

The meeting then terminated.

The Board will not meet again till the first week in October.

The conference as to the advisability of holding three or four examinations in the year was held on Saturday, July 29th, but the Press were not admitted.

We learn that the examiners of the Central Midwives' Board were somewhat surprised at the well-educated class of woman who presented herself for examination, many of them thoroughly trained nurses. It was also realised that not many of these skilled and certificated nurses were likely to adopt midwifery in poor districts as their profession, and that everything possible will have to be done to provide well-trained intelligent midwives to supply the places of the unskilled women who at present monopolise the work almost entirely.

Sir Walter Foster recently asked the President of the Local Government Board in the House of Commons whether he was aware that in some cases difficulty had arisen from poor women being unable to obtain assistance in their confinements in consequence of unregistered midwives having been warned not to attend such cases, and no others being available; and whether, under these circumstances, he would issue an order pointing out to the boards of guardians the duty of the relieving officers to grant midwifery orders to women destitute of the means of procuring medical attendance. Mr. Gerald Balfour answered that no case of the kind referred to had been brought to his notice, and invited Sir Walter Foster to furnish him with particulars of any cases of which he was aware, and he would cause inquiry to be made and would consider what action should be taken.

This Sir Walter Foster has done.

Practical Points.

Belladonna Poisoning. Can we, as nurses, be too often reminded of the well-known warning that "a little knowledge is a dangerous thing"? Can we be too often cautioned against the irresponsible employment of any powerful drug with no adequate understanding of its action and effects?

I have just come across what I will out of charity describe as "a serious misadventure."

A woman of middle age was not long ago discharged from a hospital after having undergone a free removal of the breast and axillary glands for a malignant growth. On her return home she suffered a good deal of discomfort in the region of the operation. She was, therefore, advised to apply belladonna, and she followed the instructions she received quite literally. Every morning and evening for three months she fomented her side with water as hot as could be borne, then painted the whole affected area with a mixture of belladonna and glycerine. The pain still continuing her adviser then applied a belladonna plaster of 12 in. by 6 in. She was feeling exceedingly unwell, suffering from nausea, dimness of vision, and an increasing feeling of weakness. This was ascribed to a derangement of the liver. The delicate skin over the seat of the operation broke down under the plaster, and a large open sore was formed. This occasioned acute discomfort. The patient was encouraged with Spartan recommendations not to be poor-

spirited, but to give the treatment a chance. When the plaster had been on for three days, a doctor had to be sent for, as the poor woman was so ill that her relations had become alarmed. All the symptoms of belladonna poisoning were present. Her face was flushed and swollen, her throat and tongue peculiarly dry, her eyesight dim; vomiting was frequent, her brain had become dull and confused; the characteristic rash was clearly marked on her back and arms; her condition was that of considerable prostration.

With truthfulness, I must explain that her adviser is not one who is qualified to appear on the Register that we are hoping before long to possess.

Every nurse who (*under orders*) is carrying out a course of belladonna treatment would do well to acquaint herself with the symptoms of belladonna poisoning, that she may not be tempted to mistake the warning of impaired vision for a symptom of "disordered liver," or to tell her patient that the fact of her feeling sick and confused in mind is "a sign that the treatment is all the more needed, and that she must persevere and not give way to fancies." A. M. S.

Green Soap for Sterilising Instruments. According to Gerson in *Deutsche Med. Wochenschrift*, the blades of cutting instruments may be sterilised by rubbing them well with pledgets of absorbent cotton

saturated with tincture of green soap. Even infected bougies and larger gynecological instruments may be rendered aseptic by continuing the rubbing for three minutes. If the instruments after being sterilised in this way are firmly wrapped up in the absorbent cotton moist with the soap solution, they may be preserved indefinitely in an aseptic condition. As the solution dries, the fibres of the cotton are closely glued together, forming an air-tight covering, while the surface of the instrument is coated with a thin film of soap left behind by the evaporation of the alcohol.

Whooping-Cough Kilmer is thus described:—A treated by the stockinette band is placed on an Elastic Abdominal Belt. baby with whooping-cough, in the same manner as is done by orthopaedists before applying the

plaster-of-paris jacket. This band extends from the axillæ to the pubes and fits the baby snugly. Two muslin shoulder straps are used to prevent the band from slipping down. On this stockinette band a single width of silk elastic bandage is sewn, extending entirely around the body and covering the abdomen. This silk elastic bandage is of the same quality as that used for elastic stockings. If the child is under a year old, it will be found necessary to use but one width (5 in.) of this elastic bandage; in an older child, two widths will often be found necessary to entirely cover the abdomen. This silk elastic bandage is pinned in place when very slightly on the stretch. After it is pinned in place, it should be sewn to the stockinette band underlying it, all around its entire edge; this procedure keeps the silk elastic belt flat and prevents its rolling up or becoming creased. The lower projecting portion of the stockinette band should be pinned down to the outside of the diaper, or other clothing, thus keeping the elastic belt smooth over the abdomen. Dr. Kilmer states that out of eighteen patients on whom this belt was used, cough was relieved in twelve and vomiting in all but one.

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