

of flexion, and that, owing to the hysterical basis has become perpetuated and exaggerated, so that there is extreme spasm." Our illustration is one of the best examples of such a case seen by Dr. Hutchison.

The child, aged 11 years, was admitted to hospital for spasm of the hands of two to three days' duration. She had had previous attacks, and she herself said that "the spasm began with a feeling of 'giddiness,' then the thumbs bent in and the hands closed so that she could not open them. . . . By gradual pressure the fingers could be unbent and straightened out, and then she could move them quite freely. The knee jerks were exaggerated, but there was no ankle clonus. Sensation was normal, and the viscera healthy. The spasm quickly disappeared in hospital, but she had a typical attack of 'globus' whilst under observation.'

**MENINGITIS.**

The chapter on meningitis, a disease nurses in children's wards and hospitals see fairly frequently, gives a very clear description of the various forms, as well as the diseases which may simulate it. Amongst these are typhoid fever, pneumonia, acute gastritis, middle-ear disease, acute poliomyelitis, and even rheumatism.

Dr. Hutchison adopts the following provisional classification of meningitis:—

1. Acute—primary and secondary (epidemic, sporadic).
2. Tuberculous.
3. Posterior basic (also known as "simple basal," and very probably only one form of sporadic cerebro-spinal meningitis).

One of the prominent symptoms of posterior basic meningitis is head retraction which, in this variety, is found in a degree of development not met with in any other form. The child depicted in our illustration "shows this in a marked, but by no means unusual degree, and you will recognise from the photograph the appropriateness of the description given to the

attitude by the French writers—viz., 'the gun-hammer position.'"

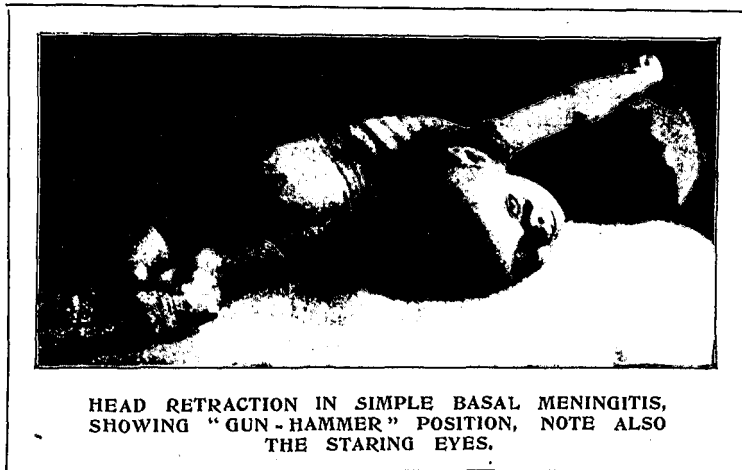
**VULVO-VAGINITIS.**

Concerning the affections of the genito-urinary system the author mentions chronic vulvo-vaginitis in childhood, "which is by no means an infrequent affection, especially in patients of the hospital class. There are two forms of it—the simple form in which pyogenic organisms are the cause, and the gonorrhœal form, which is due to the gonococcus. The latter appears to be the commoner." Dr. Hutchison believes that the view long held that vulvo-vaginitis belongs to the "strumous" order of diseases, and is a sign of general ill health, is erroneous. He states that "it appears to be really a purely local affection requiring local treatment." The gonorrhœal variety is horribly contagious, and

if introduced into a ward may spread round it like wildfire in spite of stringent precautions. On the other hand, it is a peculiar fact that it rarely leads to other gonorrhœal complications, such as blepharitis, arthritis, or salpingitis."

As the gonorrhœal form of this disease is highly contagious, the patient should be "strictly isolated, and the utmost care taken to prevent the carrying of infection by napkins, washing utensils, sheets, &c. All such articles should be thoroughly disinfected before being washed. . . . A diaper or pad should be worn to prevent the child carrying infection to the eyes."

We have given for the benefit of our readers a few illustrations and extracts from this extraordinarily interesting and exhaustive series of lectures on diseases of children. They abound in many as interesting and as practical. We can only reiterate with all the emphasis we can command, that the book should be in every nurses' library, and every nurse should be acquainted with its contents. It would be a most acceptable and delightful present for any member of the nursing profession.



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