

fluid, and at the same time permit of the almost complete coaptation of the wound.

The author's drain consists of a soft gum tube surrounded by numerous strands of cordine, both enclosed in a thin rubber protective. It is nothing but a combination of the Penrose sheath and the Fowler wick, to which has been added a tubular drain. The rubber protective does not extend as far as the cordine, and the cordine does not extend as far as the gum tube. This leaves the end of the tube free to carry off fluid, and the ends of the cordine exposed to absorb it. It is believed that the drain possesses the advantages of both the Koberle's glass tube and Bordenheuer's gauze strips, and is free from many objections to each.

It is small in size, hence does not interfere with the closure of the wound. It is soft and flexible, hence does not endanger pressure necrosis and the formation of a faecal fistula. It is protected by impervious material, hence does not become adherent and is readily removed. The cordine gives maximum capillary drainage for its bulk, and can be removed in part or in whole without taking out the entire drain. The rubber tube acts as a sentinel to show if sudden hæmorrhage occurs; it permits the escape of serum if it collects too rapidly for the cordine to carry it off; and it prevents accumulation of fluid, which sometimes takes place after a capillary drain becomes choked with coagulated lymph. If the tube fails to act spontaneously, it may be aspirated with a syringe.

The limit to the length of this paper does not permit of a description of how to place and how to care for these various abdominal drains, but, in conclusion, a few words must be written in regard to their number and location. Kelly, in discussing the subject, said: "We drain too often, but when we do, we don't drain half enough." In a bad case reliance must not be placed in a suprapubic drain. In an uphill fight there must not be an uphill drain. Capillarity must be reinforced by gravity. In acute general peritonitis the only hope of recovery lies in multiple drains through incisions at the most dependent part of the abdominal cavity, through the flanks in a man, and through the flanks and vagina in a woman.

Professor Nageli, of Zurich, a consumption expert, as a result of experiments extending over many years, makes the astounding statement that not one person among those he examined who had died after the age thirty years was entirely free from the germs of tuberculosis. This statement agrees with that of Professor Behring, who recently said at Cassel that "every one of those present is a little tuberculous." The conclusion to be drawn is that many persons recover from consumptive attacks without anyone being aware of the existence of the terrible disease.

## The Society for the State Registration of Trained Nurses.

At the Special General Meeting of members of the Society for the State Registration of Trained Nurses, held at 20, Hanover Square on Saturday, 28th ult., the Draft Bill for the State Registration of Trained Nurses was discussed clause by clause—each one being proposed, seconded, and, with two alterations, adopted. This is a great step forward, as the Bill defines quite clearly the lines on which it is hoped State Registration may be effected, and embodies several important principles.

After the next meeting of the Executive Committee we hope to publish the Bill *in extenso* as approved by the members. In the meanwhile, suffice it to say that the proposed Nursing Act is divided into eleven sections, sub-divided into twenty three clauses, the most important of which is that providing for "the Composition of the General Nursing Council," in which, with other members, it is proposed to secure the self-government of the nursing profession by the direct representation on the Council of ten nurses selected and elected by the registered nurses themselves.

Under "Provision for Existing Nurses," during a two years' term of grace, candidates must be upwards of twenty-one years of age, of good moral character, and either hold a three years' certificate from a hospital approved by the Council, or produce evidence of training satisfactory to the Council, and, in addition, must have been in *bona-fide* practice as a nurse for three years.

The rules dealing with admission to the register in the future are provided for under the heading of the "Duties and Powers of the General Nursing Council," and are left to that body when appointed to define.

It will be remembered that the annual meeting courteously resolved that after approval by the members the Bill "should be submitted to hospital committees, medical and nursing bodies, and political societies, and that their consideration of its clauses be invited," so that the Parliamentary Bills Committee should have at its disposal the views of all sufficiently interested to express an opinion when the Bill is introduced into the House of Commons.

The excuse made by those who wish to dominate nursing matters in this country, that British nurses are incapable of managing their own affairs, has been amply disproved by the manner in which the members of the Society for the State Registration of Trained Nurses have drafted, energetically discussed, and adopted, an admirable Bill providing for the organisation of their own profession.

[previous page](#)

[next page](#)