The Matrons' Council.

A PRACTICAL DEMONSTRATION ON GYNÆCOLOGICAL NURSING.

By Miss Bristow.

Sister of Martha Ward, St. Bartholomew's Hospital.

(Continued from page 8.)

UPON the conclusion of Miss Bristow's lecture, she was invited to show and explain the uses of the various instruments and appliances and dressings to which she had alluded, and which were on view at the demonstration.

Miss Bristow remarked :—"In showing you the glass catheter, I would ask you to notice that it is made after the pattern of the soft rubber one, slightly curved at the closed end, with an eye at the side. To the open end is attached from four to six inches of india-rubber tubing. This is simply to direct the urine into the receiver.

The improved metal end attached to a Higginson's syringe, is also worthy of notice, avoiding, as it does, all fear of injuring the anus as it is passed through. You will observe there is no sharp edge to the plated nozzle, as in the case of a bone nozzle. It is perfectly rounded off, so that it is quite impossible that it can graze and wound the sphincter in any way, and a patient may be saved weeks and even months of pain and discomfort, for, as will be easily understood, there is no part more difficult to heal, and the smallest scratch is often more troublesome than a larger wound in that part.

The large glass irrigator is used when, for chronic constipation, the large enemas of from four to six pints are ordered to be given by gravitation ; they are most effectual. They may be given once or twice per diem, En sap. Oiv., to which may be added ol. olive Oij. thoroughly mixed together and slowly passed into the bowel by means of a catheter attached to the tube from the irrigator.

The irrigator must be placed not higher than one foot above the rectum *unless specially ordered*, as it is estimated that at the height of two feet the force of water would be sufficient to rupture the bowel.

A Nurse can make her patient quite comfortable over a bed pan by supporting her with pillows so that there is no undue strain upon the muscles.

The great difficulty is in keeping the enema at the right temperature. This is best done by dividing the quantity, keeping one half very hot, and adding a little from time to time to that already in the irrigator; by this means the temperature can be kept at 100° or thereabout.

Should there be more than ordinary pain the enema should at once be discontinued.

The giving of continuous nutritive enemata of Oj. or more can be arranged in the same way except that the vessel which contains the enema should stand within a larger one at the side of the bed just high enough to give a slow current. By introducing a catheter No, 8 or 10, high up into the bowel, the nourishment, if properly regulated, will be partially absorbed as it passes, and its passage being so slow, there is not the slightest irritation, and a patient but rarely complains of discomfort,

The larger vessel should be kept filled with water of sufficiently high temperature to keep the enema at about 100°. It will be understood that these enemata are only given in extreme cases, therefore a Nurse should endeavour to arrange everything in the most effectual way, but with the least possible distress to her patient. I need scarcely add that enemata of this kind should always be peptonised."

her patient. If need scattery and that chimita of this kind should always be peptonised." The dressings exhibited included various methods of packing the vagina—the "kite-tail" plug, which is simply made by little rolls of the best absorbent wool, tied securely at intervals of six inches along a piece of narrow tape, and which can be thus introduced with ease and safety into the vagina through the speculum in cases of hæmorrhage. Another efficient packing is made of alembroth gauze, folded like a cravat, six yards long and five inches wide.

The abdominal bandage in use at St. Bartholomew's Hospital consists of 4-inch breadths of fine flannel, not stitched together at the back, as by this means it is considered that pressure can be more exactly obtained. The advantages of an abdominal belt of exquisite workmanship, made by Miss Reeve, of St. Bartholomew's Hospital, was generally approved.

The flat sponges, in sizes varying from about four to eight inches across, and made of a white crosswoven cellular cloth, are preferred by some operators to the marine sponge; they are less expensive than the best quality of the latter, are easily made, sterilised, and can be burnt after use.

A Keith's dressing complete was exhibited, and also the new "Ellison" breast bandage, made of strong white linen. It is most excellent, giving not only support but pressure, and that from the shoulder, thus acting equally well as a surgical bandage, and also during lactation. This bandage was designed and patented by Miss M. A. Ellison, obstetric Nurse, and we hope to show a sketch of it at an early date.

Upon rising to propose a vote of thanks to the Lecturer, which was heartily accorded, Miss Isla Stewart dwelt upon the value of the extension of the "Practical Demonstrations of Practical Nursing" as a mode of education for Nurses. The Matrons' Council, in arranging for three such demonstrations during the present session, hoped that they would meet a want, and, to judge from the very full and representative meeting, their anticipations had been realised. The Matrons' Council, though a young society, was very anxious to help in every way in their power to raise the standard of Nursing and Nursing education, and to keep in touch with Nurses and their needs.

Miss Stewart deplored the present chaotic condition of Nursing education, and, in consequence the unsatisfactory industrial condition of Nurses; and she was of opinion that the remedy lies in the hands of the great body of Nurses and Probationers forming for themselves a high ideal of their work and duty, and in straining to attain it helping their Matrons to effect necessary reforms.

The next Practical Demonstration will take place on February 27th, in the Medical Societies' Rooms, Chandos Street, W., which will be conducted by Mrs. Bedford Fenwick, and will treat of the "Nursing of Operations on the Intestinal Canal." If any Nurse has seen used any special appliance, which she deems of value, for the comfort of the patient undergoing such operations, we shall be pleased to hear from her on the subject.



