

of the mendacious babbling of Miss M. S. Riddell, the Registrar, to members of Council, and at the Ministry, embodied in the now notorious "14 Points"—the original copy of which is in our possession, and which will now see the light of day.

We stood for election, in spite of the campaign of calumny originating from Headquarters, knowing full well that secret, insidious untruths were being propagated far and wide throughout the hospital world by College detractors—a campaign made possible by the financial support which had percolated through the Nation's Fund for Nurses, and from the British Red Cross Society, into the coffers of the College of Nursing, Ltd., of all three Committees of which Sir Arthur Stanley is Chairman.

We stood for election because it was our duty to our profession, and we were determined that Miss Cox Davies and her supporters should be made to declare their policy in the open—that the animus with which we have been pursued in the performance of our Public Duty within the Council, for opposing the flagrant jobs, irregularities, hideous waste of money, ignorance, depreciation of our professional rights, and those of our colleagues, should be made public.

For upwards of sixteen months we have faced this persecution within the Council; it was necessary, therefore, to place our policy before the electorate, and be hounded out by the packed College electorate—and this has been done.

It is the fate of all successful reformers; the sweets of Office are always gobbled up by the "antis" once there is power and pelf to monopolise.

Few more degrading episodes stand to the discredit of the College Caucus—and that is saying much.

At an early date we intend to insert in *THE BRITISH JOURNAL OF NURSING*, in short articles, the truth of this campaign to crush out the soul of the Nursing Profession; and the large part played in it by the terrible Jew tyranny in the press, in philanthropic circles, and in the Government, through which the liberties and independence of this country are being slowly strangled, will not be the least interesting sidelight on the Degradation of the British Nurse.

E. G. F.

WORD FOR THE WEEK.

"Marchez à la tête des idées de votre siècle, ces idées vous suivent et vous soutiennent. Marchez à leur suite, elles vous entraînent. Marchez contre elles, elles vous renversent."

OUR PRIZE COMPETITION.

WHAT DO YOU KNOW OF THE AFTER-CARE AND TREATMENT OF INFANTILE PARALYSIS.

We have pleasure in awarding the prize this week to Miss Christina Tait, Royal Hospital for Sick Children, Sciennes Road, Edinburgh.

PRIZE PAPER.

Infantile paralysis, or Poliomyelitis, is a form of spinal paralysis, most commonly confined to one limb, which occasionally occurs in children, and is caused by an inflammatory affection limited to the anterior portion of the grey matter of the spinal cord throughout a greater or less extent, and affects, therefore, the function of motion.

After-care and Treatment.—The treatment consists of measures which aim at supporting the patient's strength and maintaining his or her health while the nervous system is slowly restoring itself so far as may be. The conditions of the disease in any particular case can only be understood and appreciated by the medical expert, under whose direction alone treatment can be advantageously carried out.

Since paralysed muscles tend to undergo degenerative changes, their molecular integrity should be maintained as long as possible. With the view of improving the circulation in the muscles, and also in order to prevent stiffening of the joints, massage is very useful. In order to exercise the muscles, the faradic current, or failing it the interrupted galvanic current, should be applied daily.

When acute symptoms have ceased, but not before this period, the use of nervine tonics, such as quinine and strychnine, and, in certain cases of substances which encourage tissue change, such as iodide of potassium and arsenic, is most essential.

In the case of paraplegia there is a necessity for highly skilled nursing, since not only the patient's comfort but his or her life depends on careful management, directed towards preventing bed-sores, by keeping the patient's back scrupulously clean and dry, by washing it daily with soap and water, sponging it with spirit, and finally dusting it with a powder of zinc oxide or boric acid; by examining night and morning for any sign of redness, and especially by changing the patient's position, so as to relieve the various prominences of constant pressure.

Care must also be taken to prevent inflammation of the bladder in cases where the act of urination is interfered with.

Special care is necessary in feeding the

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