

long and in divisions, may be a yard or more in length. Bits get broken off and appear in stools until the head is passed. Thread worms are tiny, white, and threadlike, and live in the lower bowel, causes diarrhoea and irritability, etc. Round worm looks like a garden worm, numbers may pass from the bowel; they are yellowish in colour and about ten inches long, and may find their way out even at the nostrils, and are sometimes vomited up.

*Scybala*.—Small hard nodules of fecal matter, may block the bowel and loose motions pass and leave them behind with very bad result; often the cause of Sciatica by pressure on the nerves at the base of the spine.

*Gastritis* or inflamed stomach may be due to poisons, caustics, or swallowing hot liquid. This causes disordered bowels.

We commend the papers by Miss M. W. Foster, Miss Amy Phipps, Miss O'Brien, Miss E. Robinson, and Miss L. P. Jenkins.

Miss Foster enumerates the following abnormal appearances in stools: (1) Green, slimy stools.—Indigestion, often occurs in babies that are not properly dieted, or are fed irregularly.

2. Pale, light-coloured motion, slightly constipated; usually occurs in jaundice; due to insufficiency of bile.

3. (a) Hard faeces; (b) sometimes stained with blood.—(a) Due to constipation; (b) due to constipation and piles.

4. Black stools.—Bleeding in the bowel.

5. Dark greyish stools.—Due to bismuth or salicylate of bismuth taken as a medicine.

6. Dark stools.—May be due to taking iron medicinally.

7. Loose, watery stools. — (a) Due to diarrhoea; (b) might be cholera.

8. The typhoid stool. Light coloured, the consistency of mustard; peculiar odour, due to poison in the bowel.

Miss Amy Phipps writes:—Constipation is often due to dyspepsia or other troubles of the digestive system. It is often, also, a feature of appendicitis, typhlitis, and peritonitis, and in some cases of great prostration, and in nervous disorders there may be inability to pass the motions. It should be remembered that certain drugs have an effect upon the colour of the stools.

#### QUESTION FOR THIS WEEK.

What special virtue has normal salt solution that it is so universally used for intravenous infusion, and some varieties of enemata?

Rules for competing in this Competition will be found on page xii.

## Canadian Matrons in Council.

The Fifth Annual Meeting of the Canadian Society of Superintendents of Training Schools for Nurses, held at Niagara Falls on May 24th and 25th, of which a full account is published in the current issue of the *Canadian Nurse*, was a most interesting and successful gathering. The Address of Welcome was given by Mr. Monro Grier, K.C., President of the Hospital Board, followed by Dr. Kellam, President of Niagara Falls Medical Association.

The President, Miss Mary Ard Mackenzie, R.N., Chief Superintendent of the Victorian Order of Nurses for Canada, in her Presidential Address, enumerated the objects of the Association, which are "To consider all questions relating to nursing education; to define and maintain in schools of nursing throughout the country minimum standards for admission and graduation, to assist in furthering all methods pertaining to public health; to aid in all measures for public good by co-operation with other educational bodies, philanthropic and social; to promote by meetings, papers, and discussions cordial professional relations and fellowship; and in all ways to develop and maintain the highest ideals in the nursing profession." As she truly said, "every clause there means work. . . . The question of registration is one of supreme importance at this very time, and it is from this Society, composed largely of the older and more experienced women in the profession that help should be given on this most important matter. For registration is to make the nursing in the world more proficient by setting a standard for training, and that implies co-operation among the different schools in the way of affiliation and post graduate work. Then, too, the influence we may exert on all questions of public health, and its allied departments, all those matters which we roughly sum up as social service problems, is very great. We are demanding more and more in our profession that our members be women of broad sympathies and culture, and if such are to be encouraged we must look to our superintendents of nurses to see to it that such qualities are fostered in their pupils. Also our nursing magazine, the mouthpiece of our profession from ocean to ocean, should be one of our cherished interests, for with us, again, belongs the work of enthusing our pupils in the magazine, so that when they penetrate into other parts they carry with them the conviction that the nursing magazine is partly theirs, that they are responsible in a large degree for its success or failure."

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