

Registration at Charing Cross Hospital.

Upon the invitation of the Matron, Miss Heather-Bigg, Mrs. Bedford Fenwick spoke on the Registration question to a meeting of the Sisters and Nurses at Charing Cross Hospital on Saturday last. Mrs. Fenwick sketched the progress of the movement, and touched on the various clauses of the Bill. She impressed upon the meeting the fact that the House of Lords had accepted the principle of direct representation of the nursing profession on the Registration Council—the governing body; that those who registered during the three years' term of grace would not be required to pass any further examination; and that the proposed fee of five guineas, two for registration and three for examination, was quite a moderate charge considering that in return a nurse was to receive the definite legal title and status of "Registered Nurse," and thus for the first time be in fact a member of a profession organised by Act of Parliament, especially as the majority of nurses received their professional education free.

Some £40,000 a year was being spent by nurses and others for education fees to qualify themselves to pass the examination of the Central Midwives' Board. The London Hospital charged each nurse a fee of £20 for tuition and a short experience in the special branch of midwifery. Moreover, the finances of the Midwives' Board were not in a satisfactory condition owing to the small fee charged, and it was not improbable that part of the expenses would have to be met, as provided for, out of the rates. The nursing profession should be self-supporting, and the fees proposed could make it so.

No injury would be done by the Act to those nurses whose work and character were good, even if they did not hold the highest certificates, as during the time of grace such nurses would be registered. It was only by degrees that a really well organised profession of nursing could be built up, and that by the co-operation and help of the great body of well-trained nurses themselves. Mrs. Fenwick urged those present to carefully study the Bill.

Miss Heather-Bigg, in proposing a vote of thanks, said she was much in favour of registration, and felt it would do much to help to organise the teaching and standards in the nursing schools.

Registration literature was distributed.

Practical Points.

Glycerine as a Dressing for Prevention of Suppuration.

Dr. Howard Lilienthal, in the *American Journal of Dermatology*, calls attention to the value of anhydrous glycerine as a dressing for prevention of suppuration.

He writes:—Having noted the relief following the employment of the various glycerine pastes which are in use, it occurred to me that the hygroscopic effect of the glycerine could be greatly increased by using this substance pure instead as one of the ingredients of a mass with a burnt alum or kaolin base. The experience of three years has shown that this form of dressing is of very great value in preventing suppuration in slightly infected wounds and in many of the milder cutaneous and subcutaneous infections not due to surgery.

It is not intended to supplant operative drainage, but rather to turn the scale in the borderland cases in which incision is not yet clearly indicated.

Much depends upon the manner of applying this dressing, so I will describe the method in detail: A poultice is made by thoroughly impregnating absorbent gauze or cotton with anhydrous glycerine. It is essential that the gauze or cotton, as well as the hands of the surgeon, should be absolutely free from water. The poultice is made by kneading the gauze in a basin of glycerine until it is thoroughly saturated and dripping. It is astonishing how much glycerine an apparently small piece of gauze will absorb. The part to be dressed, and a considerable area surrounding it, should be covered with this glycerine poultice, and this in turn covered by a large piece of rubber tissue, oiled silk, or other impervious material. A thick layer of non-absorbent cotton and a bandage will, by its elasticity, hold the dressing securely and comfortably in place.

The patient experiences a sense of local warmth and comfort soon after the application of this dressing, and in a few hours the glycerine will have absorbed so much water from the tissues that it becomes liquid instead of syrupy. The bed and the patient's clothing should be properly protected to prevent soiling by this liquefied glycerine.

Some Valuable Uses of Cyllin.

To inhale through the nostrils Cyllin solution (1 teaspoonful to the pint) for ten minutes, several times a day, has been found to cure completely attacks of coryza in 48 hours, if the treatment be adopted during the first day or two of the cold.

Cyllin solution is also excellent for bad gnat or mosquito bites. A piece of lint should be soaked in very hot solution, then folded and applied to the bite, covered with oiled silk, and bandaged on. This stops the irritation at once, and if left on for seven or eight hours there will be no further trouble from the bite. The strength of the solution must depend on the skin of the patient, as a very sensitive skin peels after the application of Cyllin lotion.

[previous page](#)

[next page](#)