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It is sobering to realise that as recently as the year in which On the Origin of Species was published, learned opinion was that diseases such as typhus and cholera were spread by a 'miasma', and suggestions that doctors should wash their hands before examining patients were greeted with mockery by the profession. The Cambridge Library Collection reissues milestone publications in the history of Western medicine as well as studies of other medical traditions. Its coverage ranges from Galen on anatomical procedures to Florence Nightingale's common-sense advice to nurses, and includes early research into genetics and mental health, colonial reports on tropical diseases, documents on public health and military medicine, and publications on spa culture and medicinal plants.

Introductory Notes on Lying-In Institutions

The greatest postnatal killer of the nineteenth century was puerperal fever. A vicious and usually fatal form of septicaemia, puerperal or childbed fever was known to occur in maternity hospitals far more frequently than at home births, and to spread faster in crowded wards than in those with fewer patients. Its cause was unknown. In this precise statistical analysis of the facts, gathered from several sources across the major cities of Europe, Florence Nightingale (1820–1910) explores the mystery of puerperal fever and its possible causes. She stresses the necessity of good ventilation in hospitals, condemning those with overcrowded wards, and cites instances where the layout of wards has a noticeable correlation with the number of deaths. Published in 1871, just before Pasteur's work on germ theory proved that the problem could be all but eradicated if doctors washed their hands more rigorously, this work remains clear, scholarly and engaging.



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Introductory Notes on Lying-In Institutions

Together with a Proposal for Organising an Institution for Training Midwives and Midwifery Nurses

FLORENCE NIGHTINGALE





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ON

LYING-IN INSTITUTIONS.



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INTRODUCTORY NOTES

ON

LYING-IN INSTITUTIONS.

TOGETHER WITH

A PROPOSAL FOR
ORGANISING AN INSTITUTION FOR TRAINING MIDWIVES
AND MIDWIFERY NURSES.

BY

FLORENCE NIGHTINGALE.

LONGMANS, GREEN, AND CO.
1871.





IF I may dedicate, without 'permission,' these small 'Notes' to the shade of Socrates' Mother, may I likewise, without presumption, call to my help the questioning shade of her Son, that I who write may have the spirit of questioning aright, and that those who read may learn not of me but of themselves?

And, further, has he not said: 'The midwives are respectable women, and have a character to lose'?





PREFACE.

In the year 1862 the Committee of the Nightingale Fund, with a view to extending the advantages of their Training Institution, entered into an arrangement with the authorities of St. John's House, under which wards were fitted up in the new part of King's College Hospital, opening out of the great staircase and shut up within their own doors, for the reception of Midwifery cases. The wards were under the charge of the (then) Lady Superintendent. Arrangements were made for medical attendance, a skilled midwife was engaged, a certain number of pupil nurses were admitted for training; and hopes were entertained that this new branch of our Training School would confer a great benefit on the poor, especially in country districts, where trained Midwifery nurses are needed.

Every precaution had apparently been taken to render the Midwifery Department perfectly safe; and it was not until the school had been upwards of five years in existence, that the attention of the Nightingale Committee was called



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to the fact that deaths from puerperal diseases had taken place in each of the preceding years.

During the period of nearly six years that the wards were in use, the records show that 780 women had been delivered in the institution, and that out of this number twenty-six * had died—a mortality of 33.3 per 1,000.

The most fatal year was 1867, in which year nine out of the twenty-six deaths took place. In the month of January a pregnant woman, who was under treatment for erysipelas in the hospital, was delivered in a general medical ward, No. 4, in the first-built wing of the hospital. A midwife was told off to attend her, who was not suffered to be near the midwifery wards for a considerable time. The erysipelas case died of puerperal fever; and this death was followed by a succession of puerperal deaths in the lying-in wards until November, when the wards were as soon as possible closed.

An analysis of the causes of death showed that, with the exception of one death from hæmorrhage, not a single death had taken place from accidents incidental to child-bearing during the whole six years. There were three deaths due to diseases not necessarily concomitants of this condition; while of the others, twenty-three in number, no fewer than seventeen were due to puerperal fever, three to puerperal peritonitis, two to pyæmia, and one to metritis.

