

That all English people (with the exception of Mr. Sydney Holland) are coming to recognise the necessity for some form of registration is conclusive, and on those lines progress is being made in spite of the row.

The humiliating thing that must be faced in both countries (England and the United States) is in the fact that both of these gigantic schemes* have come about because of a lack of unity and loyalty among the nurses themselves. The discord among nurses in Great Britain has been a disgrace for years. Without some assurance of a "following," Dr. Worcester would have had no motive for even the suggestion of a voluntary society in New England.

The pettiness and jealousy that have brought about these conditions are, we believe, more faults of sex than of the profession. It is as women that nurses are failing, the weak and dependent ones, like their mothers and grandmothers since the world began, instinctively following the leadership of any man, good or bad, wise or unwise, just or unjust, it makes no difference.

So we are forced to acknowledge the truth of the idea that the world can progress, and nursing can progress, only according to the moral strength and wisdom and courage of its women in standing together for what is best for the whole.

In America nurses have not fallen to the depths of discord that prevail in England, but there have been examples in several of the States where standards have been lowered or measures lost entirely because of this very lack of unity and loyalty on the part of nurses towards nurses.

The struggle that the English nurses are making for the right to live free professional lives with a voice in the management of their own affairs should be a warning to those women in this country who are not willing to follow the lead of the majority, but rather risk destruction to all progress by following after selfish schemers whose motives no one can solve.

The Midwives' Act.

An interesting paper dealing exhaustively with the working of the Midwives' Act was last week read before the Incorporated Society of Medical Officers of Health by Dr. G. H. Fosbroke, County Medical Officer for Worcestershire.

Speaking of the Act, Dr. Fosbroke said:—

"In spite of the fact that considerable opposition was encountered before it became law, I believe much good will result from its enactment; for it should, and doubtless will, raise the standard of midwives, and ensure that parturient women shall, as far as practicable, have the benefit of properly-trained midwives."

That there is much to be done still in the education of midwives is evident, for Dr. Fosbroke asks, in taking exception to the rule of the Central Midwives' Board defining the appliances which a midwife shall carry, "Of what good can a thermometer be if the midwife cannot read?" And, again, "I do not consider it safe to put a catheter into the hands of an untrained, ignorant midwife."

* The Guy's scheme in this country and that of Dr. Worcester in New England.

The Anti-Tuberculosis Crusade.

PROGRESS ABROAD.

Preparations are going forward for the International Congress on Tuberculosis, to be held in Paris in October, when reports on Tuberculosis and the treatment of its various forms will be made by some of the leading physicians gathered together from all parts of the world.

In view of this it will perhaps be interesting to glance at some of the work other countries have been doing in the struggle against the devouring monster of disease, which selects its victims from all nations and classes. France is in the forefront of the battle. The report of the first year's work of the "Permanent Commission for the Prevention of Tuberculosis in France" has just been published, and contains some useful suggestions. The Commission has been the means of exciting a widespread and practical interest in its objects. Model sanatoria have been erected at Hyères and Montigny; the Rothschild brothers gave ten million francs for the erection of sanitary dwellings for working men; a number of dispensaries have been opened in various cities, and 10,000 children have been sent to the country for the summer holidays.

The Imperial Austrian Railway Department of Vienna has issued stringent regulations, to be observed on all Austrian railway lines, strictly prohibiting promiscuous spitting, under penalty of a fine of 2—200 kronen (about 1s. 8d.—£10). Rules are laid down as to the shape and nature of spittoons, which are to be provided in all the railway carriages, platforms, waiting-rooms, &c., and the entire railway staff are to receive information, by means of a circular, of the nature of tuberculosis, and the hygienic measures for its prevention. At Davos, the articles of the disinfection law concerning expectoration were revised in January, and consumptives are now requested to carry a pocket spittoon.

In Germany, Dr. Hoffa has founded a society in Berlin to collect funds for erecting a Children's Convalescent Home on the outskirts of Berlin, for children suffering from tuberculous disease of the bones and joints. Speaking of the advantageous effects of sea air and seaside hospital treatment on this disease, Dr. Hoffa points out that unfortunately it is impossible to send all these poor sick children to the seaside—there are too many of them. In 1902, 1,300 children with tubercular disease of the bones and joints were treated at the different hospitals in Berlin. He maintains, however, that sea-air is not necessary for the cure of this form of tuberculosis. The same factors which contribute to the cure of pulmonary tuberculosis—sun, rest, fresh air, and good food—wherever they may be had, are equally efficacious. The building of the new Convalescent Home (which will take 100 children) is to be commenced

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