

Religious influences again were important in the life and work of the mental nurses. From the psychological aspect alone there was a consolation in religious belief which no other thing excited. Religion inspired sacrifice, and its influence was to mould character and to place a higher value on duty.

The Bishop of Barking advocated the cultivation of a sense of humour, and Dr. V. H. Rutherford, M.P. for Brentford, congratulated the members on having started a trade union through which they could render excellent service to each other and could benefit those whom they served. He thought asylum workers were a class of public servants who were entitled to pensions as well as wages from the rates.

PRESENTATION OF MEDALS.

Sir William Collins then presented the following long service medals:—

Gold Medal.—Attendant W. Rainbow, Three Counties Asylum; 43 years' service. Nurse A. Moss, Hull City Asylum; 37 9-12 years' service.

Silver Medal.—Attendant J. Whitehouse, Hull City Asylum, 29 11-12 years' service; Attendant W. W. Dingle, Bethlem Royal Hospital, 29 11-12 years' service. Nurse A. E. Dear, Colney Hatch Asylum, 28 years' service.

The number of silver medals awarded is usually two, but an extra one was given this year, owing to the service of Mr. Whitehouse and Mr. Dear being almost identical.

Other speakers were Sir Ralph Knox and Dr. E. S. Pasmore, Mr. Goodrich, Dr. Bower, and Miss Stone, who moved the election of officers for the ensuing year and the usual votes of thanks.

Mr. Goodrich, in the course of his remarks, advocated the establishment of a distinctive badge for fully qualified nurses and attendants under the L.C.C., and instanced the badges of the Queen Victoria Jubilee Institute and Royal Maternity Charity, and the silver star given by the Stone Asylum, as precedents. He thought it would be an incentive, and tend to raise the status of nurses and attendants.

ASYLUM ATTENDANTS AND LEGISLATION.

In view of the statement of one speaker that both of the Bills for the State Registration of Trained Nurses disregard the interests of asylum workers, it should be clearly understood that under the Bill of the Society for the State Registration of Trained Nurses, expert representation of mental interests are provided for on the General Nursing Council, by according seats to a representative of the Medico-Psychological Association, and to the past or present Matron of a public hospital for the insane, directly elected by the nurses on the Mental Nurses' Register.

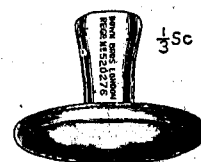
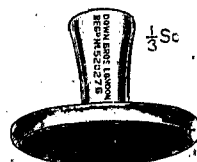
Practical Points.

The "Bier" Treatment. Some time ago, when the Bier treatment was rather new, a doctor gave an order to have a Bier bandage ready for the following day. The nurse who took the order had never heard that particular kind of

bandage mentioned before, and very innocently asked: "What kind of beer do you want, doctor?" Probably there are others to whom the name and the treatment are just as new, and who will find a short description interesting, although, as is pointed out by the *Nurses' Journal of the Pacific Coast*, it is a treatment that can only be given under a doctor's supervision and orders. The Bier treatment was first given in the year 1892, by Professor A. Bier, a very eminent surgeon in Berlin; but only of late has it been used to any extent in America. It is very effectual in acute articular rheumatism, chronic inflammatory rheumatism, and chronic diseases without inflammation; also for tubercular knee-joints or hips. Some of the most enthusiastic advocates of the treatment claim that it will cure almost any disease—from appendicitis to sea-sickness. The Bier bandage is a rubber bandage two and one-half inches wide and five feet long. It should always be applied towards the heart, making at least six turns of the bandage, each turn overlapping half of the preceding turn, and gradually increase in pressure. The pressure must not be strong enough to make the affected part turn "bluish" red, but should increase blood flow and heat and decrease pain. Placing the elastic bandage gently around the limb above the seat of the disease, the thin-walled veins are readily compressed, while the arteries are not interfered with, thus producing a partial stasis of the venous blood. The patient must be asked frequently as to how he feels. If there is increased pain, the bandage is applied incorrectly, and must be removed. The length of time a bandage should be left on depends on the physician's orders, patient's condition, etc. It may be left on from two to four hours a day, or even longer. In chronic and tubercular cases the bandage may be applied two or three times daily.

The Glass Ointment Applicator.

Those nurses who have frequently to apply irritating ointments, or those which stain the hands, as, for instance, in cases of ringworm, scabies, psoriasis, eczema, and other diseases, will welcome the glass ointment applicator, a practical appliance designed by Miss J. A. Smith, Matron of the Kingston Union Infirmary. They are in constant use in that Infirmary, and are reported by the Medical Officer, Dr. James Donald, to answer their purpose exceed-



ingly well, and to protect the hands of the nurses. They are made either in plain or ground glass, and can thus be easily cleansed and sterilised, and are obtainable from Messrs. Down Bros., Ltd., 21, St. Thomas's Street, S.E., price 1s. 6d. and 1s. 9d. The illustrations here given show the applicator one-third of its actual size.

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