tarily contracted or passively extended, as the pain is due to an inflammation of the interstitial fibrous tissue in which the muscle spindles are embedded. To this inflammation Dr. Gowers applies the name "fibrositis." This view is further corroborated when we consider the frequency with which the pain of lumbago extends from the lumbar muscles into adjacent tendinous structures, and sometimes into the fibrous sheath of the sciatic nerve. The suddenness of an onset of lumbago is often more apparent than real. The pain usually occurs on the first movement after a period of rest. It is never spontaneous, thereby differing clearly from the pain of neuralgia.

Analogous to lumbago, and like it due to the same fibrositis, is brachial muscular rheumatism, often extending into the nerve sheaths of the upper limb, and even to the joint capsules; also the familiar "stiff neck" and a painful condition of the pharangeal muscles, rendering swallowing difficult; also the well-known pleurodynia, which is really an intercostal fibrositis, and occasionally a similar condition of the diaphragm. All these conditions, formerly classed as varieties of "muscular rheumatism." are more common after middle life, and not infrequently associated with the gouty diathesis. Whilst the slighter forms of muscular fibrositis, such as lumbago or stiff neck, are usually of brief duration, that which involves tendinous structures often lasts for months. The duration of the affection seems proportional to the slowness of its onset, perhaps because slighter pain does not induce the patient to take needful rest.

Treatment of all these varieties of muscular fibrositis consists in free diaphoresis-e.g., by a Turkish bath and rest. Diaphoresis, to be of any good, must be employed at the very onset of the attack. Hot fomentations are also very efficacious; massage and electricity should be avoided in acute cases. In more chronic varieties, stimulating liniments and gentle Faradism are beneficial. aperients are of the first importance. In the acute stage a mixture containing nitrous ether, citrate of lithia, and colchicum is of value; salicylates have practically no effect. Counter irritation, especially by the actual cautery, sometimes lessens the pain. Dr. Gowers also recommends deep daily hypodermic injections of cocaine locally for two or three weeks.

Appointments.

MATRONS.

Miss Catherine Borthwick has been appointed Matron of the Pretoria Lunatic Asylum, Pretoria, South Africa, by the Secretary of State for the Colonies. She was trained at the Royal Hospital for Sick Children, Glasgow, the Royal Infirmary, Edinburgh, and the Stirling District Asylum, Larbert, N.B., in which last institution she has held

the position of Assistant Matron.

Miss S. Davidson has been appointed Matron of the Hertford British Hospital, Paris. She was trained at the North Staffordshire Infirmary and Eye Hospital, and has held the position of Charge Nurse at the Park Hospital, Hither Green, Superintendent Nurse at the Union Infirmary, Newcastleunder-Lyne, Night Sister at the Royal Infirmary, Derby, and Matron of the Whitworth Hospital, Darley Dale, Matlock.

Miss Gertrude Webster has been appointed Nurse-Matron at the Cottage Hospital, Margate. She was trained at the St. Marylebone Infirmary, and has held the position of Sister at St. Pancras

Miss Jane Phelps has been appointed Matron at the Children's Sick and Convalescent Home, Luton. She was trained at the Clayton Hospital, where she was afterwards Sister and Night Superintendent. She has also been Assistant Matron at the Prudhoe Memorial Convalescent Home, Newcastle-on-Tyne.

Miss Mary Brown has been appointed Matron of the Kilmure Convalescent Home. She was trained at the Western Infirmary, Glasgow, and has held the positions of Charge Nurse and Temporary Night Superintendent at the Fountain Hospital, Tooting, House Matron at the Down; School, Sutton, and Matron of the MacKelvie Isolation Hospital, Oban.

Sister.

Miss Edith Bone has been appointed Sister at the Birmingham and Midland Ear and Throat Hospital. She was trained at the Royal Infirmary, Hull.

NIGHT SUPERINTENDENT.

Miss Fanny L. Mason has been appointed Night Superintendent at St. Mark's Hospital, City Road. She was trained at the Royal United Hospital, Bath, where she was appointed Staff Nurse, and has taken Sister's duties in various wards. She has also had charge of the Out-Patient Department.

INSPECTORS OF MIDWIVES.

Miss Margaret B. Dobson, M.B., London, and Mrs. Jane Gilmore-Cox, M.B., Glasgow, have been appointed as Inspectors of Midwives and Lady Health Visitors under the Durham County Council.

QUEEN ALEXANDRA'S IMPERIAL MILITARY NURSING SERVICE.

Miss Ethel Mary Goard has been appointed Staff Nurse (provisionally) in the above Service. .

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