given with far more care, as the digestion is more enfeebled. It should be pushed to the point of overfeeding, if possible, and may consist of most liquid nourishments, rare or raw beef, eggs, prepared cereals, and sometimes green vegetables or fruit. That it is digested is the great feature, and as this process is always weakened it should One authority recombe constantly observed. mends washing the stomach frequently with salt solution, and giving "high enemas" with a view of ridding the system, as far as possible, of masses of indigested and unassimilated food, and also stimulating the lining of the intestinal tract. Continual rest in bed, with massage, is strongly recommended in extreme cases of melancholia; but with milder degrees, part of the day in bed, with the remainder spent in some occupation out of doors, if possible, may be more beneficial. For sleeplessness either hot wet packs or prolonged warm baths (from one-half to two hours-110 degrees), are usually successful, though mild hypnotics may be necessary.

As to the moral treatment during the acute stage, it is best generally to let the patient quite He cannot take an interest in others, he is unfit for labour, either physical or mental, amusements are painful to him, and his reason and judgment are both impaired. To surround him as nearly as possible with a neutral atmosphere is the best treatment, and, as in cases of mania, one should never argue with him in regard to his delusions, though occasionally they should be firmly and kindly denied. Sympathy may be given a melancholiac and will be greatly appreciated, and hopefuness should be inspired in every way possible. It is wonderful how much effect those about them may exert over the minds of the insane, and a nurse has it in her power to materially aid or retard a recovery by her moral attitude toward her patient. All sources of irritability should be removed as far as she is able, and her whole aim should be to govern him by kindness, patience, firmness, and sympathy. This fact is far too little understood and practised, and the tendency to play "with the mind diseased," to make the patient express his delusions for the amusement of herself or others, cannot be too severely criticised and condemned.

When the recovery of these patients is once established, regular physical occupation, as walking, bicycling, playing golf, anv out of door exercise or some useful manual labour should be begun and encouraged. "Substitution of thought," as soon as the patient is able to be diverted, should be sought in every way, and to aid him in his efforts to forget his own depression is of the utmost importance.

(To be continued.)

Murses and the Census.

The Census returns have just been published in detail for the County of London, and they contain statistics of the utmost interest and importance for the nursing profession. For the first time, midwives are separately enumerated, sick nurses and invalid attendants being now grouped together. Ten years hence, in the next Census returns it may confidently be predicted that registered nurses will be placed in a class by themselves.

In 1891 there were 53,057 persons returned female midwives and sick nurses in as female England and Wales, of whom 54 were between 10 and 15 years old; 4,983 were between 15 anl 25; 18,973 were between 25 and 45; 21,989 were between 45 and 65; and 7,058 were 65 years old and upwards. At the same time, there were for men following the same calling. the women, 326 were foreigners, 22 being Russian, 35 were Polish, 2 Norwegian, 4 Danish, 20 Dutch, 15 Belgian, 141 French, 74 German, and 3 Austrian; while of the men 28 were foreigners. In London alone, there were 162 men and 14,397 women engaged in these occupations; that is to say, 27 per cent. of the men and only a fraction above the same percentage of the women in the calling were working in the Metropolitan area.

Stated in round numbers, one female out of every 300 in England and Wales was working in 1891 as a sick nurse, midwife, or invalid

attendant.

Turning now to the present returns, we find further additional information as to marriage given on this occasion, and, as already said, midwives are separately enumerated. The total female population of Engalnd and Wales was last year 16,804,000; the total female population of the County of London was 2,394,000, or very nearly one-seventh of the former. Of the latter 682,000 were below the age of 15, and do not enter therefore into our calculations. Out of the remaining 1,712,000 women in London above the age of 15, no less than 15,841 were returned as sick nurses or invalid attendants, or nearly 9 per cent. Of these 8,977 were unmarried, and 6,864 were married or widows. Taking these at their different ages, 152 of the unmarried and only 25 married were between 15 and 25; 6,369 single and 1,522 married were between 25 and 45; but only 968 unmarried and no less than 4,116 married were between 45 and 65; and 104 of the former, as against 1,068 of the latter, were between 65 and 75. And no less than 9 unmarried and 133 married above the age of 75 were still working in this capacity. Among men last year there

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