

Miss Buck writes that the prompt recognition of retention of the placenta may save the patient's life, as removal of dead tissue will ensure the removal of the site of poison-producing organisms. Therefore, if a patient is found to have a high temperature, or if a temperature remains above 100° F. for more than 24 hours, a doctor must at once be called in. The midwife must not attend any other case until the period of infection is over, and she has been thoroughly disinfected; also her appliances.

Miss Tatham points out it is usual to at once clear out the uterus, either by curetting, or by removing any retained products with the hand. An intra-uterine douche may be ordered, and vaginal douches are also frequently used. The patient's power of resistance must be strengthened by plenty of light nourishment, rest, fresh air in the bedroom, and great cleanliness. The sanitary pad should be changed frequently.

Miss Lett says that retention of a piece of placenta after delivery is likely to lead to sepsis in one or other of its forms. The commonest and least serious form is that known as sapræmia. This form of sepsis is caused by the bacteria saprophytes, which lodge in the retained dead matter, producing ptomanies, which are absorbed by the patient.

Miss Edith Newsome states that the infection likely to occur as a result of a retained piece of placenta after delivery of the child is sepsis in one of its different forms, sapræmia, septicæmia, and sepsis.

#### QUESTION FOR NEXT WEEK.

What is cholera: its symptoms, the treatment usually prescribed, and the nursing points to be observed?

#### A FRIENDLY FUNCTION.

We are asked to announce that the arrangements for the Dinner to be given by members of the Nursing Profession to Mrs. Bedford Fenwick on December 14th are now complete. The Dinner will be held in the Victoria Hall of the Hotel Cecil, Strand, and Mrs. Walter Spencer will preside. The function is to be informal and friendly, and for that reason will be all the more pleasant and amusing.

#### TO HONOUR MISS NIGHTINGALE.

Mr. Walter Merrett's memorial statue of Miss Florence Nightingale, which he has sculptured to the order of the City Corporation, has been received at the Guildhall, where it will shortly find a permanent place in a prominent situation, probably in the lobby.

The statue represents her standing bare-headed, and is about 3 feet in height.

#### THE PLACE OF ECONOMY IN NURSING.

"I shall never employ a trained nurse again when I can avoid doing so," said a friend to me once, "they are too expensive. It is not the fees I object to, but the expenses which are due to extravagance in so many directions. When my husband was ill for three months we had a succession of nurses from various nursing homes and institutions, and they were all alike in this respect; not one appeared to have realised that the long illness of the breadwinner called for stringent economy wherever possible. One nurse sat so absorbed in a novel that she allowed the bottom of the bronchitis kettle to burn out, and when I called her attention to the fact she replied, cheerfully, 'We shall have to get a new kettle.' Not a word of apology for her carelessness!"

I have heard similar complaints in varying forms from many friends, and have myself witnessed a great deal of needless waste during illness. Precious Chippendale and Sheraton tables and trays disfigured by hot-water jugs are a common experience. It is true there are some homes where no other table is available, but it is a simple matter to cover it with several folded newspapers, over these a Turkish towel, and, lastly, a washable table-cover.

A nurse can never secure the best results for her work if the patient is even sub-consciously worrying about expense, or the spoiling of her household treasures. Unfortunately, with a large proportion of sick people some anxiety on the score of expense is inevitable, but the nurse should see to it that this concern is reduced to its minimum, not only regarding herself, but, so far as she can influence them, the servants also. For whenever sickness invades a household a large degree of demoralisation often occurs, and through varying causes, sometimes through misguided devotion, a somewhat reckless expenditure ensues. When the advanced stage of convalescence is reached the patient becomes aware of unusual bills to be met, with disastrous results from the nursing point of view. Too often all the blame is attributed to the fact that trained nurses were employed, and a bitter determination is arrived at to manage without such expensive help in the future.

It is just here that nurses should realise their high opportunities, and take every opening for driving home the lesson of economy to all in the house. Family devotion is often expressed in strangely disproportionate ways. I remember nursing a case where the patient's husband had recently presented her with a seventy-

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