

promptly granted. So lorries and harmony are now alike running smoothly."

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AN Irish correspondent writes:—

"We have heard that it is the intention of Miss Close, of Cork Street Hospital, Dublin, to resign her onerous post. We feel sure that some very good reason must actuate this movement on her part, as a glance at the Nursing Directory will show that her career has been ever onward, and her work continuous since its commencement in that deservedly famous school of Nurses, Brownlow Hill, Liverpool. Miss Close has been an earnest worker all her Nursing life, and has enjoyed the privilege of a very varied experience. We all remember the short but sharp Egyptian campaign, and Nurses can hardly forget that it was the devotion and zeal of those Sisters who worked at Ismalia (Miss Close will only let us say that she was as the least of them) that won for Nurses the first decoration from our beloved Queen—the Egyptian medal of 1882, followed by the Khedive's, both worn with pride and love by their happy possessors. The life of Agnes Jones fired her young spirit, and being in very early life left dependent on her own exertions she entered the noble profession as soon as it would receive her, at the age of 20. What wonder, then, if she feels a little tired and would take an easier kind of superintendence. Our Dublin sisters know what work in Cork Street must have been through the epidemic of small-pox which has raged and is still prevalent in this city, but we are glad to say it is on the decrease. Miss Close is too good a soldier to desert in the thick of battle. Be that as it may, the resignation of their Matron has caused universal sorrow to the staff, and they are almost unanimous in wishing her every success in her new undertaking (a Private Nurses' Home in the suburbs, worked on the co-operative principle), which we feel sure can be nothing but a success with Miss Close at its head; one of her especial characteristics having always been her care for and interest in the well-being of her Nurses. Many have reason to remember her name gratefully, and she will be indeed a loss to the Nurses of Cork Street, many of whom will wish to work with her again. We, therefore, look forward in the not very dim future to a very 'homey' Nurses' Home in the outskirts of Dublin, where loyalty and skill will be the watchwords. It will be felt in Dublin that reliable Nurses trained in the special class of cases of which Miss Close has such knowledge and such skill will be indeed a boon to the public. The supply has not been hitherto equal to the demand, and as Miss Close is not an advocate for snatchy training, being a Member of the Royal British Nurses' Association, we may feel confident that Nurses going out under her auspices will be worthy of their name. Can there be a higher standard?—to be worthy!"

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SEVERAL correspondents have recently called our attention to the frequent attacks which are made upon this Journal in the columns of the *Hospital* newspaper, and which invariably take the characteristic form of anonymous letters. We have been, and—after thanking our correspondents for their kind expressions—in future shall be, content to ignore these very undignified proceedings on the part of our contemporary.

Medical Matters.

HERNIA AFTER ABDOMINAL WOUNDS.



It is a possibility which has often been exemplified by actual cases, that after the performance of an abdominal operation, the site of the incision may become the seat of hernia. The edges of the wound might, to all appearance, heal well after the operation, but either from a deficiency in the muscular strength of the abdominal walls, or from a gradual relaxation in the newly united tissues, the abdominal contents may be pushed forwards through the weakened abdominal wall, and thus a form of rupture takes place. This can rarely be foretold or adequately prevented, although it is customary for a patient, upon whom an abdominal operation has been performed, to be supplied with a tightly fitting abdominal belt, and to be enjoined to wear this constantly for some months after the operation. In some cases, however, the protrusion of the intestines through the abdominal wall does occur, and in such patients the most distressing symptoms are sometimes found. They suffer from pain, generally of a violent colicky character, from various digestive disturbances, and often from attacks of vomiting. The only palliative treatment consists in the use of a tight abdominal belt; for the use of a pad and truss would do more harm than good, in consequence of the pressure causing an enlargement of the opening already formed, and probably also setting up inflammatory adhesions between the edge of the abdominal opening and the protruded abdominal contents. As a radical cure, the only procedure of any value is to make a fresh opening through the old wound, to replace the protruded contents in the abdominal cavity, and then to pare the edges of the opening and bring them tightly together with silk or catgut sutures, so as to permanently close the orifice. It therefore needs no further explanation to show the importance of Nurses in charge of abdominal operations watching most carefully for, and reporting at once the occurrence of, the slightest protrusion or apparent weakness in the site of the abdominal incision.

THE INFLUENZA FIEND.

THE ravages of influenza are once more attracting popular attention and arousing public anxiety, and have elicited somewhat alarmist articles on the subject from some of our lay

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