

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

IN Number XVIII of your valuable Medical and Physical Journal, Dr. Kinglake says, that in labours the support of the perinæum is more worthy of female attention than that of an experienced accoucheur, and that the practice of midwifery is not uniformly necessary. In answer to which, I would suppose, that Dr. Kinglake has rarely attended to natural labours, or else he would certainly never have objected to the support of the perinæum. From the respectable authority of Drs. Osborn and Clark, to whom I am indebted for my share of knowledge in this science, the necessity in their lectures was strongly inculcated of making a proper pressure upon the perinæum, (and since then by Dr. Osborn, in his excellent work upon Natural and Laborious Cases of Midwifery,) for the benefit of securing it against laceration, and at the same time that the expulsion of the child will be prevented from hastily taking place; by which means the placenta will be delivered with more ease both to practitioners and patients, and in nineteen times out of twenty will be one means of facilitating its expulsion.

Notwithstanding what Dr. Kinglake has advanced, the support of the perinæum is probably one of the principal objects in the practice of midwifery, and constitutes the greatest part of a natural labour. The resistance employed by an experienced practitioner, must certainly be greater than that perhaps of a kindred female; the benefit greater, and more attention paid to the state of the patient by less frequent examinations per vaginam.

The resistance has certainly prevented laceration; and other evils have taken place from a want of a due regard being paid to this subject, and have principally happened to ignorant women, denominating themselves midwives. If Dr. Kinglake wished midwifery to fall again universally into the hands of ignorant women, (which seems to be the case) this is certainly one way of encouraging it, as by mentioning such circumstances as these, they may militate against the general practice.

As the Journal is universally read by numbers not of the profession,—from a worthy author of the Qualifications of an Accoucheur, I beg leave to select these few remarks: “If instances were not known, one would scarcely suppose that any man would be so unfeeling and audacious, as to practise this branch of the art without a regular training, or that from any
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compliment husbands would chuse such a person to act in this *important office*; the whole association of professors and practitioners in this department, should, for the sake of *humanity*, earnestly unite in discountenancing untutored intruders; if *guardians of the profession fail to support regularity*, incompetent judges cannot be blamed for making improper distinctions. Students who are at the expence of a regular education, who closely apply in acquiring qualifications, and fulfil what is required of them, lose the necessary spur to industry, when the unqualified can gain equal privileges and equal encouragement.

“Regulars cannot consult with ignorant and untrained pretenders to the art, consistently with their duty to medical society, or with integrity to their employers.

“It may be argued, that women devoid of elementary rules, are frequently trusted with the management of this *momentous office*; but it may be asked, are not men generally preferred, in the expectation of greater safety in the hands of those that have studied the structure of the parts concerned, and the rules of practice under eminent teachers? Every conscientious professor of the art must acknowledge, that there may be greater hazard from this part of science being left to the management of men than women, unless suitable instructions have been imbibed.

“What a disappointment must it be to a delicate woman, that has with difficulty being prevailed on to consent to the customary preference, should she discover her accoucheur to have no qualifications superior to a MIDWIFE.”

And again, the worthy Mr. Lucas says, “As far as many year’s experience have enabled me to judge, a regular disciplined accoucheur may find that some recent information may be derived from every case; but such proficiencie cannot be acquired without a proper foundation, a regular education.”

Having attended a considerable number of women, I am of Mr. Lucas’s opinion, that something may be learned from every case; I have attended in midwifery, and I can also add, and I think the generality of practitioners will allow, that by a proper management of natural labours, with equal regard to the support of the perinæum, &c. they will find that the women recover much better; a good knowledge of natural labour certainly assists us with information in all cases of the preternatural; it is frequently to be observed where one stage of parturition is unusually rapid, or unnaturally expedited, a subsequent stage is retarded; as, for instance, where the child is suddenly born from a want of due support of perinæum, the placenta is retarded; this I know to be frequently the case.

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There will be great utility in counteracting an hasty procedure, particularly in impatient women, in order that the conclusion of birth may co-operate in assisting the contraction of the uterus, and, consequently, the expulsion of the placenta.

Would not a sensible, humane practitioner be seriously vexed if, by not paying proper attention to the last stage of delivery, it should be said by his negligence the woman was injured? Would he have a chance of being employed in the same family? Would not his compeers, in the same town, take advantage both of his negligence and his want of skill?

With regard to the delivery of the placenta, considerable mischief has ensued from its immediate expulsion. My practice is, that if the placenta does not come easily away in the course of twenty minutes from the birth of the child, by pulling gently at the funis, in different directions; if, then, there should be any retention, I wait another half hour; and, by gently pulling, try if any advances have taken place. If no advances have taken place within an hour or two, (according to circumstances) I then find it necessary to deliver by manual introduction; and not more than two cases have taken place in my own practice. But in all cases we have not the advantage of the funis, by its rupturing from the smallness of its size. In most cases the manual operation is certainly prevented, by paying a proper regard to the support of the perinæum, and preventing the hasty expulsion of the fœtus. I am,

GENTLEMEN,

Your humble servant,

SAM. THOMAS, Surgeon.

Wakefield, Yorkshire.

P. S. Upon mature consideration, I should be sorry to doubt the abilities of Dr. Kinglake, whose papers in your useful Miscellany I have read with pleasure, (all except the last); and, being an advocate for the good success of the science of midwifery, which I think ought to be in the hands of the most intelligent practitioners, and not in those of low uneducated women, it could not escape my notice without something being said on the subject, as I think if the perinæum is not properly supported, laceration may ensue, and perhaps other direful symptoms take place. In a case of the presentation of the face, or rather the chin, which I had lately, if there had not been due support applied, during every pain, to the perinæum, laceration, I am certain, would have taken place.