AJO 13 (1927)

Am J Obs Gyn 1927 V-13

Department of Maternal Welfare

CONDUCTED BY FRED L. ADAIR, M.D.

MATERNITY WORK IN THE COLONY OF HONGKONG

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WHEN asked to write an article dealing with conditions surrounding maternity and maternal welfare movements here, it was added "if any such exist." Now as I am not quite sure how to answer this latter remark, I will content myself with trying to describe what we are doing, which I am afraid must seem very insignificant compared with American or European standards. But I would ask that it should be remembered that we are dealing with a people, the masses of whom are uneducated and who do not take to new ideas kindly. Not only this but we are competing against those who practice Chinese native medicine and since they cannot profit by the introduction of modern methods, must of necessity be opposed to us. I do not wish to disparage Chinese medicine in any way. I am sure there is very much to be learned from it, and that it would repay a thorough investigation; but at the same time I cannot believe that its universal practice would be attended with as low a mortality rate as that of modern medicine.

With regard to China proper I have no information, but I doubt if there is any maternal welfare work worth considering outside the larger cities, except what the missionary enterprise may be responsible for.

Hospital development in the Colony is greatly hindered by lack of money; building sites are dear, for land is extremely valuable. There are three organizations which interest themselves in midwifery and the training of midwives.

1. The Chinese-controlled maternity hospitals, namely the Tsan Yuk and the Wanchai Hospitals, the maternity departments of the Tung Wah and the Kwong Wah Hospitals, the latter two being general hospitals.

2. The Alice Memorial Hospital, which is under missionary supervision.

3. The Government Civil Hospital.

The Tsan Yuk Hospital is devoted entirely to maternity and gynecologic cases, and the maternity work here, as in the case of the other Chinese-controlled hospitals, is under the supervision of Dr. Hickling, to whom I am indebted for much of my information, and for facilities for working in the hospital.

The building was opened about three years ago; the ground floor contains an out-patient dispensary, a nurses' dining room, and an isolation ward for such cases as typhoid or dysentery, where it is desirable to have the patients at some distance from the maternity wards.

On Friday mornings there is an infant welfare dispensary, and during the last year 341 infants were brought up, paying a total of 2366 visits; all of these infants had been born in the hospital.

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On Saturday mornings there is a general women's dispensary. We have so far regarded it as undesirable, if not impossible, to divide our dispensaries up into gynecologic and antenatal; patients will not readily appreciate the difference and, in the present state of education of the coolie classes, practically no antenatal cases come up at all; indeed the average woman is inclined to regard any attention during pregnancy as entirely superfluous and in my department I am very glad if I can persuade a woman to remain in the hospital for four days after her child is born. As a whole the Chinese are not yet believers in so-called "Western Methods" and often only come to the hospital as a last resource.

There are probably not more than three men doing major gynecologic surgery in the public hospitals and yet, considering the large population, there are relatively few operations performed by any of them. If all the patients recommended for operations from the public dispensaries sought admission, my staff would have to be doubled or trebled.

The first floor of this hospital is devoted to midwifery. There are two large wards, some private wards, making a total of 25 beds, and also a nicely fitted-out labor ward. Last year the total confinements reached 608.

The second floor is a replica of the first. It was opened for gynecology in October, 1925, and contains space for 25 beds. The theatre situated over the labor ward only recently has been fitted out. Since October last when Dr. Hickling kindly placed this floor at my disposal we have operated on about 40 patients between us, but it is really only in the last few weeks that the Chinese public is beginning to know of the work done.

The third floor is devoted to the nurses' quarters.

The entire nursing staff is Chinese, including the matron. The hospital is also a training school for midwives. Before the opening of the gynecologic wards, the period of training was two years, during which time the pupil midwife was resident in the hospital and performed ordinary nursing duties under the supervision of the matron and trained nurses. Since the opening of the gynecologic wards the period of training has been extended by one year, so that the pupils will have a year's experience in the nursing of operation cases and theatre routine.

