

hospital, in the JOURNAL OF NURSING which gave much pleasure to my family and self to read.

I am happy the Congress was such a success and with all my best wishes for the future of our united efforts.

I remain,

Yours very sincerely,

V. S. ROGIER GUINOTTE.

Le Pachy, Bellecourt,
par Bascoup.

THE DRINKER RESPIRATOR.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—I note in your October issue an account of the Drinker Respirator at the Wingfield Morris Hospital, Headington, Oxford.

In July last we admitted a child with Infantile Paralysis. Three days after admission the child had difficulty in breathing and I noted she was only using her diaphragm. Our Medical Officer came and we knew her only chance lay in getting her into the Drinker Respirator. The Doctor got busy on the 'phone, and at last located it at Headington, and on 'phoning the Medical Officer in charge there he agreed to take the child if we could get her there.

We were not many minutes in getting her into our ambulance and a Nurse and I went with her, taking oxygen and all things necessary for emergency. We arrived, and the child was showing signs of exhaustion, she was put into bed and the Doctor saw her and said we were just in time. She was put into the Respirator on that night and our Doctor went over next day and saw her in it.

She was in it until it was needed recently for another case. I hear from the parents that the child is recovering and the Hospital Authorities have every hope for a complete recovery for our little patient.

JANE T. RUDDY.

Highgrove Sanatorium,
East Grinstead.

WHAT IS THE OUTLOOK FOR YOUNG GIRLS WHEN TRAINED?

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—There is one aspect of the proposal of *The Lancet* Commission to permit the teachers in secondary schools to undertake the preliminary instruction of probationers for the nursing profession which I do not think has received sufficient attention. It is this—when the proposed instruction has been imparted to these girls how are they to obtain admission to our Nurse-Training Schools? For Committees of hospitals and the Matrons of these Schools to whom they depute the selection of probationers will not be willing to admit such immature girls for training. They know, by experience, the susceptibility of such girls to any infection, and further that physically they are unsuited for the strain of hospital life. Presumably the teachers will not be able to force their pupils upon the hospitals, and thus the carefully organised campaign to disrupt the training of probationers must fall through.

Another question in regard to the unpractical scheme suggested is what is the outlook for these young girls when trained? We need as nurses not young women who immediately they have left school are drafted into hospitals, with no experience of life, no social experience, no breadth of outlook. Whether in public health work, in hospital life, in private nursing, or in work abroad these are imperative qualifications and without them a nurse's value to the community is greatly depreciated.

Yours faithfully,

MATRON.

SENTIMENTAL INACCURACY.

To the Editor of THE BRITISH JOURNAL OF NURSING.

DEAR MADAM,—I beg to bring to your notice a letter in the *Daily Telegraph* in which the writer (Hilda B. Greenway), amongst other statements open to question, asserts that "it cannot be denied that, in better class hospitals, the menial drudgery of scrubbing wards and washing crocks has been reduced to a minimum. But, elsewhere, it is still a burden and a misery for women qualified for better things." This astonishing statement would be more convincing if the writer had appended a list of the hospitals where the nurses scrub the wards, or have done so in the last 30 years. It would not have trespassed unduly on the space in our contemporary. I do not believe she could mention one. Again, amongst our principal grievances we are supposed to suffer from "oppressive discipline, overwork and underfeeding." Discipline of course there must be in any considerable community of men or women, and is appreciated by the best type as a means to smooth working. "Oppressive," in my judgment, it is not, except, maybe, to nurses in training who resent not being supplied with latch-keys, and being allowed to come in at any hour they please. Nursing is a serious vocation and those women who feel aggrieved at not being allowed to burn the candle at both ends are better elsewhere. As for underfeeding, how many of our probationers would be better or as well fed in their own homes, or have as high a standard of housing as they enjoy in their residential quarters in hospital to-day?

Preliminary training there should certainly be, but in connection with nurse-training schools, and a curriculum laid down by, and under the supervision of, the General Nursing Council, and conducted by expert nurses.

It is difficult to write calmly when one sees the profession of teaching, which never lifted a finger to help us to obtain adequate professional education, now that we have done so suddenly discovering that we must look to it for salvation! What is the underlying reason? Surely financial gain for teachers. Otherwise I venture to think we should not have heard of this sudden interest in our welfare.

I am, Dear Madam,

Yours, etc.,

INDIGNANT.

NOTICE.

The History of the International Council of Nurses, 1899-1925.

Those who wish to secure copies of *The History of the International Council of Nurses, 1899-1925* (illustrated), will do well to place their orders with Miss M. Breay, Hon. Treasurer, National Council of Nurses, 39, Portland Place, London, W.1, as soon as possible. Price, 5s., post free.

"THE BRITISH JOURNAL OF NURSING" AND THE "MIDWIFE" SUPPLEMENT

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PRIZE COMPETITION QUESTION FOR DECEMBER.

What are the symptoms of a case of erysipelas of the face? Describe the nursing treatment, and mention the complications which may be apprehended and guarded against.

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