

the surface of the skin which is affected by the burn, the more probable is the occurrence of such a sequel. The affection which is most common, perhaps, after such an accident is some form of ulceration of the bowels, especially of the duodenum, and which may cause the sudden death of the patient even as he appears to be recovering from the effects of the skin destruction. The explanation which has been usually given is that the function of the affected skin being thus prevented, the internal ulceration represents an effort of nature to throw the work unaccomplished by the skin upon the glands of the intestines, and that these become, therefore, congested, and thus liable to inflammatory changes. Whatever the explanation may be, recent investigations on the subject, made in America, show that in the case of severe burns the lymphatic glands generally, and especially the follicles of the intestine, are found in a state of extreme congestion and commencing ulceration.

THE DANGER OF ANÆSTHETICS.

DURING the last year, deaths occurring under anæsthetics have been almost invariably reported to the Coroner, and, in the majority of instances, inquests have been held in consequence, the reports of which have found their way into the Press. It has, therefore, become evident that a much larger number of deaths occur under chloroform and even under ether than had previously been believed to take place; and it is also being argued by some medical men that these accidents are really more common than they formerly were, and that they are due to one of two causes—to a large extent—either an improper method of administering the anæsthetic, or some defect in the purity of the vapour used. It is possible that the latter is the more frequent cause of death; because the administration of chloroform and ether is now much more carefully taught in the medical schools than was formerly the case. Twenty years ago, chloroform was more frequently given on a folded towel than by any other means; and it is possible that in some cases, at least, accidents are due to a cumbersome and complicated inhaler. At any rate, this view is very widely held; and it is certain that the safest plan of administration is that the chloroform should be well mixed with atmospheric air, and given only in minute doses and slowly—all of which conditions were attained by the old-fashioned system.

Nursing Politics.

THE PRESS AND THE ROYAL BRITISH NURSES' ASSOCIATION.

THE Press are, we are glad to note, taking the keenest interest in the question of the management of the Royal British Nurses' Association; and as publicity is all to the good in such a matter, no doubt an immense amount of progress and reform will be the result of the lively interest now taken in the question. "Gag" has been the keynote of the official policy too long, and the existing abuses would never have grown to their present dimensions had not great pressure been brought to bear by those interested in "hushing up" the scandal.

London is doing an immense service both to the members of the Association and to the public in continuing to discuss the question, and the two interviews—one with ourselves, the other with the Medical Hon. Secretary, Mr. Fardon—will throw some light on the question.

The question put to ourselves: "You consider these doctors are using the Association for personal ends. In what way do you mean?" could be more fully answered here than it is in London.

First, there is the social recognition secured by quite unknown medical men and their wives and families—at our social functions, such as our Annual Conversazione and Meetings—who presumably would not otherwise associate with Royalty. Their efforts are pitiable, but comparatively harmless.

Secondly, we find persons attaching themselves to our Association, and thrusting themselves into prominent positions, and obtaining notoriety, who have failed to attain any success in the practice of their profession; and thirdly, there is the really dangerous class—mostly composed of hospital officials—who scent danger to their undisputed authority in their own little hospital sphere, in the organisation of a strong, united, and independent body of nurses, incorporated by Royal Charter.

Men of this illiberal type consider that co-operation amongst nurses which they know, and we know, means progress, *must be prevented at any cost*, and they are prepared to risk much to accomplish their ends—the prevention of unity in the nursing profession. It is this stamp of man—specious and patronising, posing as the disinterested friend of nurses—who is the most dangerous and deadly enemy to all nursing pro-

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