THE FAMINE IN RUSSIA AND THE WET NURSES.

The famine in Russia seems to have brought the country people to a climax of misery, of which the descriptions in our daily papers are very terrible to read. But perhaps one of the saddest examples of the want and misery that exists is given by the numbers of women who crowd into the towns from the starving country districts, offering themselves as Wet Nurses, but who secrete such a poisoned and useless fluid instead of milk, that the journals are warning the townspeople against employing the poor creatures in that capacity. Their babies are dead, and they themselves are reduced to the lowest ebb by want of food and privations of all kinds. In Russia, as in France, it is much more the fashion for richer people to employ Wet Nurses for their children than in England, and indeed she is a very much-pampered individual in Russian households. Generally drawn from the better-class peasants, and wearing the handsome national dress, she is an imposing figure among the servants. For the present, and for some time to come, however, we may presume Russian mothers will be unwilling to trust their children to them. In the afflicted provinces pestilence—always following close on the heels of famine—has already made its appearance. Medical men and drugs are said to be scarce; but they would be of little use if forthcoming, as there is no food to give the sufferers. Immense sums are being sent for the benefit of the famine-stricken districts, notably one of twenty million roubles from the Czarina; but even in England, in these days of commercial philanthropy, it is a costly business for a shilling to reach those for whom it is intended, even more so in such an official-ridden country as Russia. In the meantime, people are dying by hundreds of the deadly triune (Fear, Famine, and Fever), and the starving Wet Nurses wait in vain for employment at the street corners.

FORBIDDEN BELONGINGS.

All Nurses know how difficult it is to prevent patients from secreting forbidden articles when they are in Hospital. The ingenuity with which one of those flat spirit bottles—which seem made to be concealed—or a screw of tobacco, or even a pork pie, will be hidden, so as to baffle the most careful searcher, is perfectly marvellous. But there is an account in the papers of a suicide committed by a patient, the other day, in one of our large London Hospitals that should certainly bring home to Nurses the necessity for the most rigorous search among patient's belongings for contraband goods, for a revolver would hardly be allowed in any patient's locker; and it was with a revolver the unhappy man shot himself, in bed, in the Ward. It is not so very long ago since a patient at another London Hospital cut his throat with his clasp-knife. Forbidden delicacies and spirits are bad enough, but weapons which could convert a delirious patient into a source of danger to himself and others cannot be too carefully hunted out, nor can patients be too severely cautioned on the subject.

ANÆSTHETICS.

An explanation was given by a celebrated anæsthetist, the other day, that might not be uninteresting to Nurses. The question arose as to why sometimes, when ether was being administered, and the patient was apparently fully under its influence, the eye being insensible, &c., the abdominal muscles remained rigid. His explanation was that the patient was then in a partially asphyxiated condition: therefore, to produce relaxation of the abdominal muscles, it was necessary not to press the ether—as anyone imagining that the anæsthesia was not complete might suppose—but to allow the patient more air, when the abdomen would soon become less rigid.

THE NURSE IN FICTION.

Since the days of Dickens's immortal sketch, the Nurse in fiction has had a bad time of it. We do not refer to the ladies who rush from their homes to undertake Army Nursing in a foreign land at a moment's notice, and who miraculously meet their lovers or husbands, as the case may be, wounded and dying on the battle-field; the history of the training of those lovely heroines is always left sketchy. Like *Punch's* lady—we may suppose they are not trained, but gifted—they are, doubtless, always faultless and useful. No; it is when a real Hospital or Private Nurse is made to move or speak in a novel that we object—strongly object. One novelist has informed us that Sick Nurses are as a class the cruellest women in existence—her Sick Nurse interviews the hero respecting the heroine's last moments, murdering the Queen's English, and breaking his heart while she pockets his tip. Another novelist's Nurse recounts how she puts her patients out of their misery when, according to her way of thinking, their case is hopeless. That kind of Nurse is usually represented, even when fairly good-natured and not given to manslaughter, as rude, uncouth, and speaking in that kind of *patois* (never heard out of a novel) which is supposed to represent the language of English servants. In contradistinction to that type there is another, of which the novel we have in our mind supplies an excellent example. A lovely heroine, a faithless lover, a family misfortune, a Doctor secretly in love with the heroine, who, when hard times come, procures her a post (vaguely defined) at the Hospital with which he is connected. At the end of a year he is found urging her to accept the post of Lady Superintendent of a large new Hospital, of which he apparently is the sole committeeman, and for which post the lovely heroine is supposed to be sufficiently trained and perfectly suitable. It is a grand thing to be a Hospital Pro. (in fiction) on those terms. Nurses have no particular desire to grace the pages of novels; but if they are absolutely necessary to the proper development of a plot, why should not the characters drawn be something like the real thing? Nurses may well protest against being represented either as impossible angelic geniuses or coarse harridans, whose feeblest originals are daily growing fewer and fewer in their ranks.

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