

teaching the broad principles of otology, especially as they affect the child, to every student of medicine, making a sound, practical knowledge of them one of the essentials to qualification. No doubt the burden of an expanded curriculum is already heavy for the student, but my suggestion would not add very much to it, and the knowledge would be implanted when the mind is fresh and eager. It is the things that are learned during our student days that sink deepest and become habits. We could thus ensure that the general practitioner would be in a better position early to recognise the threat of ear disease and the necessity for the prompt calling in of expert assistance. Effective prevention can only be attained by anticipation, which means ceaseless vigilance and prompt interference.

EDUCATION OF TEACHERS.

The elementary school teacher possesses no small potentiality for helping us in the fight against acquired deafness. Every teacher of school children can help the parents of his charges and persuade them for their children's good. Therefore every teacher should be to some extent a physiologist. We could place this power in their hands by giving them some knowledge of the causes which lead to deafness and of how to recognise them. This is being done for the teachers of the London County Council by lectures on the care of the ear, nose and throat, so that they may have the opportunity of becoming fully alive to the opportunities presented to them for the prompt recognition of threatened ear disease during school life.

EDUCATION OF MOTHERS.

In the pre-scholastic period of the child it is the mother who is responsible for the care of her children's ears; when the child goes to school that responsibility is shared by the teacher. Among parents there is much ignorance and superstition, often a good deal of apathy and indolence, to be met. As Bishop Boyd Carpenter has recently pointed out, it is parental ignorance that is continually barring the way to our efforts for the good of the child, the child who is to follow us as the citizen of the future, to whom we have to entrust the honour of keeping unsullied a glorious past. But, in many cases, ignorance and superstition can be dispelled and apathy and indolence can be overcome by the education of the mother. Every good mother is willing and wishful to learn what is best for her child if she is only approached in the right way. The instinct is there; it only wants a little guidance. In the

Sixth Annual Report of the Borough of St. Marylebone Health Society it is noted that the number of cases of epidemic diarrhoea during the exceptionally hot and trying summer of 1911 was noticeably small and the death-rate from that disease was smaller than that of any other Metropolitan borough. This was due largely to the education given to the mothers by the Society, a teaching which was appreciated and welcomed by them. If a result so gratifying can be attained in one department, it can be reached in another. Arrangements are being made to teach the mothers of St. Marylebone the elementary principles of the care of children's ears, and I believe that this will be attended with a like success.

THE NATIONAL BUREAU.

Among the many bodies that exist for the dissemination of principles of hygiene there has recently been inaugurated the National Bureau for Promoting the General Welfare of the Deaf. If that Bureau, which has just completed its first year of activity, can see its way to help in the prevention of deafness as well as in promoting the general welfare of those already deaf, it will assist in a grand work and will have a great and useful future.

OUR PRIZE COMPETITION.

WHAT ARE THE COMMON SOURCES OF BACTERIAL INFECTION?

We have pleasure in awarding the prize this week to Miss Alice Rhind, West Mayfield, Edinburgh, for her paper on the above subject.

PRIZE PAPER.

A knowledge of the conditions under which bacteria grow and flourish will materially help us in realizing the chief sources of danger.

Bacteria require—(1) Moisture; (2) Food; (3) Heat; (4) Little light—they prefer darkness.

(1) Moisture is necessary to bacteria, as to all living things.

(2) Food.—The food of all bacteria that nurses need be interested in is dead or living organic matter—*i.e.*, material of animal or vegetable origin—a minute particle of which is an ample supply of nourishment for millions of bacilli. They all require oxygen: the aerobes grow with free oxygen; anaerobes get it by chemically decomposing substances in the medium in which they grow. It is to anaerobes that the putrefaction of the body after death is due.

(3) Temperature.—According to Dr. F. W. Andrewes, bacteria may be divided into three

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