

CAUSE AND EFFECT.

The cause of intemperance is a wide subject, upon which experts are scarcely agreed—heredity, undoubtedly is one factor; hopelessness is as undoubtedly so to another type of temperament, lack of occupation accounts for many cases, while disillusionment with life, as lived on the material plane, and a lack of "Spiritual Life," may be said to be the predisposing causes in many instances.

The cowardly and weak disposition loses hope, the mentally undeveloped has no ready resources at hand, and the materialist becomes weary, and seeks rest—alas, in alcohol. It is not possible for this pen to more than mention these few causes, others will be forthcoming upon serious thought.

The effect of alcohol on the individual has already been demonstrated, on the family implied; surely the children of the race bear witness!—on the nation—the unemployed, and yet more the *unemployable*, answer that question, without even going into the subject of crime. It is a well-recognised fact that alcoholism and lasciviousness go hand in hand—our city streets at nightfall bear witness.

THE REMEDY.

If it has been difficult for this pen to state cause and effect—what of the remedy? It is cowardly to speak on such a subject and fail to prescribe for the relief of such disease, presumptuous to attempt the task, and yet!—

First there must be an unshakable belief that the ill is curable, then a careful diagnosis as to the local causes, then educational work, in a *temperate* spirit, then legislation for the sake of the weaker brethren; all this has been tried, you will say, and you may be right; but China is throwing off the opium curse—unassisted—and why not England, alcohol? There is always waiting "The Grace of God," and that has scarcely been taken into account in our material age.

MADGE SUTTON.

THE MATRONS' COUNCIL.

The annual meeting of the Matrons' Council will be held on January 18th at 431, Oxford Street, London. In these stirring times there are always questions of importance to discuss—amongst them who is to represent the Matrons' Council as a Fraternal Delegate at the forthcoming International Nursing Congress at Cologne. An address will be given by a medical woman on the subject of great interest to members referring to the necessary

instruction for probationers on venereal diseases.

OUR PRIZE COMPETITION.

WHAT SYMPTOMS WOULD LEAD YOU TO SUSPECT VENEREAL DISEASE IN THE NEWLY BORN INFANT?

We have pleasure in awarding the prize this week to Miss Elizabeth Douglas, Maternity Hospital, Belfast Union, Belfast, for the following article on the above question.

If a woman has had a yellow discharge from the vagina during pregnancy or labour, she should be given an antiseptic vaginal douche at the beginning of labour and again during the second stage of labour; this is done as a prophylactic treatment against infection of the child's eyes. Also immediately the head is born the eyes should be swabbed with cotton wool wrung out of some antiseptic lotion.

There are few symptoms immediately on the birth of the child which would lead one to suspect venereal infection.

Sometimes the child has an ill-nourished appearance: the flesh is flabby, the skin wizened and yellowish, and the eyelids red and swollen. These appearances in conjunction with the mother having a yellow vaginal discharge should make the nurse very careful lest she get infected herself; and if in hospital or attending other maternity cases, she should see that other infants are protected from the risk of infection. After three or four days other symptoms begin to show; about the first of these is redness about the anus and buttocks, which very quickly develops into a sore in appearance like a scald. If the baby is bathed very frequently with tepid water and boracic lint applied, it will help to relieve the smarting and pain. Other symptoms follow quickly: anal condylomata, with a rash over the body. Sometimes this comes in pink spots, and at others in white blisters, either of which quickly turn into sore spots, with a yellowish discharge from them. There is usually a watery discharge from the eyes and nose, and the child breathes badly, as if it had a cold in the head.

There is very often a heavy, sickly odour about the child, no matter how carefully it is bathed and cleaned; the bowels are usually loose and the evacuations offensive; the breath is also offensive; scars appear at the angles of the mouth.

The infant takes nourishment badly; or, if it does take it, never seems satisfied. It is peevish and cross and does not sleep well, and does not increase in weight as it should.

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