

REFLECTIONS

FROM A BOARD ROOM MIRROR.

It has been officially announced that the King and Queen intend to visit Edinburgh and Glasgow in July. The whole programme for the visit has not yet been prepared but the King and Queen will take part in laying the stone of the municipal buildings extensions at Glasgow, the completion of the Royal Infirmary buildings, and the opening of the new building of the Royal Hospital for Sick Children.

At the ceremony of laying the foundation stone by Lord Northbrook, of the Queen Alexandra Nurses' Home, in connection with the Cripples' Hospital and College at Alton, Hants, it was announced that Queen Alexandra had consented to the new addition being named after her, and as a proof of her cordial sympathy with the scheme, Her Majesty had generously given a contribution of £100 towards the cost of the Home. Sir W. Treloar said that when the trustees entered into possession of that freehold estate of 70 acres in 1907, they made a bold experiment in starting a hospital on somewhat new lines with 220 patients. The venture had been blessed almost beyond expectation or belief. After five years' work the Cripples' Hospital was a national institution, and a pioneer hospital, which was being taken as a model. Many children were waiting to be admitted, and there was accommodation at Alton for more patients; but in order that a larger number might be received it was necessary to have a larger nursing staff.

The extra accommodation is for thirty-four nurses and each bedroom is provided with a fitted wardrobe, drawers, hat cupboard, and trunk store, thus avoiding all movable furniture and consequent loss of floor space.

A large recreation room measuring 40 feet by 30 feet is provided in the centre of the building with open timbered roof, which will be so furnished as to give every comfort and pleasure to the nurses in their leisure hours. Adjoining this hall are reading and writing rooms. A large verandah has also been provided outside these three apartments. Sanitary blocks containing bath rooms, &c., are provided but are cut off from the main building by ventilated lobbies.

A Sick Ward for Nurses in a wing of the building approached from a private entrance, has been provided complete with kitchen, bath room, &c. The building is of the bungalow type around which will be planned lawns and gardens—and it should prove a delightfully healthy residence.

Lord Donoughmore (the Treasurer) will take the Chair on Friday, March 13th, at 3 o'clock, at the Annual General Meeting of the London Homœopathic Hospital, Great Ormond Street, W.C. The Hospital has a deficit on the income and expenditure account to December 31st last of £3,550 10s. 1d.

ROYAL COMMISSION ON VENEREAL DISEASES.

At the fourteenth meeting of the Royal Commission on Venereal Diseases evidence was given by Sir Arthur Downes the Senior Medical Inspector for poor law purposes of the Local Government Board and by Dr. E. B. Sherlock of the Metropolitan Asylums Board.

Sir Arthur Downes stated that the general opinion expressed by poor law medical officers in London was that venereal diseases are less prevalent and milder in type amongst the poor than they were formerly. The opinions of provincial medical officers varied somewhat but on the whole they appeared to be to the same effect, there were however some exceptions chiefly in seaport towns.

Sir Arthur gave it as his general impression that the prevalence of venereal disease amongst the very poor was not large.

He explained that under the Poor Law, venereal diseases were on exactly the same plane as all other diseases and that it was the duty of poor law authorities to afford relief to all persons in urgent need of any important assistance, such as medical assistance, which they were unable to provide for themselves.

Sir Arthur said that although poor law authorities did not necessarily insist on venereal cases being treated in an institution he believed that a considerable proportion of the authorities objected to affording outside treatment in the case of these diseases. This he thought might have the effect of deterring some people from coming for treatment.

At the present time the use of the more recent methods of diagnosis and treatment in connection with venereal diseases, was confined to a number of the more important poor law authorities.

In some of the large unions, salvarsan treatment was in use and the Wassermann test was applied.

In London a very fine system of poor law infirmaries had been provided almost all of which were equal in their administration to general hospitals; most of these infirmaries were able to set apart special wards for venereal cases though they could not always reserve those wards entirely, the number of cases not being sufficient to justify their setting aside beds which were very valuable.

Most of the London Unions sent their Wassermann tests to the Wassermann Institute or the Clinical Research or some pathological laboratory.

In the case of the small country unions laboratory provision could not be expected, but the powers of the Guardians to pay for diagnosis and to send patients for treatment in special institutions were very elastic; they had also wide powers of combining amongst themselves for any special purpose.

Referring to the recommendation of the Royal Commission on the Poor Laws that subject to

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