



THE MIDWIVES' UNION SECTION

Hon. Secretary :—Miss S. M. Round (Sister Sallie),
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Members are asked to report any helpful notes of cases, and send articles for this section to the Secretary.

Madras Board Examination in Midwifery (Vernacular) May 1935—Questions

- I. What are the different antiseptics used in obstetric practice? How would you prepare a case for Caesarean section.
- II. How would you diagnose a breech presentation. Discuss the management of an uncomplicated case of breech.
- III. What are the causes of postpartum haemorrhage? What is the treatment for this condition.
- IV. What is prolapse of the cord? How would you treat such a condition?

Board Examination in Midwifery (Advanced) June 1935

- I. Describe in detail the preventive treatment of puerperal infection.
- II. How is cancer of the cervix diagnosed? Discuss the importance of early diagnosis and the difficulties associated therewith. What instruments would you get ready for an operation for the cure of this condition?
- III. Describe the diagnosis of twin pregnancy. How would you manage the labour? What difficulties may be met with?
- IV. Describe an eclampsia fit, its diagnosis and treatment. What are the danger signs.

Some Interesting Midwifery Cases

By MISS MACKENZIE

1. Aishan. Mahomedan, age 20. Admitted 8 a.m. 26-6-35.

History. 8th month of first pregnancy. One child (which died later) was born at 8 a.m. on 25-6-35 in the village about 24 miles from D. I. K. On admission the mother was having strong pains, the severed cord of the first child was presenting, and the patient was in a very dirty condition. Pelvic measurements: I.S. 8"—I.C. 9"—E.C. 6½". Patient was cleaned, and the examination per vag. showed a rather contracted os, membranes intact. She was put to bed with a dose of Pot Bromide and Chloral Hydrate gr. 10 each, at 11 a.m. Membranes ruptured at 1 p.m. and a still born male child was delivered at 1-25 p.m. (weight 4 lbs.). Placenta and membranes were expelled entire in 10 minutes. No tear, no P.P.H. The patient had fever for 5 days, receiving the treatment of vaginal douches B.D. and Mist Ergot and Quin. T.D.S. She recovered and was discharged from Hospital, returning to her village by camel as she had come in. That is the most usual means of transport for those villages off the main motor road. I remember a similar case admitted about a couple of years ago, but in this case a dirty chapli had been tied to the hanging cord, to prevent it going up again! Needless to say, though a strong woman, she died of puerperal sepsis.

2. Jasoda. Hindu, Age 22. Admitted 10 p.m. 5-7-35.

History. Full term, para second. The first delivery was by Caesarian Section 2-years ago. Child alive. Gave a history of having begun labour

pains at 8 p.m. and passed Liq. Amni. On examination patient was well built and well nourished. P. A. Scar of the old Caesar present, 2" above symphysis to 2" above umbilicus, slightly to right. Palpation discovered a twin pregnancy. One child presenting by breech, the other by vertex. F. H. good. Heart and lungs normal. Measurements: I. S. $8\frac{1}{2}$ "—I. C. $9\frac{1}{2}$ "—Ext. Conj. $6\frac{1}{2}$ "—Int. Conj. $3\frac{1}{4}$ ". Patient was prepared, and Caesarian Section done, incision slightly to the left this time. On opening the uterus the bag of membranes was found intact, and was ruptured, and the first child presenting by the vertex was extracted. A second bag of membranes was found, ruptured, and the second presenting by the breech was extracted. Both were male children, the first weighing 5 lbs. and the second $4\frac{1}{2}$ lbs. They were born in a slightly asphyxiated condition, but responded to treatment. Soon after the placenta and membranes were removed, the patient had an injection of Pituitin and Ergotine.

After treatment. Rectal salines with Glucose 4 hourly for 24 hours, and Inj. Ergotine 4 hourly for 24 hours. Diet, water the first day, milk and water from the second day, and light diet after the bowels had acted. The patient is still in hospital and doing well. Owing to the extreme heat the babies ran temperatures to 104° , the smaller babe died on the second day, but the other is doing well.

STUDENT NURSES' ASSOCIATION SECTION

Reports and Articles for this Section will be welcomed by the Hon. Organising Secretary, Miss J. ROBSON, S.R.N., D.N., Rainy Hospital, Royapuram, Madras.

The evening of the 22nd June saw a pleasant gathering of Student and Staff Nurses and their particular friends in the Nurses' Quarters of the General Hospital, Madras.

The weather threatened to damp the atmosphere of cheerfulness and cause the absence of some of the guests, but managed to clear up sufficiently to allow everyone of those invited to put in an appearance, and lend a hand towards livening up the entertainment.

To commence with, and help in breaking the ice, there was dancing, with an obliging band to respond to enthusiastic encores. The prize offered for the Spot Waltz was taken by Staff Nurse Michael, and Mr. Gibson—a Military Medical student. A happy win, judging by the popularity of the couple. The former was presented with a silk scarf and the latter with a box of handkerchieves.

An item which evoked considerable enjoyment was the 'Derby Race', in which each couple was presented with a length of paper ribbon, tightly rolled. The ladies were obliged to cut through the length of the ribbon with a pair of scissors, their partners unravelling the roll for them. Much depended on the skilful handling of the roll, as the breeze played havoc with the thin strips of paper, which, once being snipped in two rendered the disqualification of the couple concerned.

Staff Nurse Laporte, and her partner, Mr. Le Tang managed to 'do the trick' between them, while much laughter and confusion prevailed amongst some of the other couples.

'Guessing the Tunes' competition called forth the musical ear of those present. Each one was given a printed copy of a 'disjointed' story—the