

place in various parts of the Metropolis and in large Provincial towns. That will be very wise and necessary, but it is evident to us that our medical contemporaries who are at present advocating this extension, do not foresee what this will lead to. Not only to a great increase, direct and indirect, in the burden on the ratepayers, not only to the provision of palatial Infirmaries, but also to the inevitable decadence of the General Hospitals, and to the drying up of that channel of public benevolence. From inquiries which we have made, we feel convinced that the citizen of the near future will not subscribe voluntarily to the maintenance of a Hospital when he is compelled involuntarily to pay for the support of an Infirmary. It is easy to predict that the growth of the one class will mean the decay of the other, and the very intensity of the demand now being made for more Poor Law Institutions proves how these are becoming valued, while, on the other hand, the increasing financial difficulties of our General Hospitals prove that a crisis in their history is approaching.

THE USE OF CHLOROFORM IN LABOUR.

It is well known that anæsthetics are now very commonly used for the relief of the pains of labour, especially amongst the upper and middle classes of society. But it is the experience of all obstetricians that the custom has its disadvantages, and a careful inquiry which has recently been made into the matter has proved two facts experimentally, which have for long been suspected, if not actually known to practitioners in midwifery. The effect of chloroform is first to lessen the frequency of the contractions of the uterus, and then to diminish their strength; the natural result, therefore, being to delay the progress of events. This, perhaps, explains the fact that in cases where patients demand chloroform at an early stage of labour, the use of forceps to complete delivery is frequently necessary. The second result of chloroform is to leave the muscles flaccid, and thus to prevent in a marked degree the contraction of the uterus after the removal of the placenta. This, of course, accounts for the frequency with which post-partum hæmorrhage, often to a dangerous extent, occurs after labour has taken place under chloroform. The first lesson which this knowledge teaches is that the use of chloroform should be postponed as long and as late as possible, in fact, until the Cervix is well dilated and the second stage is advanced. A whiff of the anæsthetic, now and then, during the pains of the first stage may be useful, but, unfortunately, once it has been commenced, the patient, as a rule, rebels against its discontinuance. The second lesson is the necessity of giving an injection of ergotine over the hypogastric region, or of a full dose of the freshly-prepared liquid extract of ergot by the mouth, directly the child is born, to obtain the necessary uterine contraction as speedily as possible.

Reflections

FROM A BOARD ROOM MIRROR.



MISS MARY T. COOKE has been appointed Matron of The Hospital for the Insane, Paramatta, New South Wales. Miss COOKE was trained and certificated at Addenbrooke's Hospital, Cambridge; was afterwards Staff-Nurse for two years at St. Bartholomew's Hospital; and Sister at St. Saviour's Infirmary, Dulwich, from 1887 to 1890. She is a Registered Nurse, and a member of the Royal British Nurses' Association. The Paramatta Hospital for the Insane contains upwards of 1000 beds: 391, the female portion, being under Miss COOKE's direct superintendence. The salary is £130 per annum. We feel sure many old friends will be glad to see this "reflection."

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MISS TRUEMAN, for 20 years Sister of Colston Ward, St. Bartholomew's Hospital, has retired, and we sincerely hope she may, for many years, enjoy her well-earned pension. She was trained at St. Thomas's Hospital, in its pioneer nursing days, and was one of the six brave women who accompanied Miss AGNES JONES to the Brownlow Hill Infirmary, at Liverpool, when she began her splendid work—the reform of nursing the sick under the Poor Law. Miss TRUEMAN afterwards held the post of Sister at the Middlesex Hospital, from whence she entered upon her long and honourable career at St. Bartholomew's.

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MISS BRUCE, trained and certificated in the Nursing School of St. Bartholomew's, and lately holding the position of Night Superintendent, has been appointed, on three months' probation (an excellent system), Sister of Colston Ward.

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MISS WHITBY, trained and certificated in May, 1893, at St. Bartholomew's Hospital, has been appointed Night Superintendent in that Institution.

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MRS. HOPKINS has been appointed Night Superintendent to the St. Mary Abbot's Infirmary, Kensington. She was trained at Guy's Hospital; has been Matron of the East Grinstead Cottage Hospital, and for the past four years has held the responsible position of Charge Nurse of the enteric wards at the North Western Fever Hospital.

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