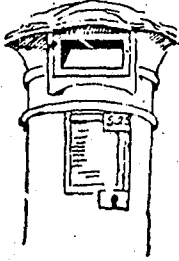


Letters to the Editor.



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.

OUR GUINEA PRIZE.

To the Editor of the "British Journal of Nursing."

DEAR MADAM,—I have great pleasure in acknowledging the cheque for one guinea, which I received yesterday morning, thanking you very much for same.

I remain, yours faithfully,
ELIZABETH DOUGLAS.

Maternity Hospital, Belfast Union.

SCALPS.

To the Editor of the "British Journal of Nursing."

DEAR MADAM,—The writer of weekly puffs of the London Hospital in a London daily paper has pointed out with great gusto that in addition to several other hospitals of a more or less insignificant status, which are now "matroned" by ladies trained at the London Hospital "To these may now be added St. Bartholomew's Hospital." Poor old Bart's! Fancy after eight centuries of precedence being paraded as a London Hospital scalp! It is enough, I imagine, to make Rahere turn in his grave. It is incredible that members of the Medical Staff at Bartholomew's—themselves so tenacious of their own prestige and procedure—should have consented to humiliate their devoted nursing staff by this outrage to every instinct of professional feeling, and, by their insult to her memory, trample upon their devoted allegiance to their dear dead friend and Matron.

A DEEPLY AFFRONTED BART'S NURSE.

THE HIGHER TRAINING OF THE MIDWIFE.

To the Editor of the "British Journal of Nursing."

DEAR EDITOR,—I have seen in the BRITISH JOURNAL OF NURSING the paper read at the Conference at the Royal Horticultural Hall, Westminster, by Mrs. Lawson. I was deeply interested, as there were a few questions I should have liked to ask had there been an opportunity. I, with others, was deeply disappointed when the Chairman did not appoint a deputy in his place. Mrs. Lawson, in the course of her remarks, pointed out the necessity for the higher training of the midwife. At present a pupil has the choice of either entering a hospital or attending a course of lectures at a training school, and getting her practical work with a midwife, or she can attend a course of lectures, and get her certificate signed by a medical man with whom she has attended twenty cases. Now, with all due respect to the medical man, he may feel that he can conscientiously fill in that pupil's paper, but can that pupil have received a good training in the practical work of the midwife? I must confess I am puzzled. I should like to

know who instructs the pupil as to how to wash the patient, to see to the making up of the patient's bed, the preparation of her hands and of her own and the doctor's instruments, how to attend to the infants' eyes, cord, mouth, bath, etc. Of course, these questions may seem superfluous seeing that a medical man signs the paper. But I only ask, as the authorised midwife is expected to instruct in all that and much more.

Yours etc.

ABERNETHY.

To the Editor of the "British Journal of Nursing."

DEAR MADAM,—The article on "constipation in infants" in your last issue was very interesting. In reading it one thing vividly impressed itself upon my mind—the responsibility of midwives who treat infants of tender age for constipation and other conditions for which a doctor is not summoned.

We are told that "no series of doses of purgative medicine are responsible for so much constipation at any time of life as the single dose of castor oil which clears out meconium from the bowel of the newborn infant." Yet this single dose is given in the most lighthearted fashion by the majority of midwives—the less they know the more lightheartedly.

Is it not time that we followed the example of our Continental neighbours, and insisted that midwives, in view of the grave responsibilities they are called upon to undertake, had a longer training than the minimum of three months. A woman with no previous training as a nurse may cram enough in three months to get through the examination of the Central Midwives' Board. Can she as well gain sufficient knowledge, and confidence founded on practical experience—not the dangerous self-complacency begotten of ignorance—to make her really practically efficient?

Should we consider any probationer in a hospital, however promising, competent to undertake the nursing of a patient under direct supervision, and why then should it be expected that, at the end of three months' training, women frequently drawn from a less educated class than the average probationer should be competent to assume full charge of a mother and infant, including a certain amount of treatment? They may have done well during training under close supervision. The test comes when they are left alone to work on their own initiative. I for one would gladly see the terms of training for midwives who have had no previous experience as nurses raised to a year—as a beginning.—Yours faithfully,

C. M. B.

Notices.

CONTRIBUTIONS.

The Editor will at all times be pleased to consider articles of a suitable nature for insertion in this Journal—those on practical nursing are specially invited.

OUR PUZZLE PRIZE.

Rules for competing for the Pictorial Puzzle Prize will be found on Advertisement page xii.

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