LETTERS TO THE EDITOR.

Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not IN ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.

THE CHALICE AND INFECTION.

To the Editor of The British Journal of Nursing.

DEAR MADAM,—The question of the possibility of infection by means of the chalice used in the celebration of the Holy Communion is one which is of interest to nurses: first, because it is a health question, and with all such questions they are naturally concerned; and, secondly, because their work lies amongst the sick, and they perhaps realize more vividly than most people the danger of infection.

Approaching the subject with all reverence, a spirit in which everyone would wish to deal with it, though it is sad to note that the correspondence on the subject in the public press has not been free from acrimony, let us do so also with an open mind.

It would be difficult for anyone to deny in the light of modern knowledge that there is a danger of infection when a number of persons drink from the same vessel. Proof, if proof were needed, is to be found in the prohibition of common drinking cups by sanitary authorities, and the provision of more hygienic arrangements. The Last Supper in the upper chamber at Jerusalem has no parallel in the service in a modern church, where, perhaps, 600 or 700 persons are communicated from the same chalice.

It is a curious fact that the public apprehension of possible danger from infection appears to begin and end with tuberculosis. I have seen no other disease so much as mentioned throughout the discussion of the subject. Yet mankind suffers from many diseases, of which tuberculosis is by no means the most to be dreaded. Syphilitic ulcers of the mouth are highly infectious, and it should be remembered that many women infected with syphilis have not the least idea that they are suffering from it. Cancer of the lip is not uncommon, and follicular tonsilitis, and also diphtheria in its incipient stage may infect communicants.

Another point which has not, so far as I am aware, been mentioned by anyone writing on the question, is that the celebrant may be affected by an infectious disease. I mention this because it has been assumed that it is sufficient if those who are known to be diseased are communicated last. Yet I know of the case of a parish priest, who is known to have tuberculosis of the lungs, and has had two attacks of hæmorrhage from that cause.

I am not writing in this strain because I wish to be an alarmist, far from it; but everything I have said is sober fact. Is it not time that the Church, as well as the laity, recognised the danger, and

seriously considered what means should be taken to obviate it? I regret the spirit in which some of the clergy imply that the matter is not one which needs serious consideration, but is merely raised by a few faddists. Nothing could be farther from the truth; and the living church should meet the present needs of its loyal sons and daughters: they have the right to ask that it should. They have surely the right to ask, further, that the vessels in which the sacred elements are contained should be guarded from pollution. If, under the Old Testament Dispensation, purity was enjoined on all who bore the vessels of the Lord, surely under the New Dispensation the purity of the vessels themselves should be jealously guarded. What is the remedy? I do not know. guarded. I do not think it is the province of the laity to suggest. We have had suggestions enough, and they have for the most part revolted us. But I do think the bishops and clergy should realize that the question is one which needs consideration, in the light of modern knowledge, if the faithful are not to be compelled to choose between certain risk of infection, and abstention from communicating. Surely, that is not a choice which they should be required to make. Lastly, whatever method may be adopted, I am sure its keynote must be simplicity. The use of capsules, tubes, and other appliances, is unthinkable.

Yours faithfully,

CHURCHWOMAN.

THE BACTERIOLOGY OF TOOTHBRUSHES.

To the Editor of The British Journal of Nursing.

Dear Madam,—After reading the article on the above subject in the Journal last week, one is tempted to ask oneself the question whether the use of a toothbrush is not a greater evil than the omission of this part of the toilet. And we are just beginning to teach school children that its use is imperative, and to institute toothbrush drill! It is difficult to know what really is the right thing to do when the possibility of each hair of a toothbrush acting as an inoculation needle is put before us.

Yours sincerely,

SCHOOL NURSE.

NOTICES.

THE MATRONS' COUNCIL.

Information respecting the Matrons' Council and forms of application for membership may be obtained from the Hon. Secretary, Miss M. Mollett, Rose Cottage, Three Cross, Wimborne.

STATE REGISTRATION OF TRAINED NURSES.

Full information as to the movement for the State Registration of Trained Nurses can be obtained from the Hon. Secretary of the Society for the State Registration of Trained Nurses, 431, Oxford Street, London, W.

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