

Mayoress on behalf of the Committee as a mark of their respect. We congratulate Miss M. A. Smith and her enthusiastic helpers on the splendid result of their work. Nothing, in our opinion, is too good for Queen's Nurses, whose social service is beyond praise.

A nurse writes:—"I am tired of being told I am too old for anything at fifty-four, as I am in perfect health, but I look old, as my hair is white, and I must work if anyone will let me. . . . If all fails, I am going to care for cats and dogs whilst their owners are away. Recently I have been doing temporary district work, and have come across some 'ancient' nurses doing maternity work. What do you think of the following 'contrast'?"

(1) Trained nurse (poor me), age 54; three years' certificate general hospital, two years Queen's Nurse, twelve years Matron, applies for post. Receives following letter:—"Regret your application as night sister is not accepted; for Red Cross work a 'nurse' with short recent training is most required." (Takes no salary, no doubt.)

Next day I attend a patient in district. Occupation, maternity nurse, age 59; was expecting to be called to case, when she had a stroke. I wash and attend to patient, cut her *claws*, dig out "landed property," scrub unspeakable feet. Daughter of patient, rather huffy, says, "Anyway, mother used disinfectant for her hands." Trained nurse wonders where are doctor's eyes? and, incidentally, where does "training" come in between the hammer of the young Red Cross nurse and the anvil of the village Gamp? I console myself that the workhouse is warm and comfy, as I trudge back to a fireless grate."

Seated in a room where young Society women were selecting trained nurses for "war work," we recently overheard one whisper to the other, upon an applicant stating her age was forty:—"What *shall* we do with this old thing?"

We felt inclined to say, "Embalm her, of course," but resisted the temptation.

The Rev. Lewis Pryce, vicar of Colwyn Bay, presided at the annual meeting of the Colwyn Bay District Nursing Association, and urged that the needs of such institutions should not be overlooked by the residents. People were rather apt just now to transfer their attention to war charities, and to forget the necessary requirements of the civil population. But things must be kept going in war-time if the well-being of the community was not to suffer.

PREVENTIVE MEDICINE LECTURES.

VENEREAL DISEASE AND THE PUBLIC HEALTH.

The first of a series of four lectures on Venereal Disease was delivered at the Institute of Hygiene, 33 & 34 Devonshire St., W., on Tuesday, October 31st, by Sir Malcolm Morris, K.C.V.O., F.R.C.S. Ed.

The chair was taken by Dr. Soltau Fenwick, who introduced the speaker.

Sir Malcolm Morris began by saying that the subject was a painful and delicate one, more especially when it was discussed before an audience of both sexes.

It had been brought prominently before the public because of the war. It was well known that after all the great wars venereal disease had largely increased, and spread throughout the country with great rapidity. This was the case noticeably after the Crimean and Napoleonic wars. But the history of this disease went further back than this. It was first known in this country after Columbus returned from his discovery of America, and at that period it devastated Europe.

Though the Public Health Service was a triumph of organisation from the birth of the citizen to his death, venereal diseases had in the past no place in its system. He himself had invented the phrase "Conspiracy of silence" in regard to attempted dealings with this subject. No one had been allowed to mention it, especially before women. Now this, he was glad to say, was altered and the Press was on the side of publicity. On all sides hospitals and infirmaries were being urged to set apart beds for the free treatment of venereal diseases. *Free treatment* was to be the essence of the success of this movement. At present there were few places where this could be obtained and the treatment was expensive and out of the reach of many sufferers.

He was glad to state that he believed that by next January free clinics in all parts of the country would be established. The patient would attend, no names would be asked, he would be instructed to return a second and third time, and in a few weeks the infective stage would be brought to an end. Instead of the infective period lasting two or three years, it would be reduced to 2 to 4 months. This reduction was of the highest possible importance, and was the greatest sanitary reform of our time.

Syphilis, if ineffectively treated, resulted in permanent incapacity; blindness, deafness, many forms of paralysis, locomotor ataxia, and general paralysis of the insane, were some of its most formidable effects. It predisposed to cancer and tubercle, it was transmittible, was a frequent cause of ante-natal death and of suffering and incapacity in the surviving child.

Gonorrhoea brought inflammatory joint troubles, produced a fourth of all cases of blindness, and deprived thousands of women of the proud privilege of motherhood. Think, said the lecturer, of the loss that all this means to the country, of the expense that institutions for those thus incapaci-

[previous page](#)

[next page](#)