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EDITORIAL.

THE CARE OF THE DYING.

The care of the dying ! What memories the words hold for us, of patients, young and old, to whom it has been our privilege to minister until their hands loosed their feeble grip on the torch of life, and all that remained to us was reverently to perform the last offices for those who, in their increasing weakness and helplessness, had depended on us to care for the bodies in which for a time they dwelt, and the needs of which seemed so paramount in the last days of their life on earth.

There arise before us pictures of the tiny infant whose life lasted but a few brief hours, of the group of those suffering from preventable diseases which have not been prevented, of the soldier mortally wounded in defence of his king and country, of old people whose span of life has been completed, and sometimes exceeded; all these have turned to us for aid in their last hours, and some of our most precious memories are of appreciation of the services which our training has enabled us to render, which has been uttered by failing lips, and which has made worth while all the arduous days and nights which we have spent in qualifying ourselves to render such service.

And yet, though all nurses worthy of their calling minister with tenderness to the dying when this duty comes in their way, few, comparatively, have any aspirations for a life which shall be filled with the care of the incurable, and the dying, though it is a branch of work which may well make a strong appeal to us. The instinct of the nurse is closely allied to the instinct of the mother, ; the helplessness of those dependent upon her calls forth the protective qualities, which are the inheritance of womanhood, and constitute women the protectors of both young and old in their dependence.

Now that many nurses are still without employment, it may be that some will turn their attention to a branch of nursing which is often passed over, and will find their vocation in institutions devoted to the care of the incurables and the dying. Nor need anyone think that her training will be wasted if she devotes her life to this branch of professional work, for there is no skill too great to place at the service of these patients. If we consider for a moment we shall realise that they are just the same class that filled our hospitals when their complaints were less acute, and there was a prospect of their ultimate recovery, when we lavished upon them all the trained skill which we possess. Now that their illnesses have become intensified they require more, rather than less, skilled care.

The work, no doubt, makes special demands on the vitality of the nurse, but the opportunities it affords of solacing the dying, and comforting the heart-broken, bring their own reward.

"Special vocations have special beatitudes," and that of the nurse who makes the dying her first care is a very beautiful one. To her it is given to ease the sufferings of those who pass by Death through the Gate of Life, and, in accompanying and sustaining them so far on their journey she may get glimpses, through the gates ajar, of the life beyond. When, in the natural course, her own times comes to receive in her helplessness the care which she has rendered in so many instances to others, the Gate through which she passes will have the aspect of a familar friend, and, on the further side, will be waiting to welcome her, friends to whom she has given of her best, and whose opportunity it now is to give measure for measure in recompense for that debt.



