

growth of other germs in the intestinal canal heighten the virulency and reduce the resistance of the system to the typhoid toxin. Convulsions in typhoid are not of common occurrence, and in many of such cases meningitis is suspected and true meningitis does exist, due to the streptococcus, to the pneumococcus, or, in rare instances, to the bacillus typhosus; in other cases only a simple congestion of the meningeal vessels is present and in several instances the *post-mortem* findings were negative. Treatment largely consists in keeping the patient on a milk diet and in controlling temperature by baths and sponging. Theoretical conditions appeal strongly for intestinal antiseptics, but clinical evidence in their behalf arouses no enthusiasm. Too rigid observance of milk diet is to be decried, as often unpleasant consequences follow the continued use of a food which the bowel clearly will not dispose of. It has been shown that the urine of 25 per cent. of typhoid patients show the bacillus typhosus weeks, months, and even years after convalescence; the statement explains the danger of dissemination it entails; in every instance under experiment, the use of urotropin caused disappearance of the germ in a short time, and its use for ten days at the end of the fever is advised. As no harm has been noticed in prolonged use of the drug, 5 grs. three times a day for three or four weeks may be given, beginning as the temperature approaches normal. The possibility of infection by means of the urine of a typhoid patient is one which nurses should note.

ETIOLOGY OF BERI-BERI.

Dr. Patrick Manson (*New York Medical Record*) says that beri-beri is clinically a distinct form of multiple peripheral neuritis. He indicates symptoms which distinguish it from other pathological groups, with neuritis as their leading clinical phenomenon. He contends that the immediate cause of beri-beri is a toxin produced by a living germ which operates in some culture medium located outside the human body. It does not enter the body in food or drinking water, but is conveyed to man by the air, or through the skin, by contact, or by some insect which inserts itself under the skin. This view is opposed to the generally accepted opinion that the consumption of rice has much to do with the causation of beri-beri. The origin of beri-beri has baffled scientific research for long, and Dr. Manson's opinion will be welcomed by many.

Appointments.

MATRONS.

Miss Mary Elliott has been appointed Matron of the Isolation Hospital, Watford. She was trained at St. Thomas's Hospital, London, where she afterwards remained for five years as Nurse. She has also held the position of Sister and of Night Superintendent at the Fever Hospital, Monsall, and of Matron at the Fever Hospital, Blackburn.

Miss L. Morgan has been appointed Matron of the Harrogate and Knaresborough Joint Isolation Hospital. She was trained at the Royal Infirmary, Newcastle-on-Tyne, where she afterwards held the position of Head Nurse. She was also Charge Nurse at the Eston Accident Hospital, and Matron at the Eston Sanatorium. She has had some experience of private nursing.

Miss Mary Annie Davies has been appointed Superintendent Nurse and Matron of the Hertford Memorial Hospital for Infectious Diseases, Alcester. Her last appointment was that of Assistant Matron at the Alcester Union Workhouse.

Miss Jane Ord has been appointed Nurse-Matron at the Westminster Cottage Hospital, Shaftesbury. She was trained for three years and certificated at Guy's Hospital, and holds its silver medal for five years' service. She has held the position of Sister at the Norfolk and Norwich Hospital, and at the General Hospital, Tunbridge Wells, and of Matron at the Eye and Ear Hospital in the same town.

Miss Helen Batchelor has been appointed Matron of the Government Civil Hospital, Mauritius. She was trained at the London Hospital, and holds the certificate of the London Obstetrical Society. She has worked in the Hong Kong Civil Hospital, and also at Wei-hai-wei.

SISTER-IN-CHARGE.

Miss H. N. Rutt has been appointed Sister-in-Charge of the Infant Orphan Asylum, Wanstead. She was trained at the Infirmary, Leicester, and has held the position of Theatre Sister at the Infirmary, Lewisham, and Sister at the Great Northern Central Hospital, and at the East London Hospital for Children, Shadwell.

SISTER.

Miss Annie W. McCloskey has been appointed Sister of Women's Wards at the General Infirmary, Macclesfield. She was trained at the Royal Hospital, Sheffield, and has had some experience in private nursing in London and in connection with a private Surgical Home in Glasgow, and for the last fourteen months has held the position of Sister at the Royal Hospital, Sheffield.

SUPERINTENDENT NURSE.

Miss Mary J. Biggin has been appointed Superintendent Nurse at the Warrington Union. She was trained in the Sheffield Union Infirmary, where she held the position of Superintendent Night-Nurse.

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