

meanwhile being kept absolutely at rest. When a varicose or other ulceration of the leg occurs, the first necessity is to make and keep the surface scrupulously clean, then to give the weakened skin and vessels around it firm support. The best method, therefore, of nursing such cases is to cleanse the surface two or three times a day with water which has been boiled, and to which Condy's Fluid or Sanitas has been added; a small pad of oiled lint, or of any ointment ordered by the doctor, is then applied over the ulcerated surface, and then a bandage is applied from the toes over the foot and ankle and up the leg above the level of the ulceration. If the material of this bandage be of perforated rubber, the pressure afforded will be more uniform, and therefore the good effect will be more marked. The cure is also assisted if the patient can be persuaded to rest completely, with his leg raised above the level of the body, so as to assist the return of the venous blood through the limb. In some cases of extremely obstinate ulcers, the application of oxygen gas, or of oxygenated water to the surface, has been attended with excellent results. But for ordinary district nursing work, of course, more simple and homely remedies are alone available.

THE PULSE.

THERE are two or three practical facts connected with the pulse which a nurse should always remember. It should always be counted and charted as carefully as the temperature; because it is often a much better evidence of the patient's condition than is afforded by the temperature of his skin. The patient's thoughts should, if possible, be distracted whilst the pulse is being taken; because with many people, especially those who have been weakened by illness, the rapidity of the beats may increase very considerably from mere nervousness. The pulse should be counted for a full minute; because, for the same reason, it often varies considerably in its rate. A slow, quiet pulse is always a good sign; a quick, flickering, pulse is always a danger-signal. A pulse which is easily compressed by the fingers, so that its beats cannot be felt, is usually evidence of a feeble heart-action; and, on the other hand, a hard, bounding pulse often reveals the presence of some inflammatory disorder, or of a severe valvular disease.

Annotations.

MALE NURSES.

COMMENTING upon Lady Priestley's paper in the *Nineteenth Century* upon "Nurses à la mode," the Editress of the *Queen* upholds the view that "men should be nursed in their own homes by male attendants, instead of by young women who appertain more or less to their own class." In the first place we should like to know where this new order of nurses is to be trained. There is at present no training ground for them, except in the Military Hospitals, where the orderly combines with his hospital duties military drill, gardening, kitchen work, and other services which are certainly not compatible with his efficient training as a nurse. The unsatisfactory character of the training given to orderlies is, in fact, one of the burning questions of the day, and it cannot be conceded that it is right to substitute attendants drawn from the ranks of orderlies for our highly trained nurses. But beyond the training given to orderlies there is none attainable by men, except that given in a few special hospitals, such for instance as the National Hospital for the Paralysed and Epileptic, Queen Square, Bloomsbury, where they are trained in the nursing of the special diseases treated in that hospital. The training ground, therefore, must be found before the ranks of trained nurses can be recruited from members of the male sex.

Such a training ground having been found, the question next presents itself as to where the men willing to submit themselves to the necessary restraint and discipline of a three years' training, are to be obtained. We believe that they will not come forward in any numbers to qualify themselves. The monotony and the irksomeness of nursing makes it an occupation unsuited for, and disliked by, the majority of men, and the vocation and aptitude for nursing are almost exclusively woman's heritage. We have during many years of professional life come across various types of the genus "male nurse." We have only met *one* out of them all who was thoroughly trustworthy. It will, therefore, be an ill day for the public when our fathers and brothers, husbands and lovers, are handed over to the ministration of their own sex in their hour of need and helplessness, and if the wifely jealousy, which Lady Priestley exposes, be the *raison d'être* of this most unwise suggestion, we think that the good sense of the greater number of Englishwomen would, after a very brief trial of the male nurse, demand the re-installment of the woman who knows, and for the most part admirably performs, her work in the sick room.

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