

Miss Adeline Douglas, who sent a good paper, was unfortunately disqualified for the competition because it was incomplete.

QUESTION FOR NEXT WEEK.

To what uses can a nurse put hot water bottles for the care and comfort of patients? What are the special points to be observed in their application?

THE INTERNATIONAL OUTLOOK.

The American Nurses' Association has, through Miss L. L. Dock, sent out official invitations to the members of the Executive Committee of the International Council of Nurses to meet at the Biennial Convention of the A.N.A., April 5th to 10th, 1920, at Atlanta, Georgia, U.S.A., to confer upon the International Outlook.

This will be the first meeting of the International Executive since 1912, held in Cologne, and will be a meeting of very far-reaching influence, and it is to be hoped that our National Council will be represented by Miss M. Breay, the Hon. Treasurer of the International Council, who has received many cordial invitations from her admiring American colleagues to visit the States, and who will, we make no doubt, be offered a hearty welcome when she crosses the Atlantic.

Atlanta is a lovely city in spring.

NATIONAL COUNCIL OF TRAINED NURSES.

We are asked to remind the delegates of the affiliated societies forming the National Council of Trained Nurses, to make every effort to be present at the Council Meeting to be held in London, at 431, Oxford Street, W., on November 6th, at 4 p.m.

EDITH CAVELL HOMES.

The widespread support given to the Edith Cavell Homes is evidenced by the fact that the Committee have received £500 from the Hong Kong War Charities Committee.

The long and devoted service of British nurses to one institution is often a matter of comment and admiration by our American cousins. The record of three members of the nursing staff of the Royal Hospital and Home for Incurables at Putney, who have retired with a combined service amounting to 84 years, has rarely been exceeded, though the London Homœopathic Hospital, in the days of Miss Brew, certainly equalled it.

NURSING ECHOES.

The *Royal British Nurses' Association Supplement* has, by consent, been omitted in this week's issue, and will be inserted next week.

The following very interesting cases of "carrying" were recently reported to the Tolworth Hospital Board by Dr. Cooper, the Medical Officer. He stated that in the scarlet fever ward they had a child who was about to be discharged after being nine weeks in the hospital, but on the eve of his discharge he developed sore throat, which on investigation proved to be diphtheria. Of course, it was a source of great anxiety to the staff to know how that child, isolated in the scarlet fever pavilion, could have got diphtheria, but eventually they connected it with one of the probationer nurses who, owing to the shortage of the nursing staff, had been transferred from the diphtheria to the scarlet fever pavilion three weeks previously. To all appearances that nurse was perfectly well, but they took a swab of her throat and made a culture, and on examining it under the microscope, found the diphtheria organism present; so that presumably she acted as a "carrier," and whilst on duty in the scarlet fever ward had infected the child. They transferred the nurse back to the diphtheria ward three weeks ago, when apparently she was perfectly well; but a few days ago she developed clinical diphtheria, and was one of two nurses ill. They then examined microscopically the cultures of every child who had been under that nurse, and discovered two others who had the organisms in their throat, and had to isolate them, although they appeared to be perfectly well. It was only microscopically that one found that they had got the disease, and the discovery was important in a way, because a child was discharged from the hospital a few days before they discovered this incident, who had been in contact with the nurse, and ten days after he got home his sister developed diphtheria. Dr. Senior, of Thames Ditton, went into the case and took a culture of the child they had discharged from the hospital, and found that he was a "carrier," and had the germs in his throat though he had not been ill with it, so that presumably he infected his little sister, who came to the hospital and died there.

It was arranged that if in the future there was any need to transfer a nurse from the diphtheria to the scarlet fever pavilion, they would take a culture of her throat, which was the only

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