

NEWSLETTER 2

Dear Member,

The number of members is now ( 315 ). I have received so many letters that there are probably members waiting hopefully for a reply and I must apologise to anyone who has kindly sent me money and who has not received an acknowledgement. I am very grateful for all contributions. So far we have had £65 in sums ranging from 2/6d. to £10 with which to buy paper, envelopes and stamps and meet any other expenses. Members give what they can afford and so far they have been very generous. If the Association continues to grow at the present speed there will be a need for a full-time Secretary - so sooner or later we must find much more money to finance what looks like being a large organisation.

Most people do not want to wear a badge, though some said that one might make a good excuse to start a conversation. A.I.M.S. Regional Organisers all over Britain are to be visited by Dr. T. Deighton and Lt.Col. W.J. Fletcher. A list of Regional Organisers names and addresses is attached to this. Please contact the person nearest to you and state the name of the Regional Hospital Board area that you live in. If you come across bad treatment in the Maternity Services - write down the complaint and send it to your Organiser. (We are still short of organisers in Leeds, Manchester, Liverpool and Cornwall).

If you are a mother (members include men as well as women of course) please fill in the Questionnaire. You may have told me some of the things in it before but this will greatly help me to list facts in some proper order.

The first informal meeting of A.I.M.S. was held at the Norfolk Hotel, South Kensington, London, on Saturday, 16th July 1960. The original arrangement to meet at a member's flat had to be cancelled at the last minute owing to mumps in the family. In spite of this late change of plans, 31 members were present during the evening, and at 11.15 p.m. there was still a small group talking animatedly and in grave danger of missing their last means of getting home for the night (one enthusiastic member had to walk 10 miles). Even the hotel manager got interested, and I think this first meeting demonstrated very well to those present that they are not alone in their ambition to improve the "black-spots" in the Maternity Services. It is hoped that another meeting with a speaker or two will be held next Winter. Saturday seemed to be the day that suited the greatest number of members.

If there is any one who has not yet sent me a first-hand account of their experiences (or reasons for being interested in A.I.M.S.) will they please do so? It has been suggested that if some kind of book were published it would help to spread "the word". Members' accounts (without mentioning their names of course) could form a valuable part of such a book.

In May I spent a very interesting day at Charing Cross hospital where I was shown round the recently re-organised maternity unit by the Professor of Obstetrics. I am very grateful to this busy man for giving me so much of his time and patience. (An account of a visit to Charing Cross was described by an A.I.M.S. member - Mrs. Betty Jerman in an article in the Guardian on 18th July, 1960, and I propose to circularise a copy of this which gives a very full description of the Unit. This is not a new building but a re-designing of space within the old building and an ingenious use of what was available.

My first impressions of the visit were the cheerful colours and the cheerful atmosphere. In the afternoon I walked round the Unit by myself and spoke to many of the patients. They confirmed my first impression - they were all happy there and had no complaints. The policy is to get the mother up as soon as possible and there is a separate room to sit in where meals are served. The babies are in cots at the foot of the beds for most of the day. There are 6 beds in each ward. I was glad to know that

"Admission Ritual" had been reformed - C.B.E. (castor oil, bath and enema) have gone and are replaced by a shower and suppositories. Bed pans are not used if the patient can possibly be got up.

The ante-natal clinic has been re-designed and has an efficient appointments system and a "hostess" sitting at the door to welcome mothers.

Husbands are welcomed at this hospital and are invited to stay with their wives during labour - if a husband cannot come a "substitute" is provided in the form of a student doctor. (Unwanted loneliness in labour is therefore eliminated - but this is a teaching hospital - in non-teaching hospitals the "substitute sitter" could well be a friend of the mother or one of a group of volunteer sitters whom the mother could arrange to meet before the birth).

I think this is a wonderful example of what can be done with a lot of thought and some re-arranging. This unit is to be extended soon but the principal of one sister in charge of 30 beds will remain.

A new Maternity Unit was recently opened at Middlesborough with due pomp and ceremony - and immediately partly closed again for lack of staff. Why is there this great shortage of midwives? Under staffing, overworking and the often accompanying shortness of tempers in many maternity units leads to an unsuitable atmosphere for the mothers - many of whom only ask for kindness.

One of our members who has 3 small children has trained one evening a week with the St. John's Ambulance Brigade in order to help one evening a week in the maternity unit where she was treated so kindly. Her ultimate goal is to sit with mothers in labour.

Mr. Derek Walker Smith has resigned as Minister of Health and has been replaced by Mr. Enoch Powell. Let us hope that the new Minister will take a greater interest in maternity welfare. A well known obstetrician has said:-

"If we can use pregnancy as a time of preparation, not only for labour but for all that family life means, and if we can make childbirth a more positive experience, then I think the social repercussions will be remarkable. The next century will undoubtedly see a great advance in our understanding of all the complex factors that influence and govern human relationships. The health, happiness, and possibly even the survival of our children will depend on the success of our studies in this field. Midwives and obstetricians have an especial responsibility, for they are there at the beginning, and probably it is the manner of the beginning that matters most of all."

