

did not arise from increased knowledge, danger lay rather in half knowledge. With a closer scientific relationship, a deeper sense of responsibility, greater confidence between doctors and nurses would develop. In the address of the President of the Council the future expansion of nursing was clearly and admirably outlined, inasmuch as the two professions were not only associated in the relief of suffering, but, in the future, would be associated in the maintenance of health. There was all the greater necessity, therefore, for an increase in the standard of training and knowledge.

#### ETHICAL RELATION.

Dr. Sevestre said that not the least of the advantages that nursing had been to medicine was that the work of medical practitioners had been made easier. The advent of the nurse brought a sense of relief to the doctor, order out of chaos, and soothed and quieted the fretted nerves of patients and friends. Nursing was thus a therapeutic and remedial agent of great value.

The speaker said that to lay down any set of rules for the guidance of the two professions in their relationship to each other would be well nigh impossible. The application of common sense, and that indefinable quality called tact, should solve many so-called ethical difficulties. The two professions were closely allied, everywhere all doors were open to them, they belonged to the privileged classes, but they must not pride themselves too much on this, for the privileges were few, and the responsibilities heavy.

#### PERSONAL RELATION.

The personal relationship between doctor and nurse was, on the whole, of the happiest description. This rested on several factors, *i.e.*, a community of interest, a regard for the difficulties and dangers of each other's callings, a mutual confidence in matters referring to the welfare of the patient, and a mutual respect which increased with experience.

Dr. Sevestre concluded an admirable paper by saying that this great Congress illustrated the fact that nursing was a world-wide profession, following everywhere the same methods, actuated by the same ideals, and seeking the same objects. Of all the professions the same could be said alone of medicine, and he was sure it was the wish of everyone that these relations should be characterised by unity, peace, and concord.

THE PRESIDENT OF THE SESSION said she was quite sure that everyone present must be touched by Dr. Sevestre's beautiful address. It had always seemed to her a most glorious thing that it was not necessary for doctor and nurse to have the same creed, nationality, or colour. What

bound them together in their relations to one another was that both were working for the same great end. If they could not altogether alleviate suffering, at least they could make the last days of the sufferers as easy as possible.

SISTER E. VON DER PLANITZ presented a short paper in which she said that the relations between doctor and nurse have been rendered difficult in Germany for two reasons, the excessive submission to doctors of religious Sisters, and the experience of doctors in connection with hospitals managed by religious communities.

She gave as an illustration of the first point the case of a Sister of the educated classes who was dismissed from a Mother-House because she refused to help the doctor on with his goloshes and turn up his trousers, this being regarded as a refusal to obey orders when on duty, and, of the second, that of a doctor who resigned his position in a hospital because, against his stringent orders, the bandage on the head of a patient who had been trephined was changed, and the wound washed with camomile tea, because the Mother Superior would not allow any deviation from the ordinary rule.

At the present day there was still a difficulty in bringing about the right relations between the two professions, because the increasing number of educated nurses made it necessary for the doctors to adopt a different attitude towards them, and many doctors found it inconvenient to be obliged to show a certain amount of consideration and more self-control, and preferred the uneducated nurse, whom they could treat unceremoniously. Among some nurses there was a regrettable lack of dignity, a tendency to flirt, and the endeavour to render personal services in order to incur less severe criticism of their professional inefficiency. The tone of the relations between doctors and nurses in a hospital depended on the personality of the nurses, and of the medical director. If the latter had no respect for womanhood it was generally wanting in his subordinates, and very frequently if a doctor was obviously in the wrong with regard to a sister the medical director would take his part all the same, and the only thing left to the sister was to go.

So long as we had to reckon with a number of average individuals in both professions, and so long as all the power was in the hands of men, these difficulties would exist. When a sister of high personal excellence worked with a doctor of the same quality the relations were satisfactorily regulated in the most natural way.

It was to be hoped that the growing organisation of the sisters might enable them to gain the necessary discipline, and to develop the necessary respect on the part of the doctors.

MRS. BEDFORD FENWICK said that so long as the profession of medicine was highly organised and disciplined, and that of nursing disorganised and undisciplined, it was very difficult to maintain just relations between the two. She entirely agreed with both Dr. Sevestre's and Miss Mollett's papers, but there were other points to which attention might be drawn. One effect of the rapid and marvellous evolution of

[previous page](#)

[next page](#)