

staff, has been increased by the admission of additional diseases.

Dr. Cuff proposes that probationers should be engaged for three years instead of two, becoming staff nurses at the end of the second year, and further refers to the necessity for varied and appetising food, and in conclusion reminds the managers that they now have to compete for their nurses with other professions; consequently their terms must be sufficiently attractive to compensate for the restricted freedom of hospital life and the special disabilities of fever nursing.

Dr. Cuff's report, with that of the Special and Medical Sub-committee of the Hospitals Committee with reference to it came before the meeting of the Board on April 4th, but its consideration was deferred.

Evidently a great deal of care and thought have been given to this report, but we may remark that material advantages alone, important as they are, will never attract the best class of candidates to fever or any other branch of nursing, and until nurses receive that encouragement and recognition from the State which their work has earned, and the power to co-ordinate the different branches of their profession, so long will the present shortage continue. It is a significant fact that almost without exception, the Matrons of the Metropolitan Asylums Board Hospitals are strong advocates of State Registration of nurses, and have signed the petition to the Premier asking for facilities for the Nurses Registration Bill in the House of Commons.

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### ROYAL COMMISSION ON VENEREAL DISEASES.

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At the twenty-seventh meeting of the Royal Commission on Venereal Diseases evidence was given on behalf of the Society of Medical Officers of Health by Dr. Chalmers, the Medical Officer of Health for Glasgow and President of the Society, and by Dr. Parkes, Medical Officer of Health for Chelsea.

They drew attention to:—

- (1) The lack of exact information regarding the present prevalence of syphilis and other venereal diseases either as causing illness or death.
- (2) The misleading or incomplete character of certified causes of death, particularly of the remote causes in death from diseases of the nervous or circulatory system.
- (3) The absence generally of any systematic provision for the recognition and treatment of the diseases in question.
- (4) The relationship of syphilis to miscarriages, still births and deaths among infants in the first year of life, especially the first four weeks.

The Society of Medical Officers of Health were, they stated, of opinion that administrative action was desirable for the purpose of providing faci-

lities for the recognition and treatment of venereal diseases. They recommended that the local authorities should be required to place at the disposal of medical practitioners facilities for diagnosis by bacteriological and other methods and that accompanying any such request for examination, the practitioner should supply a statement showing the age, sex, condition as to marriage, number of children and leading features of the disease present, but not including the name of the patient. They did not recommend the adoption of a system of notification in the ordinary sense.

Local authorities should also be prepared to arrange for the treatment of persons suffering from venereal diseases either in dispensaries or hospitals under their own responsibility or by arrangement with general hospitals and dispensaries.

It was important they thought that the facilities provided by the local authority should be available for any person who applied for them whether that person was a resident in the district of the local authority or not.

They recommended that the Local Government Board should issue an Order declaring venereal diseases to be endemic diseases threatening the health of the population and that the Board should make regulations governing the provision of facilities by the local authorities.

It was necessary they thought that the local authorities should be assisted by a considerable grant in aid from Government funds.

Dr. Parkes on his own behalf submitted a detailed scheme of action by local authorities under regulations to be issued by the Local Government Board. He was of opinion that the whole expenditure incurred by local authorities in regard to these diseases should be borne by Imperial Funds.

Both Dr. Chalmers and Dr. Parkes were opposed to notification of venereal diseases, but Dr. Parkes thought that after two or three years experience of systematic action by local authorities against the diseases it would be possible to determine whether any form of compulsory notification could be introduced and whether penalties should be imposed upon persons who knowing themselves to be suffering from a venereal disease, by their conduct exposed other persons to infection.

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### THE HOSPITAL WORLD.

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The Hospitals whose nursing staffs have sent exhibits to the Nursing Section of the Woman's Kingdom Exhibit at Olympia have each their distinctive features.

St. Bartholomew's Hospital, founded in 1123 by Rahere, who lies buried in the adjoining Priory Church of St. Bartholomew's the Great, is the one general hospital within the boundaries of the City, and has many centuries of healing fame to its credit.

The Royal Free Hospital, Gray's Inn Road, W.C., has the honourable distinction of being the

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