

their fellow nurses is concerned, and to such, a society which offers mutual help and encouragement should provide a healthy and powerful stimulus. The branches of trained nursing are now so numerous that it is widely felt that a society which can bring all branches into touch and communication with each other is an imperative need.

Through corresponding members it is hoped that the society will become useful to nurses going to Europe or the Colonies, who are often at a loss as to where they should turn for advice.

The objects of the Society are: To promote the interests of Scottish nurses, and nurses working in Scotland, to encourage a spirit of mutual help and unity among nurses, to encourage and promote the consideration and discussion of questions connected with the training and work of nurses; to promote by every means in its power the efficient nursing of the sick, and the honour and welfare of Scottish hospital training schools, special hospitals, and kindred institutions.

With these objects in view the success of such an organisation — already influentially backed — is secure, and its promoters feel confident of the support of a large section of the nursing profession, and the cordial approval of the medical profession and all those who are responsible for, or in any way interested in, the nursing of the sick.

Nurses who desire to become members, or work in the interests of the Society, will oblige by sending to me at the under-mentioned address their names and addresses; also stating their qualifications, and to what (if any) nurses' organisations they belong.

I am, yours faithfully,

E. A. STEVENSON,

Secretary, *pro tem.*

The Valley, Trinity,  
Brechin, N.B.

#### THE JOURNAL.

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

DEAR MADAM,—On the 21st I sent my year's subscription to the Manager of the BRITISH JOURNAL OF NURSING. At the same time I wish to thank you for the Journal, and for all the care and trouble you must take to make it what it is—the Journal with the highest ideals (if only we could live up to them), and the best aims it is possible to teach, the most up-to-date, and also the greatest protection we nurses have in the press.

Wishing you and all connected with our beloved Journal the greatest success.

Yours faithfully,

A SEVENTEEN YEAR READER.

Beverley, Simla, India.

#### THE BLACK PLAGUE.

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

DEAR MADAM,—From the second opening sentence of your article called "The Black Plague," in the BRITISH JOURNAL OF NURSING for January 21st, I gather it is in your mind to spread information about, and to fight, the evil chiefly as it affects our own nation, or, more widely, the white races.

Will you forgive my troubling you, and let me ask a few questions about these venereal diseases?—

questions which have arisen in my mind after reading your (and previous) articles, as they suggest themselves to me as a missionary nurse in a country where there is a terrible amount of two, if not all three, amongst the natives.

You say: ". . . venereal diseases are the result of an act, or acts, of immorality. . . ."

To take soft chanere first. (1) Is there no exception to the above rule in this? I don't think I often see this. Cases of bubo we have. Does the pus from a bubo carry a specific poison connected with the original sore?

(2) Has gonorrhoea no family relationship at all to either of the other two? Is its treatment only, or mainly, local? (This is hardly a nurse's question you will think, but out here one has to diagnose, and to some extent treat, cases "on one's own." Female patients mostly refuse to see a man, and we have no lady doctor at present.)

If gonorrhoea is treated, as I think, chiefly locally, how is infection to be pursued through the female organs of reproduction?

(3) Surely in a country where nothing is understood of diseases being conveyed by infection or contagion a vast number of those who have syphilis may charitably be supposed to be suffering from syphilis insontium.

After the initial act of immorality, which you say is the cause, what is there, where the people are left to nature, to check the progress of the disease? The man having infected his wife, and they their children, these marry and so it is carried to the next generation. (Three generations often inhabit the same house.) Where will it end?

Is the saying, "Unto the third and fourth generation" to be in any way taken as denoting a natural dying out of this disease? We know that many a syphilitic mother in this country, out of a possible family of ten will have only two children to rear, the rest being miscarriages, or premature infants already dead of syphilis in utero.

Some may say, what does it matter to me that I should know of guilt or innocence? As a nurse not so much, perhaps, but as a missionary I see my patients from another standpoint. I may have in one ward four or five little girls with tibial nodes or gummata, babies with ulceration of the mucous membrane, of mouth and eyelids, etc., etc. They must be innocent victims, but how about this woman with syphilitic ulceration of the nose, and that with burrowing sinuses of the gluteal region, or a scaly, scabby rash from head to toe? These are my congregation. These will cry when I speak of sin, and will chorus an "Amen" when I pray with and for them after the daily Bible address.

I should be most grateful for your kind attention to my difficulties.

Yours sincerely,

A MISSIONARY NURSE.

Kashmir.

#### OUR PRIZE COMPETITION FOR MARCH.

A Prize of 5s. will be awarded to the writer of the best answer to the question:—

March 25th.—What is the function of the placenta?

The replies must range from 300 to 500 words.

[previous page](#)

[next page](#)