are quite up to date, the glass couch and tables being the gift of the late Lady Curzon.

The staff consists of two English lady doctors, and one certificated Indian lady assistant surgeon, four nurses, and the matron. This meagre staff is, however, supplemented by hospital assistants during their fourth year of study. Of these hospital assistants I shall speak later on.

The beds were, for the most part, of native construction, and eminently fitted for the climate. These charpais consist of a simple frame of wood mounted on four short wooden legs. Across it, transversely, are stretched broad strips of tape, or else twisted twine. Each patient is provided with a dhurri—that is, a strongly woven cotton mat—and two blankets. Wire mattresses soon rust in India.

In the cookhouse three high-caste Brahmins prepare the food for the patients, and Mahommedans make no objection to eat food cooked by Brahmins.

One great difficulty nurses have to contend with in eastern countries—namely, how to keep their patients in bed! They will get up if possible, and often recourse is had to the simple plan of tying them into bed—literally they are tied by the leg!

It is here in India that the absolute necessity for women doctors faces one at every turn. Therefore it is not surprising that the upper-class women of the country are quite awake to the fact, and are anxious to supply the demand amongst themselves. There are already many Indian lady doctors, and, as higher education amongst the women of India is rapidly spreading, their number is bound to increase.

To my mind the most interesting feature of the Lady Lyall Hospital at Agra is the Medical School, which, at the present moment numbers 80 students. These Indian and Eurasian girls go through a course of medical study lasting four years, and are then, on passing a final examination, certificated hospital assistants, forming an intermediate class between nurses and doctors. Of course any girl can go on from this school to the further classes and instruction necessary for the taking of a doctor's degree. But these hospital assistants seem to be an eminently useful class.

A new boarding house is in course of building for these students, as they have quite outgrown their old quarters.

When driving away from the hospital in the short Indian gloaming I noticed some Brahmin cows, pretty grey creatures with humps, tethered under the trees. Fresh milk on the premises is a great boon in this dried-up country. This winter, 1907-8, the country is far drier than usual, as the rainfall was abnormally small, and it is feared that Northern and Central India is on the verge of a very severe famine.

From Agra I paid a two-days' visit to a native state, and while there was taken to see the hospital, of which they are justly proud. The buildings, scattered about a well-kept compound—garden we should call it in England—were on the same line as those at Agra, though rather more ornate in architecture. This hospital was built by the State, and it was apparent that money had not been spared either in the actual building or the appointments, the latter including an instalment of the Röntgen rays. The Rajah's English doctor is at the head of the establishment, with an Indian doctor under him, for the State Hospital for both men and women is in the same compound, and under the same management. But there is a good Indian woman hospital assistant, though not a lady doctor. I was staying with a missionary, and one of their Christian school teachers was lying ill of peritonitis in her own house, and was being attended by this hospital assistant, though, as she was a Christian, the doctor came to see her also.

A common accident in India is that of a fall off the roof. The houses are built round an open courtyard, often two or even three storeys high, and round this courtyard, on the different storeys, are passages, frequently unprotected by a balustrade, so that a careless step, or sudden backward movement, may mean a bad fall into the court below. And from the roof itself, which is much used—in winter to enjoy the warmth of the sun, and in summer nights when the people sleep on the roofs for the sake of coolness—from the roof it is only too easy to fall, as there is but seldom any wall or balustrade round the edge of it. Otherwise I should say that accidents are not so usual in this country as in Europe.

Except the accident of poisoning. So frequent is this dastardly form of murder that a European will tell you never to take sweetmeats in a native house, because so often some woman is got rid of by poison mixed in these sweets.

Ray Merton.

The Nurse's Cycle.

To many nurses at the present day a bicycle is not only a means of delightful and health-giving recreation, but an absolute necessity for working purposes. The question, therefore, to be decided is where the most satisfactory one can be obtained, and the fact that the Harris Cycle Co., Ltd., Hill Cross Works, Coventry, make more cycles for the nursing profession than any other firm in the world must commend their machines to the attention of nurses as being of proved utility for their work.

The firm have so much confidence in their machines that they are willing to send one on approval, carriage paid, on the condition that it may be returned, if not approved, without any expense to the nurse. A signed guarantee of twelve years is also given with each "Nurse's Cycle" supplied, which should give confidence to prospective buyers that it will be of real utility. Reliable cycles can be supplied at £6 6s. and £8 8s. and upwards, the £6 6s. one being of marvellous value.

Further, those who do not wish to pay the whole sum down for a Harris cycle can arrange for payment by easy instalments. For all these reasons nurses who are thinking of purchasing new machines should make a point of inquiring into the merits of the Harris cycles before coming to a decision.

previous page next page