neglect of duty or breach of discipline. By nature I am reserved and lacking in moral courage—I am therefore totally unfitted for any position of great prominence in a public Institution. It is a great relief to me to seek the advice of our Matron—a strong, wise woman—and I am quite satisfied in my quiet little sphere of work as Sister of a medical ward. I feel convinced many women who apply for Matronships convinced many women who apply for Matronships are, as to natural character and disposition, quite as unsuited to perform the very responsible and trying duties in connection with the post as I was. I think if there were some means of communication between Matrons and Hospital Committees, by which a list could be kept of women possessing the necessary characteristics for superintendence, that a far wiser selection might be often made to fill the vacancies for Matrons as they occur. We Nurses have, many of us, suffered from the lack of discipline resulting from weak and unwise government on the part of Matrons not possessing the necessary qualifications to rule, and I know of one or two splendid women, strong, firm and just, who are simply wasting their unusual talents in subordinate positions, when they should be Yours, A PRIMROSE, &C. leading.

## ARE "STAFFS" GIVEN TO SNUBBING?

To the Editor of " The Nursing Record."

DEAR MADAM,—The letters on "Staffs" in your delightful paper are very interesting, as it shows the different experiences poor "Pros." have met with. Personally, I have experienced both kinds, snubbing and otherwise. I began my training in a large London Hospital, where my life was made unbearable by the continual nagaring of the Staff under whom I by the continual nagging of the Staff under whom I was placed. I was not the only one who suffered from her. Later I went to a well-known County Hospital, where I received many kindnesses and great help and encouragement from the Staff Nurses, whom I shall always remember gratefully for the pains they took with me. But it is not only Staffs the poor "Pros." have to stand snubbing from. How about Sisters? In this same County Hospital were two Sisters whose treatment of Nurses-Pros. and Staffs alike-made all Nurses dread being sent to their wards; and when there, they were perfectly miserable from continual worrying and hustling when quite unnecessary. If it had not been for the justice and kindness of the Matron, who removed me from one of these wards, I should have been compelled to resign my post, as my nerves could not bear the strain. I think there is as much cause for making improvement in the Sisters as in the much-abused Staffs.

Yours truly,
A LOVER OF JUSTICE.

Pitfirrane, Dunfermline,

## THE TREATMENT OF TYPHOID FEVER.

To the Editor of " The Nursing Record."

DEAR MADAM, -- May I ask other Nurses one or two questions through your paper regarding the treatment of typhoid fever. I have lately been in Genoa, where the fever is very prevalent—not through bad water supply, but through the cisterns so rarely being cleaned out. To every flat there is a round tub-like cistern on the top of the house, which is certainly covered over, but the sun beats on these cisterns all

day, and I was told they are full of all impurities from not being emptied from year's end to year's end. From what I understood, too, in Italy, they do not seem to recognise any difference between typhus and typhoid. I was not in charge of the patient, but I undertook to do some of the nursing, and a thing I had never seen before was, the patient had about a quart of tepid water, with a small quantity of salol, injected once or twice a day. The doctor said the warm water entirely took the poison out of the system. The patient was very hysterical, which seriously retarded her recovery, and she complained that it was painful, but I should imagine it would be very soothing in most cases. The salol I did object to, as it made little hard solid balls, and filled up the tube and nozzle. Can you suggest any way of making the salol soluble? I mixed it with boiling water, but as soon as the water got tepid it became hard.

It is some years since I left Hospital, but in my time, and under the doctors I worked for, no injection was ever given. Indeed, I remember one patient who was twenty-one days without having the bowels relieved, and then he was allowed a simple warm water injection only. Is it usual to give injections

here in England? The doctor was very insistant, too, that the patient, should drink *red* wine, which he said killed the germs —why, he never explained. In France, I have heard it is usual to begin treatment for typhoid with a dose of castor oil. Has that treatment been adopted in

England?

In Sweden it is customary to massé the abdomen, of course very gently, to bring down the temperature. I have such faith in massage that I can imagine the result, if properly executed, would be most beneficial, but only under a very practised hand. I hear, too, of a Swede who allows his patients, if they are not too weak, to get up and walk about. I suggested perforation and peritonitis, but he says such a thing has never once occurred with anyone he has treated. After heaving these things one naturally asks. hearing these things one naturally asks. Are we not rather bigoted in our treatment of diseases, if these opposite methods succeed as well as ours and, perhaps better? But I am am old fashioned, and would like to learn what we do in England now.

Yours faithfully, M. E. W.

12, Pembridge Villas, Southfields, S.W.

## CONVALESCENCE FROM SCARLET FEVER. To the Editor of " The Nursing Record."

DEAR MADAM, -Forgive my troubling you with a DEAR MADAN,—Forgive my troubing you with a letter, but my little girl has just recovered from scarlet fever, and has been convalescing at Miss Mosse's Home for children recovering from scarlet fever, at High Barnet. I thought that perhaps if I told you what very great care and attention she had had, and how very very comfortable Miss Mosse had made her and the lady I sent down with her that perhaps if you had an apportunity. with her, that perhaps if you had an opportunity of recommending the Home either to patients or to doctors who would be likely to have them, that you could have every confidence in doing so. I am sure Miss Mosse's venture deserves to meet with success, but of course without very great influence it is, I suppose, very uphill work to start with. Very truly yours. M. R. S.

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