

rinsed out; this water can be safely put down the closet drain, and you can use the preparation of carbolic acid I mentioned in a previous paper as being most suitable for the purpose of disinfecting the drains. After the first rinse out put the blanket under fresh cold water, and leave it till it is fetched for the wash, where it will have to be dried, and aired before the fire when you get it back. And here I must pause to observe that it is quite as much the duty of the friends of the patient to see that good laundry arrangements are *carried out* as a Nurse's; in fact, without such co-operation they cannot be efficiently and properly completed. We often have to put *pressure* upon the laundress to get things well done, and this salutary coercion is better exercised by her employer than the Nurse, who cannot put into force the pains and penalties disobedience to instructions would entail. Let sanitation not only be talked about, but turned to practical use in the *little* things of daily life, that add so much to daily health and comfort, and never more necessary than in times of sickness.

To return to our duties. The patient should be bathed twice a day with a solution of Condy's Fluid, using the bed-bath for that purpose; also vaginal douching once a day with Condy's; the thighs washed and powdered, to avoid excoriation from the urine. I find it desirable to raise the feet on a pillow to a level with the hips. All chilling should be carefully avoided, and the skin kept warm and moist. Drinks should be taken warm, and as little as possible at a time.

It is not necessary for the patient to remain in bed beyond the usual period, if well enough to get up, whether the complication be due to temporary or local causes. It is desirable for the patient to gather strength for the operation that will be required to repair the injury, and it is well also for the patient to nurse her infant if possible from the first.

Recto-vaginal fistula is less frequent and more easily cured than those fistulas that involve the bladder; they arise from the same cause—prolonged pressure from the foetal head, or careless use of forceps. The sphincter ani may remain uninjured, and the vaginal perforation be of minor or major extent, in the one case leading to discomfort, in the other intolerable misery; and like its kindred trouble, it is in surgery alone that relief is to be found.

With respect to the Nursing duties required in this last-mentioned lesion, cleanliness is still the point to be aimed at, though it has to be carried

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out somewhat differently, and with less trouble, as my Nursing readers can understand, and we have to meet the difficulty much on the same lines as we do in our *little* patient. In some cases the faecal escape per vaginam is only slight, and if the integrity of the sphincter is intact, defecation may take place under ordinary conditions; but in severer cases involving the sphincter, and if the fistulous opening is large, the misery resulting from this cause is inexpressibly distressing.

I have dwelt somewhat fully upon these sad lesions of child-birth, for there are few that inflict more misery upon the sufferer, and call for more compassion and Nursing care on the part of those whose duty it is to tend her; and our pity deepens when we reflect that the injury is *always* due to mismanagement at the time of labour, be the Practitioner man or woman, for *unwise* delay on the one hand, or reckless instrumental interference on the other, brings misery to the mother and sorrow to her home.

(To be continued.)

ROYAL BRITISH NURSES' ASSOCIATION.

AT the Sessional Meeting of the Royal British Nurses' Association, held on Friday, February 20, 1891, Dr. Fenwick opened a discussion on the subject of a distinctive badge, to be worn by Members of the Association.

He began by alluding to the antiquity of such badges or symbols of class or corporation, from the anklet of the Roman slave to the regimental badge of the modern soldier. He contended that it would be an emblem and a pledge of loyalty to the Association, an incentive to an increased *esprit de corps*, and a bond of union in far countries among the Members of the Association. He mentioned that H.R.H. Princess Christian had spoken of the great desire among the Nurses in India, those in Her Majesty's service, to have such a badge. The Association was a republican Institution, and the several Members had only to make their wishes known. The matter would be mooted in the forthcoming number of the Journal, and every Member invited to send in her vote for or against the badge.

Miss Wood (who in the unavoidable absence of Dr. Gage Brown was kind enough to take the chair) said that she wished the Members present to consider the question from all points of view. It would be unpleasant to see the badge worn unworthily, and yet of this there was great risk

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