

mental disease, stated that he regards a capacity for normal sleep as one of the most favourable auguries. In order to take full advantage of this aid to prognosis a "sleeping chart" should be kept for each new acute case. If a patient reported on admission to be sleepless, is going to recover it will usually be found that his hours of sleep gradually return to the normal during the first four weeks of treatment. Another good sign, and one of great importance, is increase in weight when the more acute mental symptoms have ceased. Thus, of 195 patients discharged from Claybury as cured during 1904, the mean average gain amongst the men was twelve pounds, and amongst the females only one pound less. On the other hand, if in adolescents there is a gain of weight unaccompanied by mental improvement the outlook is unfavourable, chronic dementia becoming probable. Other encouraging symptoms are a return of the natural affections, frequently perverted in insanity, interest on the part of the patient in his friends and in his own personal appearance, as well as consciousness of having been ill. Renewed power in the facial muscles and the return of a natural expression are likewise promising. These are all interesting points which nurses will do well to note.

The Urban District Council of Southborough would have been well advised to abstain from seeking to recover the cost of a patient's maintenance in their Isolation Hospital, in a recent case heard in the Tunbridge Wells County Court.

The defence put forward was that the patient had been neglected, and the Council did not provide a proper nursing staff. A young girl, who was a kitchen-maid, was sent for two nights to sit with the patient, who was dangerously ill with scarlet fever; there was no stimulant of any description kept in the hospital, and the person in charge of the hospital varied her nursing duties with laundry work and cooking, some of which was actually done in the ward where the patient lay.

Judge Emden decided that the patient had not received proper treatment, and dismissed the claim, and mulcted the Council in the costs of the action.

The nursing arrangements in many small infectious hospitals are scandalously inadequate and it is time the whole question was investigated.

The value of medical missions is widely recognised, and however much the sceptical

may question the results of ordinary mission work, few will be found to cavil at the physical benefits conferred by medical and nursing care. Writing in a contemporary of his work as a medical missionary in Santalia, Dr. James M. Macphail says: "I believe that it is a wise plan for a district missionary to spend as much of his time as possible, especially in his first few years, in camp. During the cold season I scoured the whole country, north, south, east, and west, and failed to find anywhere a place where there was no opening for a medical missionary. The effect of setting up my tent and unpacking the medicine chest was like that of Roderick Dhu's whistle when it caused men to spring up from every bracken bush and tuft of broom. . . . We got to know the people, and to some extent overcame their fears, won their confidence, and familiarised them with our aims and our methods. In times of sickness the people turn much more readily to one whose face they have seen.

"A small hospital was built in 1894, and since then has had to be twice enlarged. Our system is quite original. There is no attempt to enforce hospital discipline. Every patient lives at peace under his own vine and fig tree, with no staff nurse to make him afraid. Most of the patients bring their own food and make their own arrangements for cooking, washing, and nursing. It may sound Irish to say that a large number of in-patients are accommodated outside, but during more than half the year a good shady tree is the best hospital ward in the world. We anticipated the discovery of the value of the open-air treatment, and apply it with success to many other diseases besides tuberculosis. This system was adopted simply because we had no money to provide the comforts and conveniences or to carry out the *regime* which we associate with a modern hospital; but I believe the very absence of these luxuries has added greatly to the popularity of the hospital. Nor do I believe our results have suffered."

The relation of the staff nurse to the patient is not, however, only to "make him afraid." She comes with skill and comfort in her hands, and much needed lessons in hygiene receive attention when uttered by her lips. Those who are acquainted with the mission work of nurses are unanimous that its value can scarcely be over-estimated.

The Matron and several of the nurses at the Kimberley Hospital have resigned their appointments.

[previous page](#)

[next page](#)