June 8, 1907]

his own account. The interest here centres in the fact that we are minutely given the workings of one of these demonstrations, the cure being effected before our eyes. This is also the case at the end of the book, when at last Thurso consents to be treated, and a miracle is performed which Mr. Benson vouches for as founded absolutely on fact.

The story is of minor importance, the plot a very slender affair, but the book is eminently readable, in fact, it ought to be read. The character of Lady Maud, the heroine, is a very pleasing one, and the fact that she is "brought into science" by Cochrane, and at the same time has fallen in love with him is one of the most plausible items in the book. That Cochrane, on the strength of drinking a deadly quantity of laudanum without disastrous effect, is immediately constrained to propose to Lady Maud quite unexpectedly to himself, is not intended, we feel sure, as irony. "His hour had come," we are assured in one of those little clap-trap phrases so difficult to avoid in the making of crisp, telling effects. E.L.H.

## Coming Events.

June 11th.—Meeting of the Lady Governors at St. Bartholomew's Hospital to consider the organisation of an appeal for funds to build a new Nurses' Home.

June 11th.—Guild of St. Barnabas. Annual Meeting, St. Alban's, Holborn, and the Holborn Town Hall.

June 11th.—Opening meeting of the Red Cross Conference, Examination Hall, Earl Roberts presiding, 12.

June 13th.—Her Majesty the Queen opens the Queen's Fête in aid of the Lord Mayor's Cripples' Fund at the Mansion House.

June 14th.—Trained Nurses' Annuity Fund. Drawing Room Meeting, 71, Eaton Square; Chairman, The Earl of Hardwicke. Speakers: Lady Henry Somerset, Major Lord Loch, Dr. Champneys, 3.45 p.m.

June 14th.—Princess Henry of Battenberg attends the annual meeting of the Colonial Nursing Association, Lord Ampthill presiding, Grosvenor House, 3.30.

June 17th.—Reception of members of the International Nursing Conference, by the invitation of the Committee, at the Maison-Ecole d'Infirmières Privées, 66, Rue Vercingetorix, Paris, 4.30 p.m.

June 18th.—Central Midwives' Board. Examination, London and the Provinces, Examination Hall, Victoria Embankment, W.C. Bristol, University College. Manchester, Victoria University. Newcastle-on-Tyne, Lying-in Hospital.

June 18th.—Opening of the International Nursing Conference, 5, Rue Las Cases, Paris, M. G. Mesureur presiding, 9.30 a.m.

## A Mord for the Meek.

Four things come not back: the spoken word; the sped arrow; time past; the neglected opportunity.



## Letters to the Editor. NOTES, QUERIES, &c.

Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not IN ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.

## FEVER NURSES AND STATE REGISTRA-TION.

To the Editor of the "British Journal of Nursing." DEAL MADAM,—In order to call the attention of Fever Nurses to their critical position, relative to State Registration, I have written a short pamphlet which is published by Messrs. H. K. Lewis. The pamphlet will be advertised in the BRITISH JOURNAL OF NURSING and other nursing papers, but I am also posting copies to all Matrons of fever hospitals, who are likely to be interested in the subject.

I venture to send you a copy, knowing that in so far as the scheme outlined in it is progressive it will meet with your support. I have gathered from the BRITISH JOURNAL OF NURSING that you consider all nurses should be trained in fever work. Theoretically, this would be the best plan, but it is, I am afraid, a counsel of perfection, impossible to put into practice. The difficulties in the way are merely touched upon in the pamphlet, but if you think the matter should be thrashed out, I would be glad to go into details in a letter to your Journal.

You will see that the pamphlet is addressed to Nurses, and to them alone. I have taken this course because I believe that their salvation lies in their own hands. Apart from this the medical men interested in fever work are few in number, the majority of fever hospitals having no resident medical officers.

There is now general agreement among those who manage fever hospitals that a general nurse cannot be given responsible fever work to do unless she has also fever training. The bearing of this on private nursing is obvious, and it is very apparent that a definite status is required for the fever trained nurse.

If fever training were recognised, the result would be a standard of efficiency which would, I believe, indirectly bring about sweeping reforms in many smaller hospitals where the staff has to work under unfair conditions. Too many local authorities remain unconscious or sceptical of the fact that infective cases should not be brought together unless the conditions are as good—in certain directions better—than in a general hospital. I am convinced that there is a tendency on the part of local authorities to regard fevers as "domestic" diseases that can be safely dealt with in the roughest fashion. As an inevitable result, the isolation hospital system has been severely handled in the medical and lay press in



