NAME SOME DISEASES THAT MAY BE CAUSED BY THE FOLLOWING ERRORS IN DIET-(2) INSUFFI-CIENT FOOD. (b) LACK OF FRESH FOOD. (c) OVER-EATING. (d) IMPROPERLY BALANCED DIET.

We have pleasure in awarding the prize this week to Miss Dora Vine, Eversley, Exmouth.

PRIZE PAPER.

It is not sufficiently understood—even by nurses—that dietetics is a study of universal importance. At the present time, when compulsory rations loom before us in the near future, we should do well to consider the question of food in relation to health and efficiency.

(a) Insufficient food is the predisposing cause of many diseases, and it is just as unpatriotic to eat too little as it is to eat too much, the health of the community being dependent upon the efficiency of the individual. Anæmia and those conditions in which the vitality is impaired through insufficient food all predispose to the attacks of the specific germs of the various infectious fevers, besides inviting the ubiquitous bacillus *micrococcus catarrhalis* and his kin.

Marasmus, "general debility," neurasthenia, are all consequences of insufficient nourishment.

(b) Lack of fresh food is not as often a cause of disease nowadays as it was when sailing ships made their long voyages and often reached their destination with a crew suffering from scurvy and skin affections, due to the lack of green and fresh food. In our times many people take an insufficient amount of vegetable food, and in consequence suffer from constipation and its kindred troubles. They are saved from scurvy by the fresh food they eat in the form of cereals, milk, eggs, &c., without being at all conscious of their indebtedness.

(c) Overeating results in biliousness, and excess of bile leads to gastric and intestinal trouble. This may take the form of stasis, obstruction, or colitis, while the additional fat impedes freedom of the muscles and predisposes to attacks of germs.

(d) Improperly balanced diet is the special pitfall for sedentary people, and the food question should therefore be thoughtfully considered by all women workers in particular. It is so easy for tea and toast to take the place of the necessary nitrogenous food, the gastric juices unable to perform their functions go on strike, excess of bile and hydrochloric acid, together with the usual accompaniments of insufficient exercise, air, and tight garments all irritate and weaken the gastric walls, and gastritis, gastric ulcer, and their sequelæ follow. Rheumatic patients require food free from purin, and must also avoid sugar and much farinaceous food. Aneurism cases are often ordered Tufnell's diet, in which the amount of liquid and solid food is exactly calculated.

Diabetic patients are nowadays dieted more according to their individual cases than formerly, when gluten bread, and no sugar appeared to be the chief instructions as to diet.

In all cases of private work, the nurse should obtain explicit directions with regard to diet, and should make a practice of reporting with regard to the amount taken, the appetite, and any idiosyncrasy of the individual patient, for not only will the omission of a "diet report" affect the patient, but it must be considered unpatriotic to encourage waste in any way, and a patient who is given unsuitable, insufficient, or unpalatable food is being sinned against by the nurse in charge, besides being a weak link in the nation's chain by not being raised to his highest level of health and efficiency.

We regret to state that instead of our usual full letter bag of prize competition papers, Miss Dora Vine's was the only one received this week, which appears to prove that nurses as a class do not sufficiently study the all-important question of food in relation to health and disease.

QUESTION FOR NEXT WEEK.

Differentiate between (a) communicable, (b) contagious, and (c) infectious diseases, and give an example of each.

A HAPPY COMBINATION.

The services rendered by trained nurses to the medical profession in their investigation of the causes of disease are well-known, but we have never seen the recognition given to them in a medical paper, which is accorded in the *British Medical Journal* of April 14th, to an Australian Army Sister. Notes on the Etiology of Dysentery including "Types of Dysentery Bacilli," isolated at No. 3, Australian General Hospital, Cairo, March-August, 1916, with observations on the variability of the Mannite Fermenting Group, and the Value of Agglutination in the identification of Mernbers of the Mannite Fermenting Group of Dysentery Bacilli, are stated to be by Lieut-Col. C. J. Martin, F.R.S., Australian Army Medical Corps, and Sister F. E. Williams, Australian Army Nursing Service. It is a very happy combination and one which might be acknowledged more frequently.

After going through various processes colonies were sown in warm broth and further investigated.



