charge. The advantage of having a trained Sister in a ward is obvious, not only for the maintenance of discipline, but for the teaching of the nurses both male and female in the nursing methods taught in general hospitals. Catheters are sterilised and the patient prepared as in general hospitals, and now since lumbar puncture has become so fashionable, the patients and instruments are ready for the Medical Officer when he pays his visit. As you can conceive, when working with ins ne patients, accidents occasionally happen, such as an insane impulse to break glass; if every ward be fitted up with its emergency surgical outfit the wound is very soon stitched and dressed by the Medical Officer. Each ward is also supplied with emergency hypodermic, tabloids and alcohol. These details may seem curious to the trained hospital nurse, but until one has had experience of an asylum run on old-fashioned lines it is difficult to realise how inadequate are the provisions made for an urgent emergency in any ward. The prevention of wet beds and the constant changing of incontinent patients, the checking of bad habits and keeping patients tidy, these are only a few of the many routine duties of the mental nurse. It will be realised that these are duties which entail a great deal of patience on the part of the nurse, an attribute which women possess in a more marked degree than men. We must not claim it as a virtue but I have noticed from my own experience and watching my nurses that a woman will wheedle a man into taking his dinner which he refused, into persuading him to go to some amuse-ment, to play cards, to be less noisy, to go for a walk, in fact by virtue of her sex, she influences the male patient all the time for a speedier recovery. A nurse will often persuade a male patient to work when an attendant will fail, from the mere fact that she is a woman and the patient feels called upon to help her in her work,

such as polishing and dusting. After training at the Royal Infirmary, Edinburgh, I took my mental training at Stirling District Asylum, Larbert, one of the most acute mental hospitals in Scotland, where I was Sister for two years and had experience both in the male and female admission hospitals and infirm wards, also in the male chronic working block. From there I was appointed Matron at Rosslynlee on the female side, and now I am Matron on the male side of the West House, Royal Edinburgh Asylum, where, under Dr. Robertson, I am introducing trained nurses and hospital methods. My experience, therefore, has been fairly varied, and not only do I think that the system of female nursing on the male side has absolutely justified its introduction, but I infinitely prefer to nurse male insane patients rather than female. The language is bad at times, but no worse than what one hears on the female side, and insults offered to one are less frequent and virulent than what one receives from the women. Many violent patients do better with women than men, are more amenable to reason; on the other hand, many violent cases

require male attendants, who, under this hospital system, are supervised by the Sister.

One instance I have always remembered was one of the most acute maniacal patients I have ever seen, who was absolutely manageable with the women, but if put in a ward with the male attendants became acutely excited and homicidal. Also, it is noticeable how the men when removed to a chronic ward, where possibly the nurses are entirely male, although under the supervision of a Sister, beg to remain in the hospital wards. Thus, to remove patients from the care of the nurses proves a very adequate punishment for those who are giving trouble in any way.

As regards the night nursing, the same system holds, all patients who can be in the care of female night nurses are so, and the whole asylum, male and female wards alike, are under the supervision of a hospital-trained nurse who acts as Night Superintendent. She is responsible for the discipline of the wards and sees that the patients are properly looked after in the night, that the wards are well ventilated, that the web patients are frequently raised and their beds kept dry. She goes to the Medical Officer to report any noisy or restless patient and gives the sedatives ordered herself. The time at my disposal has allowed me only very briefly to give in outline the methods of administration of the nursing staff in some of the Mental Hospitals in Scotland, and I trust that I have shown you that female nurses can work on the male side in Mental Hospitals even in the acute male wards, with marked benefit to the patients, but I trust also that I have clearly demonstrated that the discipline must be extremely good, and that can only be obtained by having a woman of better education, of better social standing and wider training in the nursing world, who is constantly present to direct the work of the male and female nurses and maintain discipline between the nursing staff and the patients.

A MEMORIAL TO MISS ANTROBUS.

The Council of the Guild of St. Barnabas for Nurses have decided to endeavour to raise the 'sum of ± 500 to found an annuity for a nurse as a memorial to Miss Susan E. Antrobus, founder of the Guild, and for thirty-seven years its Superior General. It is proposed that it shall be administered through the Trained Nurses Annuity Fund, and also that a portrait of Miss Antrobus shall be placed in the office of the Guild at the Church House, Westminster.

Miss L. L. Dock sails for the States from Southampton on Sunday next, having thoroughly enjoyed her association with the forward Suffrage Group in this country. Her friends will greatly miss her inspiring companionship. A short criticism from her wonderful pen of the Registration Chapter in Sir Edward Cook's "Life of Florence Nightingale" will appear in this Journal next week.



