

this the patient expectorates, and at the end of the day it is easily burnt. Even in the summer, when there may be no fire, a match will be sufficient to cause its total destruction. Most householders have a superfluity of such boxes and are pleased to find a use for them. If a cup is used, or a bottle to carry about, it is quite easy to have a lining of greased paper, which can be lifted out with its contents each night and burnt.

The *National Hospital Record* says:—"The first place in which all the best scientific knowledge of food as a remedial agent should be applied is in the hospital kitchen. The hospital kitchen of the future will rival the operating-room in cleanliness and convenience when it is clearly recognised that the skill of the physician or surgeon is of but little avail if the diseased and inflamed tissue cannot be replaced by normal conditions. Nothing but food can furnish the blood-current with the substances from which the cells may choose those essential to them. However fully he may be sustained for a time by the products of the chemist, it is of the utmost importance to the final recovery of the patient that he desire natural food in sufficient quantity to regain his strength. The neglect of the heart of the whole hospital, the kitchen, is hard to understand until we realise that this same neglect permeates the community in regard to individual homes, and that the medical schools treat of food only in relation to disease, and not in relation to healthful living."

A German surgical journal recommends the use of linen gloves drawn over a pair of rubber gloves during an operation. The instruments do not slip as easily on the linen and do not puncture it, while the rubber beneath prevents the escape of germs from the skin.

Mr. E. Harding Freeland, in an address delivered to the Willesden Medical Society, recommends extirpation of both corns and bunions for their radical cure. While I quite agree, writes Dr. Eddowes in the *Medical Times* that the extirpation of the diseased head of the bone forming the chief trouble in bunion may be the very best plan in a bad case, I cannot agree with him in the view he takes of the nature of the ordinary corn or of that which he calls "a growing corn." He describes a corn as a small localised epithelial tumour appearing commonly on the foot or toe, running a chronic course . . . &c. For me the ordinary corn is a callosity produced by intermittent pinching between, as a rule, the head of a bone and a boot, and due to faults of the latter in most cases, as I shall hope to show in a future article on the subject. The best radical cure of a simple corn is not its excision, but the removal of its cause; it will then cure itself. Mr. Freeland's so-called "growing corn" is essentially a wart, and unquestionably calls for radical treatment, especially when hidden in the dense horny layer of the sole of the foot. The operation is simple and perfectly curative, and it is fortunate that it is so, as plantar warts can give rise to very great pain and almost entirely prevent walking. The wart treatment must be quite different from that of a corn.

The Radical Cure of Corns and Bunions.

Marie Edwards, 50, in the garb of a professional nurse, and refusing her address, was last week at the North London Police Court charged, on remand, with obtaining money by false pretences. It was proved at the first hearing that the accused got £2 from Miss Honora McCarthy, of Albion Road, Dalston, by saying she was a student-nurse at the London Hospital, and had an account at Barclay's Bank. A further charge was now gone into. At a religious meeting she met Mr. Frederick S. Shell, missionary's assistant at the Sailors' Palace, Limehouse, together with Mrs. Shell. She told them she was a nurse at Netley Hospital, and was invited to take tea with them. She told them remarkable stories of what she had done amongst the wounded in the South African War, and then discovered that she had lost her purse and £2 10s., and had not the wherewithal to get back to Netley. Mr. Shell advanced her 10s., but, instead of repaying it, she wrote him a deeply-religious letter. The prisoner produced a long document, in which she sought to show that the sums she got were loans, and not fraudulently obtained; but Mr. Fordham said he would have her past further inquired into, and again remanded her.

Queen Alexandra's Imperial Military Nursing Service.

The undermentioned Sisters and Staff Nurses are confirmed in their appointments, their period of provisional service having expired:—

Sisters.

Miss J. E. Dods, Miss J. G. Powell, Miss H. Stuart.

Staff Nurses.

Miss K. Pearse, Miss E. H. Hay, Miss A. R. F. Auchmuty, Miss D. M. Taylor.

APPOINTMENTS.

Miss G. Knowles, Staff Nurse, posted to Cambridge Hospital, Aldershot; Miss B. F. Perkins, Staff Nurse, posted to Connaught Hospital, Aldershot.

CHANGES OF STATION.

Matron.

Miss G. E. Saunder, s.s. *Plassy* for Indian troopship duty.

Sisters.

Miss G. A. Magill to Woolwich; Miss J. G. Powell to Royal Arsenal, Woolwich.

Staff Nurses.

Miss E. M. Bickerdike to s.s. *Plassy* for Indian troopship duty; Miss A. F. Byers to Royal Arsenal, Woolwich.

Miss F. M. Keeble has been appointed nurse at the Hospital for Soldiers' Wives and Children at Portsmouth.

Legal Matters.

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