

shows the great difficulties against which the scheme has to contend. Hospitals especially set apart for women and children have been in working order for several years but the number of native women who have availed themselves of these institutions has been comparatively small. The fact that the higher classes of Indian women object to going to Hospitals is sufficient to prevent their poorer sisters from doing so. It is admitted now that to make Lady DUFFERIN'S scheme a success strict privacy must be secured for patients in a Hospital. Not only the medical attendants, but the compounders and dispensers of the medicines, must be women. The mere fact that the Hospitals set apart for females may be visited at any time by the Civil Surgeon or other medical officer, is sufficient to prevent native men allowing their wives to enter. Even when the men employed at the Hospital are unseen, the knowledge that they are on the staff frightens away the patients. The Hospitals which have been established are admitted on all hands to be excellently managed and worked, and, contrasted with the dirty, ill-ventilated homes of the native women, appear veritable havens of refuge in cases of illness.

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DR. GEORGE DUFFIELD and his mother and brother, says the *American Lancet*, have given the means for the erection of a separate building for the Nurses in the Contagious Diseases Hospital on Harper Hospital grounds. They will supervise its construction, so that it will be as perfectly adapted for the purpose as it is possible to make it. Dr. DUFFIELD and family will receive the perpetual benediction of all future Nurses and patients of this Hospital.

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A VERY important thing, says the *Medical Era*, in discussing the question of Infant Feeding, is the way the milk goes down into a child's stomach. Some bottles are so constructed that the milk goes down too fast. Every child who sucks at the breast has to work for what it gets. One of the great troubles in artificial feeding is that the milk is cascaded into the stomach and immediately cascaded back again. Most of the sick babies are made so by some prepared stuff being cascaded into their stomachs in enormous quantities. Quantity is a great element in these disorders, and I have known too much food to make babies sick, even where the food was fresh milk. I generally tell the mother to put a piece of pure, clean sponge into the teat, so that the child must work with its gums and lips to draw the milk, and thus obviate the too rapid flow.

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THE following figures are very interesting and important in view of the question which is so frequently put to private Nurses as to whether the administration of Chloroform is dangerous:—Gurlt reported to the last Surgical Congress at Berlin, the following statistics of deaths under anæsthetics. They are made up from the observations of 62 operators, who anæsthetized 109,196 persons, with 39 fatal results, shewing one death to 2,800 narcoses. The following were the anæsthetics used:—

|                                       |                             |   |            |
|---------------------------------------|-----------------------------|---|------------|
| Chloroform .....                      | 94,123 narcoses, 36 deaths. |   |            |
| <i>i.e.</i> , 1 in about 2,600 cases. |                             |   |            |
| Ether.....                            | 9,431                       | „ | no deaths. |
| Ether and Chloroform.....             | 2,891                       | „ | 1 death.   |
| Ether and Alcohol .....               | 1,381                       | „ | no deaths. |
| Bromoform with ethyl bromide          | 2,151                       | „ | 1 death.   |
| Pental .....                          | 210                         | „ | 1 death.   |

In 2,913 cases the narcosis lasted over an hour in an operation for utero-vaginal fistula, 4½ hours; in a case of tetanus, 9 hours. In 25 cases, of which post-mortem examinations were made, cardiac diseases were found. The author urges careful examination of the heart before administering chloroform. It is, therefore, possible, that in this country, where it is the routine practice to examine the chest very carefully before deciding what anæsthetic shall be given, the rate of mortality must be very much lower, even than those which I have quoted. S. G.

### Self Training in Hospital Life.

BY E. J. R. LANDALE.

AT a time when so much is being said and written about Nurses training in Hospitals, it may not be without benefit to consider what training Nurses may give themselves, and, indeed, must give if they are to be fully trained as Nurses, and women. There is much, I think, morally, physically, and intellectually.

Though a Nurse may attend many classes, and acquire great deftness in ward work, and conform outwardly to all the regulations of the Hospital, yet if she neglect to train herself, she will remain an undisciplined and undeveloped woman. Though in the Hospital wards she be forced to observe punctuality and attend to detail, it is only of her own will that she can acquire that habit of self-discipline which will alone make such observance and attention the source of permanent gain and beauty in her life, and usefulness as a Nurse and as a woman.

To begin with, the moral nature: "See that ye walk circumspectly"; that is, heedfully considering

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[previous page](#)

[next page](#)