

THE NURSES LOSE A FRIEND.

Dr. W. L. Maccormac, who died suddenly on February 17th, retired from St. James's Hospital in June, 1939; he was appointed Medical Superintendent when the Hospital was opened in 1910, and had been there until last June, when he retired at the age of 60. The news of his death will come as a shock to many past and present members of the Nursing Staff of St. James's, who will long remember his untiring work and energy, always planning something to improve the Hospital, especially the operating theatres, in which he spent so much of his time. He was a brilliant general and obstetric surgeon.

He took a keen interest in the Nursing Staff and always stressed the value of the spiritual as well as the material side of their work. He generously gave all the Health Insurance fees which he received for the Nurses to the Nurses' League of St. James's Hospital. He will be missed by many of his staff and old patients, who had a great respect and liking for Dr. "Mac," as he was affectionately called by them.

BLOOD CULTURE.

SPECIMENS OF BLOOD FOR BACTERIOLOGICAL EXAMINATION.

By W. J. Hatcher.

Normally the blood is sterile and any stray organisms which may accidentally obtain access to the blood stream are rapidly dealt with and destroyed. In certain diseases or at rather certain stages of some conditions a bacteræmia occurs. Isolation and identification of the infecting organism either provides the most rapid method of diagnosis or marks an important and usually grave turn in the disease.

Collection of Specimens.

Whenever possible the Laboratory Staff will themselves prefer to collect the specimen at the patient's bedside. A bottle of culture medium, usually ordinary broth, must be obtained from the laboratory, the blood is obtained by vein puncture, usually from a superficial vein in the arm. The strictest aseptic precautions must be taken to prevent contamination by extraneous organisms. If possible, an all-glass syringe, sterilised in the autoclave or by dry heat, should be used, failing this, the syringe and needle should be sterilised by boiling for 20 minutes. The blood is ejected directly into the culture bottle, usually a 6 oz. medicine bottle, with a screw-on metal cap in which a small hole has been punctured and a rubber washed cap inserted. When the culture bottle is issued from the laboratory the metal cap is covered with a cellulose cap. The metal cap must not be removed, the cellulose cover is torn off by means of a thread passed under the cap, and the rubber washer punctured with the syringe needle, the blood being shot straight into the bottle. Culture bottles of this size are suitable for about 10 cc. of blood, more should not be used or antibacterial substances which may be present in the blood will inhibit the rapid growth of any organisms present.

Hæmolytic Streptococci.

Puerperal septicæmia is mostly due to the Hæmolytic streptococcus: it is certainly the most dangerous of the septicæmias. Other types of streptococci, in particular the *Streptococcus viridans* in the case of sub-acute endocarditis, may bring about a bacteræmia, at least temporarily. In these cases it is very desirable to collect the specimen when the patient's temperature is rising.

Staphylococci.

A few cases of septicæmia have been proved to be due to infection with the *Staphylococcus aureus*: this organism

is, however, a frequent contaminant of blood cultures, due to careless technique in collecting the specimen.

Pneumococci.

Though not the only cause of pneumonia, the pneumococcus is the infecting agent in almost a 100 per cent. of acute lobar pneumonia cases and also a very large proportion of broncho pneumonias in children. In this disease, when a bacteræmia occurs, it indicates a grave turn in the progress of the disease, and the prognosis becomes correspondingly poorer.

The Enteric Group of Organisms.

Organisms of the Enteric group, that is to say, the *Bacillus typhosus* and *Bacillus paratyphosus*, are in the early stages of the disease readily isolated in the blood stream. In fact, blood culture offers the most certain method of diagnosis in the first ten days of the disease and is a method of investigation that should never be neglected. A special culture medium is usually employed, but if it is not available, ordinary broth may be used. While the method is not absolutely certain, something like 80 per cent. positive results can be expected.

Bacillus Melitensis.

Undulant fever, commonly known as Malta fever, is due to infection by the *Bacillus melitensis*. Diagnosis is often made after blood culture and in the early stages of the disease positive findings are the rule.

CARE OF WAR BLINDED.

NATIONAL INSTITUTE'S CALL FOR HELPERS. REGISTER OPENED.

A register of people willing to help any men, women and children who may be blinded by hostile action in the present war has been opened by the National Institute for the Blind. It is part of a war-time scheme providing fully for such casualties which was accepted by the Minister of Health when he received a deputation led by Sir Beachcroft Towse, the blind V.C.

Hundreds of qualified helpers are required if every part of the country is to be staffed against possible contingencies. Those enrolled will be given every facility for learning Braille and any other subjects likely to make their help to the newly-blinded more effective. Full particulars can be obtained from the National Institute for the Blind, 224, Great Portland Street, London, W.1.

One thing these helpers must avoid, an official of the Institute points out, is the doing or saying anything that might weaken the victim's determination to win through. "There must be no sloppy sentiment," he says. "Have compassion, by all means, and plenty of it; but express it constructively, so that a newly-blinded person will be quickened with courage, not paralysed by self-pity."

The National Institute's Council considers that the tragedy of a sudden increase in our sightless population can be much better handled to-day than was possible at the time of the last war. Since then, close co-ordination has been established throughout the whole field of blind welfare work in this country.

HORSES WOUNDED IN FRANCE.

The French Army authorities have accepted the Blue Cross offer to set up a Hospital for the Wounded War Animals in France. Those willing to maintain this vital work for horses injured in the battle for freedom should send donations to the Blue Cross (Dept. T), Grosvenor Gardens House, Victoria, London, S.W.1. The Editor is specially interested in this humane work. The dear horses are playing a more valiant part in war for liberty than humans in neutral countries.

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