

## CONGRESS ON INFANT MORTALITY.

THE fourth English-speaking Conference on Infant Mortality was opened at Caxton Hall, Westminster, on Monday, August 4th, by the Right Hon. JOHN BURNS, M.P., President of the Conference, who delivered his inaugural address to the Administrative and Medical Sections in joint session. Almost every English-speaking territory was represented at the Conference, twenty-nine special delegates having been appointed by the Governments of twenty-three different countries and colonies, whilst one or more representatives were sent by over two hundred public health authorities in the British Isles.

*Presidential Address.*

Mr. BURNS said this was the fourth conference on infant mortality that had been held in this country during the past seven years. Originally confined to Great Britain, it now included all the English-speaking countries, and as President he welcomed that day representatives of the Oversea Dominions, the Colonies, and the United States of America. The problem they were facing was how to reconcile the health of the people and their personal strength and individual happiness with the growth of trade and city life. It was a matter in which it was important that the English-speaking peoples overseas should co-operate. The British people had led the way in commerce, in industry, and in representative institutions. They must continue to hold their place in the world, and this could not be done by any nation except through the vigour of its men, the virility of its women, and the strength of its children. For this parents must be cleanly wed, and children nobly bred, wisely fed, and firmly led. The life of a baby was affected, perhaps, more by its pre-natal condition than by its post-natal environment, and the doctors, who he was glad to say had been the backbone of this movement, were giving ever-increasing attention to this subject. Motherhood, the rearing of physically strong boys and girls, was the noblest of all callings, and he thought they ought to see to it that it was not made the meanest of trades. Doctors did much for the community; they also did much for themselves and their families. Among the children of members of the medical profession the mortality was only 40 per 1,000, as against 100 to 130 per 1,000 among the children of artisans, and 150 to 250 per 1,000 among the children of unskilled labourers. Even in the agricultural labourer class, notwithstanding the brutally low rate of wages, the infant mortality was only 97 per 1,000. The facts showed that high wages in themselves did not prevent infant mortality. High wages often meant increased drinking, and drink always meant inferior housing. But, speaking generally, during the last few years higher wages had been accompanied by wiser spending. Considering the size of London it was an extraordinarily sober city, a fact which was noted by visitors from abroad. In this country 40 per cent. of the pauperism, which cost eighteen millions a year, was due to widowhood and orphanhood. One out of every three wives came to the Poor Law for relief through the illness of the breadwinner. As President of the Local Government Board he was foster father to 270,000 Poor Law children. That was why he was interested in the subject. He wanted his family to diminish as rapidly as possible. If these Conferences continued for the next seven years he believed that family would be reduced by more than one-half. As a result of what had already been done they were saving 50,000 lives a year in this country, or nearly the total number lost through emigration to Australia. Referring again to the Poor Law children, he suggested that childless women, of whom there were many, would be much happier in looking after them than in wasting their affections on cats and lap-dogs, working slippers for hounds, or providing bracelets for puppies. In this connexion he would be only too pleased to turn himself into a children's agency. He suggested that next year's Conference should be held not in London, but in Lancashire, say at Manchester or Liverpool. One subject to which he thought they ought to turn their attention was that of certain diseases, with regard to which society showed a prurient delicacy, that was a danger to the community. From 30 to 50 per cent. of the cases of blindness was due to the

inherited taint of such diseases. He did not belong to what he called the "better dead" school, the school who declared that the larger number per thousand of the children who died the better it was for the survivors.

*Special Education in Infant Hygiene.*

Mr. JOSEPH PEASE, M.P. (President of the Board of Education) presided over the morning session of the Medical Section on August 4th. In opening the proceedings, he said that during the last few years there had been a considerable reduction in the rate of infantile mortality. That advance had been due in some degree, perhaps, to a slight improvement in the physical condition of the mothers, but more, he believed, to better infant care and management. Ignorance was at the root of a great deal of the preventable infantile mortality, and that was where education came in. The Board of Education had endeavoured to disseminate information through the schools. It did what it could to create a healthy public opinion, and it had also done all it could to encourage schools for mothers. He was glad to say that there were now 230 such institutions, 100 of which were doing excellent educational work. The Board was also endeavouring, through the directors of education and the local education authorities, to interest the whole of the rising generation in this subject in the best possible form. Recently an official circular had been issued authorizing the increase in the present provision in our schools for instructing the girls in the care of infants. Such teaching ought certainly to be provided for girls by the local education authorities. Teaching in infant management should be available for all girls during their last year in the elementary schools. He hoped that next year crèches and schools for mothers would be further assisted by the national education system, which he hoped to be permitted to propose.

