

"Wounded 1915" with the cool ward, the trim beds, the white table, the spruce nurse, and the whole effect of concentrated sunlight, says that it makes one feel that although there must be pain in the wake of war, those at home are doing their utmost to deal with it in pleasant places. This is the least of our duty, we who, for any reason, are unable to take an active part.

But she shows us another side of the picture: "Let me say at once I am not speaking of sunlight, or flowers, or white walls, but of a hospital within sound of the guns, behind the French lines; and although there are some details I cannot give, every-day events that are too nauseating, I am going to trample under foot all ideas of romantic war, scatter artistic descriptions to the four winds, and tell as nearly as I dare, because of the extent of their needs, the life and patience of our wounded Allies, the French soldiers.

This hospital is capable of holding 1,500 patients, while the buildings are formed of 24 "batiments," or isolated wards. Each "batiment" contains 8 long stone-paved rooms on the ground floor, with two windows at the far end of the room. There are about 60 to 70 patients in each "batiment," and there is ONE NURSE. There are soldier stretcher-bearers to help. At night there is one nurse to three or four "batiments," that is to say, one nurse to between 180 and 200 men. The first 16 or 18 buildings are occupied only by the wounded, the others are for infectious cases, and are therefore isolated.

As we drove up to "Batiment No. 1 A," ambulances were coming in laden, and leaving at once empty for the front; stretcher-bearers were passing in and out of the wards with the wounded from the ambulances; there was more work to do than men to do it, and in the dust of the roadway, in the burning sun, lying only on the canvas stretcher, the wounded were waiting till the orderlies could carry them into the wards. First we went to the amputation wards. Some of the patients were asleep; some were sobbing and writhing in the agony of the aftermath of the operation; some were lying on the hard beds, still covered with the caked mud and blood, just as they had been brought from the trenches. Some, quiet and resigned, watched with wondering eyes this holocaust of life before them.

One man, naked but for the coarse grey sheet thrown loosely over him, and whose arm had just been removed, lay unattended, vomiting and choking from the ether. The smell of blood, leather, clothes and disease was stifling."

ULTRA-VIOLET RAYS IN FROSTBITE.

A French medical journal describes the application of the ultra-violet rays in the treatment of frozen limbs. No appreciable benefit was observed in simple frostbite. When there was ulceration the good effect was marked. In one case the pain was arrested by the ninth or tenth application, and the swelling subsided on the sixth day.

FRENCH FLAG NURSING CORPS.

Miss Isa Scott, of Bowden, St. Boswell's, has sent a most generous contribution to Lady Barclay for the F.F.N.C. with the promise that she will send bundles from time to time. Amongst the gifts, all of which will be greatly appreciated in France, are eighteen beautiful fine woollen shirts, many pairs of socks, thirty dozen handkerchiefs, towels, 'serviettes' and tray cloths, beautiful white linen operating gowns, feather pillows, 1 dozen fancy cushions, medicine and ear syringes, soap, walking sticks for the wounded, writing materials, and many other things, and what is so nice, everything of the very best quality. Miss Scott writes: "I have a great love for the French, and they are brave and standing between us and the enemy."

Mrs. Keith Peter, St. Lucia, West Indies, has also sent another splendid gift (forty soft cushions have already been sent from her through the F.F.N.C. to France), which she has collected, composed of 100 small covered cushions, feather pillows, 24 pillow covers, 220 bags for contents of wounded soldiers' pockets when in bed, lint and bandages. These valuable gifts will ease many an aching limb, and it is well our brave Allies should know how their suffering is realised by British women in many parts of the world.

Many nurses who are now working abroad are finding that their uniform now needs renewing. Messrs. E. & R. Garrould, 150-162, Edgware Road, W., and the Hospitals and General Contracts Co., Ltd., Nurses Equipment Section, 21, Mortimer Street, London, W., are well known firms which make a point of studying the needs of nurses, and know the exact details of the uniforms of all the Government Services and principal hospitals.

Miss Haswell expresses the opinion that the usual indoor uniform worn by English nurses is not the most practical for war time. She disapproves the long sleeve, which is untidy when rolled up, and the hard slippery cuff, when pulled down. She likes the Danish sleeve, which comes just above the elbow on which a neat pointed piqué cuff is stitched. We hope to have some good suggestions on this question in our Prize Competition Papers, August 28th.

In thanking Lady Barclay for forwarding hospital comforts to Dunkerque, Sister Lind points out that "*malades* always come off second best in comparison with *blessés*." That is because the care, comfort and cleanliness of the patient and his surroundings, whatever his disease, have not yet been grasped by the auxiliary nurse, as true scientific nursing. Only wounds are of vital interest to the war nurse, and when the wound is dressed the real details of true nursing are considered superfluous. Yet it is these details in the nursing of sick men in the isolation blocks of

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