

MEDICAL MATTERS.

SOKODU (RAT FEVER),

Dr. Frugoni, as quoted in the *British Medical Journal* from a foreign exchange, records an interesting case of infection due to the bite of a rat. The condition is said to be common in China and Japan, and the disease is known under the name of "sokodu" in Japan. It appears to be a specific infection, and may be caused not only by a rat bite, but by the bite of animals who have fed on infected rats. Agada has found a parasite of a protozoal type in the blood. But in the author's case and in three cases recently reported by Horder no parasite was found. The author's case was that of a man, aged 54, of good health, who was bitten badly in the right thumb in May, 1908, by a rat, whose teeth remained in the wound 24 hours before they were extracted. The patient washed the wound with vinegar and wine, and three days later it appeared to be healed. Fifteen days after the bite, when in perfect health, the man was seized with shivering, fever, &c., and rapid swelling of the thumb, going on to ulceration in the site of the bite; the thumb swelled up to the size of the wrist. Meanwhile the epitrochlear and axillary glands became enlarged and tender. This lasted five or six days, when there appeared intense erythematous swelling in the right pectoral region, and a little later similar cutaneous swellings about the waist and thighs, more marked on the right side. This sort of thing went on for about a month, and then cleared up. No suppuration occurred. The patient kept well up to May, 1909, when a similar attack of cutaneous erythema and fever (but without any manifestations in the throat) occurred, and again in September, 1909, and May, 1910. In November, 1910, the patient had an alarming retro-bulbar swelling of the right eye, with extensive exophthalmos (no alterations in the disc or in the vision), associated with the old erythematous manifestations elsewhere. This time he was given atoxyl injections. He left the hospital cured, and has only had some very slight attacks of erythema since. As has been previously noted, no parasite was found in the blood. The chief and constant feature was a marked eosinophilia (8 to 11 per cent.). No helminthiasis was present, no malaria, and the Wassermann test was negative.

LEPROSY NOTIFICATION.

The St. Pancras Borough Council propose to suggest to the Local Government Board that leprosy should be made a notifiable disease.

OUR PRIZE COMPETITION.

WHAT QUALITIES DO YOU CONSIDER SPECIALLY IMPORTANT IN A NURSE WHO HAS CHARGE OF SICK CHILDREN, AND WHY?

We have pleasure in awarding the prize this week to Miss Jessie M. Stevens, a member of the Private Nursing Staff of the Royal Infirmary, Bristol.

PRIZE PAPER.

The special qualities which go to make up a good children's nurse may be classed under two heads:—

(1) Those which are the outcome of her professional training.

(2) Those evolved from her own inner life, the products of temperament and personality.

Most prominent of her professional qualities should be a keen, highly trained *power of observation*. This is especially necessary when nursing babies, who have no language but a cry in which to voice their needs and troubles.

A good nurse will know at once if one of her babies is thirsty, hungry, in pain, or merely uncomfortable. Babies need close and ceaseless watching. Apparently trivial symptoms develop such alarming results, and the spark of life in a sick baby is often so feeble that it flutters out before the unwary person has realized that anything unusual is amiss.

Cleanliness, quickness, resourcefulness—of these the children's nurse needs a "double portion."

The first is essential for obvious reasons.

Quickness because, in a children's ward more than any other, is it true that the work is never done.

Resourcefulness in devising simple means of keeping children amused, happy and comfortable.

A deft, gentle touch, though in a measure the birthright of its fortunate possessor, may also be acquired by training and practice.

Of a nurse's personal characteristics the two most necessary are:—

(1) *Conscientious thoroughness* in every detail of her work. There is no smallest part of children's nursing which is unimportant; all is vital and essential.

One is especially on one's honour when working amongst babies. They cannot complain or report any neglect; they are absolutely at the mercy of their nurse, honourable or otherwise.

(2) *Loving sympathy* with childhood in general, not merely baby worship of one particularly fascinating little mortal.

This will eliminate all anger, impatience, or

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