March 28, 1914

## ROYAL COMMISSION ON VENEREAL DISEASES.

## THE HONBLE. ALBINIA BRODRICK.

At the twenty-third meeting of the Royal Commission on Venereal Diseases evidence was given by the Hon. Albinia Brodrick representing the Irish Association and the National Council of Trained Nurses of Great Britain and Ireland and by Miss Garrett, Matron of the Hospital for Women and Children, Harrow Road.

Miss Brodrick thought that the first important step to be taken with regard to these diseases was to spread knowledge with regard to them and to treat the matter scientifically instead of as a mysterious something which cannot be talked about.

From the nursing point of view she thought that the past nurses had not been properly taught regarding these diseases, and that in the future it was necessary that all nurses should go through some special course of instruction.

The education of the general public should include the education of children in the laws of sex. This might be done in the primary schools through the media of botany, and this would prepare the way for teaching at a later stage regarding the human subject. Special teachers would be required until parents were sufficiently educated to instruct their own children. It was necessary, however, that education on this question should be given to parents and to the general public. In this matter Miss Brodrick said that England was very much behind other nations and she referred to the work done by the Society of Sanitary and Moral Prophylaxis in New York, and to similar societies in Germany and other countries.

Miss Brodrick thought that a great factor in the spread of venereal diseases was the ignorance in which women have designedly been left in regard to it. She condemned the practice in the medical profession of treating women without allowing them to know the nature of the disease.

Miss Brodrick thought that greater facilities should be provided for the treatment of venereal diseases and the evening clinics were specially important. Printed instructions should be given to out-patients dealing with the gravity of the disease, the danger of infecting others and the necessity for carefully carrying out curative measures. The disease should be stated openly, and in the case of women, especially, the results to the offspring clearly pointed out.

Miss Brodrick thought that venereal diseases should be notified; at present the notification should be confidential, but later on the notification might be simply as in the case of any other infectious disease.

## MISS GARRETT.

Miss Garrett said that she had been matron of the Lock Hospital, now called the Hospital for Women and Children for the past thirteen years. She gave figures of the number of patients treated at the Hospital in each year since 1893, and these showed a decrease from 736 patients in that year to 340 in 1912. This fall she said was partly due to a change in general conditions and partly to the fact that in the earlier years women came to the hospital from garrison towns. The figures were also very much influenced by the fact that in earlier years patients were of a class who left the hospital directly they were free from symptoms; at the present time the patients remain in the hospital for longer periods and finish their treatment.

During the present year the number of patients has been much larger than has been the case in corresponding periods for a number of years. Miss Garrett thought this was probably the result of the greater publicity of the subject during the last few months.

The name of the hospital was changed some years ago, and this has had good results in getting rid of prejudice against the Hospital. In particular, cases now come to the hospital at an earlier stage of the disease.

Most of the patients treated at the hospital are very young girls, the average age being twenty, and there are very few professional prostitutes.

## DR. ROUTH.

At the twenty-fourth meeting evidence was given by Dr. Armand Routh, the Consulting Physician to the Charing Cross Hospital and to the Samaritan Free Hospital for Women and Children.

Dr. Routh said that from figures which he had obtained he had formed the conclusion that the infant mortality before the period of full birth was as high as in the first year of life so that the total mortality during the intra-uterine life and the first year after birth was about one-fourth of the possible children. He thought that syphilis was the main cause of still births, and also probably of a large proportion of early intra-uterine deaths, and he suggested various measures which might be adopted with the object of obtaining reliable statistics, of assisting diagnosis, and of facilitating the application of treatment. These measures included the extension of the compulsory registration of still births to the whole country, arrangements under which poor women might receive medical supervision during pregnancy, the provision of the pre-maternity wards in every locality, the formation and endowment of research laboratories in all general and lying-in hospitals, and arrangements for financial assistance to poor pregnant women during the later months of pregnancy.

Dr. Routh said he was not in favour of the compulsory notification of venereal diseases, for unless anonymity could be secured and be believed in, many men and most women would not consult a doctor, but would rather remain untreated, or consult venereal quacks, who would greatly multiply. He felt that voluntary notification would be entirely unreliable statistically.



