



THE MIDWIVES' UNION SECTION

Hon. Secretary:—Miss S. M. Round (Sister Sallie), All Saints' Dispensary Panvel, Dt. Colaba, Bombay.

Members are asked to send any helpful notes of cases, and articles for this Section to the Secretary.

All Saints Dispensary
Panvel
District Kolaba.

DEAR FELLOW MIDWIVES,

As there is so much talk about Ante-natal work and Infant Welfare Centres. I thought you might like to hear what Panvel has been doing.

Ten students and Dr. Vakil (lady) came out for 3 weeks from Bombay. They were housed in Dr. Patwardhan's Maternity Home and we co-operated. Lectures on Tuberculosis, Malaria, Infant Welfare and Maternity work were given with the help of a lantern and slides. Various villages in a radius of 20 miles have been visited.

During the time the students were here; we had a Placenta Praevia. Mother did well. Baby dead. Face presentation, both did well. Breech presentation, baby very asphyxiated, artificial respiration given for 45 minutes and it lived. Footling presentation, baby born dead, 4th pregnancy, and all the babies had died. Transverse in which decapitation had to be performed, premature mother and baby, doing well and last but not least triplets mother did well, but unfortunately all 3 babies died. So I think we gave the students quite an interesting time. Besides this there was a threatened abortion, and another case, primipara passed pure blood instead of urine for 24 hours. No pain and foetal heart sounds good, 8th month. She was treated with diuretics and barley water. So you see Panvel can produce a few unusual things. We are only hoping that when the students have passed their Health Visitors' examination it will inspire them to go into the smaller towns and villages and help these poor, and in many cases, ignorant mothers. Do please send me some accounts of your doings.

I am yours sincerely,
SISTER SALLIE.

The Toxaemias of Pregnancy

In his lecture at the Surrey County Council Post-Certificate course, F. V. O'Sullivan, F.R.C.S., dealt most ably with this important subject. We publish a summary of his remarks.

The Minor Toxaemias. Morning sickness is a condition which occurs in about 50 per cent. of pregnant women, and in the old days used to be looked upon as a normal condition. In fact, every pregnant woman was expected to suffer from morning sickness. In these enlightened days it is looked upon more seriously, and it is wisest to start treatment at once. There may, of course, be only a slight nausea or there may be actual vomiting. It has even been thought by some that pregnant women who suffer from this complaint are really only suffering from an attack of nerves. The modern theory is that all cases of morning sickness in pregnant women are due to toxæmia and need careful treatment.

It should be remembered that the liver is the organ which is attacked first, and that glycogen is stored in the liver cells. Now often a biscuit, dry toast or some form of glucose will arrest the vomiting. The diet must be regulated, with a reduction in fats and proteins. All such cases should be reported to a doctor.

Heartburn is another rather distressing condition which sometimes accompanies pregnancy, and is due to organic acids or excess of hydrochloric acid. It is not enough just to give large doses of sodium bicarbonate and hope that this will neutralise the acidity. Each case must be investigated properly and the true cause of the heartburn ascertained.

Many pregnant women suffer from such things as constipation, varicose veins and hæmorrhoids, and all these are really due to the same cause. The corpus luteum acts on the tissues, there is delay in emptying the bowels, constipation results, often followed by hæmorrhoids. The pregnant woman does not as a rule take enough exercise; she finds walking a difficulty and so is more liable to get constipated. It is best to start your patient with a mild aperient, and if that is not successful something stronger will have to be tried. If the patient develops painful hæmorrhoids she should be put to bed and treated with care, for it is possible to get pyæmia from thrombosis of hæmorrhoids. In a case of painful hæmorrhoids it is quite useful to soak a pad in liquid paraffin and apply externally. Varicose veins should be supported on their first appearance, either by a bandage or suitable stocking. In some cases it may be necessary to inject the veins.

Vitamins and Calcium

Such unpleasant conditions as cramps and neuralgia are generally due to a deficiency of proper vitamins in the food and an insufficient supply of calcium. Supply the necessary vitamins and calcium and your patient will soon cease to complain.

