

bereavement, or the care of the household—whatever the cause is, you will find that they have usually exhausted the resources of many physicians, worn out various nurses, or overtaxed in their selfishness the various members of their unfortunate families.

Instead of being ennobled by sickness they become self-centred, and lose that control of their emotions and wants, that regard for others which it is the duty of every one to observe in this world. In the typical case the invalid has become a tyrant surrounded by a group of slaves. It often happens that hysterical invalids complain greatly of a sensitive spine. Exertion is therefore considered to be harmful. Reading may be given up because the eyes are weak, and others have to read to her. The light finally is painful, and the invalid's room has to be darkened. That I may not seem extravagant I will quote what Dr. Mitchell says of these cases: "A draught of air is supposed to do harm, and the doors and windows are closed, and the ingenuity of kindness is taxed to imagine new sources of like trouble, until at last, as I have seen more than once, the window cracks are stuffed with cotton, the chimney is stopped, and even the keyhole is guarded. It is easy to see where all this leads to: the Nurse falls ill, and a new victim is found. I have seen a hysterical, anæmic girl kill in this way three generations of Nurses. If you tell the patient she is basely selfish, she is probably amazed and wonders at your cruelty. To cure such a case you must alter as well as physically amend, and nothing else will answer. The first step needful is to break up the companionship, and to substitute the firm kindness of a well-trained Nurse."

The patient should be carefully examined for the existence of any organic disease. In certain instances, such as advanced Bright's disease or in tubercular conditions, malignant disease, or in the case of true melancholia, the rest treatment is unadvisable.

Cardiac affections or stomach disorders are, as a rule, incidentally relieved.

The essential features of the treatment are—

- I. Seclusion.
- II. Certain forms of diet.
- III. Rest in bed.
- IV. Massage (or manipulation).
- V. Electricity.

It is the combination of these five measures that brings success.

(To be continued.)

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Royal British Nurses' Conversation.



THE sixth birthday of the Royal British Nurses' Association has again come and gone, and it was universally acknowledged at the Conversation held to celebrate the event on the 7th inst., in the galleries of the Royal Institute of Painters in Water-colours, that it was a very "fine child for its years." Upwards of 1,000 guests were present, six hundred of whom were Nurses, about 40 of them being Matrons of Hospitals, including many of the Foundation Members of the Association, who had come specially to grace "the first conversation of the Royal Chartered Corporation." So many inquiries were made concerning these enterprising ladies, that it was to be regretted that they wore no special badge or ribbon by which they might have been distinguished. The guests were received by the Vice-Chairmen, Sir James Crichton-Brown, Mr. Pickering Pick, and, in place of Miss Thorold, who was prevented being present, by Miss Isla Stewart, Matron and Superintendent of Nursing at St. Bartholomew's Hospital. The absence of the President, Princess Christian, caused sincere disappointment, but her gracious telegram was received with pleasure—"Please express my sincere regret to Members of Association not to be among them to-night, and my best wishes that they may spend a very happy evening.—Helena, President." Amongst the distinguished guests were Lady Sandhurst, Lady Raglan, Sir James and Lady Crichton-Browne, Sir Spencer Wells, Sir Richard Quain, Sir Guyer Hunter, Sir Joseph Fayrer, Sir Dyce Duckworth, Sir Herbert and Lady Perrott, Mrs. Bedford Fenwick, Dr. James Andrew, Mr. Gant, Mr. Davies-Colley, Dr. and Mrs. West, Dr. and Mrs. Bezly Thorne and Miss Thorne, Dr. Tooth, Dr. and Mrs. Dundas Grant, Mrs. Rough-ton, Dr. and Mrs. Schofield, Mr. T. Smith, Mr. Hovell, Mr. Gofston-Salmond, Mrs. Frank Bevan, Miss Fay Lankester, Mr. Owen Lankester, Mr. Cross of Bartholomew's, Miss Lowe, Mrs. Walter Spencer, and numbers of interesting people. The Matrons looked charming, nearly all having adopted a style of dress which is eminently becoming—a simple, long black dress, made mostly in rich silk, white nursing caps, and dainty cuffs and collars. Miss Isla Stewart was looking especially well, her fair hair becomingly dressed; and Miss Mollett looked very handsome; Mrs. Coster, Miss de Pledge, and Miss Cassandra Beachcroft came in for a good share of interest and admiration.

The snowy caps and aprons, and the varied uniforms of the different Sisters and Nurses flitting to and fro, produced an exceedingly pretty effect. The scarlet capes of the Army, red and white dresses of the Indian Army Service, intermingled with the blue, pink, and grey gowns of the civilian hospitals, caused a charming effect. It was observed that, on the whole, the *tout ensemble* was much simpler, neater, and more Nurse-like than in former years; but one could not help but regret that some Nurses present wore ludicrously unbecoming garments, both in cut and stuff, flobbering, bizarre, and ugly. It is to be hoped that year by year, as they learn to appreciate the beauty of simplicity, by contact with their colleagues who

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