

trained in the practice of Nursing in a large Hospital." What "other things" can be equal to the importance of having a thoroughly-trained Nurse to superintend Trained Nurses we cannot imagine. And as there can be no doubt that there will be an active competition for this important Hospital, we hope to learn that the successful candidate is, first of all, one who has been thoroughly trained in the practice of Nursing, because we have no hesitation in saying that no one with less professional experience should be selected for so responsible a post.

OBSTETRIC NURSING.

— BY OBSTETRICA, M.R.B.N.A. —

PART II.—INFANTILE.

CHAPTER III.—DUTIES AFTER BIRTH.

(Continued from page 40.)

At their completion, this Course of Lectures will be published as one of the Series of "Nursing Record Text Books and Manuals."

IN order to bring home to the minds of my young Nursing readers the necessity of carefulness and common sense in dealing with a case of tumidity, we will trace a cause of mismanagement but only too prevalent amongst the incapables of our department, and not the "Circumlocution Office" itself could afford us a more striking example of how *not* to do it than they. We will assume, then, that at the time of birth, or a few days after, one—or perhaps both—breast shows signs of enlargement—a puffiness; and the idea rampant in their mind is that these appearances are due to there being milk in the breast, and they *at once* proceed to try and get it out, first by *squeezing* the breasts, and then *sucking* them; the result of these interesting manipulations is to produce *hardness* and *redness*, but *not* milk. These secondary symptoms are treated in a way that I think we may call the crown of incapacity—by *plaistering*, and in a style that excites the wonder and admiration of the *élite* of the maternal circle from its artistic finish. The diachylon plaister is cut into short and narrow strips, and placed over the breasts in a way that bears a fanciful resemblance to the crosswise arrangement that added to the æsthetic beauty of the jam-tarts of our youthful days. Having repeatedly and in vain inquired for the *rationale* of the remarkable piece of surgery (?)

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I have felt myself bound, in the interests of the little victim, to remove the strips, when we find the breast tense, tender, and inflamed; matter forms, infantile breast abscess results, and in female infants may lead to serious mammary results in the future; and here as ever muddle leads to trouble immediate or remote.

There is yet another source of injury to the infant's breasts—*pin-pricks*—happily far less common now than formerly, when the belly-binder was fastened on with pins. Very small pins were used, mostly made of brass, or sometimes ordinary sized pins of the same metal, and these aforesaid pins were often dirty or *cankered* from long use, and a prick from them would often lead to a painful sore. In one case that came under my knowledge a prick from a dirty old brass pin led to inflammation and breast abscess of a serious character to a female infant; in another there was every reason to believe that a fine male infant died from blood-poisoning from the effects of a prick from a cankered brass pin, that ran into the breast just below the nipple; the Nurse was an old Welsh woman, and a decided believer in brass pins for babies. Another mechanical cause of breast mischief is "thumbing," due to careless handling. There are Mothers and Nurses (and women who are neither) who will lift a baby up by placing *both* their hands under his arms, and this ungainly practice tends to breast bruising, from the hands being brought *over* the breast. Others again "clutch" at the *front* of the gowns, as a *point d'appui*, for raising him up, and here again there is probability of breast bruising. Having drawn the attention of my readers to some of the errors of mismanagement in cases of "tumidity," we will do our best to deal with it on the lines of common sense and humanity (?)

I have pointed out to my readers in a previous paper how important a point in Obstetric Nursing is the *skilful handling* of the infant, which can only be acquired by good instruction, and perfected by experience. There are three parts in the infant that especially require carefulness in the management of them, from the time of birth upwards—the head, the navel, and the breasts. We have dwelt upon the two former; we will now discuss the last. Observing, then, at birth that one or both of the breasts are enlarged, you must be especially careful to avoid *all* pressure over them from your hands or baby's clothes, and here the little barrow coat I described to you in a recent paper is of especial comfort. In a few

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