difficulties existed, but in the large infirmaries there should be no difficulty in carrying on the system now in force at Crumpsall. It was necessary that there should be differentiation between the Chronic Sick and the Aged Infirm. Attendants could look after the latter, but the Chronic Sick required the care of the trained nurses. To lower the standard of nurses for this branch of work would be going back to conditions which prevailed 30 years ago and which they had fought so hard to overcome. Probationers should spend some months of their training in this branch of the work.

MISS MUSSON said greater co-operation between the two classes of Hospitals would enable probationers from Voluntary Hospitals to go for a certain time to wards of the more Chronic hospitals, but the rules of many of the Voluntary Hospitals would preclude the setting aside of beds for chronic cases which required long periods in hospital. The overweighting of the training of nurses with too much Chronic work (which had happened in the past in the Poor Law Hospitals) must be guarded against.

INFECTIOUS HOSPITALS MATRONS' ASSOCIATION.

MISS MACKIE stated that her Association sent her to condemn the addition of partly trained nurses to the Register. They considered that the proposed training of such nurses would, to some extent, be unfair to them. During the last few years wards in her Hospital had been opened for the reception of chronic cases from other Hospitals. Among their nurses she had found excellent women who, because of their usefulness in this sphere, had not been advised or encouraged to go on to take full General training. Others did not go on because they had to remain at home, and because the rate of payment was higher than that of a probationer.

MATRONS' COUNCIL OF GREAT BRITAIN AND IRELAND.

MRS. MACKENZIE said that on behalf of the Matrons' Council she wished strongly to oppose these untrained nurses being put on to any Supplementary Register. The Council felt that this would be a dangerous thing and a step in the backward direction. Chronic patients ought to be nursed by the skilled, but the field was a big one. She suggested that the elderly fully trained nurse should be employed on this work. Mrs. Mackenzie referred to the candidates who fail in the State Examinations and yet find employment as fully trained nurses and drew attention to the danger constituted by such persons.

MENTAL HOSPITAL AND INSTITUTIONAL WORKERS' UNION.

MISS WILLIS said: "We are opposed to an inferior grade of nurses, and we feel that the chronic sick should have every care it is possible to give them, and they should be nursed by qualified nurses."

MENTAL HOSPITAL MATRONS' ASSOCIATION.

MISS SCOTT SEYMOUR stated that her Association was entirely in opposition to any lowering of the standard. The chronic sick, whose lives were spent in years of helpless suffering, required the very highest skill and attention.

NATIONAL COUNCIL OF NURSES OF GREAT BRITAIN.

MISS ALLBUTT said : "My Council is very strongly of the opinion that there should be no depreciation of the General part of the Register by the addition of a Supplementary Register of an inferior grade of nurse, who cannot attain to the one portal standard laid down by the General Nursing Council."

(To be concluded.)

AN ADVANCE IN THE TREATMENT OF HÆMOPHILIA.

An advance in the treatment of hæmophilia has been made at Sheffield. Dr. W. A. Timperley, Professor A. E. Naish (lately Professor of Medicine at the University of Sheffield), and Professor G. A. Clark (Professor of Physiology, Sheffield University) have discovered a preparation from egg-white which, when injected, reduces the clotting time of the blood and controls hæmorrhage in haemophilias, and they recently described their discovery and its effects in the *Lancet*.

Dr. Timperley found that if egg-white was incubated at 37 deg. Centigrade for several days in the presence of potassium bromide, it was possible to extract from the mixture a substance whose addition to blood *in vitrio* under certain conditions led to the formation of a clear, structureless gel which did not shrink like the ordinary blood-clot.

Irrefutable proof of benefit in a disease so remarkably fluctuant as hæmophilia is difficult to obtain, they say, and the natural tendency of both doctor and patient is to err on the optimistic side. In order to make the tests of efficiency more exacting, patients were in all cases encouraged to carry out those actions which previous experience had told them were likely to bring on painful joint swellings. For instance, the man who had previously found that wielding a 4-lb. hammer for 15 consecutive minutes would almost always bring on a week's disability of the right elbow was, while under treatment, set to use a similar hammer for much longer periods, and a boy of 15 who had used crutches for many years, because bearing his weight on uneven ground was liable to cause one or other ankle to swell, was persuaded to jump from chairs, kick footballs, and run freely over all sorts of uneven ground. Patients were also encouraged not to spare themselves the knocks and cuts which by habit they had avoided.

A boy had had frequent bruising since infancy and any thoughtless lifting caused a painful deep swelling in the muscles of the trunk. Swelling and pain in the joints began at the age of four, and these attacks became more frequent. Small cuts bled profusely, and on one occasion a bloodtransfutions was necessary, while his milk teeth were care fully preserved to prevent hæmorrhage danger. Then he was admitted to the care of Dr. Timperley and his colleagues. Injections were given, considerably reducing his clotting time, and repeated at intervals. Once he slipped and fell badly without any hæmarthrosis occurring. More injections were given and he had a tooth removed. Clots kept forming in the socket, and in four days all bleeding had ceased, the total loss being only 2 oz. Later he returned to the doctor's nursing home, and three more teeth were extracted.

doctor's nursing home, and three more teeth were extracted. "It must be emphasised," the article states, "that no claim is made to cure hæmophilia by the treatment suggested, but merely to control hæmorrhage and ameliorate the general condition during exacerbations of the disease and during minor operative procedures. In order to do this adequately, repeated injections are necessary."

and during initior operative procedures. In creases, " adequately, repeated injections are necessary." In 11 tooth extractions no plug was used. Altogether 24 teeth were extracted from six patients, and in only one case was it necessary to resort to an adjuvant, such as the local application of snake venom, or a blood transfusion. Details are given of treatment of 13 cases in which tests have been made, including hæmophilics who had had relatives bleed to death.

Arrangements are being made by the Home Office to enable everyone who so wishes to have individual instruction in the fitting and use of gas masks.

It is estimated that about 30,000,000 respirators will become available for the public.



