

Editorial

The case for a Maternity Flying Squad Resuscitation Service in Singapore

"NO LOSS WITHOUT PROFIT. This paradox can mean nothing to the businessman. It could have a twisted meaning to the man who burns down his house in order to cash in on his insurance policy. I feel certain that it means something to those in the higher ranks of the insurance world, but I present the paradox to you in a different sense.

When the Angel of Death spreads his wings over a Maternity Hospital, he casts a heavy shadow of gloom. The unrelieved tragedy of two lives lost, the legacy of the motherless child have both of them a grim effect on all concerned. In the face of this situation, there can be no loss without profit. The Phoenix must rise from the Ashes. It is a time for ruthless criticism and self-examination. The same sequence must not be played again. Ignorance breeds knowledge. Failure breeds success. This way progress lies."

A. D. Browne—Master, Rotunda Hospital Dublin
Med. J. of Malaya: Vol. XVIII No. 4 June 1963, Page 306.

Yes—with the above passage as introductory remarks—this is time for ruthless criticism and self-examination. In the comparative analysis and study of maternal mortality over the past years from 1955 to 1959 and the years 1960 to 1962, it has been convincingly shown that Haemorrhage and Shock had come to occupy top place amongst the clinical causes of maternal deaths in Singapore. This factor accounted for 38.4 per cent of all the cases of maternal deaths in the years 1960-1962 as compared to 27.9 per cent in the years 1955-1959. A death from an Obstetrical Haemorrhage whether before the delivery or after the delivery of a child must be regarded as an avoidable catastrophe—more so if a Blood Transfusion Service exists. In this present age NO country can afford to ignore the avoidable factors which lead a woman to a maternal death, and in an affluent society such as is claimed to be present in Singapore today, such avoidable factors must be obviated or at the least, must be minimised. Elsewhere in this issue of the Bulletin, it is shown that for Post-Partum Haemorrhage alone, the rate at the Kandang Kerbau Hospital at 0.21 per 1000 is over four times as high as that for England and Wales with a rate of 0.051 per 1000. It is reasonable to assume that when overall conditions including Ante-Partum Haemorrhage and Bleeding from Abortions are considered, much more glaring disparity figures will be made evident. The same article also stresses the fact that amongst women who had been confined at their homes and who suffer from third stage complications including retained placentae and post-partum haemorrhage, the maternal mortality rate for them at the Kandang Kerbau Hospital at 0.086 per 1000 is about 9½ times as high as that for England and Wales with a rate of 0.009 per 1000. In the years 1960 to 1962—a total of five women had died even before their arrival in the Hospital as a result of Post-Partum Haemorrhage. When a woman suffers from Haemorrhage and Shock in relation to pregnancy and child-birth and if death did not result, there is the tremendous importance of maternal morbidity to consider. A morbid puerperium with liability to infections, deficient wound healing, deficient lactation, inefficient motherhood, anaemias and overall debility—all make their marks. And not to mention the long term effects of Pituitary and Adrenal inefficiency or failure which can result.

What factors are there that is lacking in this country? Is it ignorance or is it apathy? Is it inefficiency or is it lack of facilities? It is the contention that inefficiency and ignorance can be overcome by proper education and training. The apathetic can and must be aroused but facilities must be provided. Two vital facilities are involved in this issue viz: an organised Blood Transfusion Service and a Maternity Flying Squad Resuscitation Service. Happily for the Kandang Kerbau Hospital, an organised Blood Transfusion Service including blood bank facilities are now made available and a cry of need goes forth now for the evolution of a Flying Squad Resuscitation Service which is inhumanly lacking in the maternity services of the State today. Such a kind of Flying Squad Resuscitation Service

had its beginnings in the United Kingdom at Newcastle-on-Tyne in 1935. Thirty years have elapsed since then and yet no such service is still available in Singapore today. Over 172 Maternity Institutions in the United Kingdom cannot be wrong when they commenced their respective Flying Squad Resuscitation Service, and the Bulletin assures all concerned that the State Maternity Services cannot go wrong when a Flying Squad Resuscitation Service is initiated. Indeed Singapore will have added another shiny star to its firmament.

References

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