especially of the neck and back, with commencing optic atrophy and diminution of vision; (b) mental apathy, increased muscular weakness, and slight rigidity, with increased knee jerks-the early onset of rigidity being characteristic; (c) definite rigidity of the muscles in the position of extension, pronounced optic atrophy, and blindness. A distinguishing point from other diplegias is the absence of convulsions; another characteristic feature is the presence of a large whitish-grey oval patch in the fundus oculi in the region of the macula. The disease is invariably fatal in one and a-half to two and a-half years.

Morbid anatomy and pathology.—Birth palsies are due to injury to the brain at birth, usually vascular and due to hæmorrhage. Either the meningeal or cerebral system is liable to injury. In the former case the hæmorrhage is either subcranial or subdural, forming a hæmatoma which causes pressure but not necessarily laceration; subsequently absorption or cyst formation takes place. In the latter case the results are more serious; the hemorrhage occurs either beneath the pia, or into the arachnoid space, resulting, if in the former position, in disturbance of the nutrition of the cortex from rupture, stretching, or thrombosis of the vessels.

Inflammatory lesions.—The nature of these lesions is as yet undetermined. Part of the brain undergoes marked sclerosis; the grey matter, except for a few islets, disappears, and is replaced by fibrous tissue with an absence of the normal pyramidal cells, the lesion generally being symmetrical, the most probable view of the pathology of such cases being that the lesion is inflammatory, a polioencephalitis, akin to the polio-myelitis in infantile spinal paralysis. The acute onset, fever, and tendency to repression, suggest a germ infection, though no proof of this exists.

Infantile cerebral degeneration.—The pathogeny is unknown. The condition is one of progressive atrophy of the essential nervous cellular elements of the cortex, resulting in general wasting, atrophy, and straining of the convolutions. Microscopically the pyramidal cells show marked degeneration. The disease is a general atrophy of the cells of the brain, progressive, and ultimately fatal.

The following Nursing Sisters are now on their way home from South Africa:

In the Staffordshire: Sister J. N. Dixon, of the Victorian Nurses' Institute. In the Saxon: Sisters A. L. Pierce and E. Townsend.

# Appointments.

## LADY SUPERINTENDENT.

Miss Evelyn Hurlbatt has been appointed Lady Superintendent of a Surgical Home in Norwich. Miss Hurlbatt was trained at Guy's Hospital, where she temporarily held the position of Sister. She has also been Matron of the Cottage Hospital, Willingham-by-Stow, and of the Memorial Hospital, Kendal.

#### MATRONS.

Miss Maude Sawle has been appointed Matron of the Hospital, Grantham. She was trained at the General Infirmary, Cardiff, and has held the positions of Charge Nurse at the Newport and County Hospital, Sister of the Children's Medical and Surgical and the Women's Accident Wards at the Wolverhampton Hospital, and of Sister in the Torbay Hospital, Torquay.

Miss Gladys Reyner has been appointed Matron of the Isolation Hospital, Cheshunt. She was trained at the City Hospital, Birmingham, and has held the position of Sister in the hospital to which she is now appointed Matron.

Miss A. Thompson, of the Wharneliffe Hospital, Oxford, has been appointed Matron of the Borough Asylum, Canterbury.

Miss J. Wright has been appointed Matron of the Borough of Cambridge Infectious Diseases Hospital. She was trained at the Borough Sanatorium, Brighton, and has held the positions of Nurse at the Ashton-in-Makerfield Isolation Hospital, of Charge Nurse at the Swindon and District Isolation Hospital, and of Matron at the Goole Sanatorium.

Miss Mary Lewis has been appointed Matron of the Cottage Hospital, Budleigh Salterton. She was trained at the General Hospital, Bristol, and has held the position of Superintendent of the Clifton District Nursing Association.

#### - SISTER

Miss Barnes has been appointed Sister at the Union Infirmary, Sheffield. She was trained at the Union Infirmary, Epsom, and has held the position of Nurse at the City Hospital, Park Hill, Liverpool.

## HOME SISTER.

Miss Annie Appleyard has been appointed Home Sister at St. George's Hospital, Hyde Park Corner, S.W. She was trained at St. Bartholomew's Hospital, and is a member of the League of St. Bartholomew's Hospital Nurses.

# CHARGE NURSE.

Miss Mary Rowell has been appointed Charge Nurse at the Workhouse Infirmary, Brighton. She was trained at the General Infirmary, Worcester, and the Royal Maternity Hospital, Edinburgh. She has also had experience in private and district nursing.

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