

MINUTES OF THE DOCTORS AND MIDWIVES ASSOCIATION MEETING

HELD ON TUESDAY 5 SEPTEMBER 1989 AT 2.30PM

PRESENT:

Mary Hammonds, Jenny Woodley, John Hilton, Sue Muller, Peter Cameron, Yvette Watson, Carolyn Young, Monica Yuzak, Linda Williams, Marie Somerville, Margaret Falcon, Glen Hoare, Adrian Gain, Grant Jackson, Joan Donley, Graham Gulbransen, Sian Burgess, Brenda Hinton, Joyce Cowan, Denis Snelgar, Val Furness, John Nealie.

APOLOGIES:

Marjet Pot, Bruce Cunningham.

1/ Report from Helensville Birthing Unit.

With the closure of the Helensville Hospital this unit has been recently established as a private (community trust) "Cottage" hospital which provides low tech birthing with low rate of pain relief.

Deliveries will be organised in the rooms (unstaffed) by the client's GP and domiciliary midwife. Patients must leave within 24 hours or be transferred if more post-natal care is wanted. The unit accomodates higher risk women, e.g. smokers, with lack of self-care and preparation. At present they are investigating ante-natal education for the unit and whether to contract it out or not, also whether domiciliary midwives wish to take part. Possibility of a rep from our group to help set things up.

Request given for members to fill out questionnaire on the leaflet handed out.

Issue of epidurals was reported as being the most discussed issue, with staff wishing to resist epidurals. Denis Snelgar says that acceptance of epidurals may affect the grading of the service, otherwise a change of grading of the unit not necessary in the future.

2/ Talk on Birth and Homeopathy by Sue Muller.

Discussed basic principles of use of homeopathy.

- * It is easy to overprescribe. The principle is to leave things alone, once the healthy function of the body has been stimulated. overprescribing may result in unwanted symptoms, or the cure may be impeded until administration of medicine is stopped.
- * One remedy should be used at a time for holistic reasons. Patient will generally only need one remedy at a given moment.
- * Use only reputable sources: Moores Pharmacy, Naturopharm, Weleda.
- * The choice of remedy depends on matching the patients symptoms with the symptoms that the remedy is known to cause.

Sue offered some easy prescriptions, such as those for physical trauma, flat babies etc, where patient's reactions tend to be similar, thus facilitating choice of remedy.

Noted that homeopathy can be used with any western medication, thus use of the two together is not a problem for homeopaths, although it is often a problem with the medical profession who may not allow use of homeopathy without their knowledge or control.

Discussion over the fact that homeopathy is often not taken seriously enough: i.e. - people self administer, unqualified people overuse, misprescribe etc.

3/ Report from Grant Jackson.

- A GP practising obstetrics from Tairua, on difficult situation with Medical Superintendent of Thames Hospital, who consistently and dishonestly harrasses him over the issue of his wish to practise home births in the area.

The O.S.R.C. imposes very difficult criteria to be met for homebirth cases to be accepted. Grant's contract with Thames has never been finalised after a series of trial periods over three years, - which is an additional form of harrassment.

Discussion and advice to Grant to enlist the support of the Thames Valley Home-birth Association, to contact another interested homebirth doctor, Dr Drinkwater, for mutual support, to get cases of women who have complaints against Thames Hospital and organise themselves. As the area is a bastion of 'alternative' people, general support shouldn't be difficult. Support of the media should also be enlisted (- this has been effective for Grant in the past).

4/ Vitamin K.

There is some controversy over the value of administration of Vitamin K orally for use in late onset hemorrhagic disease in newborns.

In "Lets Live" magazine 1989, Dr Pike says breastmilk (especially colostrum) as opposed to cowsmilk, is rich in Vitamin K, and therefore Vitamin K administration shouldn't be necessary.

Also noted is the importance of Vitamin K in the diet of the pregnant woman.

Discussion on defecation of high risk cases. Noted that intramuscular Vitamin K lasts 1 month (which covers the risk period of around 10-17 days), whereas not certain if oral Vitamin K lasts more than 36 hours in the system. Concern that it may mask liver weaknesses which is also causing hemorrhage.

5/ Organising of Bulk Orders of Midwifery Supplies.

As supplies for domiciliary midwives are becoming more difficult to obtain from hospitals legitimately, it is necessary to make an official arrangement as soon as possible, on the basis that homebirth is an economic extension of hospital services, and therefore midwives should be entitled to free supplies as in the past. Semi-assurance by Denis Snelgar that in the long-term the midwives needs will be met, but followed by the suggestion that the submission by domiciliary midwives should be put to Ray Naden (Head of Maternity Task Force Services).

MEETING CLOSED 10.30pm