

having a "beau garçon." The transparent child-like gossip, was most amusing to me, but husband and wife listened in raptures.

With regard to dietary, French physicians either completely ignore its importance or exaggerate it. It is either a case of ordinary, middle, or liquid, come what will, or the other extreme of overdoing it. In one word, they become faddists on the subject. In Paris I fell upon two such physicians, and I now regret that I did not keep notes and a list of the special articles of diet they prescribed for some of the patients. One neurotic lady patient was supposed to take four hours in the process of digestion, though how the doctor knew it I have never been able to find out, for I know, too well, that the X rays were never used; boiled sole was the only food she was allowed for months, without salt or pepper, asparagus and sea-kale, boiled and passed through a sieve. Peaches were the only fruit she was allowed to eat uncooked, while pears and plums had to be stewed and passed through a fine sieve. With regard to patients on ordinary diet I had to write a fresh menu every Monday and submit it to the visiting physician, for he insisted on a variety of food, fruits, and vegetables according to the season (stewed fruit every evening). Once I wrote down macaroni for midday, and in the evening I had macaroni soup, and, though I explained to him it was to use up the surplus macaroni, he preferred my throwing it away to using it up. Another hobby of French doctors is mineral waters, which explains the puffy appearance of middle-aged French men and women.

Apart from a few little peculiarities of this kind and a deficiency in their orders in details of nursing, I should say that French doctors were very clever. Over and above the fact that they are a very clever, quick nation, there are two reasons for their success, the first being that the students do a great deal of practical work in the wards themselves. (I may remark in passing there are no screens used in the wards, and the bodies of their patients are neither sacred to them or to the other patients in the ward. It is a mercy that there are still a few hospitals in Paris nursed by nuns where respectable girls can go and have their feelings respected.) The other reason of the success of French doctors is their assured social position, for the medical profession stands high as compared to others, *i.e.*, it stands higher than the army or navy. Thus, wealthy parents and studious young men look upon the position of a doctor as a very high one. The examinations are very stiff, and they have to pay a very high sum to the Government

for a "patente" to be able to practise. In Paris I have known some of the students living in flats of their own and possessing motor cars, and, when they marry, girls with large *dots* look upon them as good matches. The consequence is that French doctors frequently have sufficient means to pursue their studies and give up their time for their profession instead of having to work by day and by night to earn a living, thus being too tired mentally and physically to do any work of research and science.

But there is one criticism which I cannot refrain from and that is, that if French doctors took more notice of the bathroom, more of soap and water and general cleanliness and physical hygiene, and less of the operating theatre, the steriliser and local asepsis, many of their medical cases would escape becoming surgical cases.

French doctors have written so much about English nurses that, should these observations about them fall into their hands, I hope they will forgive my audacity in trying to describe them.

EDLA R. WORTABET.

Frederika Fliedner.

In an early issue we shall be able to give, thanks to the kind offices of Miss L. Metta Saunders as translator, some very interesting personal details of dear Frederika Fliedner, from a little German book, which contains a sketch of her interesting life and the creative part she took in organising the Deaconess Sisterhood of Nursing at Kaiserswerth. This work has come to hand in a very roundabout way, proving how important are international relations between nurses. Germany is within a few hours of our shores, but before obtaining the information we required we had to communicate with a friend in Chile, who, after an unavoidable delay of months, introduced us to a German friend, who happened to be as deeply interested in the half-forgotten work of Frederika Fliedner as we have always been. So now we shall learn just how much we trained nurses owe this gentle pioneer of nursing on moral lines. Some day the services of Frederika Fliedner will touch the German sisterhood of nursing as intimately as those of Florence Nightingale have thrilled the nurses of the Anglo-Saxon race.

Berlin is about to establish sanitarium schools in country and mountain regions for delicate or convalescent children, where they will continue to receive their education while improving in health.

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