

our consciousness, as in the case of the heart and intestines, or of the muscular ring which surrounds the pupil of the eye; or we may be conscious of it, though able to control it only partially or for a short time, as in swallowing and breathing.

The attribute of sensation is common to most parts of the body, and is therefore called *common sensation*. But there exists also the power of perception in other ways—viz., by the senses, and this is termed *specific sensation*. Common sensation is excited by mechanical or chemical irritants, but the appeal to the senses is made through special agencies. Each nerve of special sense has its particular centre or point of termination in the brain, and one cannot act in the place of another; each can fulfil its own special function alone.

Sensation, whether common or specific, may be partially or completely suspended, either directly by injury to, or pressure on, the brain, or indirectly by the paralysing influence of intoxicating agents on the stomach or lungs. All the machinery for producing an impression is complete, except that the brain is incapable of perception.

It is in this latter way that chloroform and other anaesthetics, as they are called, act. The intoxication, for such it is, thereby produced is transient; but patients often pass through the various stages of exhilaration before the period of stupor and insensibility ensues, and sickness, languor, and headache often succeed after sensibility is restored.

I need scarcely tell you the names of the special senses—touch, taste, smell, hearing, and sight.

To the sense of touch I have already given as much space as I can afford when considering the structures of the skin, and I cannot say more of the organs of taste and smell than that the nerve centre in which the respective nerves terminate is endowed with the property of distinguishing flavours and odours. In the case of the tongue and palate, the arrangement is of a nature closely allied to that which has been described as existing in the sense of touch.

The delicate organ of hearing consists of three divisions—the external, middle, and internal. The first of these is that which we see on the side of the head, and the canal leading from it, into the orifice of which the finger may be passed; the middle compartment is the drum or *tympanum*; the inner one is called from its complexity the labyrinth.

The external ear is called the *auricle*, and the passage leading from it the *auditory canal*, which is lined by a continuation of the skin inwards. It is protected from the intrusion of foreign bodies or of insects by the obliquity of its direction, by small hairs growing from its surface, and by the

presence of a bitter, brown secretion called *cerumen*, or ear wax, which is the product of special glands.

The middle ear, or *tympanum*, is a drum-like cavity, separated from the auditory canal by a fibrous membrane, which is attached to the whole rim of the passage, and completely shuts in the drum.

The interior of the drum communicates with a hollow cellular space in the bony prominence behind the ear. Air is contained in these, the *mastoid cells*; but the chief communication by which air has access to the drum to support its membrane is through a canal called the eustachian tube, which opens into the throat just behind the nostrils. The actual cause of hearing is the undulations of the atmosphere which are conveyed to the special nerve of hearing by the vibration of the membrane of the drum, which sets in motion a small chain of bones stretched across the tympanum or air chamber. But this drum membrane would fail to act, unless the atmospheric pressure on it were equalised by free communication with the air through the throat by means of the eustachian tube, which if obstructed, as in swelling or inflammation of the throat, fails to perform its office, and deafness ensues.

Diseases of the ear are usually treated by Surgeons who devote their entire attention to that subject, and you will not in your ordinary course of practice as Hospital Nurses have much to do with such cases. I therefore refrain from entering into them. I would only advise extreme caution and gentleness if ever you are desired to syringe the ear, and that you should never attempt the most difficult task of removing a foreign body unless you are far from Surgical aid.

(To be continued.)

WHITE SLAVERY IN HOSPITALS.

THE following article appeared in the *Pall Mall Gazette* on the 3rd inst., and has naturally attracted much attention and no little comment. We refer to its assertions in another column this week.

“In a Hospital every one is cared for except a Nurse, who is considered simply as a machine wound up by an imaginative enthusiasm, set going by the opposition of friends, and expected to work night and day until the spring breaks and life is useless. Women are so hard upon women and have no idea of the relative value of things. Into the motives which lead a woman to adopt the profession of Nursing we shall not enter here, nor shall we say one word about the reasons

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