

Dr. Russell here gave a table showing the variety of physical diseases which occur in hospitals for the insane, requiring medical, surgical and obstetric treatment and nursing, and continues:—

Measures relating to disorders of the digestive tract and nutrition, to circulatory disturbances, and to functional nervous disorders are especially applicable. In the management of the dietary, the nurse for mental cases should be an expert. Not only will the more common occasions for ability in this direction be met with, but all sorts of vagaries and positive refusal of food must be managed. In the care of all acute cases and of epileptics, and of cases of general paralysis, dietetic considerations become extremely important. Hydrotherapeutic procedures are employed in great variety in the nursing of mental cases, from the neutral tub in which an excited or delirious patient may be kept continuously for days or weeks to the simple sprays and packs. Rubbing and massage and electricity are used extensively, and the nurse should be able to employ them effectively and judiciously.

In the application of all nursing measures in these cases, the question of mental readjustment and restoration to normal activities must be ever in the mind of the nurse. The special measures employed in dealing with these are judicious mental management, combined physical and mental exercises, and means of recreation and pleasure. The proper mental management of the cases can only be learned as a result of insight into their character and of practice. The nurse must know what may ordinarily be expected from a case. "A cheerful, wholesome outlook on life in the nurse herself is quite essential. She must be sure of her self-control under aggravating circumstances, and find a constant pleasure in healthy activities with and for others. She must learn when and how to use repressive measures, and to what extent it is best to permit even morbid activities to have their swing. She must know how and when to use assertion, suggestion, and example in dealing with morbid ideas, and when to leave the patients to their own thoughts. Little can, however, be said on this subject that will explain the requirements.

Much importance is attached to the use of combined exercises. Among the simplest are marching to music, calisthenics, dancing, interesting walks, and simple, often childish, games.

SOCIAL SERVICE FOR MENTAL CASES.

A few years ago, under the auspices of the State Charities Aid Association, a movement was started in New York State for the after-

care of patients discharged recovered from the State hospitals for the insane. The work has been carried on with exceptional efficiency in New York City, where it has been extended so as to include attention to incipient mental cases who apply for treatment at Bellevue Hospital. The value of this method of seeking to prevent the onset or recurrence of mental disease has been clearly shown, and its further application seems certain. This should open to nurses an important and interesting field of work, in which a working knowledge of mental diseases would be extremely useful. A somewhat similar work has been carried on in Massachusetts for many years, and nurses are constantly employed to visit the patients in homes where they are boarded by the State, or in their own homes.

A great deal more might be said on the subjects touched on in this paper. I fear, however, that I have already tried your patience. My purpose has been to bring to your attention some facts and considerations relating to the whole field of nursing in mental diseases with a view to exciting interest, and possibly suggesting openings for helpful and profitable service. I should like to emphasise the following practical points:—

1. That, though a great deal of splendid work is done by the attendants and nurses in the hospitals for the insane, nurse leaders are needed for dealing more efficiently with the care of the insane as a distinct nursing problem and for the better organisation of nurse training for the work.

2. That, for humanitarian reasons, and for the earlier treatment of mental cases, provision for at least temporary care should be made at the general hospitals.

3. That physicians and nurses in general should be better informed in regard to the nature and causes of mental diseases, and to the proper methods of dealing with them. This would render them more efficient in dealing with the cases in the homes, and would enable them to lead in measures for earlier attention and prevention, which must be looked to if the rising tide of mental disease in this country is to be checked.

To accomplish what is needed will require co-operation and many workers. The nurses cannot cultivate the field uninvited and alone. The need exists, however, and is daily becoming more plainly seen and felt. So far as it relates to nursing, the nurses of America may, I am sure, be depended upon to find a way.

The same may, we feel sure, be said of the nurses of the United Kingdom.

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