Diet must be light, but liberal from the first. Milk, yolks of eggs, strong beef tea, chicken broth, may be given. A little and often must be given, two to three ounces, as a large quantity may cause vomiting. When the throat is clean, semi-solid food may be given, gradually increasing until ordinary diet is taken.

After the fourth week, the patient may be allowed up in blankets for three days, and then to be dressed.

Isolation is necessary until mucous surfaces are free from bacilli, and a swab is reported clear after bacteriological examination.

Hæmorrhagic diphtheria is a serious condition, due to toxæmia. There is usually epistaxis, petechiæ on skin, and subcutaneous hæmorrhage.

COMPLICATIONS.

The larynx may be involved by the membrane, breathing become embarrassed, and a sucking in of the lower part of chest be observed on each inspiration. A steam kettle to which has been added a little creosote or tincture of benzoin is beneficial. Tracheotomy or intubation may become necessary.

Paralyses due to diphtheria are :-

Of Palate.—Symptoms—Nasal voice, regurgitation of fluids through nose. Treatment —Nasal feeding.

Of Pharynx.—Symptoms—Coughing on drinking. Nasal feeding necessary.

Of Diaphragm.-Raise bed from foot.

Of Pneumo-gastric Nerve.—Causing persistent vomiting. Treatment—Rectal feeding.

Of Ocular Muscle.—Causing squint.

Ciliary Paralysis.—Causes pupil to become fixed; of lower extremities, and general.

Other complications are :--Broncho-pneumonia, Otorrhœa, Rhinorrhœa, Cellulitis, Albuminuria, formation of membrane on external abrasions, enlarged cervical glands, suppression of urine, Thrombosis.

Complications due to antitoxin.—Urticarial or Roseola rash, œdema, arthritis.

HONOURABLE MENTION.

The following competitors receive honourable mention :---Miss E. O. Walford, Miss Florence Mord, Miss Hilda Smith, Miss Theodosia Meade, Miss F. Coxon, Miss Mary May, Miss Kate Boyes, and Mrs. Farthing.

QUESTION FOR NEXT WEEK.

Describe how to organize, and the daily routine of, a special sanatorium for nurses suffering from tuberculosis.

FEEDING OF INFANTS.

BY MISS J. B. N. PATERSON.

After twelve years' seeking I think I have at last sighted the goal. I am so convinced of the necessity of trained nurses thoroughly tackling this subject (the Feeding of Infants) that I wish to give them a few facts. If we trained nurses intend to keep in the forefront of our profession we must know all there is to know about children, especially, if we intend to compete with the semitrained nurse now entering Public Health Work. The country is waking up to the importance of the much-neglected subject of "mother and child," but the salaries offered to Public Health nurses are scandalous, even if they be semi-trained. It is our duty to force the public authorities to recognise the necessity of employing fully-trained nurses with C.M.B. certificates and to give educated women who are interested in this branch of their profession a suitable salary-£200 per annum with uniform-for this most vital national work. No nurse should be engaged in Public Health work who is only seeking freedom from institutional restrictions, or cannot prove her interest in and knowledge of infants, children and mothers.

I have spent three months at the Babies of the Empire Training Centre, of which Dr. Truby King is in charge. I went, as I have gone to other children's hospitals and clinics, in the hope that I might strike a rational, simple and efficient method of feeding the human animal, and I am more than satisfied-so satisfied and convinced that I feel it a *duty* to let other nurses know of this fount of knowledge lying at our doors. It is surprising how few trained nurses take advantage of this opportunity to gain experience in children's work. Is it possible they are satisfied with infant feeding as we have been and are taught in our hospitals? A sign of the times is that several nurses holding only C.M.B. certificates and engaged in district or public health work are working at the Centre. Nurses, wake up! The Health of the Nation is in *our* hands, but we *must* have certain knowledge to tackle so vast a subject. More babies die from wrong feeding than any other cause, yet here is Dr. King offering the simplest and, I can vouch for, the most efficient mode of feeding infants, but trained nurses do not avail themselves of the offer. To me it is terrible that as a profession we apparently do not realise the awful necessity for reform in the feeding of chil-This does not apply to the children of one dren. class of society only; the poor are always with us and often have neither time, money, inclination nor strength to bring up their children as they ought; there is, however, a large middle class (upper and lower) which is as ignorant. To this class, also, nurses must carry the knowledge; let it percolate upwards and downwards to the other strata of society; here is the opportunity for the trained private nurse. The medical profession acknowledges that this part of their own training has been



