

exposed, so long as nursing has no recognition from the State, that makes those who appreciate the position so insistent that legislation shall no longer be delayed.

The representative Deputation, organized by the Central Committee, and received by the Home Secretary on July 30th, presented a case so strong that there were no arguments to be advanced against it, and in his reply Mr. McKenna fell back upon the force of the opposition as an argument against immediate Government action. He however made two encouraging statements (1) "You have entirely satisfied me on one point. Your claim to registration relates to something quite different from the objections put forward," and (2) "You have quite converted me, if I needed any conversion on the subject of an Official Directory." It is an ever present danger, that when legislation is imminent, the opponents will endeavour to minimize its value by endeavouring to substitute an Official Directory for a Register of Trained Nurses. The fact therefore that the Home Secretary realizes the futility of this proposal is eminently satisfactory.

The British Medical Association at its Annual Representative Meeting once more passed a resolution endorsing its support of the principle of State Registration of Nurses.

Of the various societies affiliated to the Central Committee, the Society for the State Registration of Trained Nurses has been most active in propaganda work, during the year, and in drawing public attention to the proposals of the Nurses' Bill.

In Scotland at the Nursing Conference held in Glasgow early in the year a resolution in support of State Registration of Nurses was carried unanimously, and subsequently forwarded to the Prime Minister.

In Ireland the Irish Nurses' Association also actively supports the Nurses' Registration Bill, and keeps Irish Members of Parliament well informed on the question.

Wherever nurses are organized in our Dominions beyond the Seas, they are working to secure legal status or already enjoy it.

The most important new organization this year is the South African Trained Nurses' Association, in which eligibility for membership is registration as a general nurse, or midwife, in any Province of the Union of South Africa, no nurse not so registered being admitted to the Union.

In the United States of America registration laws have been passed in Florida, Kentucky, and Mississippi, bringing the number of States in which registration is in force up to 40.

MENINGITIS.

By Miss AMY PHIPPS.

Meningitis, or inflammation of the meninges (usually the pia mater) covering the brain, is a disease most commonly met with in early life, rarely occurring after the age of forty-five.

The disease may be simple or tubercular in origin, the latter being the most common, or it may occur as a complication of some other disease. The intensity of the inflammatory process varies; some cases are acute, others protracted, while many, particularly the tubercular ones, tend to run a chronic course. The part of the brain most usually attacked is the basal portion of the pia mater, usually including the fissure of Sylvius; the convexity is often found to be attacked also, but the limiting line is not easily defined.

In acute cases of simple meningitis the base of the pia mater is the seat of a purulent deposit, the exudation in some cases coating several of the cranial nerves and matting them to the adjacent membrane, involving the choroid plexuses. There is often considerable ventricular effusion, rendering the neighbouring cerebral tissue soft and oedematous.

In the tubercular form of meningitis the membrane is more or less inflamed, and there is usually an exudation of a serous or purulent character. The tuberculous granulations are met with in the course of the vessels of the pia mater, and are particularly numerous between the lips of the fissure of Sylvius. The lateral ventricles are often distended with serum, which frequently permeates the aqueduct of Sylvius, invading the fourth ventricle. The presence of the miliary tubercle in the meninges is often associated with a similar deposit in other organs.

The causes and predisposing causes of meningitis are many, and include direct or indirect injury, imperfect hygienic surroundings, alcohol, &c. Probably the majority of cases occur as a secondary disease, the primary affection being such as pulmonary or peritoneal tuberculosis, syphilis, caries of the cranial bones, internal otitis, erysipelas, carbuncles, &c., of the face, tumour, abscess, or as the extension of inflammatory processes of the dura mater. The onset may be insidious, with a marked premonitory stage, or it may be quite sudden, the patient, in the midst of apparently perfect health, being suddenly attacked with symptoms suggestive of acute inflammation of the pia mater. The symptoms are, or may be, numerous, from the fact that the nerve centre of almost any part is likely to be attacked.

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