At the end of their three years they will obtain a certificate from the hospital if their conduct has been satisfactory, and will be eligible to sit for the Midwives Board Examination, which in passing confers permission on them to practice in the Colony.

The Chinese make very good nurses and readily take to routine of any kind; they are quiet, and have the curious quality of frequently being able to anticipate one's wants.

There are seven public dispensaries in the Colony, some in connection with Chinese hospitals referred to. On one day a week a gynecologic clinic is held in each by Dr. Hickling, and patients paid about 4,500 visits last year. As she will now send most of the operation cases to the Tsan Yuk, it is evident that the gynecologic wards of this hospital will be very full in the future. I have given a somewhat lengthy description of the hospital, for I believe it will in all probability contribute more to the maternal welfare of the Colony than any other.

The Tung Wah Hospital contains some interesting features, notably the entrance hall, which is very resplendant with gold work pillars. In appearance it is suggestive of a temple with its little altar, which I presume is dedicated to the Joss of Medicine. Another item of interest is the Chinese pharmacy; like ordinary pharmacies it contains numerous drawers for storing drugs, but it is at once

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noticeable that none of these drawers are labelled. The attendants however appear to be able to find any medicine they require without difficulty.

Chinese drugs appear to be made mostly from roots and barks, but in addition one is shown objects which we "Western Doctors" would not suspect to possess any medicinal value, namely cockroaches, sea horses, and such like; the latter I am informed is a very expensive medicine.

In addition to the ordinary pestle and mortar, the Chinese have a novel method of grinding up a drug. On the floor there is an oval trough, about two feet in length, about six inches wide at the top, shelving down to about a quarter of an inch at the bottom; the trough also slopes from each end towards the middle. The substance which is to be ground is placed inside, the mechanism is supplied by a small boy, who stands on the axle of a heavy metal wheel, about eight inches in diameter, which he rolls to and fro with his feet, keeping his balance by holding a rope suspended from the ceiling. Pills are large and are contained in a hollow ball of a beeswax-like substance about the size of a ping pong ball, which acts as a preservative.

In an adjoining room are rows of small ranges, each adapted to hold one pot about the size of a teapot, in which the roots or barks are placed for boiling, the infusion or decoction being then given to the patient. The dose is large, probably about a pint, given, I understand, usually in the morning. Outside there are rows of little open boxes, one for each patient being treated; as soon as the infusion is poured off, the spent roots are emptied into a box, where they are left for 24 hours, so that the patient's relatives can come and inspect the kind of medicine given.

I understand there are wards for "Western" treatment only, and wards for Chinese treatment, and admission to either is optional for the patient.

As far as I can make out every type of case appears to be admitted to the Chinese treatment wards, including fractures, but I have no means of judging of the efficacy of such treatment with regard to the latter.

In the maternity wards of the Tung Wah General Hospital, with seventeen beds, 1122 patients were attended in their confinements by the nursing staff, consisting of two trained nurses only.

In the same wards at the Kwong Wah, with eighteen beds, 1218 patients were confined during the year, the nursing staff consisting of one trained nurse and three probationers, or pupil midwives. There are, however, nine probationers undergoing training in the hospital. The period of training at this hospital is three years.

In the Wanchai Hospital with twenty beds, 812 cases were attended during the year, two trained nurses only being in the hospital.

As I already explained, the work of these hospitals is superintended by Dr. Hickling, and all the nursing staffs are Chinese. Dr. Hickling is also responsible for the training of the pupil midwives.

In the Maternity Bungalow of the Government Civil Hospital approximately 500 Chinese cases are attended every year, and perhaps 50 to 100 Europeans. The building is officially the maternity teaching centre of the University, but it is hoped that in the future more accommodation will be available, for the building as it now exists does not provide adequate space for a growing maternity clinic. The Government Hospital undertakes the general education of nurses and on completion of

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