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called forth a claim on the part of the Nurses Social Union that it already covers the field. Excellent as the Union is as a social factor, we cannot endorse this claim. The very basis of its particular form of usefulness is its close social affiliation with the laity interested in various forms of social work, and it admits as associates women who are not, and never can be, members of a standardized nursing profession. Granted that within recent times it has continually altered and added to its constitution, we should regret to see the Nurses Social Union shedding its social skin, and attempting to do what cannot be done until such time as the nursing profession has a legal basis upon which to found an effective recognized membership. The Nurses Social Union has taken no part in elevating the profession of nursing into a legally constituted body, and unless it is prepared to include such a policy in its constitution, and to work actively for it, it cannot assume to meet the needs of the educated wing of the nursing profession. Moreover, it merely touches the fringe of the English nursing world.

GREAT NEWS.

We announce the great news this week that the Prime Minister has promised that the claims of the Nurses' Registration Bill shall be considered, therefore let all nurses desirous of advancing their profession put their money and their brains into the effort to secure legal status. When that is gained they can usefully specialize in many directions.

LECTURE ON TUBERCULOSIS.

On Tuesday afternoon last, Dr. Steegmann, under the auspices of the Nurses Social Union, gave a most interesting Lecture on Tuberculosis at the Institute of Hygiene, Devonshire Street, W.

Dr. Steegmann said that many people who spoke of tuberculosis limited it mentally to pulmonary tuberculosis, but, like syphilis, it affected every organ of the body, unless perhaps, the pancreas.

It was interesting to hear that in the middle of the 18th century Marten proclaimed that consumption was caused by an animalcule, and declared that if a microscope could be made sufficiently powerful he would wager all he possessed in the world that he would be able to see it.

OUR PRIZE COMPETITION.

HOW MIGHT A CASE OF SCARLATINAL NEPHRITIS BE RECOGNIZED, AND HOW SHOULD SUCH A CASE BE NURSED ?

We have pleasure in awarding the prize this week to Miss Josephine G. Gilchrist, Gilmore Place, Edinburgh, for her paper on the above subject.

PRIZE PAPER.

Nephritis, or inflammation of the kidneys, usually occurs in the third or fourth week after an attack of scarlet fever. It is one of the most common and serious after-effects of that disease, and the symptoms are recognised in the appearance and condition of the patient. In a mild case, the patient's face is pale and puffy, and much swollen if going about; feet and hands swell, and there is loose skin under the eyes. The first symptoms are often vomiting, rigor, more or less fever, constipation. In more severe cases the patient presents a flabby, bloodless look, is drowsy, and easily fatigued; there may be pain in the small of the back, increased by pressure or sudden change of position. In all cases the urine is abnormal. It is reduced in amount, sometimes to a few drachms in the twenty-four hours; contains excess of albumen in varying quantity; blood noted by the brownish red colour; epithelial casts from the small urinary ducts of the kidney.

The functions of the kidneys are to secrete from the blood various impurities, which, if retained, would become poisonous to the system.

The cause of scarlatinal nephritis is due to the poison of the fever, which is in great part removed from the system by the kidneys, irritating these organs, retarding the flow of blood through the minute vessels, with ensuing congestion and exudation of albumen and fibrinous tissue. The functions of the skin being closely allied to those of the kidneys, exposure to cold or chill after a febrile condition may be a predisposing cause of nephritis, which may also be associated with the abnormal state of other organs of the body.

The importance of early recognition and treatment is very essential, as the blood may become so contaminated from want of due purification in the kidneys as to cause uræmia, or the kidneys may become permanently damaged, and a chronic or dropsical condition be the result.

In nursing treatment, warmth is most essential; the patient should wear flannel nightclothing and sleep between blankets, being protected from draughts and chill air. The night-

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