

retention of urea in the system is fraught with many and great dangers. Inasmuch as the water also is not extracted, the quantity of urine passed is very much diminished.

We will now consider the symptoms of an acute nephritis as they occur in practice, and they may be divided into those which show that the kidney is inflamed and those due to the effects of the retained urea and water on the system. In the former class we have a rise of temperature, headache, shivering, and pains in the back, which latter instead of ceasing after the onset of the illness has passed (as in other febrile ailments), settles down into a continuous aching in the loins. As aforesaid, there is a great diminution in the amount of urine passed, or there may be even total suppression of the flow, and the urine that is passed contains blood and albumen and much less urea than normal. On examining the sediment from the urine under the microscope, we find clumps of dead epithelial cells which have come from the interior of the inflamed tubes and are therefore known as tube casts.

Then the effect of the retention of water is shown by the occurrence of swelling of the face and feet—dropsy—and in severe cases the fluid collects also in the peritoneal cavity—ascites—and in the pleura, where it gives rise to pleurisy; sometimes there is a local swelling at the outlet of the larynx so that the patient is unable to breathe and may die of suffocation in consequence. The effect of the retained urea is seen in persistent headache, drowsiness, sometimes going on to unconsciousness and general convulsions from the irritation of the brain by the poison; these together make up the condition which we call uræmia.

Death may take place at the outset from complete suppression of urine, or later, from the pressure of the accumulated fluid on the internal organs, or from uræmia. Recovery is always slow, and liable to be interrupted by relapses due to fresh inflammation, the outlook being much better in the scarlatinal form of the disease, than in the tubal variety for the reason previously given.

(To be continued.)

Dr. Paul Ehrlich, as reported in the *Times*, has made a statement concerning a cure for syphilis which he has discovered and prepared with his collaborators, and which is already being used in some hundred clinics. Work for the perfecting of the cure is still proceeding, but Dr. Ehrlich considers that high expectations of the healing power of the preparation are justified.

The Battle of the Standards.

The "Bart's" appointment has had one good result. The appeal of the Defence of Nursing Standards Committee has compelled the Governors to take a personal interest in the conduct of business at that institution. It is almost incredible that men who are no doubt inspired with the most philanthropic motives, so far as the patients are concerned, know absolutely nothing of the medical and nursing departments. Where a medical school exists, the medical staff may safely be left to care for the best interests of their own profession, and the qualifications of the medical staff are printed in black and white. But how different it is with the nursing department. For the Matron and Superintendent of Nursing no standard is defined in the rules, and presumably a woman semi-trained or not trained at all is quite eligible for the responsible duty of superintending the education of the nursing staff and their professional work in the wards! The absolute necessity for standards defined by statutory authority has been borne in upon every "Bart's" nurse of late, and we hope upon all the Governors, some of whom confess they do not know the term of training, or curriculum demanded for the training of the nurses for whom they are responsible to the public.

We learn that the fact that the lady selected as Matron had only a two years' certificate of training was not brought to the notice of the Election Committee, as it should have been, in printed form by those responsible for setting out the qualifications of the candidates, so that the majority of those present did not realise that they were ignoring their own three years' standard of certification. Surely this omission was not intentional!

It would be interesting to know if, as vehemently stated, the election was *bona-fide*, how it was that a member of the medical staff was able to inform a ward sister, who was to be appointed two days before the election took place—information which, moreover, was widespread and instigated the withdrawal of more than one fully trained Matron candidate, who did not wish to be superseded by a Matron's assistant, and her status and qualifications thus depreciated. We learn that the interrogation of some of the candidates was so superficial as to amount almost to discourtesy, and certainly to justify the assumption that it was not a genuine competition.

In our opinion one of the most reprehensible features of the whole discreditable affair was the manner in which the strongest "Bart's"

[previous page](#)

[next page](#)