

climatic conditions in his official Report to the Local Government Board. The report is of exceptional interest and particular value to those responsible for the organization and conduct of so-called open-air treatment. The conclusions are of such importance that we think it wise to reproduce them here:—“The curative influence of open-air treatment and exercise depends on the increased metabolism of the body which is accompanied by a more ample ventilation of the lungs, more vigorous circulation, better appetite and digestion, and lessened bacterial decomposition in the large bowel. It is rather by these ways than by auto-inoculation that the beneficial effects are obtained in the treatment of phthisis. The movement of the air, producing an adequate cooling of and stimulating effect on the skin, is the prime factor in ventilation, and crowded tenements and cities owe their deleterious effects to the withdrawal of the citizens from the adequate action of moving air and sunlight, and not to any chemical impurity of the atmosphere which they breathe, leaving on one side the question of dust in the atmosphere. There seems to be no advantage in open-air treatment on cold damp days when the atmosphere is still and saturated with moisture. Exposure to such an atmosphere produces a sensation of cold owing to the water vapour in the air, which cools the nerve endings in the warm skin of the face and hands; it does not produce the advantageous increase in metabolism or the stimulating effect which is produced by air movement acting on the whole cutaneous surface. Bracing places are those where the metabolism is increased most by free movement of cool and not too humid air. Sanatoria should not be placed in situations so sheltered that the air is apt to be still and overladen with moisture. It is inadvisable to surround suburban houses with trees and shrubs, which blanket them with a stiller and moister air. The beneficial effect of garden cities, as far as atmosphere goes, is to be sought in the freer movement and greater relative dryness of the air both inside and outside the houses. It is well known that artificial methods of warming cannot be applied with any advantage to the raising of animal stock, and such methods should be so used by man as to diminish to the least degree the energy output of his own body, commensurate with his efficiency in work. Overheated rooms and still air decrease the activity of the body furnace, and so lead to lessened vigour and resistance to disease. Particularly is this the case if over-eating accompanies overheating, for the food eaten is not required to keep the body warm, and undergoes bacterial decomposition in the

bowel, with the consequent deterioration of health. The overheated air of rooms, with the rapid changes of temperature from this air to the outside winter air, leads to the disturbed function of the respiratory mucous membrane, with the consequent acquisition of ‘colds’ and respiratory infections. It is not the cold outside air which causes the trouble, but the overheated atmosphere of the room. The general belief that exposure to cold is the cause of all trouble is greatly to be deprecated. So far as real evidence goes, those who expose themselves freely to open air and cold weather become hardy and vigorous, and do not take ‘cold.’ Excessive protection from cold weather by overclothing, overheating, and shutting out of wind lessens immunity and increases the susceptibility to such diseases as pneumonia and phthisis. The evidence of this research is in favour of open-air schools, open workshops, garden cities, and means of affording sedentary workers opportunities of open-air exercise to counteract the effect of their employment in still, warm atmospheres. When it is generally realized that it is the physical and not the chemical conditions of confined atmospheres which influence health and happiness, a vast improvement in the condition of home and industrial life will be effected.” The report of this well-planned investigation certainly goes far to justify open-air treatment as usually carried on in the sanatoria of this country.

QUESTION FOR NEXT WEEK.

What are the symptoms of mental failure, and what is the nursing treatment?

THE KING'S RETURN.

Everyone was surprised, but much delighted, to know that the King was at home again. His Majesty crossed the Channel in the hospital ship *Anglia*, and the journey from the coast was made in the ambulance train *Queen Mary*.

The ambulance in which he was removed to Buckingham Palace was the gift of the ladies of *Burmah*.

The two trained nurses who have the honour of nursing His Majesty are Sisters Edith Ward and Vivienne Tremaine, the former English and the latter Canadian. Both were working on an hospital barge in France when summoned to attend His Majesty.

Sir Frederick Treves and Sister Ward accompanied the King in the ambulance on the journey between Victoria and the Palace, which was very slowly accomplished.

The whole nursing profession will unite in the hope that His Majesty may speedily recover completely from the effects of his accident.

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