are secured, nursing is best performed by them. There is to build upon the mother instinct, which naturally cherishes and is tender to the weak and afflicted. Man's instincts lie in other directions, and, further, the close confinement necessitated by work in wards of sick people is unnatural for a man. We do not think that in large numbers men of a type to make the best nurses will ever come forward, though a minimum has been proved to be all that can be desired.

The British Medical Journal says :-

The progressive amelioration in modern times in the care of the insane, of which the almost complete abolition of mechanical means of restraint, the housing of patients in villas and family colonies instead of their former rigid incarceration, and a general approxima-tion to hospital methods in the treatment of acute cases form important landmarks, has its latest development in Scotland in the proposed employment, where possible, of female nurses in male wards. This has evoked a strong protest from Dr. Urquhart,* of the Murray's Royal Asylum, Perth, on the ground that "it is necessary for the adequate nursing of many patients that trained male nurses should be employed, and, if this be so, then training-schools for male nurses should not be abolished." This means hurses should not be abounded. This means that male nurses or attendants should not be ousted by female nurses from their present position, in which they can be instructed in the nursing of the insane, or reduced, as Dr. Urqu-hart puts it, "to the position of hired bullies or common labourers to do the heavy lifting with no hope of advancement in the asylum and no prospect of developing in their profession in the world of medicine." We were not aware that a wholesale substitution of female for male nurses in male wards was contemplated, but this is evidently feared by Dr. Urquhart, and is assumed throughout the paper. The Matron of the National Hospital for the Paralysed, Queen Square, where male probationers are trained, is quoted as saying that the care they exercise as regards eleanliness of patients, &c., is quite equal to that of women nurses, and that after a year's experience they are quite as capable as many women after two years' training. As regards the comparative gentleness of the two sexes, Dr. Urquhart gives an amusing account of an inquiry into the breakages in the asylum dining halls during 1903, which showed that there were only twenty such occur-rences on the male side, whereas "neat-handed Phyllis" was responsible for 127. He dismisses as futile such arguments as have been presented as to the comparative ease with which male patients are fed by comparative ease with which male patients are fed by female nurses, and says "the converse is quite as rele-vant, but it has not yet been suggested to replace nurses on the female side by male attendants." The writer further quotes a lengthy statement by a male nurse trained at the National Hospital, pointing out the sufficiently obvious disadvantages of female nursing in the case of violent and indecent male lunatics. These disadvantages are so considerable that we do not These disadvantages are so considerable that we do not share Dr. Urquhart's fear that there will be any universal and complete adoption of this change in the nursing staff of asylums, although when much-needed reforms in the classification and distribution of patients

* Journal of Mental Science, October, 1904.

have been accomplished, it is quite possible that the female nursing of some classes of male patients might be advantageous. The fear—and this, we take it, is the gravamen of Dr. Urquhart's interpellation—that there will be a shortage in the supply to private patients and asylums of properly-trained male nurses is not likely to be realised, for so long as "it is necessary for the adequate nursing of many patients that trained male nurses should be employed," so long will it be necessary that male nurses should discharge their responsible and difficult duties in those asylums and mental hospitals which are their training-schools.

Mr. Walter Sichel, writing in the Monthly Review, on things Anglo-Saxon which are "Going, Going, Gone," refers to the journal of M. Louis Simond, who visited this country and reported his impressions in 1810 and 1811. M. Simond, in his impressions of our hospitals at that time, says :--

". . . I shall relate what I saw. The physician seated at a table . . . with a register before him, ordered the door to be open; a crowd of miserable objects, women, pushed in and ranged themselves along the wall; he looked in his book and called to them successively. . . The poor wretch, leaving her wall, crawled to the table. 'How is your catarrh?' -'Please, your honour, no offence I hope, it is the asthma. I have no rest night nor day, and ----' 'Ah, it is an asthma. . . Well, you have been ordered to take, &c.'-- 'Yes, sir, but I grow worse and worse, and ----' 'That is nothing, you must go on with it.'-- 'But, sir, indeed I cannot.'--'Enough, enough, good woman, I cannot listen to you any more.' . . The catarrh woman made way for a long train of victims of . . . disorders detailed without any ceremony before young students. Then suddenly followed a surgeon, fo'lowed by several young men, carrying a piece of bloody flesh on a dish. 'A curious case,' they explained, placing the dish on the table, 'an ossification of the lungs! Such a one who died yesterday--just opened.' . . . The women being despatched, twenty or thirty male spectres came in and underwent the same sort of summary examination. The only case I recollect was that of a man attacked by violent palpitations, accompanied with great pain in the shoulder. . . His heart had moved from its right place ! The unhappy man, thrown back on an armehair--his heart uncovered-pale as death--fixed his fearful eyes on the physicians. . . The case excited much attention-but no great appearance of compassion. They reasoned long on the cause without adverting to the remedy till after the patient had departed--when he was called back from the door, and cupping prescribed ! . . ."

We may be thankful this condition of affairs in our hospitals is "gone" long since, although, unless memory plays us false, we could a tale unfold of nursing "atrocities" which flourished as late as the seventies in the last century, which would appear almost incredible to the twentieth-century nurse.

Chatting with an American nurse who has lately been paying a visit to the wards of some of our important hospitals at meal times, she expressed



