

plete post-aural operation in children. In young subjects, grafting seems to be peculiarly successful. Possibly this is to be accounted for by the activity of growth of the tissues of immature animals. With these exceptions, *i.e.*, young subjects and large cavities, I prefer generally not to graft.

Before closing these brief remarks, I wish to draw attention to one other point in the subject of operation on the mastoid. In dealing with cases of cholesteatoma, one well-known otologist has persistently advocated the leaving of what he calls the "cholesteatomatous matrix," on the ground that, being skin, it forms the lining for the cavity which the surgeon aims to obtain. I do not think that this opinion will be endorsed by any other aural surgeon of eminence. It is, to my mind, not only fallacious, but most mischievous. Cholesteatoma is an exaggeration of the normal desquamation constantly proceeding from epithelial surfaces, and, occurring as it does in the middle ear, which, owing to suppuration, has become invaded by epithelium from the meatus, is not a normal manifestation. The epithelial lining which constitutes the "cholesteatomatous matrix" is one which is manifesting a perverted function, and is, therefore, totally unfit to serve as the lining membrane of the cavity left by the radical operation. Consequently, it should most decidedly be removed and the cavity treated as one would treat that left by any complete post-aural operation.

A Central Board for London Hospitals.

The question of raising sufficient funds to maintain the hospitals of the metropolis on an adequate financial basis is one which is well-nigh the despair of those who are responsible for their management. The question of their organisation and control by a Central Board is once again offered as one of the solutions. This was proposed by the Select Committee of the House of Lords on Metropolitan Hospitals in 1892. The Charity Organisation Society has also urged the formation of such a Board. The latest suggestion for dealing with the ever-pressing problem of hospital support is that for every £1 voluntarily contributed the Government, from Imperial taxation, should add another.

There are at present three Central Boards for London, each dealing in its own way with the hospitals, but it must be realised that if hospitals accept either the help of Central Funds, or of the Imperial Government, they accept also control. No public body in these days will contribute funds for others to disburse. It will claim, and rightly, a share in the management.

The Quality of Thoroughness in Nurses' Work.*

By ISABEL HAMPTON ROBB,

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A little over thirteen years ago it was my privilege to greet for the first time a Baltimore audience and to become for a few years a resident of Baltimore City. And, like all others who have once lived within her borders or who have been in any way a part of the Johns Hopkins Hospital or University, I have always been eager to seize any opportunity that might afford itself of revisiting the place that has been endeared to me by work and association. So when Dr. Hurd did me the honour to ask me to address the graduates of to-day, the pleasant anticipation of finding myself once more surrounded by Johns Hopkins nurses, past, present, and future, and of being again in touch with Baltimore, was not to be withstood. I am only too well aware of the fact that the retrospect and forecast I may hold before you to-day may not contain the full measure of inspiration and wise counsel that you may have hoped for, nor delight you with the happy phrasing that might have been offered you by many others who would gladly have accepted the honour of addressing you in my place; nevertheless, I feel assured that no one could be found who is more profoundly interested than myself in your individual interests and work, or who could draw more closely to you in those mutual professional ties and common interests into which you are about to enter.

At that first gathering the Johns Hopkins nurse was conspicuous by her absence. She was still in the future; her place was still to be made in the hospital and household; her history page was still fair and unwritten. But two years later the first class of graduates stood, where you stand now, prepared to leave their hospital and to go forth to form a new factor in the life of this city, to become part of it for better or worse; and each year since a fresh class has been added to the first, until to-day our alumnae form a goodly host. How they have sped we of the household, who have watched their individual lives anxiously, know full well. The Johns Hopkins nurse has not only become a familiar presence in many homes both of the needy and of the well-to-do of this city, but to various positions in other cities and countries she has also carried the well-known name of her hospital and school, doing both, we trust, honour and credit.

For the graduate of to-day that first class must need have a special interest, for early in its formation there came into its ranks one who was destined

* An address to the graduating class at the Johns Hopkins Hospital Training-School for Nurses, May 28th, 1903. From the *Johns Hopkins Bulletin*.

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