

Alas! the little eager feet could not carry him fast enough, and forbidden though it was, he hung on to a passing motor van, fell, and was fatally injured, dying before he reached the hospital.

In spite of advice to the contrary, the little white coffin was brought back to the only home the child had known. Miss Smith insisted on that.

Her grief was quiet and restrained, and infinitely touching, as she looked on the little bruised form that had been her world for six years.

"No one else shan't have his bedsocks," she said; "he thought the world of them, so I've put them in along with him."

Arthur's resting place is marked with a stone cross, recording the fact that he was "The beloved foster-child of Mary Smith"—and "Thou gavest him a long life, even for ever."

It cost £20. Do you say that is a sordid and vulgar remark? Not so!

"I saved it to give him a start in life and only he shall have it."

Mary Smith, when at the last Great Assize, your name is called will you answer "Here am I. I and the children whom Thou hast given me?"

H. H.

THE HOSPITAL WORLD.

The Voluntary Hospitals Commission have written to the Clerks of County and Borough Councils requesting their assistance in constituting the Local Voluntary Hospital Committees recommended by the Cave Committee. It is proposed that the Local Committees shall consist of two members nominated by the County Councils and one by each borough within the county, two medical practitioners nominated by the local committees in the area, one from the staff of a voluntary hospital, and the other a general practitioner; two hospital representatives, not medical practitioners, one for the larger general hospitals and one for the smaller and cottage hospitals in the area. The Commission will nominate five additional members, one of whom must be a woman, from those resident in the area, and the local Committee will select its own chairman. The following are included in the functions of the Local Committees:—

- (a) To act as local advisers to the Commission.
- (b) To collect information as to the needs of their areas.
- (c) To further co-operation between hospitals.
- (d) To co-ordinate appeals.
- (e) To consider the possibility of arranging the transfer of patients where this can advantageously be done.
- (f) To prepare, where practicable, schemes of co-operative purchase.
- (g) To advise as to the adoption of a uniform system of hospital accounts throughout their area.
- (h) To organise systematic contributions both

from employers and by employees in areas where no such systems at present exist.

(i) To undertake the distribution of any contributions made by an approved society in cases where the society is purely local in character.

(j) Generally to take every possible step to assist the hospitals in their area to maintain the present voluntary system.

The Chelsea Hospital for Women has received £25 from the Mercers' Company, and £26 5s. from Sir S. B. Provis, K.C.B., C.H., towards the building of its greatly-needed Nurses' Home. The sum collected now amounts to £16,000, and £13,000 is still required.

In view of the prevalence of cholera in Russia, the opinion of Dr. W. J. Simpson, F.R.C.P., formerly Health Officer at Calcutta expressed in the *Times* is of interest. "As one who has had much experience in cholera and plague, I would point out the great value of inoculation in preventing the spread of these diseases, when carried out in an organized manner among a healthy community. I would suggest that this prophylactic measure should be systematically adopted as soon as possible in the countries bordering on Russia, so that even if cholera and plague infected immigrants break through the frontier safeguards, the inhabitants of the invaded countries shall be able to resist the infection. This would not exclude other well-known preventive measures. As regards Russia itself, it is different, and a word of warning is needed. Prophylactic inoculation amidst a starving population would have to be employed with the greatest care and discrimination, otherwise it would only do harm. Food, medical comforts, nursing, and hygienic measures are more important."

THE EXPERIENCES OF AN ASYLUM DOCTOR.

Dr. McDonald (C.U., Wallasey) asked the Minister of Health, in the House of Commons, if his attention has been called to a publication by Dr. Montagu Lomax, containing grave charges of inhumanity in the administration of our asylums; and, as these charges were specific, and the alleged inhumanity was inferred rather than witnessed by Dr. Lomax, would he cause inquiries to be made as to the truth of these allegations, in order to relieve the anxiety of the public who had relatives confined in these institutions.

Sir A. Mond: My attention has been called to the statements contained in this book, and the visiting committee of the asylum at which Dr. Lomax was employed as locum tenens, and to which he evidently refers, have already been asked by the Board of Control for their observations. As soon as these have been received I will consider what further action is necessary.

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