thinner, and refusing to graze." On further inquiry, I found the amount of milk given was now but sufficient for household purposes, and that it creamed badly. Here, then, I thought, is the clue to this chronic typhoid condition. How, then, is this result to be arrived at?

First, the faecal matter from the water-closet drain is poured into an open stream; the water of the stream becomes mere sewage, and this contaminated water is the only drink the cow can get. So perverse were these good folks in their belief that it was impossible that the milk from their cow could be the cause of their illness, that I had the greatest difficulty in persuading them to refrain from drinking it. After they consented to send their cow away, and get their milk from a neighbouring farm, a tardy but permanent convalescence resulted.

ON NURSING SYSTEMS.

By JOHN E. NEALE, M.R.C.S.,

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THE question as to the merits of the different systems of nursing is one which at the present time is exciting a good deal of interest in the professional world; and in the BRITISH MEDICAL JOURNAL for January 3rd, Dr. Braxton Hicks has written a most able and practical article, in which he has discussed the question so fully that, beyond agreeing with him in his conclusions, there is very little left to be said. However, always having had a great interest in the matter, and also a fair amount of experience, I have thought that further remarks, based on practical experience, might be of use, when we are on the eve of a revolution taking place in the nursing arrangements of one, if not more, of our metropolitan hospitals.

Without the slightest doubt, it can be most positively asserted that of all the "systems" now in vogue, that characterised by the "ward system" is by far the best. In that, a nurse, having passed through her period as probationer, during which her time has been divided between the various general and special wards of a hospital is, if considered competent, appointed to a particular ward or wards, where she remains a fixture. She thereby becomes thoroughly acquainted with the peculiarities and modes of treatment of the physician or surgeon in whose wards she is working; she soon takes a pride in her work; is looked up to by all in the place, especially by young dressers and clerks, whom she can teach a great deal which will be of untold value to them hereafter; while the residents, perhaps holding their first appointments, are made a great deal more confident in themselves, knowing that they have under them a woman on whom they can most implicitly rely, and whose interests are, as it were, common with their own. The knowledge which the nurse has, too, that she will not be shifted or dismissed without her case being fairly considered, goes very far in keeping her up to the mark, if not on purely conscientious motives, at least on the grounds of good policy. There is no other method by which this *esprit de corps* can be obtained.

How different this is from that which exists in what Dr. Hicks calls the "central system" none but those who have had to work under the two can appreciate. Here the nurses may be every bit as good, but another element steps in, in the shape of a "matron" or "lady superintendent", who, though not nominally, yet practically, reigns supreme. She can shift the nurses about from ward to ward as her fancy takes her, and discharge them in the same manner; while, if the medical staff should ever remonstrate, the result is a general snubbing from the governors and the commencement of a series of petty annoyances instigated against them by the matron, who now, after her victory, knows the feeling of the lay to the medical staff, and is, therefore, free from fear of losing her comfortable home, and may even go so far as to have the audacity, when occasion presents, of making open or underhand reports about the medical staff. This is by no means an exaggeration of the actual facts, as I can testify from actual experience.

Apart from this feature of the system, the constant changes in the wards cannot be anything but sadly detrimental to the care and comfort of the patients, especially in the larger institutions. There the nurse, not knowing when she may be removed, naturally cannot take that interest in the patients which she otherwise would; while to those who have the medical charge of the patients, the amount of unnecessary repetition of orders and supervision in seeing them properly carried out, is very annoying, not to say heart-breaking, to anyone who puts his whole energies into his work.

The younger nurses also appreciate the constant changes in their superiors, for it is impossible for them to gather such good hints from all-round nurses as from those who by long experience have been accustomed to work of one kind. Nothing proves this more assuredly to my mind than the fact, that those who have been unfortunate enough to

begin under this "central system" rarely remain at the hospital longer than they are absolutely obliged, not knowing when they may be dismissed, thereby losing a character. Thus not only is the general standard of efficiency lowered, but there is no trained material to fill up vacancies amongst the older nurses, thereby causing the appointment of raw material to responsible posts.

The question as to the value of training institutes is a wide one, as there are several varieties of them. Those which are farmed out to hospitals are, as far as my experience goes, the worst embodiment of the "central system", and afford another outlet for the pecuniary resources of benevolent people, in the shape of a "fat living" for one or more "lady superintendents". This subject has now reached such a point that it ought not to be dismissed without very mature consideration. If we are to have our hospitals properly carried on, there must be a professional and not a lay authority over the nursing arrangements; and above all, it is high time that the committees of hospitals were made to understand that some weight should be attached to the representations of the medical men, who have devoted some of the best years of their lives in trying to alleviate the sufferings of mankind.

THERAPEUTIC MEMORANDA.

TREATMENT OF POST-NASAL CATARRH.

IN the *London Medical Record*, which frequently contains useful hints for the general practitioner, I saw lately a formula for the treatment of post-nasal catarrh. It was, I believe, originally suggested by Dr. Duffin. It consists of oxide of bismuth, powdered gum acacia, and a small quantity of muriate of morphia. It should be well mixed, and then, if used as a snuff in severe coryza or post-nasal catarrh, it acts in a most charming manner. Cases of great severity and long duration have yielded to its influence after three or four days.

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JOSEPH ROGERS, M.D.

HOW TO CURE FITS OF SNEEZING.

IN the issue of the BRITISH MEDICAL JOURNAL dated December 27th, 1879, the above heading having attracted my attention, I was very much interested to find that the course of procedure recommended agrees to a certain extent—the principle being the same—with the practice I have adopted for years. Since my schoolboy days, I have known that, if the nostril of the affected side be stopped early enough, as by pressure with the finger on the ala nasi, there will be no sneeze. During more recent years, when I have been suffering from irritation of my Schneiderian membrane so as to annoy me, I have selected out and placed a good "chamomile flower" in each nostril. I find that it not only acts as a respirator, but the flower gives off a very grateful aroma, which I consider beneficial from its soothing influence. These flowers are inexpensive, and can be obtained of all sizes. They will be found, I believe, very useful if placed lightly within the nostril. Although I have practised this little idea for some time, I did not consider it worthy of recording until I observed the communication of Mr. S. M. Bradley in this JOURNAL. I may add that, during the past autumn, I was very much annoyed with continuous irritation of my Schneiderian membrane, to which the foregoing only gave temporary relief. After trying many things, I bethought myself of trying extract of belladonna; the small dose of half a grain of this drug produces its toxic effects on me, drying up the secretions of my faeces, etc. Although it is now more than two months since I took my dose, I continue free from anything unusual in this way. I may say that the irritation complained of did not amount to sneezing, but to a raw sensation on inhalation, which I found very annoying. I was, therefore, very much pleased when I found that the irritation produced by my dose terminated in complete resolution. Should these hints be of any benefit to mankind, I will be more than compensated.

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OBSTETRIC MEMORANDA.

THE POST PARTUM UTERINE PAINFUL SPOT.

AFTER confinement, if the hand be placed on the abdomen, the uterus in general will be found contracted into a hard ball, longer than it is broad, and somewhat tapering from above downwards; and if careful manipulation with pressure be practised, there will invariably be found one spot exquisitely tender; the remainder of the uterus grasped and