

We have always considered that midwifery should be in the hands of either medical practitioners or trained nurses, for it is quite impossible to isolate one portion of the human body and treat or nurse it without reference to the rest. The reason, no doubt, why the training and work of the midwives who work under the St. John's Sisters ranks so high is that this common-sense principle is realised and acted upon. So long, however, as members of the British aristocracy consider a salary of £40 per annum, all told, a sufficient remuneration to offer a midwife, it is impossible for her to give three years of her life to undergoing a thorough training. The return for her output is totally inadequate. The cheap value placed upon the skilled labour of women is really at the root of their superficial education, not only as midwives, but in many other branches of work.

Mr. James Parker in the House of Commons last week asked the President of the Local Government Board whether his attention had been called to the number of working hours, ranging from 14 to 16 hours per day, worked by asylum attendants, and the percentage of these attendants who ultimately suffered from lunacy; and whether he was prepared to cause an inquiry to be made into the subject. Mr. John Burns said, in reply, that his attention had not been called to this matter, but he would cause inquiry to be made from the Lunacy Commissioners.

There is no more trying or responsible work in connection with nursing the sick than the care of the insane, and whether for men or women 14 to 16 hours a day on duty is far too long, not alone on the ground of the preservation of the health of the attendants, but also if the patients are to receive proper attention. It is impossible to keep the mind actively alert throughout a day of this length, yet alertness is a necessity to the adequate care of the insane.

There are hundreds of poor people in London, street hawkers for instance, who depend entirely for their living upon a horse or a donkey, and should the animal fall ill they are temporarily penniless. To remedy this, as well as for the sake of the animals, "The Animals' Hospital" has been founded by "Our Dumb Friends' League" in High Street, Belgrave Road, here there are separate wards for horses, donkeys, cats, and dogs, and these are to be fitted up with little beds, over each of which will be a card bearing the animal's name and the nature of its illness. Trained nurses will also be in attendance. An annual payment

of one guinea gives each subscriber two out-patients or one in-patient letter. Subscriptions are urgently needed.

Writing of the nerve nurse in his useful book, "The Management of a Nerve Patient," Dr. Scholfield says:—"The neurasthenic nurse is a being yet to be evolved as a definite product, but she is sometimes met with as a chance growth in out-of-the-way places; frequently painfully ignorant, alas! of the simplest hospital routine. The ordinary nurse dislikes neurasthenic cases, largely because she does not understand the reality of the disease in the absence of physical lesions, and partly also because in hysterical cases there is not only the appearance of fraud, but often a perverted mental bias that takes pleasure in fault-finding, and setting the nurse against the doctor and *vice-versâ*.

"It is well for the doctor to remember this, and even when a nurse has to be changed, to uphold the nurse to the patient, whenever possible, even on therapeutic grounds. *Nascitur non fit* is undoubtedly the distinguishing motto of the nerve nurse, though the "fitting" is most necessary and useful also.

"The question of nurses raises that of nursing homes generally. In the first place," says Dr. Scholfield, "neurasthenics cannot, as a rule, be cured in their own homes, for what they one and all need is rest in some form. Now, to women, home is the sphere of the greater part of their work, to the man only is it (with exceptions) the place of rest. Hence, home is obviously not the environment needed for women, and for other reasons men also are cured more certainly and expeditiously away from their own family circles. This makes the nursing home an indispensable adjunct for at any rate part of the cure.

"Now, it is not too much to say that the quality of this home largely determines the question of success in the treatment. Nursing homes are so frequently unsatisfactory that many physicians have been driven to run their own. This has, of course, its advantages, but it has great and serious drawbacks. Of course I am here not speaking of surgical homes or of any treatment, but that of neurasthenics! Personally, I have never been able to get over the professional feeling that a physician ought to look to his fees, and to his fees alone, for payment for his services, and should not directly or indirectly run a boarding-house under any name, or share in the profits if derived from his patients. . . . Many medical men will

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