

R. Acidi Sulphurici Aromatici	dr. iss
Acidi Acetici diluti	dr. ii
Acidi Carbolicci	℥ ii
Aque ad	oz. viii
Misce. One sixth part every half hour.		

This medicine not only assists recovery, but seems to mitigate the immediate severity of the symptoms. If the doctor cannot cure the disease, it is, without doubt, in his power to ease the pain and suffering, and not only to ease but altogether to check them. In chloroform, the medical man possesses a power which, though not directly remedial, is of more value than any medicine. The patient should be placed under the influence of this anæsthetic and kept so until reaction, as shown by the return of urine commences, which may not occur for hours. Even in the stage of collapse the chloroform should be fearlessly continued. The administration of chloroform can only be entrusted with safety to a doctor, and as he could not devote his sole attention to one patient, this method of treatment is difficult to put in practice.

Reaction.—The stage of reaction sets in with the return of the secretion of urine, and is often accompanied with marked febrile disturbance, sometimes of a typhoid character. The danger is not over, and the most careful nursing with judicious treatment is required; energetic measures should be avoided, and anything like depressing treatment discountenanced, but at the same time, stimulants, if given, should be administered with extreme caution. The progress towards recovery is gradual, and there is more fear of the patient falling into a low adynamic condition, than of the reaction being too severe. Cold cloths to the head, and wrapping the patient in blankets wrung out of tepid water are better than medicine, but an effervescing draught of carbonate of ammonia with citric acid may be given every second hour. Food should still be very sparingly given and restricted to slop diet. On no account should any opium be given during this stage.

Convalescence.—The return of colour in the motions, the increased secretion of urine, and a general improvement in the other symptoms, mark the commencement of convalescence. Tonics are now required, and Fellows' syrup—a tonic of quinine, iron and strychnine—is an invaluable preparation, of which one teaspoonful should be given in a claret wine-glass of water three times a day.

Complications.—Diseases of a low typhoid character frequently interfere with recovery and require to be treated in an appropriate manner. Dysentery and diarrhoea often persist for a consider-

able time, and should be dealt with by the recognised methods of treatment.

Disinfection.—Throughout the illness the room should be constantly disinfected. There should be no carpets, and it is a good plan to stain the floors with a strong solution of Condy's fluid. McDougall's powder, Sanitas, Jeyes' fluid, Carbolic and Camphylene or Carboleine should be sprinkled about the floor of the room and passages. All soiled linen should be burnt. The slops and excreta should be disinfected with commercial carbolic acid, and subsequently buried in the ground. For washing purposes, a solution of corrosive sublimate, 1 in 1,000, should be used. Tabloids can be obtained from any chemist, and only require to be dissolved in the water. After the removal of a patient, the empty room should be well fumigated by closing all the apertures, and burning sulphur. The Nurses' clothes should, strictly speaking, be burnt, regardless of the expense, but if this be not done, they should be thoroughly baked or boiled.

(To be continued.)

Nursing Echoes.

* * *All communications must be duly authenticated with name and address, not for publication, but as evidence of good faith.*



I HEAR that H.R.H. PRINCESS CHRISTIAN came to London on the 2nd inst., and presided at the ordinary monthly meeting of the Executive Committee of the Royal British Nurses' Association.

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MISS CATHERINE LOCH, Superintendent Sister in the Indian Army Service, I am told, has most kindly offered her services to the Cholera Nursing Committee. Miss LOCH returns to England early in the spring for twelve months' leave, after five years' arduous work in India, where she has gained invaluable experience in the nursing of cholera. Miss LOCH's assistance and advice should, therefore, be invaluable on this Special Committee of the R.B.N.A.

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THERE have been quite a number of new Sisters appointed at St. Bartholomew's Hospital, owing to the re-opening of wards, which have been closed for structural improvements. Miss MABEL SLEIGH,

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