

unworthy of public trust, and professional confidence. For some twenty years, the reformers struggled in vain to gain a hearing in Parliament, and the agitation for Registration more than once seemed to collapse altogether, in consequence of the difficulties and the opposition with which it was encountered.

But about the year 1843, an energetic publishing firm took the matter into their own hands, and issued a Medical Directory, showing the names and addresses of, and the various qualifications and public appointments held by, medical men. At first, this volume was small and insignificant, but its utility gradually became known, and its size and popularity steadily increased. It showed the advantage of a public list of recognised medical men, while at the same time it emphasized the necessity for an official, and State-recognised, list, beyond any private and irresponsible publication, however excellent. So strongly did this feeling grow, that, some ten years later, the first Medical Act was drafted, and in 1856 it was passed; for the first time giving State recognition to the idea of a systematic method of medical education and registration. The *Medical Directory*, therefore, proved, as was expected, to be a most powerful lever in forcing forward the State Registration of medical practitioners, and it has grown ever since in increasing popularity and usefulness. It must be remembered that, from the very first, no name was placed upon the *Medical Directory* unless the medical man possessed a recognised qualification to practice. It was the lesson of the facts we have recalled, which led, in 1891, to the publication of *The Nursing Directory*, and which caused only the names of nurses registered by the Royal British Nurses' Association to be entered upon that Directory; because hitherto that has been the only body engaged in this work.

In future, the work of testing the professional qualifications and personal characters of those who desire to be enrolled on its pages will be carried out by a much more efficient professional body—a Committee appointed by the Matrons' Council; because it is now generally known that the Registration Board of the Nurses' Association comprises persons who are not themselves registered, and whose opinion and judgment carry of course no professional weight. *The Nursing Directory*, then, it is hoped, will do what the *Medical Directory* did forty years ago, in proving the need for legislation and professional registration. Like the

Medical Directory, and all other good things, the success of *The Nursing Directory* has inevitably caused the production of inferior and worthless imitations; and one has been recently issued by a City financier which includes trained nurses, probationers, asylum attendants, ship stewardess, a housekeeper, and other untrained persons, in one hopeless *olla podrida*. Such a publication stands self-condemned, but we have welcomed its appearance as the strongest proof yet advanced of the need for State registration, of the manner in which the public require to be protected against untrained nurses, and as to the manner in which they can be deceived and misled upon this matter by any specious publication issued by any unqualified person who may consider it a good commercial speculation.

Annotations.

THE ABUSE OF DRUGS.

THE suicide of a nurse in a large London Hospital from an overdose of chlorodyne, which she took for insomnia while on night duty, points once more the necessity for any nurse who suffers from sleeplessness reporting herself to the Matron in order that the symptoms may be adequately dealt with. Insomnia is a sure sign of physical and mental exhaustion, and no Matron would keep on duty a nurse who was suffering from it, nor could a nurse successfully malingering in order to avoid night duty, for, to a practised eye, the symptoms of insomnia are unmistakable, and reference to a medical man would speedily solve any doubt. The condition of this unfortunate nurse seems to have been pretty well known to her fellow nurses, but, somehow, in a case of this sort, the Matron is frequently the last person to be informed of the nurse's condition. At the inquest which was held into the circumstances attending the death of this nurse, a fellow-nurse gave evidence that she knew the deceased took large quantities of chlorodyne for insomnia which she scorned to take in a diluted form. Medical evidence was given that the nurse was found unconscious in her bed, and died twenty-four hours afterwards. A bottle, which had contained chlorodyne was found in the bath room adjoining her room, and death was due to chlorodyne poisoning. It was impossible that the nurse had obtained the chlorodyne in the hospital, but it was easy to procure outside. The sooner some law restricting the sale of poisonous drugs is enforced, the better.

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