

LETTERS TO THE EDITOR.

Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.

A GREAT RESPONSIBILITY.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—I beg to draw your attention to the case I have just had.

As you will see by the address, I am away from all skilled assistance and consequently must act on my own.

About 11 p.m. on the 31st August I was called to a case. She was a primipara, and I found that the membranes had ruptured. At 12.35 the following day the first baby was born (it was a case of twins). It was a blue baby and the cord was once round the neck. A quarter of an hour afterwards the second baby was born, and twenty minutes later the placenta and membranes came away complete. The uterus felt fairly firm, I kneaded it and gave Ergot ʒii, and everything seemed all right.

In a few minutes postpartum hæmorrhage started. I raised the foot of the bed, gave pituitrin i.c.c. but all without effect. I then gave another dose of Ergot ʒi. Despite all this the patient was sinking fast and seemed beyond all hope; she was practically pulseless. Then I gave brandy ʒii and saline and glucose ʒviii. in all. After this the pulse became more perceptible.

I then put her on strychnine and digitalis alternately every two hours, and about 7 p.m. she began to revive.

I then turned my attention to the babies. The first one weighed 2½ pounds. This was the blue baby. I dressed the cord, oiled her and wrapped her in cotton wool, placing her on a pillow surrounded with hot-water bottles, but she only lived until Sunday evening at 6 p.m.

The second baby was even smaller, but a much better colour. She only weighed 1½ pounds. I managed to keep her alive 14 days.

On the eleventh day I discovered that the lochial discharge was fetid. I could not understand this as there was no rise in temperature and the pulse varied from 80-96. The patient looked well and enjoyed all her food. However, I gave a hot lysol douche, and about an hour afterwards she passed a macerated fœtus. It was absolutely putrid. . . . I kept on douching four-hourly, and gave quinine grs. v. t.i.d. also mag. sulph. every morning until the condition cleared up.

I would like to know if I did all possible. Should I come across the like again is there anything else I could do?

In the absence of a doctor should I examine the uterus or give an intra uterine douche? Fortunately this cleared up without. I only gave vaginal douches.

This is my first experience of being left absolutely on my own, and I do feel the responsibility.

Yours faithfully,

A. B. MacKAY.

Miango, via Jos, Northern Nigeria,
B. W. Africa.

[Medical advice has been obtained on the points raised, and communicated to our correspondent.—ED.]

NURSES' PROBLEMS.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—In the December issue of THE BRITISH JOURNAL OF NURSING, in an article on the retirement of Sir Richard Barnett, M.P., there is a paragraph containing the phrase, "It is a curious anomaly that women members do not understand their (nurses') problems, and for the most part do not care to do so." I think this is unfair. I know

that Miss Ellen Wilkinson, M.P., has always taken a very special interest in nursing conditions, was on the Parliamentary Select Committee for Nursing, and has always been especially anxious to assist nurses whenever possible.

Your contributor was probably not aware of these facts, and I think it my duty to point out the error.

Yours sincerely,

124F, Croftdown Road,
N.W.5.

M. S. McWILLIAMS
(Mrs.)

[We are aware that Miss Ellen Wilkinson was a member of the Select Committee of the House of Commons which was appointed "to examine the Election Scheme (of the General Nursing Council for England and Wales) and to report upon the desirability of making the adoption of the Council's Syllabus of Training compulsory," but, so far as we are aware, none of the women Members of Parliament have endeavoured to get into touch with the nurses' self-governing organisations, to learn their views on questions vitally affecting their profession, with which Parliament is dealing or has dealt. We refer to some of these in our editorial article on page 1, and invite women Members of Parliament to find time to read it, and to seek further information from such organisations as the Royal British Nurses' Association, the British College of Nurses, the Mental Hospital Matrons' Association, and kindred organisations, and to keep an eye on any Bills introduced into Parliament dealing with any of these questions.—ED.]

IMPORTANT NOTICE.

MEETING OF THE INTERNATIONAL COUNCIL OF NURSES
AT MONTREAL.

The National Council of Nurses of Great Britain has decided to advise those of its members who propose to attend the International Congress of Nurses at Montreal, in July, 1929, to travel by the s.s. *Alaunia* (Cunard Line), which, by special arrangement, will leave Southampton and Cherbourg on June 28th, and is due to arrive at Montreal at 2 a.m. on Sunday, July 7th.

There are two classes on this boat:—

1. CABIN.

2. TOURIST THIRD.

The return fare will be:—

1. For cabin passengers, £60.

2. For Tourist third passengers, £38. This is a new class, which is well recommended by those who have had personal experience of the arrangements.

Members of the National Council of Nurses who travel to Montreal by this boat will be at liberty to make independent arrangements as to the return journey.

The arrangements for the voyage are in the hands of Mr. Harper, Ocean Travel Department, Thomas Cook & Son, Berkeley Street, Piccadilly, London, W., and it is desirable to get into touch with him as soon as possible, so as to have the best choice of berths.

The International Officers and the four official Delegates of the National Council of Nurses will have to leave England a week earlier to be in time to attend the Business Meetings. The *Ascania* which leaves Southampton on June 21st, is a convenient boat.

Those who desire to embark at Liverpool may find convenient the s.s. *Duchess of Richmond* (Canadian Pacific Line), leaving Liverpool, June 28th, Glasgow, June 29th, and due to arrive at Montreal on Saturday, July 6th.

PRIZE COMPETITION QUESTION FOR FEBRUARY.

How would you nurse a patient after removal of stone from the kidney, from the post-operative to the convalescent period? To what points should your attention be specially directed during that period?

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