

more slender end segment was attached. These two portions were separated by a constriction more marked on the left side. On the whole the tail was not at all unlike a pig's tail, a similarity which has been noted in a number of cases previously reported. The tail when first seen, the child being two weeks old, was 4.4 cm. long, and at six months was 7 cm., showing a fairly rapid rate of growth. The most remarkable characteristic of the tail was its mobility. When at rest it would lie extended in the mid-line, or bent over to one side upon the buttocks. When the child was irritated, and cried or coughed, the tail would contract markedly. Between the basal and middle segments but little movement was possible, but between the middle and distal segments the movement was considerable. The latter could be drawn in sharply, telescoping the middle segment, and at the same time flexion to the left side took place. During this action the middle segment became much shorter and thicker. When the child was six months old the tail was removed, and immediately put into Zenker's fluid to harden. Sections were afterwards cut and showed that the skin covering it was normal and in places of considerable thickness. A few bundles of fibres of voluntary muscle existed between the basal segment and the other two, being attached for the most part on the left side, but none were found between the trunk and the tail. On the right side some atrophied remains of muscle fibre were seen. No artery or nerve of any size, or any trace of anything like the medullary cord or notochordal tissue could be found.

HABITUAL CONSTIPATION.

Dr. C. D. Spivak, writing in the *Journal of the American Medical Association*, says:— I wish to call the attention of the profession to the following statements: (1) A certain percentage of individuals suffering from habitual constipation are apt to have a spontaneous movement of the bowels the following day after the stomach has been washed for the first time. (2) The majority of such patients will eventually recover the normal function of their bowels, if lavage is continued daily for two or three weeks, and later at greater intervals. (3) The best results are obtained from using cold water, or hot and cold water alternately. (4) The best time for such lavage is one hour before breakfast.

Appointments.

MATRON.

Miss Emma Mary Byles has been appointed Matron of the Lambeth Infirmary, Southwark. Her previous experience has been that of probationer at Addenbrooke's Hospital, Cambridge, from 1889 to 1890, and Staff Nurse at St. Thomas' Hospital, London, from 1890-1891. From 1891-1892 she worked in connection with a private nursing home in Cambridge, when she was appointed Night Superintendent at Addenbrooke's Hospital. She held this position until 1893, when she was appointed Ward Sister in the same hospital, a position she held for six years. She was then appointed Assistant Matron at the Southwark Union Infirmary, East Dulwich, a position which she still holds.

NIGHT SUPERINTENDENT.

Miss Mildred Jackson has been appointed Night Sister at the South Devon Hospital, Plymouth. She was trained at the Royal Infirmary, Liverpool, in connection with which she has also acted as private nurse and temporary Sister.

CHARGE NURSE.

Miss Sarah M. Edwards has been appointed Charge Nurse at the Isolation Hospital, Chester. She was trained at the Salop Infirmary, Shrewsbury, and has held the position of Staff Nurse at the Royal Chest Hospital, City Road, Charge Nurse at the North-Western Fever Hospital, London, and at the City Hospital, Sheffield. She has also done some private nursing.

Miss Jennie Brooke has been appointed Charge Nurse at the City Hospital, Park Hill, Liverpool. She received her training at the Royal Infirmary, Sheffield.

A Surgeon on the Treatment of the Sick in South Africa.

Dr. Alfred R. Friel, M.A., F.R.C.S.I., writing to the "British Medical Journal," from Waterford, says: "As one who was on duty as a surgeon in South Africa, from March to October, 1900, and heard and saw much of what Mr. Burdett-Coutts described, I wish to say that in my opinion the way in which he has been treated is unworthy. Immediately after his letters were published an immense improvement took place in the treatment of the sick by the authorities. Most of us have relatives or friends at the front, either in the regular army, or among the volunteers. Scarcely any soldier passes through a campaign without, at some time or other, being in hospital, and both the soldiers who fall sick and we at home, who have relations and friends at the war, owe Mr. Burdett-Coutts a debt of gratitude for the better treatment which they now experience.

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