

SHOULD MIDWIVES BE REGISTERED?'

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This article is written with the purpose and desire to provoke discussion upon the question of the supervision of midwives by the State. What is the present legal status of the midwife? Is she a necessity or a nuisance? What relation does she bear to the governments of civilized communities? Has she a standing in any of the States of the Union? Is it wise for our own State to take any legislative action? If so, what should be done?

The State of New York recognizes four classes of medical practi-

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tioners, physicians, pharmacists, dentists and veterinarians. All of these are compelled to furnish proof of good moral character and to give evidence of knowledge of their respective branches before competent examining boards before they are allowed to practise their professions. The law prescribes how much knowledge each student shall possess before beginning study, and the duration and scope of the course of education. It also prevents any from practising except those licensed. Midwifery is a branch of medicine but differs from all other branches in that the vast majority of its patients are in a physiological and not a pathological condition. The law may exact just and heavy penalties from a man who allows his child to die of disease through neglect to call a physician. And it might punish a man who allows his wife to die of puerperal convulsions or hemorrhage unattended. Yet it would be impossible to convict a woman of the crime of giving birth to a child without medical aid. She might, and frequently does, prefer to have her mother with her instead of a physician. Or labor might be short and a kind neighbor might perform the needful offices. Neighborly attendance in cases of sudden death from other causes is considered no attendance and the facts are certified to by the Coroner. But no inquest can surely be necessary in uncomplicated birth without medical attendance. In reporting such a birth the line for the name of the physician is simply left blank, and many birth returns are made out in this manner. And so when unlicensed women assist at births, the cases stand before the law as being without medical attendance.

The law makes no mention of midwives whatever; hence they are without its pale and are irresponsible. The Boards of Health of our large cities compel them to register in their respective offices, but in the absence of legal recognition no qualifications can be required from the women presenting themselves for registration. They must receive all who apply and wait for a coroner's case or an indictment for manslaughter in order to obtain an opportunity to drive away incompetent ones; for any attempt to prosecute as illegal practitioners of medicine all those engaged in the practice of midwifery would not be sustained by the public sentiment of our large communities.

The mere fact that there are so many midwives is proof presumptive that they are needed. The vast majority of their patients are among the poor, who are unable to pay the fees that most physicians consider an adequate return for the service. These poor people live in few and small rooms, and even when able to afford the expense of a nurse have no place for her to sleep. The sleeping accommodations of

all tenement apartments are entirely inadequate. Badly ventilated at best, each pair of lungs is a tax upon the supply of oxygen; hence the fewer the residents, the better their health. The ordinary house-keeping duties of the poor are light and are easily assumed by the neighbor across the hall, so that the chief call for a nurse in an ordinary case of confinement in a tenement house is to cleanse the woman, renew the bed, and bathe the baby. All these duties are performed by the midwife, and it is this combining of the functions of medical attendant and nurse that makes her so useful. There are very few physicians who have the time or the willingness to undertake these many duties at the price that these people are able to pay. Midwives always avoid difficult or dangerous cases. They send in about forty-five per cent. of the birth returns in Brooklyn. It is estimated that only about two-thirds of all births are ever reported. Physicians are most careless in this respect but, after all allowances, it may be estimated that midwives attend at least one-third of the births of Brooklyn. I have made an endeavor to ascertain if they have more than their share of still-births, or, more than their share of cases fatal to the mother. No deaths escape reporting, so that death returns give more accurate knowledge than birth returns. A month was chosen at random and death returns and still-birth returns were examined to find out what proportion had been under the care of midwives. There were one hundred and fifty still-births reported during June, 1892. Of these the coroners certified to forty. Most of these, if not all of them, were attended by midwives. An inquiry addressed to twelve physicians, who reported still-births during the same months elicited the fact that, of the thirteen still-births reported, two were at first in the care of midwives. During the same month, eighteen women died of puerperal causes: of accidental hemorrhage, one; of rupture of the uterus, one; of convulsions, four; of septicæmia and peritonitis, twelve. Another letter of inquiry was addressed to the eleven physicians who reported these last twelve deaths and nine of them replied; of the ten fatal cases, two had been delivered by midwives. When we consider that only the easy cases are undertaken by midwives, the conclusion seems to be that they have more still-births than they ought. This large number of still-births is probably due to the delay in the second stage of labor, and would probably have been lessened by prompt application of the forceps. Nevertheless, the showing is not so discreditable as might have been expected in view of the entire absence of qualifications necessary to begin practice as a midwife.

