

general and special training schools, and for some system of affiliation. If the course of practical training were planned so as to include a systematic course in both a general and infectious hospital then it would really be immaterial in which of the two hospitals the probationer began. This could be arranged at the convenience of the authorities.

#### *Discipline.*

Another important point raised by Dr. Gordon is that of discipline, and we feel sure that the lack of discipline in a considerable number of fever hospitals is at the root of the disfavour with which some general hospital Matrons regard applicants with previous fever training. We once heard the Matron of a large fever hospital described as "a nice woman with just about enough discipline for the Matron of a fever hospital."

#### *Charge Nurses in Fever Hospitals.*

One point we should like to emphasise, namely, that no nurse should be promoted to the position of Charge Nurse in a fever hospital without previous experience of infectious work. General experience she certainly should have, but the special experience is essential also.

To place a nurse who has a three years' certificate, but who has never given a nasal feed, in charge of a ward of diphtheria cases is not to do the best for the patients.

One fever hospital Matron tells us that from the point of view of practical work the second year assistant nurses, whom she has trained, are of much more use to her in the wards than the nurses with general certificates, without fever experience, imported from outside. In fact, she spends a good deal of time endeavouring to hide the ignorance of the "charges" from the assistant nurses whose superior officers they are.

#### *Private Nurses and Infectious Work.*

Another point we should like to mention, is that whether or not every nurse should be required to have infectious training it is essential for those who are thinking of taking up private nursing; for unless they have a knowledge of infectious nursing they are necessarily unable to take a large number of cases.

## Medical Matters.

### THE DIET AND HYGIENE OF CHILDREN.



Dr. A. F. Voelcker, F.R.C.P., Physician to the Hospital for Sick Children, Great Ormond Street, W.C., delivered an interesting and practical lecture at that institution, which is published in full in the *British Medical Journal* on "Some Common Errors in the Diet and General Hygiene of Children."

In view of the opinion expressed by Miss Amy Hughes at the Nursing Conference at St. George's Hall, Mount Street, W., that monthly nurses not uncommonly dissuade mothers from nursing their babies because a bottle fed baby is less trouble to themselves, the following expression of opinion by Dr. Voelcker is interesting.

"An immense amount of evil is done by monthly nurses by the persistent efforts some of them make to induce the mothers not to suckle their infants. I may perhaps be asked why it is that this should be the case. Well, there are three reasons which I can think of. First, it is a popular suggestion with the parents in too many cases; secondly, it saves the nurse, or, as she would say, the mother, trouble. If an infant is breast-fed it has to be brought to its mother every two or three hours, and while it is being fed it has to be waited for, and then put back into its cot, and this we can well imagine is not a popular proceeding with the nurse. In the third place, too often the monthly nurse's ideal is to leave a fat and heavy baby when "her month is up." Smithfield dead meat market is her ideal, and provided the babe puts on weight as long as she is in charge all is well. I wish that there was some way by which those who start mischief through artificial feeding could be made to suffer for the later results of their actions. It is surprising how much wrong feeding some children will put up with, but most of these results of artificial feeding only show themselves some time after the monthly nurse has taken her departure, with the promise of her re-engagement for the next 'if it ever should come.'

"The mention of the increase in weight, which is so commonly urged as a defence of the practice of artificial feeding of infants, reminds me of another danger to the happiness of a home into which 'number one' has arrived. This danger is the weighing machine. I have called it a danger, not a curse, though it may become

[previous page](#)

[next page](#)