

instructed from many sources—visitors, literature, and popular lectures, &c. Yet cases of surgical tuberculosis are just as frequently met with, and the ignorance and apathy of public attention on the point does not cease to exist.

Just at this time, when the mind of this country is so full of the thought of war—of men, munitions, hospitals, transit, &c.—it may seem that this present paper is inopportune, that this question might be allowed for the moment to slide.

In a former article bearing on "The Child" I pleaded for a wider patriotism. A little further thought will prove that this is the most important time for us one and all to preserve the children of the nation.

In a speech recently made in the Houses of Parliament we learnt that our casualty list up to the present numbered 493,294; up to the present, mark you—we are not at the end yet. Before this war is over we shall see the nation depleted of many more of her sons.

Meanwhile, 10,000 little lives are being sacrificed no less surely annually to the great white plague, and England will have need of her sons and daughters to maintain her place in the world, and to fulfil her mighty destiny.

Furthermore, in the heart of every man and woman at the present moment burns the pure flame of patriotism.

Those who are young and fit have shouldered a knapsack and are away, filling our trenches, drilling and route marching to form a new army with which to conquer, and maybe to die.

Women of all ages and ranks are nursing and knitting, and seeking useful work in one sphere or another, often with anxious and aching hearts.

Well, here is work for one and all—to *conserve the child life of the nation*. Let the scheme go forward without hindrance or fail. England will need her 10,000 little lives in this and in the years to come.

Many hospitals are coming into being for our wounded warriors that by and by could be utilized for tubercular cases at a very reduced expenditure. Is it not a past military hospital, the aftermath of the South African War, at Alton, Hants, that is being used as a pioneer institution of the type so greatly needed in every city and county in our land?

When the reign of peace arrives, "the care of its children will again be the first work of the nation," and meanwhile it is work that must not be neglected. Let me commend it to the present care of those patriots who have to remain at home.

M. SUTTON.

TO AID THE WOUNDED IN WAR.

TWELVE COMMANDMENTS TO AVOID CRIPPLING OF WOUNDED SOLDIERS.

Professor Ritsch, of Freiburg, has recently issued a set of rules for guidance of German surgeons in attendance on the wounded at the front. These rules, posted in all hospitals in Germany, are practical, and may as well be used for the benefit of our own wounded:—

1. Remember that rest of joints (stiffness) and muscles (atrophy and weakness) is harmful.

2. Do not depend on orthopedic mechanical after-treatment, but attempt to avoid it by your results. In severe cases, however, refer your patient to mechano-therapy as early as possible, in order to save time, trouble, and money.

3. Avoid keeping joints in one position; move them as soon as the fracture is healed (change angle of joints; use passive motion).

4. Attempt to retain the valued power of the muscles by the very early use of massage, electricity, and active movements, both with and without resistance, performed under your supervision.

5. Remember that extensors atrophy much more rapidly than flexors. Above all, try to keep the deltoid and the quadriceps femoris intact, as the arm and leg without them are of little use.

6. If on account of severe injury to soft parts prolonged immobilization becomes necessary, place the joints in a position in which, if ankylosed, they will be most useful:—

Shoulder: In the position afforded by an ordinary sling.

Elbow: At a right angle.

Forearm: In pronation.

Wrist: Over-extended as in writing, or as in clenching the fist.

Fingers: Slightly flexed.

Hip: Slightly flexed and abducted.

Knee: Slightly flexed.

Ankle: About at right angle and slightly rotated inward.

7. Avoid allowing the wrist to fall into continued flexion when the arm is carried in a sling, since, if permanent, tight closure of the fingers is prevented.

8. Keep fingers limber. Don't over-bandage them, and don't forget to tell the patient to keep them in motion. If possible, retain some sort of grasping organ (Greifzange), for an artificial hand is insensible.

9. Stimulate circulation, especially in individuals confined to bed, by means of movement of the limbs and by deep breathing; for in-

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