

the College of Nursing, Ltd., upon the part of the intelligent members of the profession, to its lay control, and to its charity propaganda through which it is absolutely impossible to build up a self-governing, self-supporting and self-respecting body of women.

The day, however, is past when trained nurses can be governed without their consent, and although thousands of young women, ignorant of economic and political questions, find it convenient to support the policy of those in authority over them, there has arisen an intelligent minority which thinks for itself.

This minority is co-operating on trade union principles, and its organisation, the Professional Union of Trained Nurses, is now registered under the Trades Union Act, and has thus thrown in its lot with the Labour Party.

It is to be anticipated that all these three groups will have representation upon the General Nursing Council, and if their representatives are persons in whom their supporters have confidence there should be no difficulty in their working together for the benefit of the Nursing Profession as a whole and the sick whom it serves.

I AM WONDERING.

There was a woman in the hospital to-day—
One of the kind with satin slippers and Ideal perfume;
And she thought we were "wonderful" and "truly angels of mercy."
She would "just love to be a nurse."
And now I am wondering—
I am wondering just how much she would love
Those three years of training;
With the terrible feeling about three o'clock in the morning
That you must sleep or die.
The worry on tonsil night for fear some youngster may hemorrhage.
The Hamburg steak and poor coffee at midnight supper;
The getting up during the day for lectures.
And the out-patient service where you go down into the slums
To help some Italian or Polish woman have her baby.
And the operating room where you stand for hours on a tiled floor
And serve an exacting surgeon—
And then polish the instruments and wash blood-soaked linen.
And, after graduating, the living in a suit-case,
With the constant companionship of a sick person—day and night.
And men taking the attitude of "but I can tell you"—
"You understand things of that sort."
I am wondering just how much she would love it.

VIRGINIA GRIFFITHS,
Pacific Coast Journal of Nursing.

OUR PRIZE COMPETITION.

WHAT IS URÆMIA? WHEN DOES IT OCCUR? GIVE THE SYMPTOMS AND GENERAL MANAGEMENT OF THIS CONDITION.

We have pleasure in awarding the prize this week to Miss S. F. Rossiter, Sisters' Quarters, Royal Naval Hospital, Chatham.

PRIZE PAPER.

Uræmia is a condition caused by the accumulation and circulation in the system of urea and waste products that should normally be eliminated by the function of the kidneys.

Therefore any disease or injury interfering with this process of elimination may result in uræmia. The commonest cause is nephritis (Bright's disease). This may be acute or chronic.

Acute nephritis may occur at any age, and frequently follows scarlet fever or diphtheria. The prognosis is most favourable in the very young.

Chronic nephritis generally occurs late in life, and may be resultant on an early acute attack, or due to degeneracy of connective tissue of kidney from various causes, e.g., alcoholism, lead-poisoning, syphilis.

Functional interference during pregnancy and injury to uterus may also give rise to uræmia, the symptoms of which may be divided into three groups, as follows:—

1. *Cerebral*.—Headache, impairment of vision, delirium, mania, coma, deafness and convulsions.

2. *Gastric*.—Vomiting, diarrhoea, smell of urine in breath.

3. *Pulmonary*.—Air-hunger, dyspnoea.

These symptoms may again be divided into acute and chronic.

1. *Acute*.—Convulsions or uræmic eclampsia, much resembling epilepsy (but not preceded by aura), subsiding into coma. There may be a number of convulsions intervened by periods of coma. This should give cause for greater anxiety than a single severe attack. During the spasm pupils are dilated, the face is livid, and there is frothing at the mouth.

2. *Chronic*.—Headache, vomiting, dyspnoea, diarrhoea, stupor, and twitching of muscles.

The treatment should aim at immediate elimination of the toxins causing the symptoms, and the methods employed are diaphoresis, diuresis, and free purgation.

Diaphoresis may be assisted by hot-air baths, hot packs, hot sponging, and any treatment which stimulates the action of the skin. Pilo-

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