Salivation is perhaps one of the most difficult conditions to treat and great patience has to be exercised and many remedies tried, but it is possible to cure it. Salivation is very distressing to the patient; she may even work herself up into a frenzy of agitation. Various mouth washes should be tried, while often belladonna and atropine have to be resorted to, and as the condition stops during sleep in the majority of cases, it may be necessary to induce sleep by means of a sleeping draught. Women who suffer from salivation rarely feel any bad effects, and as soon as the baby is born the condition ceases. Milk given in large quantities is useful and may perhaps be said to be the best treatment for persistent salivation.

Many women suffer from pruritis, which usually starts in the vulva with severe itching of the skin round the genitals; then urticaria may appear in various parts of the body with violent irritation. All such cases should be seen by a doctor, as often the cause of the condition is due to diabetes. If no albumen, sugar or pus are found in the urine, then other causes must be considered.

Rest in Bed

Varicose veins have been known to cause pruritis and when they appear in the vulva are most painful and often take a long time to get rid of as well as being very distressing for the patient. Urticaria is frequently associated with albuminuria and is a great danger to the foetus. Various skin rashes may appear and must have proper treatment. Often rest in bed, together with a diet free from protein, will be most effective. In severe and persistent cases it may be necessary to give only glucose and water for a few days, large doses of Epsom Salts or some other saline, external applications for the skin and some form of bromide to induce sleep.

In some cases herpes may develop. A doctor must at once be consulted, for it is possible to get badly infected glands through untreated herpes.

Caries of the teeth is often overlooked and thought to be of no importance, but much trouble might be saved if all pregnant women had proper dental treatment.

The Major Toxaemias.—Albuminuria or pre-eclampsia is a serious condition and directly a patient is thought to be suffering from this a twenty-four hourly specimen of urine must be tested daily and the blood pressure taken. It is essential to see to these matters as all cases have a raised blood pressure and albumen will always be found in the urine. There is often oedema of the feet and other parts of the body, and in order really to diagnose such cases every ante-natal clinic should take these tests systematically, as well as weighing the patient regularly. Many cases of eclampsia could be ruled out if statistics were taken conscientiously.

The best treatment for albuminuria is complete rest in bed with a diet rich in glucose and free from proteins until the condition improves. The bowels must be kept well open and in severe cases colon lavage may have to be used. It may be necessary to isolate the patient and only give water by mouth with plenty of sedatives. If there is still no improvement the pregnancy will have to be terminated. Should the blood pressure become normal in fourteen days there will probably be no further trouble, but if it stays up and albumen persists then it is almost certain that chronic nephritis has developed and the patient should not, in any circumstances, become pregnant again.

Hyperemesis or excess of vomiting in pregnancy usually starts with ordinary morning sickness, then goes on persistently and often continues by night as well as by day, the patient then becomes emaciated, the pulse rapid, and if speedy treatment is not carried out she will die.

Acute yellow atrophy is always characterised by jaundice and occurs in the last three months of pregnancy. There is marked constipation accompanied by jaundice and the condition is a very serious one, but will respond to treatment.

Eclampsia is the most serious of all the toxæmias, but, fortunately, the cases are becoming increasingly rare. There are various theories as to the cause of eclampsia, but whichever one is right, it is most necessary to take the blood pressure, test the urine and weigh the patient. Medical aid should be called in at once and the patient removed to a hospital or nursing home. The modern theory is that it is wisest not to perform Cæsarean section, but treat medically, but it should be remembered that in eclampsia no patient is safe until the pregnancy is terminated, and statistics reveal that about 50 per cent. of the children die, and about 22 per cent. of the mothers. Above all, let it be recalled that whether a patient is suffering from a major toxæmia or a minor one, the condition is one which calls for skill, promptness and kindness, and should never be regarded lightly or not worth while.

(From *The Nursing Mirror and Midwives Journal*, February 13th, 1937.)

Treatment for Eclampsia

The following treatment for eclampsia is used at the Salvation Army Hospital, Nagarcoll, where it is found extremely successful.

Directly the patient is brought in the following stomach wash out is given, Sod. Bic. $\frac{1}{2}$ to Water O II, the contents of the stomach are invariably so offensive that it is frequently necessary to give up to O VI before the wash-out is returned clear. Mag. Sulph $\frac{1}{2}$ Mag. Carb. $\frac{1}{2}$ in Oss. Barley Water is run into the stomach before the tube is removed and is followed by an enema if necessary. Major Poole who kindly contributed this note for the Midwives' Page said that the treatment was most satisfactory.