

the mother has phthisis it is much more common to find the children and the grandchildren also attacked—affected at early ages and in a more acute degree. In other words, then, a phthisical father might be expected to transmit to his daughters a tendency to just such chronic degenerative changes as are known to take place in the production of ovarian cysts, whilst a phthisical mother may have sons affected with phthisis, and daughters and grand-daughters who suffer from ovarian cysts. There are many other interesting points connected with this subject which space prevents me from touching upon, but perhaps I have already said sufficient to illustrate the great advantages which in this matter, and in all other cases of disease, accrue from a careful enquiry into the Family History of the patients.

Progress of State Registration.

Dr. Stanley Haynes, of Malvern, writing to the *British Medical Journal* on the subject of the Registration of Nurses, in connection with a recent letter from Dr. T. B. Rhodes, writes :

"I venture to add another idea—that the terminology 'registration of nurses' should be abandoned, for reasons patent to all registered practitioners, who would be competed against by 'registered' nurses, and that the list should be instead of 'certificated nurses.' This would be a great safeguard to struggling medicos; the nurses could be kept in their proper place and honourable status, while the public would not be deceived into believing that the nurses are 'registered' in a like manner as medical practitioners. Those at the top or in the upper branches of the medical tree may think this idea is a distinction without a difference, but the general practitioner knows where the shoe pinches, and dreads the advent of yet another set of unqualified practitioners being supinely permitted by our lax legislation."

The general practitioners of this country, however, conclusively endorsed the principle of State Registration of Nurses when, after full discussion of the question in the divisions, their accredited representatives passed a resolution at their Annual Representative Meeting approving of the recommendation of the Parliamentary Select Committee that there should be State Registration of Nurses.

After all, the movement is one in which neither the interests of the medical nor the nursing professions are the primary consideration, but the welfare of the public. We think, however, that those medical men who fear competition from the Registered Nurse are under a misconception. Such competition is to be feared not from the thoroughly trained and competent nurse, who, proud of her own

honourable professional status, has no desire to pose as a quack practitioner of medicine, but from the semi-trained and ignorant women who have no hesitation in assuming medical and nursing responsibilities.

Further it cannot be too widely known that the Bill introduced by Mr. Munro-Ferguson, M.P., into the House of Commons expressly provides that "Nothing contained in this Act shall be considered as conferring any authority to practice medicine or to undertake the treatment or cure of disease," thus for the first time setting a legal limit to the practice of nursing.

We commend to the notice of Dr. Haynes some remarks of Dr. James Dudley Morgan, in a paper read before a recent meeting of the Washington Obstetrical and Gynaecological Society. He said :—

"Oh, what a sense of security a physician feels when away that he will be notified by the nurse of any serious change and not called back for minor, trifling incidents. He knows that a bandage if uncomfortable will be slightly changed, as if he were present. A catheter will be used; that undue hæmorrhage will be noted, that confidence in him will be maintained by the loyalty and assurance of the nurse. A flagging heart in pneumonia will be noted as well as an increased restlessness and tympanites in typhoid. The kidney will be watched in scarlet fever, the lungs in measles, and the heart in diphtheria. Oh, nurses, how much easier, pleasanter, and more successful you have made the practice of medicine."

Dr. Morgan considers that :—

Educational requirements of training schools for nurses must keep pace with the educational requirements of the schools of medicine.

High educational standards beget confidence on the part of the laity.

The more advanced nurses in the training schools are the ones in most demand by visiting and resident physicians.

Surely nurses should be able to confidently expect the support of the profession of medicine in establishing and maintaining standards of professional education. Doctors demand them in their own profession, and will not meet or recognise professionally those who have not attained them. Why should nurses have to recognise, and have their own work spoilt by women who, while demanding to be regarded as trained nurses, have not taken the trouble to learn the elements of their work.

What incentive is there for a woman to qualify herself thoroughly for the responsible work of a nurse if she finds ignorant persons entrusted with the same work and paid the same fees as herself? Yet who can doubt that it is to the advantage of the public to employ competent nurses and to have a guarantee of such competence by means of a State Register.

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