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11. RESEARCH.

No maternity service for a country can be regarded as complete that does not provide for research into the special problems affecting the country for which it is designed.

At the present time no such organization exists, and the Committee advocates its inauguration.

New Zealand women, for some reason which is not known, suffer from eclampsia to a greater extent than those of England, Holland, and some other countries for which the statistical returns are comparable.

One of the first duties of a research service should be to make systematic inquiry into the reason for this position in order to attempt to solve that problem which particularly affects New Zealand, Australia, and Canada.

There is a large mass of information already possessed by the Health Department, the Obstetrical Society, and the Otago Medical School that would be of immense use in this research and possibly might succeed in revealing the causes and replacing assumption and theories with definite knowledge.

Another problem that has lately exercised the minds of those interested in obstetrics is the relief of pain. As has been indicated in another portion of the report, new drugs and new methods of using old ones for the relief of pain during labour have in recent years come into use, and others no doubt will be introduced from time to time.

The necessity for research into this particular subject was made very evident to the Committee by the very varied opinion as to the value and safety of different methods adopted by different practitioners, but in only one instance was any evidence based on a systematic record placed before the Committee, and on no point was there more contradictory evidence given than with regard to the value and safety of the many methods now in use.

The Committee feels that the establishment of an obstetrical research committee under a competent officer who would collect and collate information derived from the many practitioners and workers interested in obstetrics in New Zealand and elsewhere is a duty that is owed to the women of New Zealand, to the practising obstetricians, and even to other parts of the world.

The work of this Committee would, of course, be co-ordinated with that of the Medical Research Committee.

The Committee is of opinion that if a competent research officer were appointed at a reasonable salary there are a large number of medical men interested in obstetrics who would willingly co-operate, and that such an officer would be able to gain and distribute valuable information and make it available for the benefit of New Zealand's future mothers and infants.

12. MAORI MATERNITY SERVICES.

THE RISKS OF MATERNITY AMONGST THE MAORIS.

Contrary to what is widely believed to be the case, childbirth amongst the Maoris is associated with considerable risks; the death-rate is nearly twice as great as amongst the European population, and disabilities following confinement are far from uncommon.

Investigation shows that, whatever may have been the position when the Maoris lived under their truly Native conditions, septic infection is at the present time the most common cause of death.

While pelvic contraction is almost unknown amongst the Maoris, obstructed labour due to malpositions of the child has been one of the dangers in Maori midwifery, and even to-day, when the Native attendants send for help more speedily, deaths from this cause are not uncommon. Experienced observers also suggest that, now that the Native women are performing less laborious manual work, the tendency is for the size of their infants to increase.

Hæmorrhages, both ante-partum and post-partum, constitute another serious menace, and it does not appear that the Native attendants have any adequate method for dealing with these grave, and often very sudden, emergencies. An arresting illustration of the danger came under the notice of the Committee where, within three months of the year, four deaths from hæmorrhage had occurred in Maori homes in one area of the North Island.

To one group of complications, however—the toxæmias of pregnancy—the Maoris appear to be relatively immune. Careful investigation has confirmed the impression held by those interested in midwifery that these conditions, and especially eclampsia, are extremely rare. There is every reason to believe that this is due to the different temperament, habits of life, and diet, particularly of the Natives. It is suggested that a more complete study of these points might yield some important evidence in the investigation of the problem of the toxæmias of pregnancy generally.

Opinions varied as to the frequency of injuries following childbirth. Some doctors stated that evidence of such damage was common in hospital gynecological wards, but the general experience of the district nurses did not suggest any striking incidence of these complications.