

other cause. The practical point for Nurses to remember in these cases is that it is no use to attempt to allay the thirst, as is so frequently done, by permitting the patient to suck small pieces of ice, for it is a clinical fact that this often increases the thirst to a very marked degree. The simplest and most effective method of relief is to allow the patient, now and then, to fill the mouth quite full of warm water, and after retaining it for a few moments to expel it again.

#### STEAM AS A HÆMOSTATIC.

The well-known fact that boiling water is one of the quickest and most reliable means by which bleeding can be stopped, has led to the adoption of a new method of attaining this end, especially in cases of hæmorrhage from the uterus after labour. A fenestrated sound is passed into the cavity and is connected with an apparatus which gives off steam at about 212°. The effect, it is stated, is immediate—hæmorrhage ceasing at once; and, what is more surprising, the process appears to be absolutely painless to the patient. Experiments have been made which prove that one minute's application of the steam causes the mucous membrane of the uterus to be covered with a thin pellicle of coagulated albumen, which, to some extent, would account for the beneficial result of the treatment in checking hæmorrhage. The remedy is a very valuable one, for the Obstetric Nurse especially, to note and remember.

#### CÆSARIAN SECTION AFTER DEATH.

An interesting case has been recently placed on record of a woman who was brought into a Lying-in Hospital in Germany, dying from heart disease, and well advanced in pregnancy. Directly the movements of the heart ceased, Cæsarian section was performed, and the child was very rapidly extracted. It weighed under four pounds, was born asphyxiated, but was speedily resuscitated; however, it died on the fifth day of sheer weakness. It is an important case, because it has been, for centuries, a much debated question as to the measures which should be adopted to save a living foetus in the case of a dying mother; whether labour should be brought on, or whether Cæsarian section should be performed after death. Against the latter course, it is urged with much force that under such circumstances, as in the case just narrated, the child would almost certainly be born asphyxiated. Against the former course, however, the still stronger objection is brought that premature induction of labour in such cases takes away the woman's only chance of a peaceful death. It is, therefore, in most cases, the custom to perform Cæsarian section as soon as death occurs, and the case just noted shows that, even in the most hopeless case, the life of the child may perhaps be saved.

## Reflections

FROM A BOARD ROOM MIRROR.



A SUCCESSFUL meeting was held last Thursday at the Middlesex Hospital—Mr. H. CUSTANCE (Secretary of the Metropolitan Hospital Sunday Fund) presided, and amongst those present were: Lord SANDHURST (Chairman of the Weekly Board), Sir LIONEL PILKINGTON, Bart. (Vice-President), Mr. FRANCIS HOARE, Mr. G. J. MAJORIBANKS (Treasurers), Canon ACHESON, Mr. W. H. BURROUGHS, Sir RALPH THOMPSON, Mr. J. W. HULKE (President of the Royal College of Surgeons and F.R.S.), Colonel NEEDHAM, Dr. COUPLAND, Mr. KEGAN PAUL. Mr. CLARE-MELHADO, the Secretary-Superintendent, stated that the structure of the new operating-theatre was progressing. A slight variation had been made in the original plan, to minimise the noise which, under the previous arrangement, seemed possible, by the substitution of a stone for a wooden staircase leading to the students' gallery. A design for a glass instrument case on the most improved and scientific principles had been approved and ordered at a cost not exceeding £80, and other necessary fittings and appliances have been put in hand to be in readiness immediately the new theatre is fit for use.

The Convalescent Home at Clacton-on-Sea was making its appearance, and it was under consideration whether electric light should be installed therein. Funds were coming in for the proposed new wing for female cancer patients. The Board were gratified to announce that an unexpected and munificent legacy of £5,000, duty free, had been bequeathed to the general funds by a late Governor of the Hospital, Mrs. MATILDA PILCHER, of Taviton Street, Gordon Square. Many other donations and bequests were announced, including a sum of £200 in respect of the late Mrs. MARY EDWARD'S bequest to the cancer fund. During the past quarter 470 medical and 556 surgical cases had been treated in the Hospital, 666 cases being discharged cured, while 76 died, 30 left at their own request, and 254 remained in Hospital. In the out-patient department 9,226 patients were treated, with a total number of attendances of 25,403. Lord SANDHURST, in thanking the Governors for the vote of thanks they had accorded to the Weekly Board, said it was their endeavour to maintain, not only the efficiency of the Hospital, but the efficiency of the medical school as well.

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In the course of the meeting, a Governor present submitted the suggestion that the trained Nurses of

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