

## The Society for the State Registration of Nurses. The International Congress of Nurses.

At a meeting of the Executive Committee of the Matrons' Council, held on Thursday, the 6th inst., a most encouraging report was received from the Registration Sub-Committee. First and foremost, Miss Louisa Stevenson, of Edinburgh, has consented to become the President of the Society for the State Registration of Trained Nurses. Miss Stevenson's work for the community, and especially for women, places her in the first rank of leaders, and her acceptance of office was most sincerely appreciated by every one present at the meeting. Miss Louisa Stevenson is a member of the Council and Executive of the Scottish Branch of Queen Victoria's Jubilee Institute for Nurses, and also a member of the Board of Management of the Edinburgh Royal Infirmary.

### LOCAL SECRETARIES.

Amongst the ladies who have consented to act as Local Secretaries are Miss Mollett for Hampshire, Miss Poole, Matron of the Blackburn Infirmary, for Lancashire, Miss Annie Barling, Matron of the Kidderminster Infirmary, for Worcestershire, Mrs. Groves (Member of the League of St. Bartholomew's Nurses), Bristol, for Gloucestershire, Miss E. Purvis, Matron of the Middlesborough Nursing Association, for Middlesborough, Miss J. F. Jamieson, Dorchester, for Dorset, Miss Richardson, Matron of the Stockport Infirmary, for Stockport, Miss Greenlaw, Matron of the Allt-yn Hospital, Newport, for Monmouthshire, and Miss Louisa H. Hayes, for the County Tyrone.

Upwards of 200 Matrons and certificated Nurses all of whom have applied since our last issue were elected as members, and Mrs. Bedford Fenwick consented to act as Hon. Secretary, *pro tem*.

It was decided to hold a Meeting in London in May, at which Miss Stevenson has kindly promised to preside—when the constitution will be considered and adopted, the officers and committee appointed, and work begun in good earnest. We are delighted with the enthusiastic letters received from Matrons and Nurses, and seem at last to see the dawn of the bright day of real professional co-operation, so passionately desired for so long.

In the meantime the Form of Application for membership will be found in our advertisement columns on page v., and the Hon. Sec. will be grateful if candidates will give their permanent address, and not a temporary one; this, of course, applies more especially to private nurses. Also, if possible, will each member try to interest her nurse friends in the Society and encourage them to fill in the Forms as they appear from week to week. By this means we shall soon be a thousand strong.

### MORNING SESSION.

THURSDAY, SEPTEMBER 19TH, 1901.

### NURSING OF THE INSANE.

By Miss S. LOUISE LAIRD,

*Superintendent of Nursing, Willard State Hospital, New York.*

(Continued from page 168.)

In cases of simple acute melancholia, about 90 per cent. are recoverable, and 5 per cent. result in death, usually due to marasmus, suicide, visceral disorders, or pneumonia. A very large number of the chronic cases die of tuberculosis.

We will now consider briefly the third and largest class of the insane—that of mental enfeeblement. Dementia is the general term given to the greatest division of this disorder, and one author speaks of it as "The goal of all insanities." Being the result of so many different disturbances, it assumes numerous phases, which we shall not have time to consider in detail. Rare cases of "primary dementia," that is, enfeeblement of a mind once normal with no acute form of insanity preceding it, may follow a prolonged physical or mental strain, such as may attend the vicissitudes of war or some intense fright or shock, in which case the usual care of an acute insane patient may be given, and recovery looked for at any time from a few months to a year. More frequently these cases merge into a condition called "secondary dementia," where the enfeeblement is recognised as the sequel of some cerebral disease, as epilepsy, alcoholism, syphilis, melancholia, and mania.

Secondary, or "terminal," dementia may be divided in two classes, apathetic and agitated. About two-thirds of the patients in our State hospitals are demented, many of whom were maniacal or dangerous when committed, but have since lapsed into a quiet existence with but little emotional basis. Their condition is more pathetic from its hopelessness, though mercifully they are more contented with their lot than one would imagine they could be. They appreciate any comforts or favours very highly, take an active pleasure in amusements, a large part of the work about the hospital is performed by them, and while they are not capable of initiating any work, they acquire automatic habits of employment when directed and supervised. They are very useful to the hospitals, and are deserving of all that can be procured for them in the way of improvements or diversions. In the advanced stage of apathetic dementia the patients do not speak, crouch or lie about on the floors or in corners in the most negligent attitudes, and cover

[previous page](#)

[next page](#)