

I suppose most doctors have been consulted by nurses who fear that they have contracted "the disease" while nursing a patient, and who are entirely ignorant of how the venereal diseases may be conveyed, and what precautions will ensure safety.

Such anxiety is wholly bad for the nurse, and it is not fair to her that she should be subject to it.

C.—*Because nurses are the source of*, or are quoted as the authority for most of the *popular beliefs* regarding such subjects. The influence of the nurse's dictum with patients and their friends can hardly be over-estimated. To them her word often stands for the opinion of one to whom all medical knowledge is available, but who is free from the imaginary prejudices and reserves of the medical profession. This very confidence of the public makes it the more important that what knowledge nurses have of these diseases should be sound and useful, for nurses might be a most useful aid in general sound education in relation to sex.

A true knowledge, free from morbid imagination, will be one of the most important factors in stamping out these diseases, which are such a curse to society. Hitherto, through ignorance, the ordinary nurse has been far from helpful.

II.—*The possible objections* to any instruction being given.

(1) That "a little knowledge is a dangerous thing."

Such is the knowledge at present possessed by the nurse. She gets hints from the orders given by the doctor in certain cases; tales from ignorant sources are repeated, or very imperfect knowledge is acquired by those who try to read the subject for themselves in books intended for those who are already familiar with the elementary facts.

The knowledge given to nurses will necessarily be slight as regards much that is known of the diseases, but it should be as clear and complete as possible from the practical point of view.

Such knowledge is not a danger, but a safeguard.

(2) That it will make nurses fear that they have infected themselves when nursing patients.

On the contrary this fear arises from the sense that they do not know. Nurses do not often exhibit morbid anxiety lest they have taken typhoid, diphtheria, &c.

III.—What instruction should be given?

(1) That two distinct diseases are popularly classed together as venereal.

(2) That Syphilis and Gonorrhœa are two diseases, caused by entirely different organisms, which produce quite different groups of symptoms, and damage the body in different ways, and are only alike in the fact that they may be, and generally are, conveyed from one individual to another by sex relations.

(3) That these diseases are not a kind of penalty devised by nature to punish promiscuous vice, but are definite infectious diseases which can only be communicated by an individual already suffering from the disease. The fact that Syphilis was not introduced into this country till the end of the 15th century should in itself refute such an idea.

(4) That both diseases may be communicated by other ways of contact than sex relations.

The course of each disease should be sufficiently described to make clear the special risks of infection in each case: *e.g.*, the various stages in Syphilis and the special dangers of the secondary stage: how infection may take place through cups, pipes, kissing, &c., and how infection may take place in dressing sores, if any abrasions are present on the hands, round the nails, &c.

Again, the recurring infectiousness of Gonorrhœa, its latent periods, with possible fresh manifestations on the occasions of menstruation, marriage or pregnancy.

The risks of infant ophthalmia when the mother has suffered from Gonorrhœa.

The risks of infecting young children by the eye or the vulva if contaminated by secretion from an infected adult.

The risks of infection of the wife on marriage if the disease has been present in the husband and not completely cured before marriage.

(5) Definite practical instructions should be given in preventive treatment, in the precautions necessary in nursing such cases, and the instructions which should be given to patients not wholly under the nurse's charge; *e.g.*, on a district.

Such are:—

How to apply treatment for a gonorrhœal discharge during pregnancy:

The scrupulous care needed in respect to towels, sponges, night clothes, beds and sleeping arrangements connected with patients suffering from either Gonorrhœa or Secondary Syphilis.

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