

are clothed, and so are less likely to be bitten by the fly, and also they less often go into the fly areas, and do not allow the flies to settle on them and bite them as do the natives."

It is, therefore, unlikely that the disease and death caused by this fly should ever attain the same dimensions among European as among native races, some of which are in danger of being altogether wiped out. At the same time, the risk must be taken into account by those residing in the tsetse-fly areas, and all possible precautions against the bite of this pest be taken.

RUBELLA.

Dr. Dillingham, in *American Medicine*, believes in scarlet fever, measles, and rubella, but does not believe in the existence of "the fourth disease." The author quotes with approval this saying by Griffith: "The disease (rubella) may be divided into two types, resembling mild measles, and then resembling mild scarlet fever, and then gradations from these types to either extreme: (1) Eruption, in which the spots are for the most part nearly or fully the size of split peas, more or less grouped, and having greatest resemblance to measles; (2) rash, confluent in patches, or universally; not elevated, uniform redness simulates scarlet fever. Careful investigation often reveals a few papules and general diffuse redness. It is best seen on the wrists and fingers. The author compares in detail the three diseases under discussion, and gives the chief points on which the differential diagnosis must rest. He concludes by saying that to one with large experience in contagious diseases the differential diagnosis of rubella should not usually give much difficulty. But even one with the greatest experience, although he carefully consider every factor, will occasionally fail to make the correct diagnosis in cases where measles is the confusing element."

ADENOIDS AND NOCTURNAL INCONTINENCE.

The *New York and Philadelphia Medical Journal* says:—"Melzi reminds us that adenoids in the pharynx are in some way connected with nocturnal incontinence in children. Various theories have been advanced to explain this connection, but the fact remains that the removal of the adenoid growths causes a cessation of the incontinence. The author reports two striking cases, and advises the practical physician to think of adenoids whenever he meets a case of nocturnal incontinence."

Appointments.

MATRONS.

Miss Margaret Schwappe has been appointed Matron of the Wallsend and Willington Quay Joint Fever Hospital. She was trained at the Royal Infirmary, Newcastle-on-Tyne, and held the positions of Ward Sister and Night Superintendent in the same institution. She has also held the appointment of Matron of the Private Hospital, Hartlepool, and Sister-in-Charge of the Nurses' Home, Haworth, Keighley.

Miss Champley has been appointed Matron of the Scarborough Cottage Hospital and Convalescent Home. She was trained at the Royal Infirmary, Edinburgh, and has held the position of Ward and Home Sister at the Royal Infirmary, Hull, and of Matron of the Concentration Camp, Wynburg, South Africa.

Miss Evelyn Hurlbatt has been appointed Matron of the Victoria Cottage Hospital, Woking. She was trained at Guy's Hospital, and has held the positions of Matron of the Reynard Cottage Hospital, Willingham, Gainsborough, Matron of the Kendal Memorial Hospital, and Lady Superintendent of a private nursing home at Norwich.

Miss Edith Blacker has been appointed Matron of the Cottage Hospital, Dartmouth. She was trained at the Taunton and Somerset Hospital, Taunton, and has held the positions of Staff Nurse at the Rous Memorial Hospital, Newmarket, Charge Nurse at the Park Hospital, Hither Green, Lewisham, and Staff Nurse at the District Hospital, Yeovil.

SUPERINTENDENT AND DEMONSTRATOR.

Miss Florence M. Boyce has been appointed Superintendent and Demonstrator to the nursing staff at the Leavesden Asylum, Herts. She was trained at the North London Hospital for Consumption, and at the Mile End Infirmary, and has worked as a private nurse in connection with the All Saints' Nursing Institution. She has also held the position of Lecturer on Nursing, Sanitation, and Hygiene under the London School Board, and of Sister in charge of the new annexes at the Tooting Home. She holds the certificate of the London Obstetrical Society.

SISTER.

Miss Evelyn Ward has been appointed Sister at Addenbrooke's Hospital, Cambridge, in which hospital she received her training.

NIGHT SUPERINTENDENT.

Miss E. E. Baldry has been appointed Night Superintendent at Addenbrooke's Hospital, Cambridge. She was trained at the London Hospital, Whitechapel, and holds the certificate of the London Obstetrical Society. During the late war in South Africa she worked as a member of the Army Nursing Service Reserve in military hospitals in that country.

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