

local application it checks inflammation and lessens pain. It is prescribed in cases of rheumatism and neuralgia. If applied to the eye, it powerfully dilates the pupil. Atropine is chiefly used in ophthalmic work.

In cases of poisoning from belladonna, emetics must be given or the stomach pump used. Nitrate of pilocarpine is the best thing to antagonise the poison. Hot coffee or stimulants should be given, and artificial respiration employed.

The Registered Nurses' Society.



The ninth annual meeting of the Registered Nurses' Society was held at 20, Upper Wimpole Street, on Wednesday, July 22nd, Dr. Bedford Fenwick in the chair. The Annual Report, which was adopted, showed continued progress and success in every direction. The audited accounts

showed that during the past year £7,341 had been received in nurses' fees, an increase of nearly £600 upon the receipts of last year.

The earnings of the nurses, who have been members throughout the past twelve months, have varied from £125 9s. for forty-one weeks' work to £90 9s. for twenty-one weeks' work; the average being no less than £87 for an average of 35.4 weeks' work. As almost every member took eight weeks' holiday, and the average earnings of each of the above nurses per week was £2 9s., there is good reason to believe that no other Nursing Association can show more satisfactory figures. During the year, while the large number of doctors who previously supported the Society have continued to give it their valued confidence, no less than 132 new practitioners have commenced to send to the offices for nurse.

The Chairman pointed out how much indebted the members of the Society were to their excellent Secretary, Miss Sophia Cartwright, who conducted the business of the office in such an admirable manner, and worked early and late for the benefit of the Society.

Upon the retirement of Sisters T. Jones, McEwen, and Sadler; Sisters Boden, Rose Holliday, and Mason were elected to represent the members on the Committee. It was decided to call a special general meeting in the autumn to consider how to extend the usefulness of the Society to members by incorporating in its objects a professional and social element, now that its commercial prosperity was assured, thus forming a Registered Nurses' Society League.—Mrs. Bedford Fenwick was again elected the Delegate of the Society to the National Council of Women of Great Britain and Ireland, and will attend the meeting to be held at Cheltenham in November next.

The Nursing of the Sick at Sea.

We are glad to note that the care of invalids on ships—an important question dealt with so sympathetically by the Comte C. de Cardi at the Matrons' Council Conference in 1900,—has a powerful advocate in the Editor of the *Journal of Tropical Diseases*, whose remarks on the subject in the June issue are eminently practical, and are quoted below:—

THE CARE OF INVALIDS ON SHIPS.

An invalid in the tropics "ordered home" is frequently loth to leave his more or less comfortable home or hospital to undergo the "hardships" an invalid is subjected to on board ship. He feels too ill to undertake the voyage, and may prefer to risk the chance of recovery in his tropical environment. The life of an invalid on board ship, even under the most advantageous circumstances, is not, and never can be, anything but most trying and uncomfortable; yet it is surely possible to alleviate in some measure his unenviable and in many cases dangerous position.

THE DOCTOR.

We do not join in the universal condemnation of that much-maligned member of our profession, "the ship's doctor." It is the fashion to view him as a being of inferior medical calibre, and one only to be mentioned to be pitied or ridiculed. How unjust these statements are, all medical men who have travelled are fully aware of, but the public have come to look upon service men, whether of the Army or Navy or of the merchant service, as bodies apart, and as belonging to a different professional species to the practitioners at home. The public services are doing all in their power to free their medical men from the opprobrium that has attached itself to these departments; but the "ship's doctor" is content to continue with the stigma which gossip has affixed to his calling. How this is to be removed we have pointed out more than once in these pages, and we would repeat that the main principle to be aimed at is that no medical man ought to be placed in charge of passengers or crews of ships sailing to and fro to tropical countries without a previous course of instruction in tropical diseases.

THE NURSE.

There is another element, however, in the management and care of an invalid which requires to be brought prominently forward. The doctor without a nurse is like the engineer without his stokers, or the captain of the ship without his officers. It is not the province of the doctor to nurse patients, although on board ship he often has to undertake the duties of both medical attendant and nurse. If, however, he devotes almost his entire attention to one patient others must suffer, and he is therefore neglecting his proper duty. A nurse is, and must in future become, an essential part of a ship's company. In the meantime, the patient is cared for by a friendly steward or stewardess; but "caring" for a patient is not nursing, and no untrained man or woman at the present day should be placed in such a position. The nurse in charge of patients from the tropics, moreover, should have had experience of tropical ailments, and no nurse should be employed who cannot show

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