



Our Foreign Letter.

NOTES TAKEN DURING A SUMMER HOLIDAY.

WHILE paying a hurried visit to Norway, in the company of another member of our nursing profession, our steamer brought us to Trondhjem—at one time the Norwegian capital, with a royal residence and a very handsome cathedral, and still a town of considerable importance close to the Arctic circle.

Being always on the alert to find out what progress Hospital work and Nursing has made wherever I go, I inquired what Hospitals there were, and found there were two, one for lepers (out of the town). I may add in parenthesis, that this disease, almost unknown among us, is terribly common in Norway, and all the large towns have leper hospitals connected with them in consequence. The other one was a general hospital. My friend and I determined to try and see for ourselves what a Trondhjem Hospital was like, and, notwithstanding the laughter of the rest of our party, we set out in search of Elizabeth's Hospital. To find our way there, was more a matter of difficulty than we had expected. In driving through the town we had made a note of a street called Hospitals Gade, and had made up our minds that all we had to do was to go there and ask for the Hospital, but when we did so, we found the Hospital in question was an asylum, and not intended for sick people. We appealed to a passing "commissionaire," who knew as little of English as we of Norwegian, but who was very polite and brought us to a hotel where, through the medium of a mixed dialogue of German and English, we managed to make our wishes understood, and were put in care of the commissionaire to take us to our destination. On our way thither, our guide conveyed to us his opinion of the Elizabeth Hospital, namely, that it was a good Hospital (Sychhus he called it), a *very good Sychhus*.

Before taking our readers into the Hospital they may like to know something of the Town of Trondhjem. It was founded by King Olaf of Sweden and is now exactly 1,000 years old. Though superseded as capital by Christiania, the coronation of the Kings of Norway still is performed in

the Cathedral which is at present undergoing complete restoration. The city has passed through many vicissitudes having been desolated by the plague and destroyed several times by fire. It is now a thriving and apparently cleanly town, containing 25,000 inhabitants. I purposely qualify the latter description as we heard later that not only was scarlet fever well known but that cases of typhus were of frequent occurrence, a state of affairs which in this pure air and with an abundant water supply ought surely not to exist.

On arriving at the Hospital, our guide took us into a square courtyard, the centre of which was tastefully laid out as a garden and was bright with many coloured blossoms. The buildings round were of wood. Though stone is abundant everywhere, almost all Norwegian houses are built of pine wood, hence the frequent fires which destroy whole towns. The appearance of the houses was really very picturesque, with the rich brown tones which age and frequent varnishing give, the windows somewhat small and flush with the walls so as to avoid the snowdrifts which, with windows such as ours, would accumulate and shut out the light.

Our guide took us straight to the Senior Deaconess' room, shewing a personal acquaintance with the interior of the Hospital, and receiving a warm greeting as an old patient when he entered the room. Here the difficulty of communicating our ideas again confronted us, and ourselves unseen we were aware that the question was being discussed as to who should take the strangers round; happily one of the deaconesses knew a little English and to her was allotted the task of shewing us the wards, &c.

The Hospital contains 120 beds for medical, surgical and fever cases; the wards are small and somewhat low, but well ventilated; the walls are mostly oil painted, the ceilings being done in the same way, but a few had polished wooden dados; the bedsteads are of wood with high sides, an anachronism for which our guide apologised, saying they hoped next year to have money enough to buy new iron ones. The beds were spring, with mattresses and down pillows. The quilts were grey woollen ones, unattractive looking but light and warm. In the wards the order and tidiness were not quite what we are accustomed to, but when one considers what four nurses with 120 patients under their care could do, allowance had to be made for external defects where more important matters were evidently well cared for.

Summer cleaning was being very thoroughly done in one part, ceilings as well as walls and floors being well scrubbed with Sanitas soap.

We were somewhat surprised to learn that strumous cases were among the most frequent, and that rickets were well known, osteotomy being often

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