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The seven-year grant through the Medical Research Council for investigations at Queen Charlotte Hospital, London, on maternal mortality permitted the planning of thorough long-term work and so offered attractive opportunities to competent scientific workers. The Hospital authorities provided space in the form of a research block and the nursing and other care for patients selected for special study and experimental treatment.

In the words of Dr. Mellanby, the secretary of the British Medical Research Council, "no better project could have been aided." Three substantial results are to the credit of Dr. Leonard Colebrook and his associates in this study. It has been shown conclusively that one of the chief dangers to women in childbirth is infection through contamination from pathogenic germs harbored in the nose and throat of attendants, and that this danger can be greatly reduced through the use of masks by attending doctors and nurses.
Two drugs, prontosil and sulphonamide, have been shown to have a very considerable effect in the reduction of mortality from puerperal septicemia due to the streptococcus. In closely observed series instead of six deaths among twenty-five patients as treated previously there is now only one — a reduction from 25 per cent to 4 per cent mortality. When multiplied by the number of hospitals that will profit from such knowledge the results may be considered as highly valuable. There is the possibility that the new drugs can be used effectively for prevention as well as for treatment.

A further return which illustrates the unpredictable advantages of enabling competent persons to work under effective conditions is the following — One Monday morning specimens of urine from five different patients were examined after a delay greater than was usual. Four were cloudy with the bacterial growth to be expected under such circumstances. One was clear and apparently free from growth — somebody wondered why and tested the exceptional specimen further out of intelligent curiosity. It showed a chemical substance which appears when a fat person is living on her fat — i.e., not taking other food. And then the observer wondered, "then why not try giving nothing but fat to persons with infections of the bladder, for the urine thus modified might entirely discourage the growth of germs in the urinary tract?" Success attended the application of this hypothesis and from this seven-year grant in the field of obstetrics has developed a form of treatment for cystitis which because of its simplicity and effectiveness will find increasing application broadly in medicine throughout the civilized world. The new drug treatment of puerperal septicemia may also be used
in generalized infections other than those associated with child-birth.

In comment upon the project at the Queen Charlotte Hospital the following factors have played a considerable role: the intelligence, imagination, and tenacity of the research staff; the relatively large promise of a field of study none too well explored hitherto; and the length and adequacy of the grant (seven years, £15,000 a year).

To Dr. Colebrook and his collaborators the principal credit is due, and to the management of Queen Charlotte Hospital.