Dr. HODGETTS (Medical Adviser to the Commission of Conservation of Canada) said that some 35,000 infants under 5 died in Canada annually, and this was due mainly to ignorance and partially to penury.

Dr. L. E. LA FETRA (New York) said investigation had shown that of 10,000 infants nursed at the breast there died during the first year of life 580; of 10,000 artificially-fed babies there died 4,588, so that the naturally-fed baby had about nine times as many chances of life as the artificially-fed baby. Manifestly, the most important factor in baby saving was to have the baby nursed by its own mother.

*Control of Milk Supply.*

The Countess of ABERDEEN presided over a meeting of the Administrative Section, at which the administrative control of the milk supply was discussed. She called attention to the doings of the Viceregal Commission on the milk supply which sat in Ireland a few years ago. Although the report had not yet been formally presented, she was permitted to refer to some of its recommendations. It would dwell on the importance of milk dépôts, and would also show the good results attained through the institution of a few voluntary milk dépôts dispensing small quantities of reliable milk. The question in the towns was shown to be largely one of organization, by means of which the producer and the consumer might be brought together. In the rural districts the problem was much more difficult, and the different causes of scarcity would be reviewed and explained. Various recommendations likely to remove or minimize these difficulties were to be made in the report. The commission would also refer to the importance of winter dairying, the keeping of milk records, and the improvement of the milk-yielding properties of cows, and it would be shown that this could with certainty be attained. The second part of the report dealt with the prevention of the contamination of milk. The recently issued Tuberculosis Order for the slaughter of tuberculous cattle had gone very far to meet the recommendations made. The recommendations the Commission hoped to make aimed at establishing uniform and efficient administration by local authorities under the supervision of inspectors responsible to a central authority. The many causes leading to the infection of milk, and thereby to the spread of infectious disease, were laid stress on, and recommendations were made for strengthening the laws relating to the detection of the sale of infected milk and to the

precautions to be taken by all connected with the handling of milk. The Women's National Health Association were preparing to do their best to promote an educational campaign on the subject as soon as the report appeared in the autumn.

Professor J. M. BEATTIE, City Bacteriologist of Liverpool, read a paper in which he recommended the systematic inspection of cattle by full-time veterinary inspectors; the establishment of isolation farms by local authorities, the farmer or dairyman to be recouped for any loss he might sustain in consequence, and the bacteriological and experimental testing of milk by experienced bacteriologists.

Dr. E. W. HOPE, Medical Officer of Health for the City and Port of Liverpool, said that dépôts had been established in Liverpool for the supply of the nearest approach to human milk for infants whose mothers were not able to nurture them. Over 20,000 infants had been fed from these dépôts, the cost of which had been largely in excess of the amount paid for milk. Experiments had been made during the past two years with a view of lessening the cost of sterilization, and researches had been carried on by Professor Beattie and others on the electrical sterilization of milk. The upshot of these investigations was that it had been shown that milk could be effectually sterilized by electrical methods, all extraneous organisms being destroyed.

Dr. LENANE, Medical Officer of Health for Battersea, said that in London the milk supply was very unsatisfactory. As a result of the statutory powers obtained by the London County Council five years ago, a large quantity of milk had been examined, and of this 11 or 12 per cent. was found to be tuberculous.