The Ministry's attitude at present is summed up in this letter to an M.P. from the Ministry of Health:

"You wrote to Derek Walker-Smith on 8th June enclosing a copy of Newsletter No. 1 of the Association for Improvements in the Maternity Services, which I now return.

We have had no correspondence with this Association but to judge from press reports its object is to improve the maternity services in general and in particular the relations between doctors and midwives on the one hand and patients on the other. This is equally our object and the whole question of human relations in maternity departments is being carefully studied at the present time, particularly in relation to the views expressed by a Committee on the Maternity Services (under the Chairmanship of Lord Cranbrook) which reported to us last year. I may add that we are well aware of Professor Morris' interesting inaugural lecture in which he considered this matter in greater detail than the Cranbrook Report did.

Many of the difficulties which occur in maternity units are due to the shortage of staff, especially of practising midwives and this too is a matter to which we are giving careful attention.

The maternity services like most other community services have their imperfections but our efforts to improve them are being materially assisted by the work of Professor Morris, the National Birthday Trust and others who have suggested some new and promising lines of investigation and I am quite sure that good progress can be looked for."

When Parliament reassembles it is hoped that many M.P.'s will ask further questions about the Report "Confidential Enquiries into maternal deaths in England and Wales between 1955-1957" (obtainable from Her Majesty's stationary office). The comment in the "Observer" on this was:

"Almost half the women who died in childbirth in England and Wales during the years 1955-57 need never have lost their lives. That is the frightening conclusion of a confidential inquiry on behalf of the Ministry of Health, details of which were published last week. If, during these years, more than 400 women died unnecessarily, how many more were put in danger through the same negligence and mismanagement and how many of these suffered permanent loss of health and disability? If avoidable loss of life occurs in the conduct of midwifery, how sure can we be that it is not common in other branches of medicine?"

These deaths resulted from incompetence and inexperience both inside and outside the hospitals. The conclusion to be drawn is that the public is entitled to a permanent system of inspection of the quality of medical care. The practice of holding confidential inquiries into deaths in midwifery, which has been going on for some years, should be extended to other branches of medicine. More good could be done and more lives saved by raising the standards of existing medical practice than by many of the discoveries we are always waiting for. It is time a proper research arm was created within our National Health Service in order to find out what is really going on."

I have made contact with the Natural Childbirth Trust. Some of our aims about conditions at childbirth are similar. We have agreed therefore to work amicably and to exchange information.

Another organisation which is giving us help is the National Birthday Trust Fund. This was founded in 1928, and has done much to improve conditions for women at childbirth. For instance they did a Pilot Survey into effects of Fatigue upon Maternal Health in 1955; Investigation of effects of analgesic drugs 1953-57; Survey of Maternity in Gt. Britain 1946. They are now pressing for no unwanted loneliness in labour for mothers, and they have paid for the first trials of Dr. John Elam's gas-oxygen machine. This is a nitrous oxide and oxygen machine which will give relief from pain during labour. This is better for the baby than the usual gas & air machine.

Other ways to reduce unnecessary suffering in childbirth are being tried out. It has been found that a special mixture of drugs with pethidine often gives better results than perhaps pethidine on its own. The "space-suit" designed by Dr. O. S. Heyns in S. Africa has been tried out at Edinburgh and at University College Hospital, London, with good results. This consists of a plastic bag which envelopes the abdomen. During first stage of labour air can be extracted from the bag (with a machine like a Hoover) and this draws the abdomen forward and gives great relief during contractions. ( for details see The Lancet of May 28th 1960 )

Why are most mothers in this country delivered while lying flat on their backs? Traditionally it would seem that women were delivered in a sitting position. Recently it has been re-discovered that this position can reduce pain from severe back-ache during labour. The sitting position also reduces by 23% the strain on the heart compared with the recumbent position. Many women find that lying on their backs during the second stage of labour is uncomfortable (especially so as they are so often required to do this on a high, hard, narrow "bed") - "like a stranded whale". Surely a properly designed delivery chair would not be beyond the bounds of 20th Century ingenuity?

Will members please spread the idea and press for an inspectoral system in hospitals. If the hospitals (and the maternity units in particular) were inspected in a similar way that the schools are inspected, it would help to raise and maintain higher standards, and speed the introduction of new methods.

This is World Mental Health Year and good childbirth is partly a matter of mental health - a badly managed confinement can lead to an unhealthy mental outlook. This would seem a good year to campaign for rapid reforms.

Many candles together make a bright light. Light yours.

Yours sincerely,

Sonia Wipplington

I am running a cheap clothing pool, in case you know of anybody needing clothes for children from birth to about 5 years. Also plenty of maternity wear in good condition - women's coats, etc. and oddments such as double pushchairs - just send inquiries to me with s.a.c.

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