

easily be limited to a privileged class of members, so that the only way in which outsiders could obtain an undue proportion of sick pay would be by introducing an excessive proportion of qualifying sickness. On what does the apprehension of such a result rest? It is a large part of the nobility of the nurse's profession that she makes a considerable sacrifice, not only of ease, but actually of health, in the pursuit of her vocation. Her arduous duties, her prolonged vigilance, and her constant contact with whatever disease is abroad, rob her only too surely of the prospect of uninterrupted health, be her constitution what it may. The admission of able-bodied women of almost any other class would tend rather to diminish than to increase the pressure of sick benefit upon the Fund.

"But, be the merits of this provision what they may, the objections above noticed—a mere sample and selection of objections, after all—must surely convince all well-wishers of the present movement that it would be wise to withdraw the prospectus, which has been, we cannot help thinking, incautiously made public, and to prepare a revised scheme in consultation with those who know what nurses want, and can not only conjure with figures, but also understand the flesh-and-blood facts of the case."

This should at all events convince our readers that adverse criticism is by no means limited to ourselves. In addition to the opinions expressed by the *Lancet*, there also has been a considerable correspondence going on in the columns of the *Times* during the past week, which does not by any means tend to increase our regard for the Fund as it now stands.

(To be continued.)

REMINISCENCES OF A SMALL-POX EPIDEMIC.

BY ISLA STEWART.

(Continued from page 18.)

IN summer, late spring, and early autumn life in camp was almost perfect. We forgot that small-pox had brought us together, and we *lived*. As I write I have one day fixed in my memory as some things do fix themselves. It must have been in June, I think, when the sun is brightest and the sky bluest. The morning was fresh, with a delicious scent from the clover field which stretched its crimson length between the camps; the sun shone; the birds sang as if the greatest joy was theirs; the soft green country stretched before us, and the poppies lifted their glorious heads. The day died with a clear twilight which rendered everything absolutely distinct. Gradually the birds hushed their song, the grasshopper ceased his whirring, and nature's prayer hour seemed come, when the plaintive note

of the nightingale broke the soft silence of the night. But, alas! there was another side to life in camp. There were the dull days of the late autumn, the long winter, and early spring. They had to be endured, that was all. The chalk was slippery in wet weather, with a slimy stickiness all its own; the wood pavements were quite as bad; the tent walls dripped, and when the weather was specially bad, the tent floors were wet, and always cold; the hot pipes gave the air inside the tents a stuffiness which, added to the natural odour of small-pox, produced an undesired result. Umbrellas were not provided either for nurses or patients, and they all looked wet and draggled, with the water dropping off their noses. The doctors buttoned up their coats, pulled their hats over their eyes, and everything looked, and was, dreary. Of course there were some fine days, but they need to be very fine in winter in a small-pox camp to be any comfort. In summer you could get away from the scarred faces, and the patients being much scattered one did not notice the extreme offensiveness of the disease; but in winter, when we were all crowded together, and no one cared to go far from the hot pipes, then we were aware of a penetrating odour never to be forgotten; then those faces, scarred and lined and of a livid red (which to a certain extent improve, but never wholly recover), were ever present. I have known two sisters live in the same camp, eat at the same table, and see each other daily for a week before they recognised each other.

Taken as a whole, the system adopted by the Metropolitan Asylums Board was good. The objections to it mainly arose as a consequence of the rapidity with which it had to be organised in order to meet the demands of the rapidly increasing epidemic, but the great blot was the nursing. Small-pox, doctors allow, is a nurses' disease. More depends on the proper attention given by the nurse than all the treatment of the physicians, and the nurses were as a rule not trained: excellent women, many of them, but with no knowledge to help them. It is, unfortunately, the great evil of all epidemics that nurses must be at once forthcoming, and trained nurses have as yet not offered themselves in great numbers for this work. There are some reasons for this. One is the uncertainty of the duration of the work; another is the isolation and loneliness which attends it; and I suppose the loathsomeness of the disease is a factor also. It is a field where good, true women are much needed, and when next it visits us I hope many trained and educated nurses will be found in this new sphere of work.

As I am writing to nurses, perhaps I may be allowed to say a few words in closing on the treatment and nursing of small-pox. The patient should have as much air as possible, and his room should be kept at a uniform temperature. The delirium is

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