## NURSING RECORD

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## Editorial.

## Infection and Precaution.

THE SMALLPOX SCARE throughout the country during the last month caused an unending rush for vaccination, particularly in Glasgow and its surrounding Burghs. Many thousands of people queued outside surgeries and health centres for the essential treatment, in an effort to avert or lessen the virulence of the disease. Due to the commonsense of all concerned, the situation has been handled very efficiently and it is to this efficiency we owe our thanks, for what might otherwise have

proved an even greater disastrous situation.

In an old scrap-book belonging to my grandmother, I found the following information on a piece said to be taken from a book entitled "Glasgow and its Clubs, and written by Dr. John Strang, who was born in Glasgow in 1795. This was published apparently in 1856: "To the leading members of the medical club, it may be justly said that we owe much, not so much for alleviating or curing many of the 'ills that the flesh is heir to,' as for preserving the features of some of the fairest citizens, from the dreadful effects of that destroyer of beauty, to which our city like many others, has been

so long subjected."

Of course, when Jenner made the great discovery which has immortalised him, he met with prejudice greedily adopted and advocated by the medical opponents of England—I trust that my readers will forgive my frankness! Throughout Scotland, however, vaccination was at once hailed and practised by the leading medical men. Dr. William Nimmo was said to be the first to make use of the vaccine virus in Glasgow in 1800. On the other hand those days were early, for medical science was much behind the times and so all patients could not have the essential attention. It is told of one doctor that a wealthy patient who had the misfortune to need his visits was in the habit of holding a gold piece ready in his hand to electrify the doctor when he felt his pulse. One day the doctor was informed by the servant—"All is over." "Over!" re-echoed the doctor as he remembered the customary fee. "Impossible! He cannot be dead yet.

No, no, let me see him, it is some trance or heavy sleep perhaps." Eventually, the doctor was introduced into the apartment, and took the hand of the pale corpse, appearing to feel for the pulse. He gave a sorrowful shake of his head and finally with a nalert movement, he relieved from the grasp of death, two guineas, which in truth, had really been destined for him. "Ay, ay, good folk," said the doctor, "there's a destiny in all things," and in the same shrewd way he turned on his heel and her the land. heel and left the house.

This question of infection recalls yet another true

story told to us by our Moderator when visiting our school, where he was for some time Chairman of the Board. The school was mainly for daughters of doctors and clergymen and in most instances the parents were abroad. When an outbreak of infection occurred, apart from the doctor and Matron in charge of the sanatorium, only the minister was allowed to visit us, and then deeply swathed in the essential "robes." He always had a story for the sick, and on one occasion during an outbreak of scarlet fever, the Moderator told us of the deep esteem and affection in which the Reverend Norman Macleod was held, especially amongst the poor. His parish was the "Barony." Another minister was called in to see and pray with a man who was believed at that time to be dying. When the minister was about to leave, he said to the wife, "Do you not belong to any church?'

"Och, ay," she said, "we belong to the Barony—Dr. Norman's."
"Oh," exclaimed the minister, "then why on earth

did you not call in your own minister?"

No, no!" said she, "it's a catchin' feever this, and we wad never think of riskin' Norman!'

MARGARET B. MACKELLAR.

We are much in sympathy with the criticism of the Medical Officer of Glasgow, Dr. Stuart Laidlaw, published in The Daily Telegraph of April 10th, 1950 concerning the management of fever hospitals under the National Health Service. He intends to raise the matter at a meeting of the Scottish Medical Officers of Health Society, also to have it referred to London.

Describing the arrangements as "one of the gravest anomalies of the health service," he said: "Fever hospitals should be put back as part and parcel of the local medical officer's equipment. This is the only way

to handle outbreaks of infectious disease.

At present fever hospitals are divided among boards of management under regional hospital boards. There are four management boards in Glasgow and it is impossible for them to be linked up or to be in contact

with the public health department.

We would like to draw the attention of the Nursing Profession to the apparent indifference of the Minister of Health to the value of Fever Nursing, so clearly demonstrated in the ruling of the Nurses Act, 1949, in which the Supplementary Fever Register is the only one to be deleted from the Statute Book, and therefore the status of the Fever Nurse completely effaced.

It appears to us that in spite of preventive medical advancement, the recurrence of epidemics of infectious

disease cannot be ignored.—ED.1

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