

LETTERS TO THE EDITOR.

Whilst cordially inviting communications upon all subjects for these columns, we wish it to be distinctly understood that we do not in any way hold ourselves responsible for the opinions expressed by our correspondents.

SYMPATHY FOR ISLINGTON INFIRMARY NURSES.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—At a largely attended quarterly meeting on January 29th of our Poor-Law Infirmary Matrons' Association it was unanimously decided that we should, through the medium of the nursing Press, extend our very real sympathy to the Matron and nursing staff of St. Mary's Infirmary, Islington, for the very trying and disagreeable time they have experienced lately.

Some remarks occurring in the course of a report by the Lady Inspector, intended in all probability as helpful criticisms to the authorities, got into the Press, and were circulated far and wide before any enquiry could be held.

By this means a very misleading and unfair impression was conveyed to the public in connection with an infirmary which is amongst the foremost rank of the Poor-Law training schools for nurses.

The nursing staff of the Islington Infirmary have always held a very honoured position in the nursing world, and we feel sure they will continue to do so in the future.

Yours very truly,

ELEANOR C. BARTON

(President Poor-Law Infirmary Matrons' Association).

THE USE OF CATHETERS.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—Can you kindly explain why doctors still order a catheter to be passed, a short time before a bladder operation, in cases where there is no difficulty in passing urine naturally? In cases I have observed the patient often is quite calm and comfortable until then, when the excruciating pain, described as that of suction, is so great (even if sometimes lessened a little if urine is afterwards passed naturally) that a very depressed condition of spirits arises which cannot be good for patient, who has to look forward to the anaesthetic as oblivion out of which he or she wishes never to return. Nurses entering into the profession to try and relieve pain, are loth to inflict it unless really necessary, and in my opinion much more could be done after the anaesthetic has been given. I should be glad of your help, seeing you kindly invite questions, and knowing that many nurses would like to understand more about the use of catheters.

Yours faithfully,

Taunton.

MARY SOUTHWELL.

[Surgeons order the catheter to be passed before any abdominal operation, or one which

involves the bladder, because it is essential to remove any residual urine which in such cases may be left in the organ even though the patient seems to pass urine naturally. Done with proper care and gentleness it should give little or no actual pain to the patient, though nervous patients often express fear before it is done.—ED.]

KERNELS FROM CORRESPONDENCE.

A CAUSE OF CONSTIPATION AMONGST NURSES.

A Guy's Nurse.—"I have been reading your article on a day in the Guy's Hospital Preliminary Training School, and I notice what I consider a great mistake is still existent, and think attention should be drawn to it. Many found it a great trial and their health was upset by it, and that was that no time is allowed for the 'calls of nature' between chapel in the morning and going on duty. This means real suffering to people brought up to be punctual at about that hour all their youth."

[This is a most important matter, and recommendations were made in relation to it, upon the suggestion of Dr. Crouch, in the Report on the Economic Position of Nurses issued by the National Council of Women. The Report recommended that one w.c. should be provided for each six nurses, as it was pointed out to the Committee by a doctor responsible for many years for the health of a large body of nurses that 75 per cent. were suffering from constipation, from which they were free up to the time of their training. It was abundantly evident that this condition was due to two causes. Firstly, the insufficient time allowed after breakfast for using w.c.'s, and, secondly, the small number of w.c.'s available. It is unnecessary to point out what a serious impediment to good health such a condition is. In building, or re-modelling, ward lavatories there should always be one section reserved and locked for the use of the nursing staff.—ED.]

THE PAY OF PROBATIONERS.

Poor Law Infirmary Matron: "I consider the very high pay of probationers—from £40 to £50 a year—only encourages the wrong class of women to enter for training. It is more than they can earn in service, as they are usually entirely ignorant either of domestic work, cooking or dressmaking, and through lack of education can seldom attain the qualities and knowledge required for supervision. I should like to see the day return when educated girls paid for their training—the type who made efficient sisters and matrons—and am of opinion that a "Registered Nurse" should not be offered a salary of less than £100 a year."

OUR PRIZE COMPETITIONS.

February 12th.—How would you care for a patient before, during, and after anaesthesia?

February 19th.—What do you know of sleeping sickness, its treatment and nursing care?

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