

## Practical Points.

### The Digestive Value of Pineapples.

The medical value of pineapples, says the *Spatula*, has recently been the subject of considerable inquiry among physicians, and in Hawaii experiments have been made to determine something of these properties. It has been found that the fruit of the pineapple contains a digestive principle closely resembling pepsin in its action, and to this is probably due the beneficial results of the use of the fruit in certain forms of dyspepsia. On the casein of milk pineapple juice acts as a digestive in almost the same manner as rennet, and the action is also well illustrated by placing a thin piece of uncooked beef between two slices of fresh pineapple, where in the course of a few hours its character is completely changed.

### Smoking and Eyesight.

In his report to the Directors of the Royal Victoria Eye Infirmary, Paisley, Dr. N. Gordon Cluckie calls attention to the abuse of the eyes by their excessive use in reading in bed. Referring to 152 cases of toxic amblyopia due to excessive use of tobacco, he points out that these working men were so saturated with nicotine that the visual nerve centres of the brain were affected, and defective vision caused to the extent of preventing them from earning their daily bread. It is the absorption of the nicotine and its poisonous effects that are to be guarded against. If the nerve of vision is not decayed, and the patient becomes a total tobacco abstainer, vision may be restored to its normal condition in a few months. In Dr. Cluckie's opinion there is as great need for Total Abstinence Societies for tobacco as for liquor.

### Treatment of a Case after Chloroform has been given.

When the patient returns to the ward, the hot water bottles and blankets are removed from the bed, and he is gently lifted on to the bed, the blankets and bottles replaced (a layer of blanket between the skin and bottle.) If necessary, a cage is placed over the wounded part and the bed-clothes put straight. Only one small pillow should be put under the head at first. The nurse must not leave the patient until he is out of the chloroform, as he will probably feel very sick. If patient vomits, the head must be slightly raised or turned on one side. Patient must be kept quiet, and nothing must be given by the mouth for a few hours except a little ice or soda water. After four hours, if there is no sickness, he may have a little milk and soda water. If there should be troublesome sickness, starvation may be tried as a means of controlling it, or sucking small pieces of ice or sipping very hot water may be tried. The part that has been operated on must be carefully examined from time to time to see that there is no swelling or hæmorrhage, or discharge through the dressing.

V. J.

## Appointments.

### MATRONS.

**Royal Surrey County Hospital, Guildford.**—Miss Jessie Millicent Jackson has been appointed Matron. She was trained at St. Bartholomew's Hospital, London, and has held the positions of Sister at the New Hospital for Women, Euston Road, Assistant Housekeeper in the Nurses' Home at St. Bartholomew's Hospital, Assistant Matron at Kensington Infirmary, and Assistant Matron at the Sussex County Hospital, Brighton.

**Tiverton Infirmary and Dispensary, Devon.**—Miss Lilian Lloyd has been appointed Matron. She was trained at the Jessop Hospital for Women, Sheffield, and the General Infirmary, Bolton, Lancashire; and has held the positions of Charge Nurse at the Park Hospital, Hither Green; Night Superintendent at the Royal Infirmary, Halifax; Night Superintendent at the Royal Chest Hospital, E.C.; and Matron of the Cottage Hospital, Malton, Yorkshire.

**Cottage Hospital, Oswestry.**—Miss Eleanor Jasper has been appointed Matron. She was trained at the Royal Infirmary, Bradford, where she won both the gold and the silver medals. She has also been Sister at the Hospital for Women and Children, Bristol, Superintendent Nurse at the Union Infirmary, Todmorden, Nursing Sister in the Army Nursing Service Reserve, working at the Royal Herbert Hospital, Woolwich, as well as in South Africa, Night Sister at the Children's Infirmary, Liverpool, and Nurse Matron at the Cottage Hospital, Mold. Miss Jasper was recently appointed Matron Nurse at the Alnwick Infirmary, but did not take up the post.

### NURSE MATRON.

**Hendon Urban District Council Isolation Hospital, Renter's Lane, Hendon, N.W.**—Miss Annie Edmonds has been appointed Nurse Matron. She has held the positions of Second Assistant Nurse and Assistant Nurse at the Fountain Hospital, Tooting, under the Metropolitan Asylums Board; Sister at the City Hospital, Birmingham; and Matron of the Frimley Urban District Council Isolation Hospital.

### ASSISTANT MATRON.

**Samuel Lewis Seaside Convalescent Home, Walton-on-the-Naze.**—Miss Julia Arnold has been appointed Assistant Matron. She was trained at Charing Cross Hospital, in which institution she has held the position of Staff Nurse.

### SISTER

**General Hospital, Gheithenham.**—Miss Maud Shorto has been appointed Sister. She was trained at the East Suffolk Hospital, Ipswich, and has held the positions of Sister at the Hospital, Bridgwater; Night Sister at the East Suffolk Hospital, Ipswich; Theatre Sister and Night Superintendent at the Royal Infirmary, Hull, and Night Sister at the New Hospital for Women, Euston Road, N.W.

### ENQUIRY OFFICER.

**East London Hospital for Children, Shadwell, E.**—Miss Margaret Burrows has been appointed Enquiry Officer in the Out-patient Department. She was trained at the East London Hospital, and at Guy's Hospital, and has held the positions of Sister at the

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