

4. Inhalation. Nitrite of amyl capsules should be broken in little pads of wool to prevent the glass fragments becoming scattered.

There are many varieties of insufflators on the market, and these must be used as directed, according to their construction.

Liquid inhalers should have a thick towel pinned tightly round them, to prevent burning the patient; and they should never be more than two-thirds full.

5. Unguentum hydrarg is sometimes administered by rubbing. The parts usually selected are the axillæ and groins, a different area being used daily in rotation. Previous to application the part should be shaved, if necessary, and well washed. A good plan is to put the ointment on a warmed bottle, which saves the hands from coming into contact with the drug.

Cod liver oil, olive oil, &c., are sometimes rubbed in, in cases of malnutrition and wasting.

HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss S. Simpson, Miss L. Nunnerley, Miss M. Punchard, Miss L. M. Ridgewell, Miss G. Hind, Miss E. F. Stokes, Miss J. M. Stevens, Miss E. C. O'Brien.

Miss J. M. Stevens mentions that drugs may be introduced into the system endermically by means of dressings applied to wounds (well-known instances of this are the carbolic acid, and iodoform poisoning which sometime occur when these drugs are used continuously).

Miss Stevens also refers to anti-toxins, which, although not classed as drugs, are given hypodermically. Before an injection of anti-toxic serum, which may be injected deeply into the subcutaneous tissues, the muscular tissues intravenously, or into the nervous tissues, the skin should be prepared as for a surgical operation, a compress wrung out of antiseptic lotion being applied 12 hours beforehand if possible.

A local anæsthetic may be used for intravenous, intra-muscular, or spinal injections, but for an injection into the cerebrum a general anæsthetic is given.

All punctures must be sealed with sterile gauze and collodion.

Miss Nunnerley states that when the patient is unconscious and unable to swallow, drugs may be given in the form of a nasal feed. Mydriatics and myotics may be applied to the eye by means of a dropper, the throat can be painted or sprayed, and drugs which act upon the membrane of the nose, throat, and bronchial tubes can be added to boiling water and inhaled. Drugs can be passed into the uterus and vagina by means of douching, and for local

treatment tampons soaked in glycerites of ichthyol, iodine, &c., are used; the use of cotton-wool applicators is another method.

In some bladder diseases it is necessary that drugs should be introduced into that organ. This is done by means of the ordinary apparatus for washing out the bladder, and a certain quantity allowed to remain. The pelvis of the kidney can also be reached in this manner, by means of a proper apparatus for the purpose, and a urethral catheter.

QUESTION FOR NEXT WEEK

What are some of the complications to be watched for during pregnancy, and their causes? Mention methods you have seen used to combat them.

NURSES' REGISTRATION.

Trained nurses have to thank the editor of the *Standard* for not excluding the question put last week by Dr. Chapple to the Prime Minister on Nurses' Registration, and only printing his reply. This reprehensible method of boycott was adopted by the Holland-Harmsworth Anti-Registration Press in their unfair suppression of the demand upon the part of trained nurses that the public shall be protected from unqualified persons posing as skilled and qualified nurses—for that is what Nurses' Registration means.

THE QUESTION.

As we reported last week, Dr. Chapple asked the Prime Minister whether his attention had been called to the fact that the Nurses' Registration Bill was now supported by the British Medical Association, the Matrons' Council of Great Britain and Ireland, the Royal British Nurses' Association, the Society for the State Registration of Trained Nurses, the Fever Nurses' Association, the Scottish Nurses' Association, the Association for the promotion of Registration of Nurses in Scotland, and the Irish Nurses' Association, and that Acts providing for the State registration of nurses had been passed in South Africa, in Queensland, in New Zealand, in Ontario, in 34 of the States in the American Union, in Germany, and in Belgium; and whether, in view of the necessity for the protection of the sick from unqualified nursing which assumes to be qualified, he would give facilities for the passage of the Bill already passed by the House of Lords or some other.

THE REPLY.

Mr. Asquith: I was not aware of all the facts cited by the hon. member, but in any case I fear I cannot give facilities for the passage of a Bill on this subject.

The important part of this reply is not that facilities cannot now be given—during constitutional turmoil and revolution constructive social legislation is bound to be crowded out—

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