

THE PROTECTION OF THE PATIENT FROM HIS
FELLOWS.

On this point the writer remarks: "Though most general hospitals have adequate provisions for the isolation of contagious diseases in many those cases classed as infectious must be treated in the open wards. It is in the latter contingency that the rubber glove is of value. This is especially true in diseases where the infection is carried through the excreta. The thorough disinfection of the hands of a nurse in a busy ward, whenever she gives a bedpan to a typhoid patient or changes linen soiled by excreta, is a difficult procedure and the most conscientious nurse may become a source of danger to other persons. If this is true of adult patients it is even more striking in a children's ward during the summer months, when the duties of the overworked nurses consist largely of changing the soiled napkins of diarrhoea cases and of preparing the children's nourishment. The infectiousness of intero-colitis, whether due to Shiga's bacillus or to some other organism, is sufficiently well proved and enough ward epidemics of diarrhoea have occurred, where the original supply of milk has been of undoubted purity, to make it evident that contamination may take place in the ward. The thought is not a pleasant one of a nurse, with hands more or less fouled from a fluid stool, giving a biscuit or a bit of bread-and-butter to a child. Even the knowledge that she has washed her hands between times and "disinfected" them by a perfunctory dip into a carbolic acid solution does not make the thought entirely agreeable.

"During a house epidemic of typhoid fever at the Lakeside Hospital in Cleveland in January, 1904, a committee was appointed, of which I was a member, to investigate the cause of the outbreak and to take necessary steps to check it. Among other changes recommended was the use of rubber gloves by the nurses whenever handling bedpans, soiled linen, or napkins of typhoid and enteritis patients. The technique was made as simple as possible. A large dish of carbolic solution was placed in each lavatory and in it were kept several pairs of heavy strong rubber gloves, similar to those commonly worn by pathologists. To facilitate rapid changes they were several sizes larger than the hands of the nurses. When a bedpan was called for, or a napkin to be changed, the nurse rinsed a pair of the gloves in water and slipped them on her hands, a procedure requiring but a few seconds. The gloves were kept on until the stool was taken to the lavatory, broken up with a glass rod, if

solid, and carbolised. They were then returned to the carbolic solution and were soon ready to be used again. The objection at first raised of lack of time to carry out these innovations was soon dropped and within a few days the nurse began to look upon the glove as a boon instead of a hardship. Not only was time saved by the reduction of the amount of scrubbing required but it was soon found that the hands, previously kept cracked and sore by the frequent soaking in carbolic acid, were again resuming their normal healthy condition, and were kept clean with less trouble and without pain.

"In one other condition I would suggest the possible value of this use of the rubber glove, though I do not speak from personal experience. This is in that unhappy epidemic which occasionally breaks out in a children's ward of vulvo-vaginitis, due to an organism resembling the gonococcus, and which spreads rapidly to every female child in the ward, and may even require the temporary exclusion of girl patients. As this affection attacks infants as well as older girls bedpan infection can be excluded. It is possible, but seems unlikely, that air contagion is the cause. It is not pleasant to think of the hand of the nurse as the means of transmission, but this possibility must not be forgotten. If this be the cause, surely the precautions taken with cases of typhoid fever and diarrhoea may be so modified as to be of value in combating this disease as well."

A New Inhalatorium.

One of the most quaint and charming seaside resorts in Holland is Scheveningen, which is within a walk of the Hague, and where the invigorating breezes of the North Sea may be enjoyed under most pleasant conditions.

On the advice of eminent Laryngologists an Inhalatorium has now been established in the Kurhaus at Scheveningen, its arrangements being based on those of the well-known and successful Inhalatoriums of Ems. The treatment is carried out by spraying solutions of the medicament in the patient's apartment, by the use of appliances furnished with a mouth and nose piece, and by pneumatic appliances which provide for inhalation of compressed air and expirations in rarified air. Before being employed the sea air is passed through a filter of cotton wool, which is inserted in the taps. The Inhalatorium is under the direct inspection of the laryngologist, Dr. C. M. Hartog, and a certificated nurse has exclusive charge of the apparatus.

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