

Twilight Sleep and Early Rising

Dr. Haultain's Interesting Views

A meeting of the Edinburgh branch of the Scottish Midwives' Association was held in the Royal Maternity Hospital on Saturday, March 9th, Miss Turnbull presiding. An address was given by Francis D. N. Haultain, M.D., F.R.C.P., Edin., on "Some Recent Developments in Midwifery."

Dr. Haultain said he would speak about two subjects of much interest as well as of much controversy and debate at the present time, (1) The Morphine-scopolamine Treatment, or Twilight Sleep, (2) Early Rising after the Puerperium.

With regard to the first, the subject was at present of enormous interest, and had been brought more vividly before the lay public by the publication of a book by Mrs. Hannah Rion. The medical profession was in a considerably controversial state regarding its advantages and disadvantages.

The anaesthesia produced by scopolamine-morphine had a great advantage over that produced by chloroform, in so far as the mere application of it did not interfere with the pains of labour. Chloroform had this disadvantage, that when it was given the pains became weakened and labour was continued for an indefinite time, forceps having to be applied as well. This method aimed at two objects—the relief of pain and the absence of memory. Two drugs were given—morphia and scopolamine. With the morphia it was hoped to relieve the pain and to keep the patient in a state of semi-consciousness. The pain was not absolutely relieved, Dr. Haultain thought; it was recognised at the time, but only temporarily, the moment it was gone the memory of it passed. With regard to the injection, the first dose should be given whenever the pains were regular. The method should be started early; people were inclined to wait too long, then the individual remembered, and the drug did not act with the same efficacy. It should be begun when the pains were in the first stage, occurring every seven or ten minutes. Whenever the medical attendant was certain that the patient had commenced

labour the treatment should be begun. The first injection should consist of quarter grain of morphia and one 150th of scopolamine. After this hyoscine alone should be continued at intervals of three-quarters to one hour. After the first dose the pains were relieved. If the treatment were commenced early enough the patient did not complain, she thought the labour had stopped; that, however, was not the case—the labour was going on all the time in a passive way. The pains would assert themselves in due course; when the patient had them she would make a movement or groan. The doses should be continued, and after the third or fourth dose the patient would go to sleep. She would wake up, but would go off to sleep again. She must not be disturbed in any way. If disturbed, she would wake up, recognise the fact that she had pain, and brood upon it. She should be kept absolutely quiet with cotton-wool in her ears; the blinds should be pulled down; she should not be spoken to. This sleep was only semi-consciousness, not complete unconsciousness as under chloroform. She should be given water to drink and she would take it. She would have no desire to pass water. But as a full bladder was one of the causes of delay in labour the water should be drawn off every eight hours; if asked to get up, she would be wakened. In his experience it was necessary to give four doses, morphia only once, and then hyoscine in small doses, even if the labour continued for two solid days.

What was the result of the method? In seventy-five per cent. of the cases the patient was unaware of anything, and awoke surprised that she had got a baby. In twenty-five per cent. it was not so complete, perhaps owing to some idiosyncrasy of the patient. These cases had some knowledge of what had happened and thought they had had very severe pain. There was no doubt that in every case there was a certain amount of relief from pain. In a number of cases memory remained; some pain had been felt, but nothing like the pain experienced without the drug. It prevented to a slight degree