

It is hoped by this means that better facilities for training will be available for male nurses in the future—at present outside military and naval hospitals their educational sphere is strictly limited.

If male nurses were admitted to the women nurses' register, women specialists could not logically be excluded.

#### FEES FOR REGISTRATION AND EXAMINATION.

##### Clause 16.

No alteration was made under this heading. The Registration fee for all nurses during the three years' term of grace remains £2 2s. After the term of grace the Examination fee is to be £3 3s., the combined charge not to exceed the sum of £5 5s. The Association for Promoting the Registration of Nurses in Scotland are of opinion that the work can be efficiently carried on for less, and Sir Victor Horsley approves of a Treasury grant if the expenses exceed £3 3s. for each nurse. All the Societies composed exclusively of nurses support the higher scale of fees, as they wish their Governing Body to be self-supporting, and to encourage trained nurses to realise that legal status has a real professional and financial equivalent. Moreover, taking into consideration that the large majority of nurses have a valuable professional education provided free of charge, they are of opinion that £5 5s. is a very moderate charge for the benefits to be received. To secure the services of the best medical and nursing examiners and inspectors, an adequate fee must be paid, and a new branch of work on educational lines will in the future be available for thoroughly qualified nurses, for which a sufficient remuneration will be necessary.

The nurses' societies are also unanimously of opinion that reasonable fees should be paid to the members of the Registration Council, so that the Governing Body shall be on a business basis. They strongly deprecate voluntary supervision or patronage in this connection.

The institution of Divisional Committees will add to the working expenses, as no doubt they will to the efficiency of the registration system.

#### THE FUTURE OF THE BILL.

The acceptance of one Bill by the eight influential medical and nursing Associations is a matter for sincerest congratulation to all concerned. To Lord Amptill's inspiring influence and tact this result of the Conference must be accredited. He has our warmest thanks for his incomparable conduct of business.

The Bill will be at once transcribed, and await the fate of the ballot next week, but in any case the demand for legislation is to be enthusiastically pressed forward, and its ultimate passage into law cannot now be long deferred.

## Medical Matters.

### PELLAGRA.

The spread of pellagra during recent years has resulted in the formation of a representative committee to investigate its nature and causation. This committee has issued a preliminary communication as to the present position and knowledge of the disease, which states, in part:—

Pellagra is one of the formidable disease-scourges of mankind. Like malaria, it is widely distributed throughout the world, being most prevalent in certain districts of tropical and subtropical countries. Europe, Asia, Africa, America, Australasia, all have their areas of pellagra endemicity, the extent of which, owing to non-recognition of the disease, is in most cases probably far wider than is generally suspected.

Like kala-azar and sleeping sickness, pellagra is a deadly endemic disease, presenting a long, cruel course of 3, 10, 15, or more years' duration. It is confined almost exclusively to field labourers. It is characterised by a complexity of nervous, gastric, and cutaneous symptoms. The symptoms make their first appearance during the spring months and recur year after year at the same season, remitting more or less during the winter months. Clinically, the more distinctive features are a peculiar skin eruption, not unlike a severe sunburn, which affects the exposed parts of the body, accompanied by profound melancholia alternating with mania, which often leads to murder or suicide. In the last stages the patient becomes greatly emaciated, paralytic, and completely demented. In women pellagra usually causes abortion; when they do have children, the offspring are sickly and degenerate.

Pellagra is regarded as strictly endemic. Everywhere, however, where its occurrence has been noted for any length of time it has shown a marked tendency to slow extension. This tendency to spread is a fact which must receive very serious attention, especially when we consider that pellagra can thrive just as well in Poland as in the Panama Canal zone, and that when once established in a new locality it remains there.

Dr. L. W. Sambon, F.Z.S., a member of the Committee, will proceed to a pellagrous area and investigate the conditions of the disease and the blood-sucking flies that are to be found there.

Dr. Sambon has informed a representative of the press that an urgent reason for inquiry is that pellagra, kala-azar, and other diseases do not remain limited to their endemic regions. They go forth, so to speak,

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