LETTERS TO THE EDITOR.

Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not IN ANY WAY hold ourselves responsible for the opinions expressed by our correspondents.

WOMEN AND THE COMMITTEE OF INQUIRY. To the Editor of THE BRITISH JOURNAL OF NURSING.

MADAM,-It is reported that a committee has been appointed "to inquire into the working and organization of Voluntary Aid Detachments. The names of the committee are given, and it would appear that it is composed exclusively of men-there is not one woman's name upon the list. Now, Voluntary Aid Detachments are composed chiefly of women. There are, for instance, in the County of London, registered with the British Red Cross Society, 51 V.A.D.'s of women, with a personnel of 1,327, and four V.A.D.'s of men, with a *personnel* of 211 (see report, March, 1913). I should therefore like to point out to those responsible for the selection of this committee that it is, under the circumstances, scarcely appropriate that this inquiry should be conducted solely by the male sex. The work of V.A.D.'s is primarily women's work, for it concerns the care of the sick and wounded, and I would deferentially suggest that the committee should include some women doctors, some fully-qualified women nurses, together with some non-specialized women who have had experience as organizers of women and as commandants in women's Voluntary Aid Detachments.

If women are incapable of taking a share in the organization of work which is pre-eminently woman's work, they are incapable of responsibility in a national crisis, and the whole scheme of V.A.D.'s should be relegated to the sphere of drawing-room games. But if, as I maintain, women are very capable of participating in the organization of work concerned with the sick and wounded, then the exclusion of the female sex from this committee of inquiry is an insult to all women and a special grievance to those thousands of women who have, throughout the country, ever since the inception of the scheme of V.A.D.'s, sacrificed much money, time, and energy in the cause of national defence.

Yours truly,

M. A. STOBART.

3, Reynolds Close

(Hampstead Garden Suburb), N.W. [We heartily support Mrs. St. Clair Stobart's

point of view.—Ep.]

THE RELIEF OF PAIN.

To the Editor of THE BRITISH JOURNAL OF NURSING. DEAR MADAM,—I was extremely interested in the article on "The Relief of Pain" published in the last issue of the JOURNAL. Dr. Gordon seems to understand what nurses want to know, and to have the faculty of explaining it to them.

MATRON.

WHY SHOULD SCOTTISH NURSES WAIT? To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,-I read eagerly all registration news in The British Journal of Nursing, and it has occurred to some of us Scottish Nurses that it is unjust we should have to wait for registration, when we are almost unanimous for it in Scotland—Committees, doctors, matrons, nurses -simply because in England so much commercial profit is made by hospitals like the London Hospital, out of their nurses. We do not have that system of farming out private nurses for hospital upkeep in Scotland, and hope we never may have to suffer such injustice. Then our Matrons are all in sympathy with State organi-zation, and the help it will be to better education and conditions for us, and Scottish nurses naturally have confidence in following their lead. We don't see why we are to be dictated to by the Matrons of London Hospitals, who are less progressive and sympathetic than our own. We are to have a Scottish Midwives Act. Why not a Scottish Nurses' Act-that is unless this stupid opposition ceases ? Ireland could also have an Act, and then reactionary England would have to follow. As it is we are all held up because English Committees are frightened of nurses having power to remedy the abuses from which they suffer. Yours truly,

A Scottish Sister.

REPLIES TO CORRESPONDENTS.

Senior.—The principal reason why ergot should not be given until the third stage of labour is over is that should there be any abnormality connected with the placenta, as for instance if it is adherent, the contraction of the uterus resulting from the ergot, may cause difficulty in carrying out the necessary treatment. Not only the uterus but the cervix may be contracted, and great difficulty arise in dealing with the situation. The point as to whether ergot should be given *after* the third stage is over is a debatable one which does not arise in your question; but it is an important one, as many midwives trained some years ago were taught to give it as a routine practice, but the weight of modern opinion is averse to this.

M.V.W.—Please send name as guarantee of good faith, not for publication.

TO CORRESPONDENTS.

As the letters addressed to the Editor weekly on all sorts of questions to do with the journal and otherwise have now arrived at great dimensions, stamps must be enclosed if a reply is required. No charge whatever is made for replies.

OUR PRIZE COMPETITIONS.

July 18th.—Define hæmorrhage, shock, coma, asphyxia, syncope.

July 25th.—How may the course of pregnancy be affected when the mother suffers from syphilis? What are the effects upon the child, supposing it is born alive, when the mother suffers from (a) syphilis or (b) gonorrhea?

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