

Netherlands." Again, Napoleon complained of the sick from this disease, "encumbering the hospitals and roadsides," and in the Crimea in the first seven months 60 per cent. died, a larger mortality than that of the Great Plague of London. We are told that Sir Thomas Longmore, M.D., says of the Crimean War, "Nothing was ready for a state of war . . . the neglect of the sanitary department of the military service and the subordinate position assigned to it, recoiled on the heads of the Government and the people by leading to a frightful amount of sickness and expenditure of life in the ranks of the army, and ultimately to the enforced abandonment of part of the enterprise the army was designed to accomplish." The author adds that this criticism, with the exception of the last sentence, may be applied with equal truth to the French war in Madagascar, to the Spanish-American, and present South African wars.

Neither is the unnecessary sickness, suffering, and death the only point to be considered in this connection, for the soldier, after years of training, is, by them, in the very hour of danger, rendered useless to the nation.

#### THE HOPE OF THE FUTURE.

Logically, pitilessly, convincingly, Dr. Canney proves his position point by point, but he does not stop there. He shows us how in the future this appalling sum of sickness may be avoided. Four campaigns—that in Abyssinia 1867-68, those in Ashanti in 1873-4 and in 1895-6, and the Suakim Expedition in 1885—were fought on boiled or distilled water, the result in each instance being that "the death rate was about the ordinary home death rate and the need for hospital transport very limited."

Dr. Canney asks: "How much destruction of life by preventable diseases in war is necessary before general officers will take up this problem seriously? How many years must pass between established scientific work and the adoption by the War Office of its practical applications? The preventability of typhoid (enteric fever) has been established at least a quarter of a century, yet the immense casualty lists from this and other preventable water-borne diseases all over South Africa in this war reveal a state of things as regards the supply of pure water little in advance of the first year of the Crimean War, or even of the Crusades. . . . If the Commissariat Department had supplied poisonous food would nothing have been said? How then can a general officer conduct a campaign on contaminated water and the public remain apathetic?"

The author urges the abolition of the *laissez boire* theory ("Tommie will drink where he likes") in future wars.

"We pitied the Dervishes rushing against the storm of lead; what will they think fifty years hence of the picture of 45,000 Englishmen drinking unaltered the polluted Paardeberg River?"

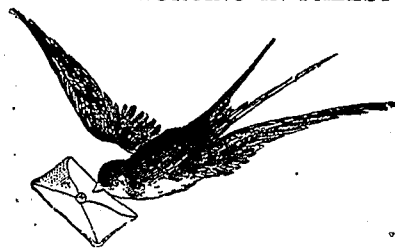
In war all water should be regarded as contaminated, and to deal with it a section of the R.A.M.C. should be set apart to be known as the Royal Water Corps. If it is necessary, we are told, in civil life to separate medical work into practice and prevention, it is far more so in actual war. The transport of this corps should be independent of the general transport, and should take precedence of everything except the day's ammunition. Under these conditions, and under the scheme proposed, it has been proved possible for water

for 45,000 men to have been boiling nine minutes after the arrival of the Army at Paardeberg, or, again, 100 pints of water could be boiled with three-quarters of a pint of petroleum in twelve minutes. It is further urged that officers and men should be educated in the hygienic advantages to be gained by the careful scientific control of the water supply, and that they should be taught to regard it dishonourable and a crime to use a drop of water, on a campaign, not approved or allowed by this corps.

The pamphlet contains many suggestions of great value, and we commend it to the earnest consideration of all who desire that our brave troops should not be subjected to the risk of contracting preventable disease.

## Our Foreign Letters.

### NURSING IN PALESTINE.



The Editress has asked me to give our readers a little insight into nursing in the Holy Land.

As an English - trained nurse who recently worked there for some time I am glad to be able to write a brief account of my experiences and impressions of nursing in Palestine.

There are in Syria many English and German hospitals, and also not a few French and Austrian. The former are practically all mission hospitals. The continental infirmaries are chiefly staffed by nuns or monks. In Nazareth there is an Austrian hospital belonging to a brotherhood and the "brothers" form the whole nursing staff.

The natives as a rule dislike anything connected with sickness, they are afraid of anyone who is ill, and shun hospitals almost as much as they do cemeteries. So they are appreciative of the skill and attention bestowed—gratuitously—by European and native doctors and nurses. There are some clever native doctors in Palestine; but, so far as I know, no Syrian hospitals. Therefore it is to Europeans—as a rule—that the natives turn when the stress of sickness overtakes them.

An English nurse's life in an English hospital in Syria—though much akin to that of any British nurse in the East—is obviously very different to nursing life in the mother country.

For instance, with regard to nurse training. A so-called training is in some cases given to native women who eventually turn out more or less capable nurses under European authorities. But, although much can be done by kindness, firmness and tact, the Syrian is difficult to discipline.

In the hospital to which I belonged, we had a very useful native wardman, a kind of orderly. Under three trained English nurses (the doctors were non-resident) he worked very well, and, on the whole, gave us very little trouble. He was also our interpreter.

Although so far from home, most European hospitals in Syria are excellently organized, and very genuine

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