

CARE OF THE WOUNDED.

Mr. C. Arthur Pearson, President of the National Institute for the Blind, 206, Great Portland Street, W., makes an appeal in the press to the members of the House of Commons for the men who have had their sight destroyed while fighting for us, which cannot fail to meet with a sympathetic response. So far, he writes, 22 men have been incapacitated in this terrible manner, including two officers and one non-commissioned officer. They are now to be sent to the 2nd London General Hospital at Chelsea, and all soldiers blinded at the front will be sent there in future. Mr. Pearson pleads for special consideration for these men when the question of pensions and allowances comes before the House of Commons. There will not be many of them, and it is, he says, certain that the country will not grudge any comparatively small additional sum needed to place these young, hearty fellows, plunged into darkness, so early in their lives, in comfortable circumstances.

The Canadian War Contingent Association are collecting contributions of comforts, or funds to purchase them, in anticipation of the requirements of the contingent while at the Front, and to supplement supplies from the Government stores of contingents in England. Socks, body-belts, mufflers, gloves, mittens, cardigans, sweaters, sleeping caps, coloured handkerchiefs, &c., may be forwarded to the Ladies' Committee, at the Westminster Palace Hotel; and subscriptions to Mr. C. C. Casells, Hon. Treasurer, Bank of Montreal, 47, Threadneedle Street, E.C.

The Prince of Wales, who recently visited the Canadian Hospital, at Le Touquet, complimented the commanding officer, Colonel Shillington, on its efficiency, and said that he would mention the excellent work of the hospital in writing to the King.

The Welsh Hospital at Netley is being enlarged to two hundred beds. This means that additional equipment will be required. Gifts of linen, blankets, pyjamas, and other comforts will be gratefully received by the Matron. It is hoped that as soon as the military situation permits this hospital will be taken abroad. In the meantime some of the most serious cases from France are treated in it.

The American Women's War Hospital at Paignton is being enlarged by 30 beds, bringing the total capacity of the institution up to 230. This addition has been made possible by utilising the fine riding school. The new ward will be called "St. George," after a generous donor to the Fund, and when completed will be staffed by English and American nurses, as are all the other wards.

The casualties of the Expeditionary Force in the Western area up to February 4th, were approximately 104,000 all ranks.

LETTERS FROM THE FRONT.

FROM VERSAILLES.

No. 4 General Hospital, Versailles, is, I suppose, the largest and best equipped of the British Expeditionary Hospitals, so possibly some account of it may be of interest. As it was formerly an hotel there is a plentiful supply of hot and cold water and electric light everywhere, which is a great boon. There are three wards on the ground floor, containing 22, 35, and 51 beds respectively, and on the floors above—four of these—are series of fair-sized rooms containing three, four or five beds each, with a fair number of bathrooms. On the first floor, which is kept for officers—or "Pets," as they are called—are the Theatre, X-ray Department, and Senior Surgeon's office. In the garden are marquees for medical and convalescent surgical cases, dining tents, and two church tents (Church of England and R.C.). The dysentery and enteric tents are in the adjoining field, also bathrooms, which have just been fixed up. Altogether there is accommodation for a thousand patients.

For each floor there is a Sister, two or three Staff Nurses, and several orderlies and one or two medical officers. On an average there are 100 beds on each floor. The routine for work is almost identical with a hospital in England, and the hours are from 7.30 a.m. till 8 p.m., with alternate afternoon or evening off duty (if the work allows). Convoys of wounded arrive every now and then, and men are constantly being sent away for duty or garrison duty. An ambulance train for conveying stretcher cases sufficiently recovered to go on to England takes patients away once a month. We get a great variety of wounds, the cleanest cases being the simple wounds caused by bullets. Shrapnel wounds are mostly very dirty, but perhaps the worst are those of a ricochet bullet, which lacerates terribly. In the early months of the war we had a good deal of tetanus and gangrene, but lately we have had almost more frost-bites than actual wounded.

Tetanus, of course, requires to be isolated, and the treatment is much the same as one sees in England. As it develops sometimes after a patient has come into hospital it is as well that nurses should be on the watch for any signs of general restlessness—violent headache, frequent yawning, and possibly some feeling of giddiness, with darting pains in different parts of the body—any of these being liable to occur previously to the later and more noticeable (because better known) symptoms. In any shell wounds of the arms or legs gas gangrene may be looked for. The patient has severe pain—in the early stages, anyhow—and the wound is most offensive with a characteristic odour, so that after dealing with one case of gas gangrene another would be easily recognised. The peculiar bubbling up of the pus is the same also in all cases. From what one learns from questioning the patients it seems in very many instances that in all probability this condition might have been avoided if only the wound

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