

against, sanatorium life. Not a few Matrons speak of it as monotonous, unexciting, dull, and the like, and even those engaged in the work are too apt to discount its opportunities and discountenance its usefulness. According to their faith is it unto them. To those who have eyes to see and ears to hear, contact with the consumptive opens a new world of possibilities, brings them into intimate touch with human life in its many activities, and reveals problems in psychology and ethics, sociology and economics, philanthropy and religion, hardly dreamt of in the rapidly moving routine of a general hospital.

#### THE STUDY OF THE CONSUMPTIVE PATIENT.

The consumptive as seen in sanatorium practice is subject for endless study. It is only the superficial observer who considers him uninteresting and dull. Some have endeavoured to show that this class of patient possesses a characteristic psychology. It is certain that among many undisciplined and motiveless consumptives undesirable mental features are very apparent and some of the most desirable moral qualities are conspicuous by their absence. No doubt intellectual lassitude and relaxation of moral fibre are in part almost unavoidable elements of the disease, but many of the regrettable features we deplore are in only too many cases encouraged by the irrational and shortsighted methods we have been content to allow for so long. By our deplorable lack of any scientifically directed system for affording relief we are rapidly manufacturing a definite type of "consumptive vagabond." By our inability to provide adequate "after-care" we are throwing away time, labour, and money, and often times leaving the patient as regards those things which count most more destitute than we found him.

There is much that I should like to say in regard to this most important matter of mental and moral deterioration of the consumptive by institutional treatment, but I trust I have said sufficient to indicate what a splendid field for service is here open to the discriminating, discrete, and high-principled nurse.

#### THE WORK OF THE NURSE IN THE FUTURE.

Our present means for caring for the consumptive and protecting the community from consumption are totally inadequate. In the near future we may expect a considerable extension in our powers and opportunities. There will be much need for the well-trained and experienced nurse. The results of sanatorium treatment have doubtless not been such as reckless enthusiasts foretold, but when we consider the difficulties in the way of early

admission, the limited stay usually possible, the return often to worse conditions of life than under which the patient originally broke down, the absence of any medical supervision at work or "after care" in the home, we ought to be thankful that the results are as good as they are. It is clear to all discerning minds that in the hygienic treatment of consumption we have the best means known to modern medical science.

The Sanatorium has come to stay and we shall continue to require nurses trained in the principles and practice of hygiene rationally applied to the treatment of tuberculosis.

The popularisation of open-air methods has done much and will do more to revolutionise private nursing, and every wise nurse will do well to make herself personally acquainted with the means and measures for maintaining such life with comfort and benefit.

Nurses, I think, must be prepared to take their place in the future in the educational combat with disease. They must be preachers of the gospel of health, in the home, in the school, in the workshop, as well as in the hospital. If they will prepare themselves for this work posts will not be lacking.

It seems likely that before long we may have something analagous to the Tuberculosis Dispensary system of France. Here will be a fresh opening for well-trained women. It is much to be desired that in connection with the out-patient practice of our consumption hospitals nurses should be appointed to visit the patients' homes, instructing them in the disinfection of sputum and generally directing them in the best hygienic management of their home and their person.

There is urgent need for Havens for the dying consumptive. The Poor Law can never under present conditions be expected adequately to meet the case. Suitable institutions will have to be provided by our Public Health authorities, and these will provide fresh fields for nursing skill.

Many are turning with great expectations to the establishment of horticultural or agricultural colonies for the consumptive, and although there is good reason to believe that these cannot be self-supporting, at least, in this country, the experiment is worth attempting, and here nurses who have themselves been smitten or are predisposed may find a congenial sphere for work as nurse-instructors.

#### CONCLUDING REMARKS.

I have purposely avoided entering on any discussion of the many influentially advocated lines of policy for dealing comprehensively with the problem. I have also of set purpose refrained from touching on the technique and

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