#### *Ante-natal Hygiene.*

In the Medical Section, presided over by Dr. CHARLES A. HODGETTS, Medical Adviser to the Commission of Conservation of Canada, a discussion took place on Ante-natal Hygiene. Among the subjects dealt with was the working of the maternity benefit under the National Insurance Act. This was brought forward by Dr. A. K. CHALMERS, Medical Officer of Health for Glasgow, who submitted a paper by Miss Barbara Sutherland, one of his assistants. Miss SUTHERLAND said that maternity benefit was almost always paid in cash to the husband in cases where he was insured. In very few cases the Insurance Society retained part of the benefit to make direct payment either to the midwife or to the maternity hospital. At least one society only paid 15s. immediately after the confinement, retaining the balance of 15s. for fourteen days, lest any emergency should arise within that time, while another society was accustomed to send its agents to the homes to pay the money at an hour when both parents were usually present. In some cases, where the woman made a direct application, and explained that her husband would abuse the benefit, the money was paid to her on her application. One notable effect of the Act was the raising of midwives' fees, and this was a decided hardship in cases where benefit had not been received, or where received, was less than the fee, as was often the case with the deposit contributor. Abuse of the benefit money was, unhappily, very common. Cases were numerous in which the husband received the entire thirty shillings and spent it in liquor, while in many cases the receipt of benefit resulted in one or two weeks of unemployment for the husband. Sometimes, in anticipation of the benefit the man would stop work and refuse work when it was offered to him. Some men had devised an ingenious method of evading the accusation of not giving the benefit money to the mother; they handed over the thirty shillings to her, but deducted that amount from the usual money given for household expenses. Mothers sometimes said they were better cared for at previous confinements, when there was no maternity benefit, as the receipt by the husband of the thirty shillings was often sufficient to disturb the peace of an entire family. The way to stop such abuses, to a very large extent, was to pay the maternity money direct to the wife before her confinement.

#### *Veneral Disease.*

Dr. F. W. MOTT, Physician to Charing Cross Hospital and Pathologist to the London County Asylums, said some outspoken words on this subject. He asserted that

veneral disease was preventable and ought to be prevented. The public conscience should be educated to the necessity of dealing seriously with the question from a preventive as well as a curative point of view. A fruitful commencement could be made by examining by the Wassermann test the bloods of all suspect mothers and children. It was desirable, he said, in conclusion, that a Royal Commission, as suggested by Sir Malcolm Morris, should be appointed to inquire into the best means to be adopted for the prevention of the disease to which he referred and other diseases belonging to the same category.

#### CONCLUSIONS.

In the afternoon a joint meeting of the Administrative and Medical Sections was held to consider the conclusions arrived at. Alderman BENJAMIN BROADHURST (Huddersfield), who occupied the chair, said that the Executive Committee had watched the proceedings of the Conference and had drafted a number of resolutions. These were submitted *seriatim* and agreed to one by one with absolute unanimity. They were as follows:

1. That this Conference urges that the maternity benefit be made the property of the mother both in practice and in law.
2. That in view of the damage liable to be wrought to growing girls by injudicious stress of education, especially during puberty and adolescence, this Conference feels bound to deprecate any form of education for girls which pays insufficient attention to establishing good bodily health and development and complete fitness for maternity and the practical care of a home.
3. That this Conference urges upon the Government the necessity—in the interests of both mother and child—of legislating for the registration of stillbirths.
4. That this Conference urges upon the Government the necessity for the more complete medical certification of death, and that the medical death certificates should be forwarded to the registrars, as confidential documents, under sealed cover.
5. That the time has arrived for steps to be taken with a view to securing the better training of women who apply for the certificate of the Central Midwives Board.
6. That this Conference requests the Executive Committee to communicate with the General Medical Council and the degree and licence-conferring bodies with a view to infant hygiene being given a more important place in the medical curriculum.
7. In view of the large percentage of stillbirths and infant deaths directly attributable to veneral diseases, and considering that infant blindness and other congenital defects are in many cases due to the same cause, the English-speaking Conference on Infant Mortality urges the respective Governments of the countries therein represented each to appoint a commission to inquire into the prevalence, the causes, the provision of treatment, and the possibility of the prevention of these diseases.
8. That the attention of the Board of Education be drawn to the extreme desirability of making the grant earned by "recognized" infant welfare centres depend in future on their efficiency, on the number of registered attendances of the mothers at consultations, classes, and talks, and on the number of home visits paid under adequate supervision.
9. That this Conference calls on the Government to give explicit powers of making grants for infant consultations and schools for mothers.
10. That the Executive Committee be instructed to take whatever steps they may think desirable in order to ensure a microscopical examination of milk, to be supported by analytical methods.

THE French Minister of Labour has signed a decree appointing a commission to inquire into the whole question of the conditions of the participation of the medical profession in the application of social laws.

THE *Boston Medical and Surgical Journal* of July 10th states that it is reported that a bill relative to the prevention of marriage of the unfit has passed both Houses of the Pennsylvania Legislature. The bill provides that no marriage licence shall be issued when either of the parties is epileptic, an imbecile, or of unsound mind, nor to any man who is, or has been within five years, an inmate of any county asylum or home for indigent persons, unless the applicant can show that the cause of such condition has been removed, and he is able to support a family. Applicants for licence to marry must also file a statement declaring themselves free from transmissible disease.