

## Medical Matters.

### — SNAKE POISONING.

Dr. Prentiss Willson, in a monograph on snakes and snake poisoning in the United States, as reported in the *British Medical Journal*, says: The majority of patients will undoubtedly recover without any treatment, for the simple reason that the amount of venom injected is not a fatal dose. In individuals who have received an amount of venom equalling or exceeding a fatal dose, the rendering of any material aid is a most difficult matter. The only hope lies in a local treatment which will limit the absorption of venom from the wound. In the case of bites on the extremities this is to be effected by ligature of the limb, and is best accomplished by the use of a series of ligatures between the bite and the heart, at least one of which should be applied to that segment of the limb containing one bone. The danger of this treatment, if long continued, should be borne in mind as well as the devitalising local action of crotaline venoms, and the ligatures partially relaxed as soon as practicable. In cases seen after some little time has elapsed, the local swelling being marked, and constitutional symptoms in evidence, complete control of the circulation is of doubtful utility, and ligatures should be so applied as merely to impede the return flow of the blood and lymph. In relaxing ligatures it is probably safest to begin by intermittingly relaxing the ligature nearest to the heart, letting it become looser and looser until it is entirely removed, and the other ligatures taken off in the same manner. Having controlled absorption it is necessary to destroy or eliminate as much of the injected venom as possible. A finger or toe may be amputated, free excision of bitten area, or deep incision into swollen and inflamed tissue made, and the blood and serum washed out by saline solutions and antiseptic lotions. Chemical destruction or neutralisation of the venom is only possible in the tissues around the wound, but it is impossible to affect the venom itself once it passes into the general circulation, save by the use of specific antiserums. The administration of adrenalin solution, from its effect upon blood pressure, may tide the patient over a crisis, and the same may be said of such mechanical means as bandaging, abdominal compression, and posture. In cases of colubrine poisoning artificial respiration is undoubtedly of life-saving value, but in crotaline poisoning the circulation usually comes to a standstill before the cessation of respiration.

## The Nurses' Registration Bill in the House of Lords.

The Nurses' Registration Bill was read for a third time and passed in the House of Lords on Tuesday last, and thus the efforts of Lord Amptill, who has guided the Bill with such courtesy and wisdom through its various stages in the Upper House, and of those nurses who have been working so long and earnestly in the Registration Cause, have been rewarded with success.

The Third Reading of the Registration Bill was the first order of the day, and was moved by LORD AMPHILL.

THE EARL OF WEMYSS said he had received a letter from a lady who was a nurse at the London Hospital, whose father lived on his estate, and who had urged him to resist the Bill. In reply to a question put by him as to whether the whole nursing staff at the London Hospital were of her opinion, the nurse had informed him that every Sister and Nurse at the London Hospital was opposed to the Bill, and when he asked further whether the nurses in the other London hospitals were also opposed to it, she informed him that, with the exception of two hospitals, the whole of the nursing staffs of all the London hospitals were opposed to the Bill. She also stated that Miss Nightingale was "deadly opposed" to State Registration.

LORD KINNAIRD was anxious that the safeguards incorporated in the Bill (presumably for partially trained nurses) should not afford an uncertain security, but said he desired, as everyone must desire, that those who were carrying on such an honourable profession should receive recognition.

LORD BALFOUR OF BURLEIGH then said that he had not taken much part in the debate on the Bill now before the House, but their Lordships would remember that on another occasion he had brought in a Bill which on division did not meet with their approbation.

The present Bill had been amended by the Privy Council, and altered out of recognition. He thought still it was likely to do more harm than good, but he did not propose to divide the House. He could say with some confidence that the apparent guarantee given by the Bill was a delusive guarantee, as, while the names of nurses once registered would be continued on the Register, there would be no continuing guarantee of efficiency.

Lord Balfour then advanced the old objection that qualities cannot be registered, and the theory that while for medical practitioners and midwives a modicum of professional know-

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