

Getting patients out of bed early in the puerperium.

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# GETTING PATIENTS OUT OF BED EARLY IN THE PUERPERIUM

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## Abstract

The exact medical regimen of the puerperium has varied from century to century and from one social class to another. Obstetricians of old had their patients lie flat on their backs for fifteen or more days before allowing them out of bed. Their great fear was uterine prolapse. Our present day obstetricians are still adhering to this mode of treatment in part, or in whole, with very few variations. With the current shortage of maternity beds at the Sinai Hospital in Baltimore we have increased our maternity bed turnover by resurrecting the custom of allowing patients out of bed early in the puerperium.

Percival Willughby, Gentleman, in his *Observations and Midwifery*, written in the 17th century states "I knew a lady that constantly did keep her bed a fortnight

and also take into consideration the psychologic, recreational and physiologic values of athletics. From our discussion of functional fitness and motor skills it is obvious that a proper physical educational program requires more than calisthenics. Obstacle races, swimming and games such as soccer and lacrosse, which develop endurance and the competitive spirit, are highly desirable. Tennis, squash and handball, which develop coordination, have particular value because they can be continued after school days are over.

Although "a sound mind in a sound body" is a commonplace among educators, some school systems are still reluctant to provide either sufficient time or personnel for the development of adequate physical education programs. The relation between good fitness and efficient academic effort is not always appreciated by the educator, and too often the athletic coach seeks to develop outstanding skill in the few and neglects to improve the all around physical efficiency of many. Often also authorities are timid about strenuous exercise. It is granted that such exercise may be harmful if it is given without knowledge of the individual's medical fitness, and it may also be harmful if not properly graded, gradually increased and carefully supervised. While much can be accomplished from well planned daily exercise, a "thorough workout" once a week will of course result in sore muscles; on the other hand, if the exercise is mild and short, little benefit can be expected. Frequently strenuous exercise is regarded as harmful because an individual was overtired after his initial experience with the exercise he needed: it is to be remembered, however, that fatigue,

from cultivating motor skills would seem obvious. Nevertheless, neither is receiving proper attention, for Rowntree<sup>18</sup> quotes Colonel Bank as saying "Many young men are entering the Army today totally unprepared for military life. It takes weeks to bring them into physical condition necessary for military training. This means weeks of wasted time and effort which could be avoided if every young man now in high school would engage in physical activities." It must, however, be remembered that such activities cannot be beneficial unless the individual has been found medically fit and unless the program is planned to suit his needs. Physical exercise must be carefully supervised and methodically increased as efficiency grows.

### GETTING PATIENTS OUT OF BED EARLY IN THE PUERPERIUM

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BALTIMORE

The exact medical regimen of the puerperium has varied from century to century and from one social class to another. Obstetricians of old had their patients lie flat on their backs for fifteen or more days before allowing them out of bed. Their great fear was uterine prolapse. Our present day obstetricians are still adhering to this mode of treatment in part, or in whole, with very few variations. With the current shortage of maternity beds at the Sinai Hospital in Baltimore we have increased our maternity bed turnover by resurrecting the custom of allowing patients out of bed early in the puerperium.

Percival Willughby, Gentleman, in his *Observations and Midwifery*, written in the 17th century states "I knew a lady that constantly did keep her bed a fortnight after delivery and Gaines Wolveridge, M.D., a late writer in midwifery, in his book, *Speculum Matrice*, advised the women to keep their bed, 5 days at the least, after delivery. For he sayeth, I know 'tis usual for them to rise at the 3 days' end, but this, to be sure, the longer women contain themselves in their bed, the more secure they are from danger, and I know by experience that his sayings in this case be found very true."

Charles White<sup>1</sup> of Manchester, England, 1728-1813, challenged the practice of keeping patients in bed for a prolonged period after childbirth. In his treatise on the Arrest of Puerperal Fever he states "The patient should be allowed up within a few hours after delivery. The sooner the patient gets out of bed, the better, and this should not be deferred beyond the second or third day at the furthest." An opposite opinion was held by Robert Gooch,<sup>2</sup> who in 1820 was the professor of obstetrics at St. Bartholomew's Hospital in London. Gooch cautioned his obstetric students not to allow puerperal women out of bed before the 21st day. The following is a quotation from his book on midwifery: "For three weeks after delivery, the patient should be kept chiefly in the recumbent position, the consequence

TABLE 5.—Examples of Variations in Physiologic Measurements Before and After Training Twelve Weeks in a Group of Oarsmen

Subject	Recovery Index		Maximum Pulse During Run		Maximum Lactate, Mg./100 Cc. of Blood	
	Before	After	Before	After	Before	After
Pr.	65	75	195	195	160	142
Fl.	72	78	195	192	133	110
Ma.	77	95	200	180	74	68
Ly.	77	105	195	180	78	75
O.	78	93	195	170	149	90
Br.	78	97	196	168	121	95
Ab.	80	93	205	186	122	106
Ch.	80	93	193	156	74	74
Wh.	82	112	190	172	108	62
J.	83	91	196	180	93	89
La.	84	94	190	180	117	77
So.	85	98	192	174	130	95
Sn.	87	99	204	178	103	85
MaF.	87	108	173	170	141	85
Cha.	89	100	190	178	77	77
Eu.	89	108	196	182	91	69
Er.	90	117	189	164	102	73
Rl.	92	105	199	170	84	79
Rl.	93	112	185	172	112	64
Cl.	93	108	185	172	33	59
No.	93	108	185	172	33	59
Cu.	156	181	172	158	68	41

The test exercise in this series of experiments consisted in running for five minutes on a treadmill at a speed of 7 miles per hour and on a grade of 8.6 per cent.

sore muscles and breathlessness after exercise in a normal individual are eliminated by becoming accustomed to that exercise, not by avoiding it. Occasionally failure to make a proper response to an exercise program may come from an undetected pathologic condition, and such unexpected failure should always call for a repeated physical examination, which may reveal a condition precluding benefit from the program or perhaps even presaging harm if it should be continued or intensified.

The desirability of developing and maintaining good

18. Rowntree, L. G.: *Education, Health and Physical Fitness*, J. Health & Phys. Educ. **14**: 370-372 and 388-390, 1943.  
From the Obstetrical Service of the Sinai Hospital of Baltimore, Inc.  
1. Adams, J. G.: *The Manchester School*: Charles White (1728-1813) and the Arrest of Puerperal Fever, J. Obst. & Gynaec. Brit. Emp. **29**: 1-20, 1922.

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