

the body of the Association may be towards the innovation. Above all things, it seems to me important to centralise into a common interest the needs, the ambitions, and the developments of every branch of our Nursing community.

ANNESLEY KENEALY.  
Registered Nurse. Lecturer to the  
National Health Society.

MADAM,—No suggestion more fraught with possibilities of use and help has ever appeared in the RECORD than that which proposes a means of drawing Matrons together in Council for their mutual benefit. We have been working hard at the Herculean task of teaching Nurses to take an interest in their own affairs, and understand the benefit of co-operation and association, and it is time, indeed, that Matrons should bestir themselves on their own account. I have often asked myself, "Why are the Superintendents of Hospitals so unfriendly to each other? Why are they so desperately British in their need of a formal introduction, and so little inclined to hold out a hand of good fellowship when a less experienced lady comes to some, perhaps, smaller Hospital near them?" I have never found a satisfactory answer to my question, but I look forward to having them no longer occur to me, when once a "Matrons' Friendly (?) Society" is started. There is no more isolated work than that of a Matron out of London; and, were it made possible for her to take counsel with her professional Sisters from time to time, in the difficulties which beset her lonely path, it would be a great help and strength to her. I don't think that it would be possible to make this a point in the programme of the proposed Society; or to get the full value of discussions on "Our work, our difficulties, our ambitions, and our hindrances," especially the difficulties and hindrances, if Mrs. Somerset's suggestion that "a verbatim report" of such council meetings should be published. Such publicity would entirely do away with what, to my mind, might be one of the greatest advantages of the Society. What Matron would venture to seek the aid of the wider experience of her Sisters in office on such a subject as her best course of action in difficulties arising from the attitude of her Ladies' Committee, or ask for information on points of business or Committee etiquette, if she knew that every word of her questions would be printed, and might find its way into the hands of her youngest Probationer, or her most trying Lady Visitor? While there might be much of general interest, and helpful instruction, which might be published with wide and good effect, let there be, at the same time, some arrangement by which Matrons may confer together on subjects which it is undesirable to bring before the general public, and unwise to lay before their Nurses and Probationers. No doubt there is much to be done for the formation of the Society before such details are arranged, but I feel strongly that the point I venture to bring before you is one which touches a wide field of usefulness, and, at the risk of seeming premature, I urge its consideration in the promotion of the new Society.—I am, Madam, faithfully yours,

E. J. R. LANDALE,  
Registered Nurse.

## Medical Matters.

### TUBERCULOUS CHILDREN.



It is a well ascertained fact that about one-third of the young children who die in hospitals suffer from tuberculous diseases. And this, it would appear, is a proportion which has not tended to diminish during recent years, although within the same time it is undeniable that the general mortality from phthisical complaints, ranging over the whole population, has not only not increased, but has even perceptibly diminished. The immense ravages which the tubercle bacillus, therefore, makes amongst children, renders it a matter of the greatest importance to ascertain the cause and methods of progress of the disease. It is well known that, in the case of children, tubercular disease is found more as a general, than as a local, affection, and that, contrary to the case of adults in which death may result from disease of only one organ, in younger life it is more common to find tubercle extensively scattered through every part of the body. An important paper has recently been published in which it is conclusively shown that, in a considerable proportion of cases of this disease, tubercle is found in the lymphatic glands, and mostly in those of the chest, this fact being especially marked in children under five years of age. If the lymphatic glands of the chest or abdomen, therefore, are the starting point of this mischief, as seems most probable, it might be argued that the disease must depend, at any rate to a considerable extent, upon the air breathed or the food ingested by the patient, and that through the lungs or the intestines the bacillus finds its way into the system and commences its infective process. It is just ten years ago since a well known German physiologist showed that milk containing the tubercle bacillus, given to rabbits produced the characteristic features of the disease, and it has often since been proved that the milk of tuberculous cows produces tuberculosis of the intestines, and therefore of the mesenteric glands. Taking it for proven, therefore, that the glands of the chest and abdomen are those most frequently affected in young children, it may fairly be argued that the disease—that is to say, the bacillus—must obtain admittance through the channels named. It therefore follows again that it is most important, as a measure of prevention, to separate children from phthisical patients, and also that all children should be given ample air space during their sleeping and waking hours, and milk, especially, which is derived from healthy cows. In view of the great mortality from this disease, especially amongst the children of the poor, or in those who live in over-

[previous page](#)

[next page](#)