

that she had actually undertaken to observe this condition.

We quote this case because it is typical of others, and not only on account of the hardship which it entails upon the Nurse, but because of its probable injustice to medical men and to the public, and in view of the fact that the custom is evidently increasing in frequency, we call attention to the matter.

The law on the subject is quite plain, because such a case may be taken to be identical with the conditions under similar agreements which have been, and are, made between medical men, and their assistants or partners. It has been ruled by judges, on several occasions, that a medical man has the right on engaging an assistant, or agreeing with a partner, to demand, and to receive, a formal undertaking, that, in case of the engagement terminating, the new-comer shall not exercise his profession within a certain distance of the place at which the original master or partner was established at the time. But it has been expressly laid down that "such stipulations, to be valid, must be confined within reasonable limits"; that is to say, the person implicated cannot be bound to give up his profession altogether, nor even to cease practising it beyond a reasonable limit of distance and time. In London, for example, such agreements between medical men usually stipulate that the practitioner, who has sold his practice, shall not practise within three miles of the residence of the vendor for five or seven years.

It would, therefore, appear that the authorities of Nursing Institutions would be quite within their legal right in making such an agreement with their Nurses. But we hold that in one important particular the cases are not identical, and that, therefore, it would be unfair for Institutions to make this demand upon their Nursing staff. In the case of medical men buying and selling a practice, the stipulation has been held to be valid because the absence of the departing practitioner is distinctly a necessary part of the consideration received for the purchase money. In the case of Nurses, inasmuch as this condition does not hold, and as they, throughout their service, are sources of profit to the Institution, and in no sense partners; and as, moreover, their area of work is not like that of a medical man confined to a restricted area, it would seem to be unfair to make such a condition with them. The result, of course, to the Nurse, of being compelled to cease working for doctors or for patients who have learnt her value, and whose ways and methods she has acquired, is distinctly a hardship to both sides.

The only conclusion, however, in the present state of the law, and the only counsel we can offer to those who have sought our advice on the matter, and to other Nurses who may be similarly

situated, is that they should decline altogether to tie their hands by entering into such a stipulation. It might possibly prove in time to be most detrimental to the Nurse if she had consented to such an undertaking, because having signed such an agreement she is clearly, morally, if not legally, bound to abide by it.

WOMEN DOCTORS IN BOSNIA.

ALL women, especially Nurses, all Doctors and all men who realise that the health or ill-health of any person has far more than an individual or even local effect, must be rejoiced to hear that, on behalf of the Government of Bosnia, a document was issued last week anticipating improvements in the sanitary condition and health of the female populations of Mohammedan countries through the influence of lady doctors. As is well known, Mohammedan women are, on religious principles, closely immured in their harems, and treatment by men is regarded as intolerable: They will undergo any suffering rather than submit to such degradation. Of course, there are Nurses and "wise women," whose vast ignorance is supplemented by superstition and prejudice. These, doubtless, often cause more disease than they cure or ameliorate. Anyhow, we know that a high death-rate prevails. Cholera and such-like zymotic diseases hang like a cloud over the people, ready to punish, not only the evil, but the good. So far as the women and the remedying of sanitary and health conditions around them are concerned, the only hope lies in the highly-educated, highly-skilled lady doctors; and the Bosnian Government is endeavouring, we are told, to improve matters, by increasing their number. There are already two qualified medical women in practice. Last year one of these attended over 520 women and children, together with thirty male patients. But this is a mere drop in the ocean; a mere unit amid a vast horde. Till sanitation and hygiene are subjects more understood by the Moslem world—and we firmly believe that much can be done in this direction by the influence of an adequate number of enlightened medical women and Nurses—we shall continue to hear from time to time of such ghastly mortality that makes even the stoutest hearted and most indifferent shudder to think of it. In regard to the annual pilgrimage to Mecca, it is said that about twenty thousand lives were lost, chiefly from cholera, last year, in the course of a single month. Much can be done by improving the surroundings and health of the women, and through them the physical well-being of the race. The *raison d'être* of the lady doctor is fully established, particularly in regard to the women of Eastern countries. Would that her numbers were increased even a hundredfold in those lands. There would be work enough and to spare for them to do.

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