As long ago as 1807 the Code Napoleon defined the duties of the midwife class. They were not to perform any operation endangering either mother or child, and they were to report all births promptly. In Switzerland, all midwives report quarterly to the medical officer of the district stating the number of births, the number of deaths, and giving a detailed statement of complicated cases. In Russia, women are compelled to study midwifery for three years with practical experience at the Polyclinic. At the close of this period, the applicant is examined by the Chief of the Midwifery School, and, if successful, receives a diploma. Before she can practice, however, she must pass an examination before the Professor of Obstetrics in the State University, who, being a governmental officer, grants the license to practice. In the German Empire, within the last year, the medical faculty have agreed upon an official text-book for students in midwifery. In it is taught both the necessity and methods of disinfection. It forbids midwives from extracting the placenta by the introduction of the hand and directs them to wait one half hour before using Credé's method. In case of hemorrhage, midwives are to send at once for a physician and to use ordinary means to arrest the flooding. Only in case of continued absence of the medical man and of imminent danger to the mother may they enter the uterus. They may not apply the forceps or perform podalic version unless the help of a physician cannot be obtained and the mother or child, or both, are in danger. If, in such case, they operate, they are to make a prompt detailed report of the case to the local health authorities.

The State of Minnesota is the only one that thus far has recognized midwives. Its law compels all persons beginning practice who are graduates in midwifery to present their diplomas to the State Medical Board. If these are genuine, a license to practice for one year is granted upon the payment of one dollar. If the candidate be not a graduate, the Board subjects her to an examination for which a fee of two dollars is to be paid. She is then licensed as before for one year. Persons already in practice at the time of the passage of the act are required to present proof of the same to the State Board and to be registered. The State Board may revoke or refuse licenses for unprofessional or dishonorable conduct or for neglect to make proper returns of births. The law does not apply to physicians or surgeons or to students of medicine or to gratuitous services in cases of emergency.<sup>1</sup>

<sup>1</sup>Med. Record, Vol. 42, P. 429.

If the State of New York finds it necessary to define the qualifications of him who performs the dangerless operation of filling a tooth, how much more necessary should it be to compel knowledge on the part of her who presumes to assist women at the time of pain and peril. If one is not allowed to sell flaxseed or compound licorice powder without a license, why not require a license from her who administers ergot to the mother and spiced syrup of rhubarb to the child, who treats uterine subinvolution by hypophosphites and ophthalmia by breast milk. Our community can no longer remain in its present state of slothful inactivity and two courses of action are open to it; the first, to enjoin midwives from practicing their profession; the other, to recognize them as it recognizes others practising a branch of medicine, to define their duties, to limit their rights, to prescribe their course of training, to make them responsible to the law, and to proscribe unlicensed practice. We have seen that the present state of public opinion would not countenance the first course of action. For this reason, if for no other, it would seem wise for our legislature to take the second course, and I believe the time is ripe to do away with the injustice of allowing one class of practitioners to be without legal qualifications while compelling all the others to come within the bounds of the law.

For these reasons the Legislature should take the following action. A law should be passed making it a misdemeanor punishable by fine to practice midwifery without license. To practice midwifery should be defined as attending women in child-bed for remuneration, or to expose a sign, or to circulate cards or other advertisements with one's name and the word midwife or one of its synonyms. Nothing in this act should be construed against an occasional delivery by a by-stander in case of the tardy arrival of the physician. All midwives engaged in practice at the time of the act should, within sixty days, present satisfactory proof of same to the local health board, and receive from it a certificate. This certificate is to be filed with the State Board of Medical Examiners, and upon its receipts the board shall grant a license to practice. From the provisions of the act should be exempted physicians, medical students and hospital internes. Are others wishing to practise midwifery, should be compelled to pass an examination before the State Board Examiners on the following subjects: The anatomy and physiology of the organs of generation, including the breast; the rudiments of general anatomy, including the changes that occur in the child at the time of birth; the physiology and pathology

of pregnancy, parturition and the puerperal state; the principles and methods of asepsis and antisepsis; the physiology of the new-born and the rudiments of ophthalmology. For this the student should pay a fee equal to one half of that paid by medical students. Upon passing the examination, the Board should issue a license to practice midwifery anywhere in the State, and this license is to be forfeited without renewal upon conviction of crime. The law should include the present law relating to nurses in cases of ophthalmia neonatorum. It should forbid the application of the forceps or the performance of podalic version, except in cases of emergency or where a physician cannot be obtained. In such instance a detailed report of the case, showing why the operation was performed, is to be submitted to the local board within three days. The law should also require prompt report of births, and of course prohibit a return of death or still-birth.

In conclusion I would say that I have no desire to pose as a champion of midwives or their enemy. I consider them necessary to the community and wish them better opportunities of learning and greater skill. I rather choose to defend the cause of those who employ midwives and have no protection against such as are ignorant or incompetent.