distinctive variety is originated. Moreover, in the same individual the rash is not always of the same character throughout, several distinct types developing in different parts of the body. The rash is usually more or less symmetrical, the colour in the early stages being a dusky red, resembling that of raw ham, whilst later on it becomes of a more coppery hue; occasionally, however, it may be a bright rosy red.

The secondary stage is highly infectious; the blood and all the secretions are infective, for the germ of the disease is spread all over the body

3. The Tertiary Stage.—The phenomena occurring in this stage may appear within six months of infection, or may be delayed for several years. The phenomena consist in overgrowth and infiltration of connective tissue in various parts of the body. If the overgrowth is localized it forms a hard lump in the particular part in which it occurs, known as a gumma.

The particular points I wish to emphasize are that the primary sore and the secondary stage are both highly infectious. After the symptoms of the secondary stage have disappeared, the patient may present no signs of the disease, and may appear a perfectly healthy woman. If she has been properly treated, she is cured. If she has not been properly treated, she still has the disease, although she may have no sign of it. The germs still lurk in her body, and she may at any time develop symptoms, such as paralysis, from a gumma of the brain or spinal cord, a disease such as locomotor ataxy, or general paralysis of the insane. She can also transmit the disease to her children.

This leads me to speak of the Wassermann reaction. By this delicate test, which is made on the blood, we have a certain means of finding out whether a person has syphilis or not. It is a highly complicated and difficult test, and can only be carried out by an expert pathologist who is constantly performing it. A positive test means that the patient still has syphilis. A negative test means she is cured. It is only by employing the Wassermann test that it is possible to say for certain whether an apparently healthy person has syphilis or not.

A few points of difference between syphilis in men and women are worthy of mention. Syphilis in women is not nearly such a serious disease as in men; the primary stage and the early part of the secondary stage are equally severe in the two sexes, but the later manifestations of the secondary stage and the tertiary stage are much less severe in women. It is also a noteworthy fact that in women who

are bearing children the symptoms are even milder still. This last fact is of great importance to us. The disease in a child-bearing woman may be so slight that she presents no manifestations; all the same, she may give birth to syphilitic children, and only the Wassermann reaction reveals the fact that she has syphilis.

(To be continued.)

NURSING AND THE WAR.

The following Matrons had the honour of being received by the King on February 16th, at Buckingham Palace. His Majesty invested them with the Decoration of the Royal Red Cross:—

First Class: Miss Margaret Sparshott, Miss Clara Vincent, Miss Christina McKay, Miss Janet Sheppard, Miss Winifred Smeeton, and Miss Harriet Oates.

Second Class: Miss Madeleine Raye and Mrs. de Winton.

Our portraits of Miss C. E. Vincent, R.R.C., Principal Matron 5th Northern General Hospital (T.F.), Leicester, and Miss Harriet Oates, R.R.C., Matron 1st Western General Hospital, Liverpool, will be welcomed by many of our readers.

will be welcomed by many of our readers.

Miss Vincent, Matron of the Royal Infirmary,
Leicester, was trained in the Nightingale School
at St. Thomas' Hospital, and subsequently
was appointed Sister, and then Assistant Matron.
For the last three-and-a-half years she has been
Matron of the Royal Infirmary, Leicester. In
1913 she was appointed Principal Matron of the
5th Northern General Hospital, of which Miss
Hannath is Matron, and a description of which
has been published in these columns. The
original hospital of 520 has now been largely
augmented.

Miss Harriet Oates, Mation of the 1st Western. General Hospital, Fazakerley, Liverpool, was trained at the Royal Infirmary in that city, and afterwards held the position of Sister of Clarence Ward, subsequently being appointed Matron of the St. Helen's Hospital, Lancashire. Miss Oates has been connected with the Territorial Force Nursing Service since its formation.

We are indebted for these portraits to the courtesy of the Editor of The Gentlewoman.

It was a happy coincidence that the news of the arrival in London of the Scottish Nurses who had been imprisoned in Austria should reach the City of Perth on the day of the Annual Meeting of the subscribers to the Perth County and City Royal Infirmary, for amongst them was the Matron of the Infirmary, Miss Bowhill, and the large gathering had an opportunity of expressing its admiration and appreciation of the services and sacrifices of these nurses who voluntarily undertook to nurse the wounded Serbians. On the proposition of Mr. Alexander McDuff, the subscribers sent a telegram to Miss Bowhill, expressing their admiration of her heroism, and

previous page next page