

mortem examination. If incisions are made before or after death gas and sanious fluid bubble up. Pus is confined to the edges of the wound, and is very little in proportion to the sanious discharge.

PRACTICAL CONCLUSIONS.

The practical conclusions we would draw from these observations are as follows:—

1. All tight bandages, and especially those applied at the first field dressing, should be avoided. Shell wounds are so often followed by so much interstitial hæmorrhage that the part swells, and the bandage rapidly becomes tighter and interferes with the circulation. Consequently many bandages require to be cut within a few hours of their application.

2. In many cases the tension requires to be relieved by incisions and drainage, and the opportunity should be taken to wash the wounds thoroughly with an antiseptic. Hydrogen peroxide is one of the best. Great care should be taken to remove portions of clothing, as these contain the infective agent. Shattered fragments of bone and pieces of shell or gravel should be taken out.

3. Amputation may often be successfully performed through tissues made emphysematous by gas, but not yet gangrenous.

4. The group of anaërobic organisms causing gangrene are spore-bearers, and spores (especially of this group of anaërobic organisms) are especially difficult to kill by any antiseptic solution, or even by boiling. Consequently, in order to sterilize instruments and other things that have been infected, other measures are required.

(a) Destruction of blankets and clothing soaked by the discharge.

(b) Heating in an autoclave at a temperature of 120° Centigrade.

(c) Boiling for an hour in a solution of 1 in 20 carbolic acid or lysol (1 in 10).

It should be remembered that the mud on the clothes of wounded soldiers is almost certainly infected, and care should be exercised to see that the area in which operations or dressing of wounds are performed should be kept free from possible contamination from such a source.

5. Where possible, it is advisable to isolate patients under treatment in hospitals, and this is all the more necessary on account of the bad smell which is inseparable from the condition.

Gas gangrene is a condition which few nurses have seen, and it is therefore important for those going on active service, or nursing in military hospitals at home, to acquaint themselves with the foregoing facts.

STATE REGISTRATION.

Parliament has now adjourned until February 2nd, 1915, and we hope that all those who are interested in the progress of the Nurses' Registration Bill will lose no opportunity in the interval of drawing the attention of Members of Parliament to the very urgent necessity for legislation. Hundreds of trained nurses are seething with indignation at the manner in which their skilled work, and their uniform, have been annexed by amateurs, crazy for the excitement of "going to the front," and the manner in which their livelihood has been economically depreciated by the use of volunteer workers. The following outrageous advertisement appeared in the *Times* on Monday, which proves that the "society pirate" is prepared to pay for her amusement at the front as well as at home.

A FEW LADIES are INVITED to JOIN the STAFF of a CLEARING HOSPITAL, for FRANCE. Must be willing to contribute £5 weekly to the upkeep of hospital.—Box 4,127, The Times Book Club, Oxford-street.

Several trained nurses called our attention to this proposed "jaunt" in highly indignant terms. If, however, in the past their professional consciences had been more alive, they would have long ago compelled Parliament to protect the sick, especially our splendid sailors and soldiers, from the cruel exploitation of the amateur society nurse, who can now assume every attribute of the highly skilled worker, and undermine the prestige of her profession. We knew the day of reckoning would come. It is here to-day. Let us hope it will arouse thousands of nurses to actively support their own Registration Bill, and thus protect the sick and themselves from the dangers of the unscrupulous amateur.

On Thursday, November 26th, Mrs. Bedford Fenwick addressed the members of the Catholic Nurses' League in their charming club-room at 118, Victoria Street, London, S.W., on the subject of State Registration of Trained Nurses, when she explained the principles upon which the Nurses' Registration Bill was drawn. Miss Kirwin, who was a most genial chairman, invited questions at the conclusion of the address, and several were asked and answered. A vote of thanks to the speaker, proposed from the Chair, and seconded by the Secretary, Miss Campbell, formerly Matron of St. Vincent's Hospital, Dublin, was cordially carried, and then a dainty tea was served, and some of those present who had seen service in Belgium and elsewhere informally discussed their interesting experiences.

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