^{*} Exclusive of the case of a poor woman who was delivered in a cab, and died in the hospital of post partum harmorrhage.



PREFACE.

The following table gives the actual fates and dates:—

Midwifery Statistics, King's College Hospital.

	al rries	Fatal Cases							
Year	Total Deliveries	Date of Birth	Nature of Labour	Cause of Death	Date of Death	Deaths to Labours			
1862	97	Nov. 6 ,, 30 Dec. 10	Natural Twins Natural	Puerperal peritonitis { Phthisis and puerperal } fever Puerperal peritonitis	Nov. 25 Dec. 27 Dec. 20	} 1 in 32·3			
1863	105	Jan. 10	Natural, Child	Puerperal fever	Jan. 16	1 in 52.5			
1864 1865	141 163	April 29 Feb. 16 April 14 Dec. 1 Jan. 30 Feb. 8	Natural Natural Induced Born in cab Natural Natural	Puerperal fever Puerperal fever Pyæmia Hæmorrhage Embolism Puerperal fever	May 20 Feb. 25 April 29 Dec. 7 Feb. 12 Feb. 18	1 in 47			
1866	150	June 24 Oct. 20 Oct. 29 Jan. 10 Mar. 24	Forceps Forceps Natural Natural	Puerperal metritis and pelvis cellulitis (Laceration of perinæum, puerperal fover Puerperal fever Gastro-enteritis Retained placenta, puer-	July 30 Nov. 3 Nov. 9 Jan. 20 April 10	1 in 32·6			
1867	125	Oct. 8 Nov. 10 Dec. 4 Jan. 10	{ Placenta prævia. } Turning Forceps Natural (Had erysipelas) when admitted*)	peral fever f Emphysema and bronchitis Peritonitis Puerperal fever Puerperal fever	Oct. 10 Nov. 15 Dec. 31 Jan. 30	1 in 30			
		Feb. 7 , 8 April 12 May 18 June 4 July 26 Nov. 5 ,, 8	Natural Natural Turning Natural Natural Netural Twins: 1st dead, 2nd by turning Forceps	{ Considerable hæmorrhage, } puerperal fever Puerperal fever Puerperal fever Pyæmia Puerperal fever Puerperal fever Puerperal fever Puerperal fever Puerperal fever Puerperal fever { Laceration of vagina, puerperal fever }	Feb. 22 Feb. 22 April 22 May 27 Junc 19 Aug. 11 Nov. 10 Nov. 14	1 in 13·8			
Total	781			- dent	hs: 27	1 in 28.9			

^{* &#}x27;So was confined in No. 4 ward.'

Under these deplorable circumstances the closing of the wards was a matter of course; and since that event we have been anxiously enquiring whether it would be justifiable to re-open our Midwifery Nursing School under other conditions.

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X PREFACE.

This question is discussed in the following pages, from a basis of statistical facts supplied by the best authorities; and a few proposals have been added, with the view of turning to the best account our past experience, by extracting from it any leading principles which may present themselves for practical application in the future construction and management of Lying-in Institutions, and more especially in connection with means of training Midwifery nurses.

These Introductory Notes, collected and put together under circumstances of all but overwhelming business and illness, are now thrown out merely as a nucleus, in the hope that others will be kind enough to supplement, to add, and to alter; in fact, only as a hook with a modest little fish on it—a bait to catch other and finer fish.

The facts themselves, the nucleus, have been made as correct as it was possible, and as would have been done for a finished work. But the facts themselves are only put forth as feelers—feelers to feel my own way.

I need scarcely say either that these 'Notes' are not at all meant to discuss every point which presents itself in Midwifery statistics. On the contrary, they are, for the moment, purposely limited to the consideration of facts immediately relating to the present object.

Let me thank once more with true gratitude all those who have so kindly supplied me with help and information, some of whose names will appear in the following pages.



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