

## Coming Events.

*June 26th.*—A Garden Party in the grounds of the Cancer Hospital, Fulham Road, S.W., at 4 p.m. Band of the Royal Horse Guards.

*June 30th.*—The Duchess of Sutherland will open a Sale of Work by the Inmates of the British Home for Incurables, Streatham, in the grounds of the Home.

Three Days' Bazaar in aid of Actors' Orphanage Fund, at the Queen's Hall.

*July 1st.*—The Duke and Duchess of York will inaugurate the Fête in the Grounds of Middlesex Hospital to celebrate the opening of its Convalescent Home.

*July 2nd.*—The Marchioness of Dufferin and Ava will open a Garden Fête at Kidbrook Lodge, Blackheath, in aid of the Countess of Dufferin's Fund for supplying Medical Aid to the Women of India.

Annual General Meeting of the National Society for Women's Suffrage, Westminster Town Hall, 3 p.m. Chair taken by the Lady Frances Balfour.

*July 3rd.*—Reception by the Committee of the Nurses' Co-operation at the Queen's Hall, Langham Place, 3 to 6. Meister Orchestra.

*July 6th.*—Princess Christian attends the Bazaar in aid of the Young Men's Christian Association, Windsor.

Annual Meeting Registered Nurses' Society, at 20, Upper Wimpole Street, 5 p.m. Tea and coffee.

*July 8th.*—The Duchess of York opens the "Princess May Ward" at the Royal Hospital, Richmond.

*July 21st.*—The Duke and Duchess of York open new Infirmary at Halifax.

*July 22nd.*—Annual Meeting Royal British Nurses' Association, Great Hall, St. Bartholomew's Hospital, E.C., 11.30 a.m.

bladder to act naturally. But—it may not, and it is, I believe, a universal principle that "it is unjustifiable to perform any operation, however slight, for the sake of experiment."

It may still be necessary to pass a catheter, and we are in the position of having caused the patient a considerable amount of needless discomfort and disturbance at a time when it is most essential to keep her as quiet as possible, and we may indeed have done much harm by setting up an irritation of the bowels, difficult to stop, and most injurious to the patient in the days immediately following confinement.

Why the catheter should not be passed when necessary in the first instance, is difficult to see. It is not surely recommended that an enema should be given, especially in the case of a woman newly confined, by an unqualified person. The qualified person could easily pass a catheter, or are we to infer that the district or private Nurse has to send for a doctor many miles away, because she cannot do so?

I am, Madam,

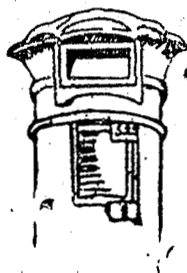
Yours faithfully,

L. O. S.

[We have referred this to the contributor of the article in question, and he writes: "If your correspondent would be good enough to read the note she criticises once more, she would probably appreciate the reason for the advice given. It was specially said that the treatment was recommended for cases in which the 'bladder had been paralysed.' In such cases the use of the catheter often sets up cystitis, or even septic fever, especially when it is unskilfully used; and death has on more than one occasion been caused by the catheter being 'easily passed' 'by a district or private Nurse,' ignorant of the harm she was doing. The more experienced a medical man is in such cases, the more anxious he is to avoid using the catheter, if that be possible."—ED.]

## Letters to the Editor.

Notes, Queries, &c.



*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not IN ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.*

### THE USE OF THE CATHETER.

To the Editor of "The Nursing Record."

MADAM,—The paragraph in your issue of June 20th, "The Use of the Catheter," advising Nurses to give a large warm-water enema in lieu of passing a catheter, "especially after a confinement," fairly took my breath away. I am indebted to your valuable paper for many most useful hints, but I cannot help thinking that the advice given in this instance would, if taken, be followed by most mischievous results.

To begin with, an enema is commonly given a few hours previous to delivery, usually with excellent result, so that it is in no way needed six hours afterwards (the longest time that a patient, recently delivered, should be allowed to go without passing urine), indeed, there is no suggestion as to any reason for its use except that it *may* have the effect of causing the

### NURSES AND BICYCLES.

To the Editor of "The Nursing Record."

DEAR MADAM,—There is no doubt that the bicycle would be a Godsend to the district Nurse, and it seems quite absurd to object to her using a means of locomotion which would enable her to get through her work in a quarter of the time it now takes her, and with far less expenditure of strength. But oh ye Powers that be, do not make a mistake at the outset, and send her off on her two-wheeled Mercury in her ordinary uniform!

It is true, that at the Nursing Exhibition, the spick and span model on her machine looked most fascinating; but we who cycle saw her in imagination in the hot sun, or in a high wind, and pitied her from the bottom of our hearts.

To begin with, we who (though we would not for worlds discard our skirts, and thus reduce ourselves to the level of the man, cannot sometimes resist an inward sigh for the freedom of knickerbockers), know that to wear the skirt with a long cloak buttoned over it would be not only miserably uncomfortable but dangerous. And secondly, the thought of exposing our faces to the sun, even in the sweetest of uniform bonnets, or of tying strings under our chins, makes us shudder.

Poor Nurse, we picture her, dressed like the model, arriving at a country patient's cottage, her face burning and possibly streaming with perspiration, hands

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