

PATIENTS TO ORDER.

To the Editor of the "British Journal of Nursing."

DEAR MADAM,—I always read your Editorial with interest, and find in it food for reflection. As you know, when it alludes to private nurses, I like to put in a word for the class to which I belong.

I quite agree with much you say. I am one of those who (greatly to my own discomfort) still live with my box packed, that I need not delay in starting when a sick person requires me, neither do I take much interest in food, so a meal more or less never interferes with things of more importance. At the same time, I know many private nurses will agree with me in saying the most trying part of their lives is the time spent in waiting for cases. No one can tell, except from experience, the mental worry it is, never knowing from one hour to the next whether you will have to hurry off to some distant place for an indefinite time, or only into the next street for a few days. In the one instance, a good sized trunk is required, in the other a "Gladstone" is all that is necessary. Again, a nurse may have to wait several days for a case; the longer you wait, the more difficult it is to start quickly. To an active woman, who has much she would like to do in any spare time, it appears absolute waste, to do little else, but watch her box hour after hour. She feels at the end of a week, "How much I could have done, had I only known." Patients not being made to order, I suppose there is no remedy for it, but I do know that if people were a little more thoughtful for nurses, this state of affairs might easily be improved. There are some urgent cases, requiring immediate attention, and doctors generally know where to get a nurse in an emergency, if not, most Societies have one or two at hand; but there are very many cases, to whom a few hours would not make any difference, and others, where the doctor, or the patient's friends, know, early in the day, that a nurse will be required for the night, yet they put off sending for one till the last moment. (They know they could not get a lawyer or a cook at such short notice, so would arrange that earlier in the day.)

Some doctors discourage their patients sending for them at night, and I think they are wise, for nine times out of ten, if a patient requires another visit, he can make up his mind at 8 p.m. as well as at midnight; now that telephones are so general, it is no trouble to him to "ring up" the doctor, and probably ruin his night's rest, but if one of the family had to get up and walk some distance, in bad weather, then I think sometimes they would go early, or wait till the morning. The telephone is a useful invention, and we sometimes wonder how we got on without it, but it has its drawbacks; people, who have one, find it an easy matter to "ring up" for everything they require at the shortest notice, therefore they cease to think in advance; it also adds to extravagance in this rapid, pleasure-seeking age. Things are so easily ordered through

it that people do not pause to think whether the article in question could be done without, or something else substituted. Self-indulgence and thoughtlessness are the faults of the present day, and nurses suffer from them in many ways. They may frequently be surrounded by luxuries, but that, by no means, proves that they participate in them. I trained in the days when probationers averaged 12 hours' work per day, and enjoyed it, so I am not afraid of any amount of work, but I never shall approve of selfish thoughtlessness, and if people want to get the best work out of nurses they should think a little for them.

Yours faithfully,

JULIA HURLSTON.

EARTHQUAKE AS A CURE OF DISEASE.

To the Editor of the "British Journal of Nursing."

DEAR MADAM,—The extremely interesting account of cases of recovery from various diseases, owing apparently to the electric shock received at the time of the great earthquake in Chile, recorded in your columns last week, reads like a romance. There must presumably be some scientific explanation for these strange recoveries. The recovery of the dying man is less strange to me than that cases of typhoid fever, rheumatic fever, and inflammation of the lungs should be cured by the shock. In the one case the failing nervous system presumably received a fresh supply of energy, but in the case of diseases caused by a definite microbe the cure is difficult to understand. It would be very interesting to know the opinion of the medical profession in Chile as to these cases.

Yours faithfully,

INTERESTED.

A LIVING WAGE FOR MIDWIVES.

To the Editor of the "British Journal of Nursing."

DEAR MADAM,—I am glad to see in THE MIDWIFE that you are calling attention to the fact that the salaries offered to skilled midwives in the country are so inadequate that it is impossible to live upon them. Already the result of the Midwives' Act is being felt in country places, and the cottage midwife is disappearing. This is good in one way, but how is her place going to be supplied by the midwife of a better educated and more reliable class, if there is no money to pay her a salary she can live on? Unless some central and influential society collects sufficient funds, I don't see how the demand is going to be supplied. From personal experience I find there are not sufficient babies born in a group of small villages to keep a midwife if working on her own responsibility, and nursing societies pay such wretched salaries, it is no inducement, unless under contract, to obtain work through them. In a few years this midwife question in rural districts will become an acute one. Only obstetric nurses will be in demand.

Yours truly,

CERT. MIDWIFE.

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