could be no doubt of the moral and physical benefits received when such children as these were sentfora fortnight or more into the country. It is well that London children should be placed for a time among country sights and sounds, where Mother Nature can whisper her secrets in their ears, and apply healing balms to wounded spirits while the physical system is absorbing life-giving ozone.

Appointments.

LADY SUPERINTENDENT.

Miss K. Maud Moore has been appointed Lady Superintendent of the Children's Hospital, Nottingham. She was trained at St. Bartholomew's Hospital, and is a member of its Nurses' League. She has held the position of Ward Sister at the Hospital for Sick Children, Great Ormond Street, Matron of its Convalescent Branch at Higbgate, Matron of the Royal Hospital for Children and Women, Waterloo Bridge Road, and Matron of the Gordon Hospital, Vauxhall Bridge Road, S.W. She is a member of the Matrons' Council.

MATRON.

Miss Annie Edmonds has been appointed Matron of the Isolation Hospital, Frimley Green, Surrey, under the Frimley Urban District Council. She held the position of Nurse for six and a-half years at the Fountain Fever Hospital under the Metropolitan Asylums Board, and of Ward Sister at the City Hospital, Little Bromwich, near Birmingham.

Welcome to the American Aurse Delegates.

Miss Mary E. Thornton, Secretary of the Nurses' Associated Alumnæ of the United States, will leave New York with a party of about fifty trained nurses next week, who will spend a few days in England on their way to attend the International Congress of Women and the meeting of the International Council of Nurses in Berlin in the middle of June.

It is proposed to entertain the American nurses on a convenient day during their visit to London, and Mrs. Walter Spencer has been good enough to act as the Secretary of a Committee which she is now organising to carry out the arrangements.

Those of us who enjoyed the kindest hospitality from American nurses during our visit to the States in 1901 will, we feel sure, be eager and willing to help Mrs. Spencer to make the reception of our American colleagues of the most cordial description.

Those who would like to help to make the occasion a great success might address her at 35, Brook Street, Grosyenor Square, W.

۹-

Infant Incubation—A Description of the System at the Chicago Lying-in Bospital.*

By JOSEPH B. DE LEE, M.D., Chicago,

Professor of Obstetrics, North-Western University Medical School; Attending Obstetrician of Mercy, Wesley and Provident Hospitals; and Obstetrician of Chicago Lying-in Hospital and Dispensary.

In the middle ages premature infants were wrapped in the skin of a sheep, with the wool on, or put in a jar of feathers. Later, they were enveloped in cotton. Sterne (1), in the middle of the eighteenth century, relates how the child of a physician was raised by the "same artifice that one used to make chickens hatch in Egypt. He put his son in an oven, properly constructed, heated regularly, the temperature of which was regulated by suitable instruments." Nothing came of this suggestion.

In 1857 Denuce (2) described a double-walled bath tub, with water in the interspace, for the rearing of feeble infants. In 1866 Crede (3), of Leipsic, used an identical contrivance, though he did not publish it until 1884. In 1880 Jarnier had Odile Martin, a poultry-raiser of the Jardin des Plantes, construct an infant incubator on the plan of a chicken incubator. It was installed in the Maternité, and could hold several children.

Individual incubators were subsequently constructed, of which that of Auvard is one of the best of that period. It consists of an oblong wooden box heated by cans of water, with an opening for air at the bottom, a vent at the top containing a wheel to indicate the movement of the air, and a glass, sliding cover. The child is supported on a shelf, and a wet sponge is hung near by to keep up the moisture. Nearly all the incubators in this country are modifications of this form of apparatus.

The objections to all of these instruments are that they are of wood, and therefore harbour infection; they are clumsy; they have unhandy heating methods—*e.g.*, hot-water bottles or cans that are to be emptied and filled frequently; they have no automatic heat regulation, little provision for moisture, poor ventilation, and no provision for fresh uncontaminated air, so that often the air in the incubator, owing to the high temperature, is worse than that outside. Therefore infection of the child occurs, and many infants are better off out of than in the box. Some of these instruments are still on the market. They serve but one purpose—to keep the infant warm, and that may be accomplished as well with a shoe-box and hot-water bottles.

There are four main problems in incubator work. First, and easiest, the heating apparatus; second, the ventilation, of considerable difficulty, but of

* Read before the Chicago Medical Society.



