

does not prove that it has been retained for a long time in the stomach. He has, apparently, been able (by examining microscopically shreds of mucous membrane found in a mass of vomited blood) to detect the characteristic glands of the cardiac end of the stomach in one case, and those of the pyloric end in another, and thus to discover the part of the viscus from which the blood had come. He says that, when vomited matter contains no blood to the naked eye, it should, in doubtful cases, be tested for blood chemically, in order to detect the so-called "occult" hæmorrhages, and, for this purpose, he recommends Dr. Weber's modification of Van Deen's test. In this test the filtered contents of the stomach are mixed with an equal part of glacial acetic acid and shaken with ether. The ethereal layer is then removed and ten drops of fresh tincture of guaiacum, with twenty drops of spirit of turpentine, are added, upon which the characteristic blue colour appears even if the amount of blood present be very minute. This blue colour may be intensified by the addition of chloroform. Dr. Fuchs also mentions some of the rare cases of gastric hæmorrhage. He himself has met with a case which he considers was caused by grave hysteria, but, as he does not say that a *post-mortem* was made, one is inclined to think that some lesion of the stomach must have been present. Of more interest is a case in which the hæmorrhage was due to lardaceous diseases of the stomach. The heart and the intestines showed the same lesion, but the kidneys, liver, and spleen were healthy. Another rare cause of hæmatemesis mentioned is sepsis. Among other points of interest in his paper Dr. Fuchs records a case of hæmatemesis in which death followed immediately after the passage of a stomach-tube, and a ruptured aneurism of the aortic arch was discovered after death. The point of greatest practical importance in the paper, however, is the statement that Dr. Dieulafoy and Dr. Quincke have demonstrated by experiments that a state of anæmia retards or prevents the healing of gastric ulcer. It follows that a gastric ulcer in a chlorotic girl who has been rendered more anæmic by a large hæmatemesis runs a great risk of becoming chronic. Consequently the administration of iron should be commenced as soon as possible after the hæmatemesis, and it is usually possible to begin with it two or three days after that event.

These points are of interest to nurses, as knowledge of these details makes them to take an intelligent interest in the cases they have to nurse.

Appointments.

MATRON.

Miss Jane C. Child has been appointed Matron of the New Somerset Hospital, Cape Town. Miss Child was trained at St. Thomas's Hospital, and has had a wide nursing experience, having acted as Sister for four years at the Sussex County Hospital, Brighton; Matron of the Lewes Hospital; and as a private nurse, as member of the Registered Nurses' Society from 1895 to 1899, during which time she was selected for active service in Greece during the Græco-Turkish War, and worked for some time in the École Militaire at Athens. Miss Child went to South Africa in 1899 and has held the position of Sister in the Kimberley Hospital—in which institution splendid work was done during the war. In 1901 she was appointed Matron of the Memorial Hospital, Bulawayo. Miss Child has been awarded, for services rendered, the diploma and medal of the Greek Red Cross by the Queen of the Hellenes; the medal, South African War; the Mayor's medal, Siege of Kimberley and the Order (Hon. Serving Sister) of St. John of Jerusalem in England. We heartily congratulate both Miss Child and the Committee of the New Somerset Hospital upon this appointment, and feel sure that, as devotion to duty and tactful co-operation are conducive to good management, it is probable that public confidence in the affairs of this institution will be speedily re-established.

ASSISTANT MATRON.

Miss M. Thomson has been appointed Assistant Matron at St. Pancras Infirmary, Cook's Terrace, N.W. She was trained at St. Saviour's Infirmary, East Dulwich, and has held the positions of Sister at the Poplar and Stepney Sick Asylum, Nurse at the British Hospital, Algiers, and Night Sister at St. Pancras Infirmary.

NIGHT SISTER.

Miss Florence Farrow has been appointed Night Sister at St. Leonard's Infirmary, Shoreditch. She was trained at the Huddersfield Infirmary, and has held other posts.

VISITING NURSES.

The following nurses have been appointed for one year in connection with the School Board for London to visit schools of the Board and report on the presence of ringworm:—

Miss A. I. Hayward, trained at the West London Hospital, with special experience in nursing diseases of the skin, and of ringworm at the Banstead Road Schools for Ringworm.

Miss A. K. Robertson, trained and certificated at the Children's Hospital, Aberdeen. Had experience in the nursing of ringworm at Banstead School; at present House Matron in this school.

Mrs. E. Weaver, trained at the London Hospital, experienced in the nursing of skin disease. At present Nurse to London School Nurses' Society.

[previous page](#)

[next page](#)