

how are they to be carried out? Midwives are needed for crowded city parishes and lonely country districts, the pay is small, the work very laborious and trying, needing the best of health and strength. Now about your average three years' Trained Nurse; after her long and expensive training, and the comfort; and lack of personal responsibility to which she is accustomed in her Training School, will she perform the duties of a Midwife to her own satisfaction and happiness in these localities—or will she not? After many years' experience in this particular branch of the work, I am of opinion that very few thoroughly Trained Nurses will work as Midwives even after gaining the special training in that branch of work. Now they can practise after a short term of training, and the conscientious women do very well, and do not mind the hardships. I fear the suggestion to Register Midwives as obstetric Nurses will "end and not mend" them. It is a pity that State Registration has been agitated for, as every year the class of women training for the work gets better and better, and in a few years a supply of really well educated and efficient Midwives would have superseded the much depreciated illiterate stamp. Now our whole system of education will be interfered with, and drastic reforms instituted which will be greatly to the loss of the funds of Lying-in Hospitals."

We quite agree with our correspondent that there are many difficulties to be encountered before this difficult question of legislation for Nurses and Midwives is satisfactorily arranged to meet the views and requirements of the majority, but being of a sanguine disposition, we have no doubt, with earnest determination upon the part of those interested in the question, that a happy solution *will* be found.

A DISCUSSION has been going on in a contemporary, as to whether doctors and Nurses should deceive patients as to their condition, and if so, how far it is justifiable to do so. Letters have been written on either side, with eloquence for and against. A question has also been raised as to whether sick people should be deceived as to the drugs they are taking. It is well known that many patients conceive a prejudice against or contract a dislike towards certain medicines which may be indicated for them. Under these circumstances may they be deceived for their own good and the means justified by the end?

One Nurse thinks the solution of the difficulty is solved in the following extract from her letter, "I can only say, dear sisters, let us do the very best we can for the good of our patient, for the upbuilding and uplifting of our profession and for the glory of God. And if the time comes when we must deceive, let us each and every one of us take it to Jesus." We can only say that we think neither the interests of religion

nor the profession of Nursing can be served by such hypocrisy.

A RESOLUTION passed at the recent British Medical Congress was:—"That the employment of unqualified assistants in visiting patients is injurious to the interests of the public as well as to those of the profession." We hope that the gentlemen who unanimously carried this resolution are as determined to exclude untrained and uncertificated Nurses. These are the worst kind of "unqualified assistants" that the medical man can have.

WE do not consider the argument against young women becoming Nurses which recently appeared in a religious paper is worthy of answer. When a woman writes that "all girls are pure white lilies, and cannot bear exposure to an impure atmosphere without their delicate sensibilities being blinded," there is very little to be said excepting that the sooner such lilies fade and become of some use in a world where so much sound good work remains to be done, the better for the community. We should describe such "lilies" as useless weeds.

THIN "rubber tissue" gloves have recently come somewhat extensively into use in the United States, to be worn by surgeons when making explorations in offensive cases. For rectal examinations in case of cancerous or morbid growths, the value and cleanliness of these gloves can hardly be over estimated. The thinness of the rubber prevents the gloves from being a hindrance to the sense of touch, and from its small bulk interferes in no way with examinations. They are also of invaluable service in the conducting of *post-mortems* and in pathological work, where offensive morbid growths have to be handled with grave possible dangers resulting to the investigator. Although so fine and thin they bear sterilisation by steam or disinfection with strong carbolic acid or bichloride of mercury. So far, we have not seen them in use in England, but have no doubt their usefulness will lead to their adoption here.

PRIVATE NURSE writes:

"I see from last week's RECORD that a Nurse has been giving a few hints about sick-room diet. May I say that I have just finished nursing an operation case, where the patient had great gastric irritability. She asked the doctor if she might have some fresh butter-milk, a request he at first refused, thinking it would prove too heavy. Finally, he allowed it. I took the precaution of icing it, and found the result admirable. She retained it and thrived on it after we had failed with most kinds of diet."

[previous page](#)

[next page](#)