

## Appointments.

### LADY SUPERINTENDENT.

Miss Brenda M. Hoare has been appointed Lady Superintendent of the Afzal-Gunj Hospital, Hyderabad, Deccan. She was trained at St. Thomas's Hospital, London, and holds a massage certificate. She was recently a member of the Army Nursing Service Reserve.

### MATRONS.

Miss Mary E. Froggatt has been appointed Matron of the Urmston Cottage Hospital, Manchester. She was trained at the Royal Hospital, Salford, in which institution she has also held the position of Sister. She has also had experience in private and district nursing.

Miss Julia Simpson has been appointed Matron of the Royal Hospital for Sick Children, Glasgow. She was trained at that hospital and at King's College Hospital, London, and has held the position of Sister at the Children's Infirmary, Liverpool, and at the Royal Infirmary, Bristol.

### ASSISTANT MATRON.

Miss Stuart Cameron has been appointed Assistant Matron of the City of London Hospital for Diseases of the Chest, Victoria Park, E. She received her three years' training at the Dumfries and Galloway Royal Infirmary, and has held the successive posts of Sister at the Children's Hospital, Cardiff, Day and Night Sister at the Royal Infirmary, Preston, and Home Sister at the Union Infirmary, Firvale, Sheffield.

### SISTERS.

Miss Ellen Connelly has been appointed Sister at the Poplar and Stepney Sick Asylum. She was trained at St. Olave's Infirmary, Southwark, and has held the position of Charge Nurse at the Hospital of the Metropolitan Asylums Board, South Wharf, Rotherhithe.

### NIGHT SISTER.

Miss Isabella Rippon has been appointed Night Sister at the City of London Hospital for Diseases of the Chest, Victoria Park. She was trained for three years at the Royal Albert Edward Infirmary, Wigan, where she also held the position of Sister; she has also been Ward and Theatre Sister at the County Hospital, Newport, Monmouthshire; and Sister of Phthisical Wards at the East Dulwich Infirmary.

### SUPERINTENDENT NURSE.

Miss Elizabeth Allen has been appointed Superintendent Nurse at the Union Infirmary, Christchurch. She was trained at the General Infirmary, Stafford, and at the Whitechapel Infirmary, and has held the position of Superintendent Nurse at the Union Infirmaries of Stroud, Billericay, and Wolstanton and Burslem, and at the Prestwich Union.

## Treatment of the Different Varieties of Anæmia.

By H. W. SYERS, M.A., M.D. (Cantab.),  
*Physician to Out-Patients, Great Northern Central Hospital.*

Anæmia is a symptom, or rather a physical sign and a symptom, which is of extremely common occurrence. Apart from the well-recognised form of the complaint which is so common in young girls and women, it is met with in the course of many and various maladies, of which kidney disease and phthisis are well-marked examples. Hence the treatment of this malady is a matter of very considerable importance.

Now it may be at once conceded that there is one remedy which is of general application in anæmia, that remedy being, of course, iron. It is easy, therefore, to dismiss the treatment of this complaint as being self-evident and as not requiring any special consideration or thought. This is, however, a very erroneous view of the matter, and one that not seldom leads to a striking want of success in practice. The form and the combinations of iron used in the different kinds of anæmia vary greatly, according to the clinical indications, and the administration of one variety of ferruginous treatment may be altogether inappropriate in another instance of the affection in which the cause of the malady is different.

As the result of a large experience of the disease I would point out in what cases such and such a preparation of iron I have found successful, and this I propose to do in the following remarks.

In chlorotic girls, when constipation is a marked symptom, I have found a most effective treatment to be that with half an ounce of the compound iron mixture (Griffiths' mixture) combined with half an ounce of the compound decoction of aloes. This is, it must be confessed, a nauseous and unsightly combination, but of its usefulness there can be no sort of doubt. If the patient can be induced to take it, then good results will certainly follow.

In cases in which constipation is a less prominent symptom, a mixture of iron and arsenic is extremely useful. The sulphate of iron I give usually; the dose is four or five grains given with three or four minims of the hydrochloric solution of arsenic and a few drops of dilute sulphuric acid. This mixture, taken three times a day after meals, together with a five-grain aloes pill at night, will always be found to act satisfactorily and speedily. When the digestive functions are much debilitated and dyspepsia is complained of, I always give a milder preparation of iron, of which the ammon. citrate is a very favourite form with me. This in ten-grain doses, with three or four drops of tincture of nux vomica, often acts very well. And the reduced iron—*ferrum redactum*—is also well worthy of trial under

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