

It is a fallacy, of which the public mind is not yet altogether disabused, that there is but little difference between an asylum and a prison. The tendency of asylum development is towards the hospital and away from the prison. To what extent the prison should follow the asylum is another question, but the time is past for any such idea as that the two are much the same.

The development of the hospital idea in asylum work has produced almost equally far-reaching changes and improvements in the duties and training of the asylum nurse and attendant.

The principles adopted and practised in the hospital and sick wards of the asylum, and the training received therefrom by the members of the staff, make their influence felt throughout the whole institution, and have a most important bearing upon the health of every member of the asylum community, both patients and staff. The advance of medical science in the department of mental disease now requires the successful asylum attendant to possess high qualifications in technical knowledge and training as compared with the requirements of twenty years ago, but something else, even more important, is essential, and must not be lost sight of. Nothing, I think, can ever take the place in asylum work of such qualities as good temper, cheerfulness, unwearying patience and forbearance, constant watchfulness and forethought, sagacity and kindly sympathy, etc. If these are absent, it is of no avail to know the number of red blood corpuscles per cubic centimetre, or to write learnedly on the structure of the cerebral cortex or the nature and use of antiseptics. The ideal asylum nurse or attendant requires the double qualification.

Ugly Facts.

We quote the following paragraphs from *The Dietetic and Hygienic Gazette* for the benefit of hospital managers generally, and more especially for those responsible for the poor little patients in the Children's Hospitals.

WHEN IS A SYPHILITIC NOT DANGEROUS?

It goes without saying that the patient with an open lesion is infectious. The virulence and the possibilities of contagion lessen with time and treatment. It is a safe rule to regard all cases as dangerous during the first two years.—E. O. SMITH.

ONCE SYPHILITIC, ALWAYS SYPHILITIC.

Once you are syphilitic, you will always live syphilitic, you will die syphilitic, and on the day of judgment your ghost will be syphilitic.—ZEISSE.

The Feeding of Nurses.

A Conference on the Feeding of Nurses was held at Caxton Hall on Saturday, November 5th, under the auspices of the National Food Reform Association. Miss Rosalind Paget presided, and proved "an inspiration to reluctant speakers."

Miss Paget first called on Mr. Charles E. Hecht, the courteous secretary of the National Food Reform Association, to read apologies from those unable to attend, including a telegram from Miss Villiers (Matron, Park Hospital) who was to have taken part in the discussion, but was detained owing to an unexpected visit from Mr. John Burns to the hospital.

In a few introductory remarks, Miss Paget said that the object of the Conference was to discuss Diet Reform on the broadest lines, not to hear the views of faddists. The Chairman said she had great sympathy with the aims of the Conference, as she had for a time performed the duties of Home Sister in a large London hospital, and knew the awful responsibility of providing 20 meals in the 24 hours, and remembered her repulsion to viewing the cold remains next morning. A good deal was heard at the present time about "made dishes," the taste of nurses might have altered now, but on one occasion when she offered a nurse a helping from a made dish the reply was "No thank you, Sister; I like to know what I am eating."

Miss Musson, who had prepared an exhaustive paper, which was in the hands of many of those present, emphasised its principal points in the following paper:—

FOOD IN HOSPITALS.

The question of food in hospitals is one to which most of us devote many anxious hours. Lest there should be any misunderstanding, I should like to say that the opinions, which I have endeavoured to express, though in very sketchy and incomplete form, in the paper you have before you, are based upon 17 years' personal experience in four hospitals, varying in size from 60 to 670 beds, and have been confirmed or modified by the reports of Matrons and Nurses from other institutions, and by notes kindly supplied to me by Miss Laurence and Miss Bann. As I am at present so fortunate as to have an assistant who gives most of her time to the catering, and as the kitchens and store rooms at the hospital of which I have the honour to be Matron are modern and convenient, I am conscious of advantages which many of my colleagues do not enjoy, and am able to speak with all the greater freedom of some difficulties, because they are no longer

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