

fatal cases the foreign body is stated to have been present for the following periods: Several years (3 cases); seven years (one case); two years (one case); one year (one case); five months (one case); three weeks (one case), and twice "unknown."

Among the 33 patients who recovered cases are included in which the foreign body remained in the peritoneal cavity for seven, twelve, fifteen and (probably) nineteen years. Of the 33 cases, 26 were treated by a second operation, and in the remaining seven the instruments were passed through a sinus or per rectum.

THE CARE OF THE PREGNANT WOMAN.*

FROM "NATIONAL HEALTH."

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In dealing with the pregnant woman, I wish to lay stress on the psychological rather than the medical aspect of the condition. It is necessary to study the pregnant woman as an individual and to take into account her temperament, character and environment; the whole study being made with a view to helping her with the problem presented by her pregnancy.

Temperament is defined as that which is innate, and though modified by education and experience, is an abiding element in the life of the individual. With regard to temperament, there are two extreme types of mothers:—(1) the emotional, (2) the phlegmatic. The ordinary types occur somewhere between these two extremes.

In the emotional type (usually the most attractive personality) the woman is easily disturbed, but has a good power of recovery; though her temperament is not that of a successful nursing mother.

The phlegmatic type, though not so easily disturbed, has very little elasticity, and when once depressed, is difficult to rouse, and may become morbid.

Character is largely formed by education and in practice represents the capacity of the mother to respond to influence. Some mothers do not respond readily to influence, and are difficult patients for the doctor and nurse. The medical history of a mother often presents valuable indications as to the character of the patient—such details as the number of children reared, the age of those who have died, and so on. Her life also reflects her character; she may be strong enough to rise above her surroundings, or she may be overwhelmed by them, and sink into careless indifferent ways.

Environment may, or may not, influence her to any great extent; but it should not be neglected as a factor in the problem. In studying the environment, it is the home visit which is most valuable. Neither doctor nor nurse can know the mother well, if they only see her infrequently at a hospital clinic.

The main point to bear in mind is that the whole object of such a study is to influence and guide the mother, to make her look forward to the coming child with a deep sense of the responsibility involved in that growing life within her. All mothers should have the intense life of the embryo impressed upon

* Being the substance of a lecture given during National Baby Week, 1922.

them ; life is never so intense, nor growth so rapid, as during the first few months of pregnancy ; were this fact better known, the mothers would regard abortion, as procured by ecbolics, as being as criminal an act as the murder of a child. The reason that they so often acquiesce in the deed, is that they seldom recognise the life of the child, prior to the manifestation of quickening.

In pregnancy the whole tension of life is raised. The healthy mother feels often unusually well when pregnant ; whilst the unhealthy woman finds with the raised tension of life, an increase in her abnormal symptoms.

The value of the routine inspection of expectant mothers is to find out and treat any abnormal symptoms as they arise ; but there is at the same time a danger of the mother regarding herself as an invalid, and becoming introspective.

The important function of the antenatal clinic is constantly to lay stress on the normal aspect of motherhood. The mother should regard herself as a normal being, undergoing a normal and healthy process and preparing herself for a normal labour and nursing period, with a normal and healthy child. Medical examination is so closely connected in the public mind with disease, rather than with health, that it is difficult in dealing with the mothers, to combine extreme care and watchfulness with the idea of normality. It is so easy to convey the idea of abnormality to the expectant mother. Pregnancy is so beset with ancient fallacies, that one of the functions of the antenatal clinic should be to allay the apprehensions that arise in the mother's mind. The power of suggestion is almost unlimited and can be used with good effect in dealing with mothers. Their minds should be prepared for the course of normal labour, and no thought of artificial means of delivering the child should be permitted.

The question of infant feeding is one which has yielded to the power of suggestion. Now that the idea of breast feeding is abroad, it is astonishing how many mothers have become successful in nursing their babies, as compared with ten or twenty years ago. The bottle-fed baby is now regarded as a failure.

The same principle ought to be applied to the question of labour. A normal labour should be regarded as the most successful one for all concerned, and the first forceps delivery, the first failure.

By establishing maternal health on a sound basis, and by reducing interference with labour to a minimum, we should also reduce the deplorable maternal mortality rate.

In laying stress on the power of suggestion and personal influence upon the course of a normal pregnancy, it is very necessary to remember, that the whole structure must rest upon the basis of sound medical knowledge. It is of no use suggesting normal labour to a woman, to whom such a happy experience is impossible ; and therefore, valuable as suggestion and influence may be, they need to have the control of expert medical opinion, to produce the results we all desire on behalf of pregnant women in this country.