

handkerchief used by a phthisical person should not be washed with ordinary linen, but soaked for one hour in some recognised disinfectant before being washed. . . . Better still, the use of paper handkerchiefs, which can be burnt after use."

She also speaks of "the importance of the removal of known cases of tuberculosis to sanatoria or hospitals when possible. When this cannot be done arrangements for out-door sleeping shelters can sometimes be made. . . ."

"The dressings taken from tuberculous sores or abscesses should be treated as highly infectious, and be immediately burnt."

Miss Alice J. Wachter emphasises that "the work of the nurse in visiting poor tuberculous patients is chiefly educational. . . . She must teach and enforce the practice of *fresh air treatment*. It has been conclusively proved that patients in the open air frequently recover from tuberculosis, and patients in ill-ventilated rooms never do. In all possible cases the patient must live night and day out of doors, where this is impossible his room must be well ventilated, sunny, clean, and practically empty, no unnecessary curtains, ornaments, or books. No other person may sleep in the same room with a tuberculous patient.

*Diet.* The diet must be easily digestible, and flesh forming, with plenty of fat. It is only where the patient is suffering from tubercular mesenteric glands that excess of fat is contra-indicated. Plenty of cod liver oil, bacon fat, cream, etc., must be secured for the patient.

*Clothing.* This must be light and warm. Perhaps too much has been said in favour of wool next the skin, as woollen garments cannot be thoroughly cleaned and disinfected by boiling, and tubercular patients usually perspire freely.

*Peace of mind.* The patient must be spared all worry (as a rule tubercular patients are not low spirited even when extremely ill), and children must not be allowed to overstudy.

*Infected food.* All cases of doubtful food supply must be reported to the Local Sanitary Authority."

Our quotation from the paper by Miss E. E. Please last week should read "scalds of the throat from drinking boiling water out of kettles are very common with children, and are generally fatal from suffocation (not suppuration) as well as shock."

#### QUESTION FOR THIS WEEK.

What are the most important points in nursing cases of anæmia, and why?

## The International Council of Nurses.

### THE COLOGNE CONGRESS.

DEAR EDITOR,—You will be glad to know that the plans for the Cologne meeting are under way.

As Sister Agnes is desirous of making a complete showing of the progress of Social Service (Prevention or Health Nursing as you may prefer to call it) in all countries, I am proceeding on the following lines: We hereby ask the National Society of Nurses in each country to make itself responsible for collecting all the data in its own country, and for collating all into one report. Otherwise we should have overlapping and an unmanageable bulk of material. We hope to show the whole extent of nurses' employment by the State and municipality, in tuberculosis, infant mortality, pure milk work, public school service, out-door schools, dental clinics, and the like specialties, as well as probation officer, police officer, and truant officer work; of their activity under philanthropic volunteer agencies in similar lines, anything new such as teaching sex-hygiene, or the anatomy and physiology of sex to children and mothers (we have something to show in this direction in public schools) holding classes for children on the care of health, teaching mothers during pregnancy, and giving them instructive care during lactation, on infant feeding and children's diet, and all such work; and of their employment by industrial concerns in factory, shop, or centres of labouring people, to watch, prevent illness, and guard health.

We wish also to learn what nurses are doing in the crusade against alcoholism, against venereal disease, and the social evil, what they are doing spontaneously among themselves to prepare for such effort; what share they are taking in housing reform (as buildings inspector, tenement house inspector, or health visitor), and what new lines there are that I have not mentioned, that are opening before them.

Sister Agnes desires to have all reports on hand early enough for her to have translated in German, and a brief resumé of each made, to be distributed to the German audience. For this purpose all reports should be in her hands by the early spring of 1912. I would suggest, however, that each country preparing a report should undertake the translation of its own report into German. This should not be difficult, and would immensely relieve the President and Secretary of labour,

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