

try to get the conversation into other channels. When such patients cannot cry, and cannot speak of their trouble, and seem simply numbed, it is indeed difficult to give the mind rest, and real sympathy and that psychic instinct that is so invaluable in mental nurses will alone give one the cue. Sometimes the thought of others—friends or relatives affected by the same news or trouble, will help a patient to regain a normal outlook. But in all cases I should try to get my patient's confidence, and make sure that I knew the whole state of the case. I should want my patient to feel I was at hand as a helper in case of need, never in the way, never out of it. I should watch for any mental symptoms, and report to the doctor all personal details, such as appetite, amount of sleep, action of bodily organs, &c. I should encourage any occupation likely to help the brain regain its normal state, giving light diet, and plenty of fresh air, as accessory treatment.

(3) *Spirit*.—This third factor is one which does not receive as much attention from nurses as it deserves. I feel most strongly that mind and spirit are so closely allied (in fact, so much so that many make no distinction, and talk of body and soul only), that we cannot distinguish in our treatment and care for the mind while leaving the spirit uninfluenced.

It is just because many mental nurses forget this, that their results sometimes are not what they would wish. They treat the mental symptoms, forgetting that the spirit will be affected too—and if there is no treatment directly given to the spirit, then it will suffer from neglect, and in this connection we must remember that what does not make for good, in these cases increases the trouble. Therefore I commend the subject of help for spirit—as well as body and mind—to nurses in charge of patients suffering from mental shock. The nursing can be summed up so :—Treat body, soul, spirit, be normal—help, don't fuss.

#### HONOURABLE MENTION.

The following competitors receive honourable mention :—Miss J. G. Gilchrist, Miss M. Adams, Miss P. M. Harrison, Miss J. Robinson, Miss Macmahon.

Miss Gilchrist writes :—"The first duty is to restore the circulation to normal conditions, which owing to the shock has altered and failed. Stimulation may be obtained by diffusible drinks, such as tea and coffee, which, if given strong, is a good stimulant."

#### QUESTION FOR NEXT WEEK.

How would you prepare a normal salt solution for infusion in a private house?

### REGISTRATION AND THE WAR.

Nothing has shown more clearly than the present war the defencelessness of the sick, owing to the lack of nursing standards; and the defencelessness of the nursing profession to encroachment, from all sides—owing to their regrettable lack of organization.

In the first place, it has been possible to ignore the professional position of the Matrons. Of all the hospitals—outside those connected with the Expeditionary Force—we know of no Matron of an important hospital who has had the compliment paid her of being asked to act as Lady Superintendent in a military hospital abroad. Instead, a weekly illustrated paper seldom appears which does not contain the portrait, in full nursing uniform, of some lady of wealth and position, who is described as Superintendent of a hospital, at home or abroad, for sick and wounded sailors or soldiers.

Those Matrons who have persistently opposed the organization of their profession, and have supposed that its interests were limited to those of the institutions over whose nursing schools they preside, have met their Nemesis in the contemptuous way it has been possible to ignore their professional knowledge and skilled services, and thus to prevent efficient aid being rendered to the sick.

A correspondent of the *Irish Citizen* writes, in this connection :—"The soldiers die of tetanus, and rot of gangrene, while unskilled duchesses and influential ladies, athirst for a new sensation, usurp the functions of the skilled worker, and are photographed in half-penny papers bending tenderly over their victims, with jewels ablaze at their breast and favourite greyhounds by their side. . . .

"Cholera, smallpox, fever epidemics will cheerfully be left to the trained to cope with, but these society ghouls fasten themselves on the wounded soldier or officer, not realizing that the proper treatment of wounds demands exceptionally high training."

Another most serious side of the question is the economic one. When at the beginning of the war encroachment on the work of dress-makers and sempstresses was seriously threatened, the leaders of organized labour protested effectively, so that the influence of the Queen herself was invoked, and the evil stopped. But on all sides the work of skilled nurses is shamelessly annexed by unskilled persons, and, until a Nurses' Registration Bill is passed, the evil will not only continue, but increase. Evidence is not wanting that the public are not indifferent to the situation.

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