[MAY 22, 1897

attendants the hours of work of those remaining on duty are often lengthened to eighteen. In any case, the hours are excessive, because it must be remembered that the mental strain, of attendance upon the insane is very great. For example, it is impossible from hour to hour to know when a maniacal outburst may not occur, and when a lunatic may not make a serious effort to kill a fellow patient or an attendant; or when a mclancholic patient may not attempt to commit suicide. In fact, it is notorious that the work of a mental attendant is accompanied by no small danger, and that injuries more or less severe are constantly received by them in their daily duties of controlling the patients. With such special dangers, and such specially trying work, mere humanity would suggest that the hours of duty should be comparatively short, while common sense would strengthen the appeal by the reasoning that overwork must mean inefficient care of the insane.

We would, therefore, strongly endorse the . appeal which the mental attendants make for shorter hours; and, especially in the larger Asylums, we are convinced that there would be no practical difficulty in diminishing the actual hours of work to ten and a half per diem. In the next place, these workers complain that their times off duty and their regular holidays are short and insufficient. Some of them ask for one day off every week, and considering the arduous nature of their work the claim might not seem extravagant. But, at the same time, we cannot but recognise the difficulties of such an arrangement, and it appears to us that, for the sake of the patients, it would be almost impossible to provide that each worker should have a day's holiday more frequently than once in every three or four weeks, according to the number of attendants available for duty. With regard to the yearly holidays, there certainly seems reason in the claim that they are inadequate, and we consider that three weeks in the year is the minimum annual holiday that should be given to asylum attendants. The question of wages is a more difficult one, and must undoubtedly be largely a matter of commercial supply and demand. But if, as we are informed, many married asylum attendants are only given 17s. a week and their meals, it is impossible to regard this as at all an adequate remuneration for the onerous services expected from them, . . /

,

Diseases of the kidneys.*

By N. V. Goodspeed, M.D.

(Continued from page 350.)

THE treatment of the various forms of kidney diseases may well be arranged under three heads—preventive, curative and palliative.

Preventive treatment to be effective must be begun before there are any well-marked symptoms of the disease or at the earliest moment possible for diagnosis. We have seen that the process of parenchymatous degeneration is exceedingly insidious, and that it is caused, in most cases, by compelling the kidneys to eliminate substances which are irritating and unfit for elimination.

When the food taken into the stomach is suitable for nutrition, and when bodily combustion, or oxidation, is normal, the waste products that come to the kidneys for elimination are such as do not tax the excretive functions of the cells beyond their capacity; the work of elimination goes on smoothly, and the parenchyma suffers no pathological change. It is manifest, therefore, that if one would escape renal diseases he must give much attention to the kind, quality and amount of food eaten, and to the question of bodily combustion.

To consider at length the various food stuffs and point out which are more or less irritating to the kidneys would be a somewhat difficult task, and far exceed the limits of this paper. It is, however, pretty well settled among careful observers that nitrogenous foods when incompletely or imperfectly oxidised furnish the greater part of the offending materials. It is well known too that nitrogenous foods are oxidised with greater difficulty than the nonnitrogenous, so that, in a mixed diet, the latter are first consumed, and this leaves the former to be eliminated while yet imperfectly transformed.

At the same time it must be remembered that nitrogenous foods, such as meat, eggs, &c., are more nutritious, and produce more heat and force in the body than the non-nitrogenous, hence it will not do to rule these nitrogenous foods out of the dietary. It is essential that they be given in moderate quantities, and in the form most readily assimilated. As milk contains all the elements of nutrition, and is the most easily digested and most perfectly assimilated of all foods it is the food, *par excellence*, of those suffering from acute renal diseases.

In managing a case of acute nephritis the nurse will bear in mind that the other excretory organs, chiefly the skin and bowels, may be made to relieve the work of the kidneys in a large measure. They should be gently or

410

^{*} We reprint this Article from the Nursing World,



