limited knowledge of Hindi of much value because Bertha spoke Konkoni, one of the seven languages used in this part of Bombay.

Bertha came again in the following week—obviously feeling very uncomfortable. This time I strongly

suspected that she might have twins. We could have proved it by X-ray, but this costs money, as we do not have an X-ray here at this little hospital as yet. We were reluctant to ask her to spend money on an X-ray unless it became an absolute necessity. There were no signs then of a premature labour but she obviously needed help in more ways than one, so we soon admitted her to one of the wards. She was a quiet, silent patient—but was obviously in much pain. At least now we could investigate more fully the cause of her pain and relieve it.

Two nights later I had a sudden call from the Senior nurse on duty. "Sister come immediately, Mrs. Bertha is in labour; we have admitted her to the delivery room, and there is something that isn't normal." Literally, in a few minutes I was upstairs at her side and one glance showed me the nurse was correct. As I prepared to help, I was suddenly reminded of the story of Jacob and Essau, for two

"babies-to-be" were struggling to get into the world together. The first one had to be restrained and retarded to allow the second, to come first, a small but vigorous little girl of three pounds, two oz. Next came the "original Number one" almost on top of her sister—three pounds, one oz. The mother sighed passively as though trying to accept a double birth with its consequences. But we, midwifery staff, looked at one another for we knew the increase was not finished. Silently, we prepared for another advent into the world and within 15 minutes there appeared Number three—a little asphyxiated baby girl whose weight, we discovered later, was three pounds.

The cry of the third baby brought the mother out of her lethargy and she suddenly said: "Sister, twins were bad enough, but triplets—I'm shocked!" All I could say was, "See, how God has blessed you after nine years without any babies". I shall long remember



Holy Family Hospital, Bandra, Bombay—The triplets one-two-three being held by staff K. V. Annakutty (L), Sr. M. Ella Stewart, Pennamma Abraham and the mother of triplets.

the expression in her voice when she answered: "But sister, if you could see the size of our one room home—where shall we keep three new babies." All this was said haltingly and slowly and with great effort. Of course, we only know too well, the overcrowded conditions in which too many families have to live in that area. It isn't always that they can't pay for better accommodation but it just is not available. "What will my husband say", Bertha was saying now—"and the Children?" Obviously this thought was quite a shock for her.

Already my mind was running to a more immediate problem of keeping the triplets alive when we didn't have a single incubator, in our new-born nursery. Though we are a small hospital of 34 beds, we sometimes have as many as five premature babies at one time. The life expectancy of premature babies is not very high, as due to varying circumstances and cases, the babies often have to be discharged with the mother. In our hospital we keep them until they are at least five pounds and in good condition; but without an incubator it is a real struggle to keep them alive. At one time we applied to a prominent health organisation for a gift of an incubator, but they replied that they thought the hot, damp, climate of Bombay was on the favourable side of the premature infant. We have not found it so.....and we still have no incubator.

The mother begged us not to give the news of the triple birth to her family—in particular to her eldest son who was taking his matriculation examination that very week. She was afraid he would be so upset that his work might suffer as a result. The second son came to see his mother that morning and she told him about his two new sisters (not three!). The father and the youngest daughter arrived early in the afternoon and I showed them the three small mites lying side by side in adjacent cots in the new born nursery. The father smiled—a little overawed by the sudden increase in his family but he seemed happy. The little nine year old positively danced for joy. "We'll all help you, Mummy", she said.

"See how pleased they are Bertha," I said. "If only our one room was larger" said Bertha. "Never mind," said the father. "Joseph will soon be getting married and by the time these little mites grow up the others will be leaving us.....Then we will have only these three. Don't worry, God has provided for the first four; He will provide for these." That did it, Bertha finally relaxed.

We started feeding the babies with breast milk, by tube, in as far as we could obtain it. This created two more problems—the cost of the milk for three babies and the difficulty of obtaining it. There is very little powdered milk that can be bought here—it is scarce—so we wrote to different companies to try to interest them in the Triplets so that a supply could be guaranteed after their discharge from the hospital.

Meanwhile the news spread outside the hospital. Twice we received gifts of clothing, baby blankets, toys etc. for the triplets. The mother on being given them immediately asked for the names and addresses of the kind donors so that she could thank

them. On the 8th day, the mother was discharged from hospital but the babies remained for they needed the care of those trained to care for premature babies. After three weeks, the parents requested that the babies be baptized. A priest from the Parish Church was arranged to come to the hospital one morning together with the parents and as many of the relatives who were free to come. The babies were taken to the chapel and solemnly baptized: Sharon, Shirley and Susan, names chosen by the dancing nine year old sister.

One by one, the babies were discharged as they passed the five pound weight test in order to give mother time to get used to handling one, two and finally three babies at once. So the third baby was kept two weeks longer than the second and weighed five pounds, 12 oz. on discharge. They had almost become a part of the nursery during their long stay with us. We see them occasionally in the O.P.D. for minor ailments—but now Bertha has a big smile on her face, as the triplets have become the centre of attention wherever they go.

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