

not to become pregnant at least for one to three years, explaining to them the complications that may happen after labour, due to the inability of scar tissue to expand, and so cause obstructed labour. Afterwards they are discharged full of joy and advised to attend some Hospital for their next confinement and explain to the doctor, that they had a fistula before which had been repaired.

I am very glad to tell you that during my two months' training in the Gynaecological ward, out of the 6 V.V.F. operation cases that were done, 4 got better, out of which three have been sent home, and the two that didn't succeed are still waiting to be operated on with a firm belief that they will get better.

As Doctor Scudder is an expert at this operation, which is often a very difficult one, and as Indian women are so often terribly torn in childbirth, we hope that she may be spared for many years to help them.



THE MIDWIVES' UNION SECTION

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

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

HYGIENE OF PREGNANCY

By Miss G. H. LALA, B.P.N.A.,

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Ante-natal care means the care of the mother's health from the time she realises that conception has taken place to the time of the onset of the labour. In order that she may pass through pregnancy not only safely, but in the best of health, and that the child be born healthy and strong, the expectant mother should lead a normal and regular life. It is essential that this care should be taken not for the last few months only, but for the whole period of nine months, if possible.

An expectant mother should lead as normal a life as she possibly can by taking sufficient rest, enough exercise, nourishing and wholesome diet, and leading an open air life under the sun's rays.

It is a mistake to consider pregnancy an illness. It is a normal physiological process, and since it is normal, disease should not accompany it. Unfortunately, modern conditions of life do not permit a quiet natural life and sometimes complications arise. Fresh air is very essential and hence windows should be kept open day and night. This however is difficult to obtain in large, dusty and smoky towns, especially in thickly populated cities. The social restriction and the custom of the purdah, amongst certain classes of people, mostly come in the way of leading a free open-air life, the womenfolk being compelled to keep themselves to the backyard of the house. The habit of sleeping in rooms with windows shut, and with bedcovering pulled over the head should be discouraged, as foul air is inhaled into the system instead of pure oxygen.

We all know that a plant grown under the rays of the sun, grows to its normal size, while a plant which does not get the direct rays of the sun on it remains stunted, and has chlorophyll in its leaves. This is also true of human bodies and they too need the rays of the sun on them, for a normal healthy development; it helps to generate vitamin D in the body. Sunshine is the enemy of disease and it helps to keep the atmosphere sweet and clean, which would otherwise be foul and laden with germs. We in India have a great advantage over those in the West in having bright sunshine for the greater part of the year. What our conditions would have been without it, is difficult to imagine.

The expectant mother should lead a quiet healthy life. What is a quiet life? Not the avoidance of the usual household duties but keeping aloof from a mode of living likely to create excitement and tax the nervous system. The expectant mother should perform her household duties which gives her a sort of light exercise, as it is very essential during this period. Lifting of heavy weights should be avoided, for this is positively harmful. Under no circumstances should the woman tire herself. Lifting of even light weights above the level of the head, should be avoided. Walking is the best form of exercise for a pregnant woman, as it tones the muscles, stimulates the entire system, generates appetite and promotes the removal of waste matter from the body.

(To be continued).

THE MOTHERCRAFT SECTION

Articles for this section will be welcomed by the Editor,
Miss Diana Hartley

The Premature Infant

Premature babies are those born after the 28th week, when the child is considered viable and before the fortieth week or full term.

At Birth they are small and lack the vigour of the normal infant, they usually move very little, their limbs are puny, faces wizened, heads and abdomens large in proportion to their size, their skins are red and wrinkled because of the lack of sub-cutaneous fat, their nails do not reach to their finger tips, their veins are prominent, sutures wide, cries feeble, they often cannot suck and they are less than nineteen inches long.

Any baby weighing less than five pounds should be treated as premature to give satisfactory results. The smallest known was fourteen ounces in England and $1\frac{3}{4}$ lbs. in New Zealand.

Premature babies are difficult to rear, because of their lack of vitality, inability to digest food and difficulty in maintaining body temperature. Their organs and tissues are not ready to carry on their functions outside the uterus and want of fat makes them very susceptible to cold. But the trouble taken over them is well worth while, for they grow into normal healthy children, and they should be treated as normal babies, directly they are normal in weight.

Treatment

Three points to remember

1. To maintain and regulate body heat.
2. To prevent infection.
3. Food.