

of the meningococci,<sup>1</sup> independently, and for rather different reasons, had discarded the conventional method, and was able to rely on his results when obtained with an undiluted monovalent serum. He read his results, however, in a pipette—that is to say, stopping short of spreading and staining a film. In the case of such a highly controversial subject, however, as that of the meningococcus, I prefer Mr. Lister's method, which was also mine, because the personal factor is eliminated and a record of the observations remains on the stained slides. I am, Sir, yours faithfully,

Yelverton, Devon, Jan. 19th, 1916. H. WARREN CROWE.

## MIDWIVES' GRIEVANCES.

*To the Editor of THE LANCET.*

SIR,—In reference to Dr. Charles Porter's letter *re* "Fair Play's" note on Midwives' Grievances in THE LANCET of Jan. 1st, and your comment on it, one must conclude that the medical officer of health of Marylebone (unlike "Fair Play") does not make himself acquainted with the midwives' point of view on matters so greatly affecting them. In regard to the pressure being brought to bear on them to notify their cases, and the word "bluffing" used by "Fair Play," how would Dr. Porter describe the action of a county medical officer of health who sends printed notification forms to the midwives of his county, as if notification were obligatory (in his report he calls his action "tentative"), and the action of a health visitor under him who tells the midwives that it is an "Order in Council" (may one ask what council?)? If this does not constitute "bluffing" perhaps Dr. Porter could find a stronger and more expressive word. Should this notification pressure continue pregnant women will cease to book, there will be more emergency calls, more B. B. A. cases. Had Dr. Porter read the nursing and midwifery journals he would have seen that far from midwives congratulating themselves on (as he suggests) the inspection of lying-in homes being in the L.C.C. Public Control Department, they deeply deplore it and desire reinstatement in the Health Department, where they themselves have been since 1902. The only cause for congratulation so far is, that their homes have not been put under the borough councils with (as THE LANCET puts it) "their varying degrees of zeal and intelligence"—might one also add "honesty"? Midwives have not the same confidence in borough councillors as in London county councillors. Borough councillors may be landlords and have vested rights. Questionable homes conducted by persons unregistered and uninspected under Central Midwives Board rules may be easily "covered" locally. The *Walthamstow Guardian* recently reported that at a meeting of Leyton borough councillors, when it was to be decided whether they would take over from the county the inspection of midwives, a councillor opposed the suggestion that they, in turn, should delegate their powers under the Midwives Act, 1902, to a voluntary association of ladies to be organised for ante-natal work. Evidently these powers, in the hands of borough councillors, may be delegated lower and lower for economy's sake, and yet Dr. Porter questions the lowering of the midwife's status. He continues to discuss at great length and sarcastically the economies of the London County Council *versus* those of borough councils, but it is exactly this cheap, inexpert, second-rate, or part-time inspection under borough

councils that the trained midwives of London would strongly object to. For 14 years they have been uniformly inspected by the able London County Council women medical officers, who enter every registered midwife's home to inspect case-books, registers, bags, &c., and the midwives themselves. Would it cost a penny more, as far as midwives were concerned, for this expert authority to look round the house, if need be, as she is already in it? Registered midwives are not interested as to who inspects the undesirable or the homes of the unregistered persons so long as they do not come under the same inspection. Their inspection should be purely from the medical view-point and not (as with the undesirables) from the view of wrong-doing. People should consider their noble and arduous work as life-savers and health-workers, as friends of poor mothers, and not look upon them as a set of people existing merely to be policed and harried.

I am, Sir, yours faithfully,

JANET EWART ST. CLAIR,

Honorary Secretary, Fulham Association of Midwives.

Jan. 24th, 1916.

\* \* We are informed that the Huddersfield sanitary authority is offering to pay to medical men or registered midwives a notification fee of 2s. 6d. for each notification of pregnancy to the medical officer of health. The notification, however, has to be made with the knowledge and consent of the pregnant woman. It will be seen by our report of the proceedings at the Central Midwives Board that the Board entirely disapproves of the delegation of the administration of the Midwives Act by the Essex County Council to certain boroughs.—ED. L.

## SOLDIER'S HEART.

*To the Editor of THE LANCET.*

SIR,—I should like to emphasise the importance of the point made in the first few lines of your annotation on "Soldier's Heart" in THE LANCET of Jan. 22nd. The authority of Sir James Mackenzie in the matter is so great that there is some danger of a tendency to set down almost all heart conditions in soldiers as "soldier's heart"; whereas a very limited experience in the dual capacity of an examiner of recruits and a medical officer in charge of medical cases in a military hospital will, I think, convince anyone that no inconsiderable number of men with organically impaired hearts are being passed into the new armies. It seems to me that the history should have great weight in these cases, and that there should be much hesitation in diagnosing "soldier's heart" in any man with a history of past acute rheumatism or other infection unless the opportunities for observation have been adequate—more adequate, for example, than those usual in an examination by a medical board.

It is well also to remember that not many men can conjure with the wand of Sir James Mackenzie.

I am, Sir, yours faithfully,

Holmfirth, Yorks, Jan. 22nd, 1916. ROBERT H. TROTTER.

\* \* The point was made by Sir James Mackenzie himself.—ED. L.

DONATIONS AND BEQUESTS.—By the will of the late Miss Ellen Pearce, of Southsea, Dr. Barnardo's Homes will receive £500, and the Royal Portsmouth Hospital and the Portsmouth Victoria Association for Nursing the Sick Poor similar sums.—Mr. James Hill, M.P., has marked his unopposed return for the Central Division of Bradford by distributing 1000 guineas among 12 philanthropic institutions of the city. The Royal Infirmary will receive £400, the Royal Eye and Ear Hospital £100, the Children's Hospital £100, and the Royal Institution for the Blind £50.

<sup>1</sup> Brit. Med. Jour., Dec. 18th, 1915.