

## LETTERS TO THE EDITOR.

*Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in any way hold ourselves responsible for the opinions expressed by our correspondents.*

## A ROYAL COMMISSION ON VENEREAL DISEASE.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—May I congratulate THE BRITISH JOURNAL OF NURSING, and its collaborators on the public spirited part it has played in its demand that venereal disease shall be openly dealt with, and the ignorant, whether innocent or guilty, protected from its terrible ravages by notification and treatment.

I was present when those two wonderful women, Miss Dock and Miss Brodrick, attacked this canker in our midst at the International Congress on Nursing in London in 1909; and in my small way have done what I could do since then to teach our nurses, and interest women workers in the question.

It must be a great gratification to you, and those helping you, to find the doctors asking for a Royal Commission to investigate facts in relation to this group of diseases, and we nurses should all feel proud that our International Council of Nurses took the right course in urging that it was the duty of the State to deal with them four years ago.

Yours sincerely,

AN INFIRMARY MATRON.

[We are sincerely glad that the Government have decided to institute an enquiry, and agree that the attitude of the International Council of Nurses, and also of our National Council was right in giving publicity to this question. No nurse is really of the highest value without a sensitive civic conscience, and in Miss Dock and Miss Albinia Brodrick we have two brilliant exponents of our duty to the community in this connection.—ED.]

## THE INSURANCE ACT AS IT AFFECTS NURSES.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—*Re* the Insurance Act as it affects nurses; a short time ago I was nursing a patient in Wilmslow in Cheshire and while there contracted a cold. The doctor attending the patient prescribed for me; as he was not on the panel I therefore had to pay for my own medicine. Had I not done so I would have had to go into Manchester to see my panel doctor, as I did not know any of the panel doctors in Wilmslow.

Yours faithfully,

INSURED.

[We agree that it is a hardship to pay the Insurance tax, by which you are entitled to be provided with medicine, and also to have to pay for medicine when you need it.—ED.]

## WHERE A STANDARD AND INSPECTION IS REQUIRED.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR EDITOR,—What do you think of this state of affairs? I came home from a long term of arduous work abroad on the verge of a breakdown. My doctor, one of the very best of men and of doctors, said, if that was to be avoided, I must be under his immediate care in town, in a Nursing Home. I took his advice at once; but it became evident the strain had gone on too long, and there were serious complications, and the smash came. I soon found that if I needed anything at night, the day nurse got up; with the result that none of the patients rang if they could possibly help it. I got very dangerously ill, and a special nurse was put on whose fees I, of course, had to pay. When she left, I had had many days and nights without sleep—in fact, I had not two hours' sleep during her stay with me. When she left, I was still very ill, but there was no night nurse. How I endured those horrible nights alone, hour after hour, night after night, I don't know. There was also a patient whose dressing needed changing frequently; she, lying in bed, *changed it herself* once, dresser and dressing all unsterilised, and the wound needed a great amount of packing with gauze. Then, if another change was imperative, she reluctantly rang her bell, and the day nurse appeared. This day nurse was so exceedingly good to everyone that it put the ban on us all the more effectually.

Then came a time when a night nurse was put on. She had been on day duty, and was delighted to do anything for her patients. At once, I began to improve somewhat. Not wishing to disturb others, she and I arranged the merest signal of my bell. Next morning the nurse in charge of the Home (*I presume* fully trained, though many actions and failure to see if a patient was really ill or not, made one think the contrary), told me I was the most selfish person in the Home; I had no thought for anyone but myself, ringing my bell and disturbing everyone in the house. I was quite unable to argue with her, so I merely smiled aggravatingly. Why have bells, if no one may use them? She said that nurse had said she would look in! Much good that would be to a patient who had not slept for many nights, and was just beginning to get a quarter-of-an-hour once or twice in the night, to be roused by the nurse "looking in"; and then to lie for hours, wanting a little comfort and attention, unable to get it! Nurses will not stay in a mismanaged Home; and so an outside nurse is got for a *week*—so that I have had seven different nurses to do things for me. At the fifth and sixth I struck! But the crowning evil was the engagement of a *probationer*! You may guess (*I enclose my name*!), I gave them my mind on the subject. Think of the injury to the girl herself, absolutely ignorant of the nursing world, thinking she is getting some "training!" Probably, she will leave in a few months, and pose as a "trained

[previous page](#)

[next page](#)