

To match we take first the serum of the recipient with a pipette and put it on a slide. We add to it the equal quantity of corpuscles solution of the donor. Secondly we mix equal quantity of the donor's serum and the recipient's corpuscles solution on another slide, and leave both the slides side by side for 20 to 30 minutes. Under the microscope we examine the slides to see if the corpuscles clump together. Unsuitable donors will show the corpuscles clump, change their shapes and form tiny red deposits like red pepper precipitates. Suitable slides after 20 to 30 minutes show the corpuscles clear and definite in the solution with no clumping. No clumping after 20 to 30 minutes means the donor is suitable. It is safe to keep it for 30 minutes. As soon as we get a suitable donor, we give the transfusion. Before we give the blood, we take the patient's haemoglobin by Sahli's method, red blood cells count, the colour index and the blood pictures. After the transfusion we repeat the R.B.C. count again after 14 days. If the patient needs second transfusion we match the blood again, even if the donor's has been suitable the first time.

After the patient is discharged, we advise him to come again to the hospital every month for the R.B.C. count. Some keep in touch with us after they leave the hospital. In 1936 we have done 72 transfusions for 65 patients. Matching blood is very interesting.



THE HEALTH VISITORS' LEAGUE SECTION

The Honorary Secretary of the League, Miss M. E. Rawson, Lady Reading Health School, Bara Hindu Rao, Delhi, will gladly receive reports and articles for insertion in this section.

Some Musings on Health Work in Villages

BY SISTER BYWATER,
Lady Hardinge Hospital.

Health Visitors as well as nurses must find it very uphill work in India and are often, I suppose, doomed to disappointment. The Health Centres in existence have such a wide area to cover that the following up of cases must leave a big gap in between.

I once tried to combine Health Visiting, Mothercraft work and District Nursing but found it very difficult. I found a woman was far more anxious to have her or her child's ailments cured rather than prevented. They seem to think it such a waste of time to bother about being clean, especially in the cold weather, when probably they would never have sores and bad eyes and running ears and glands caused largely by all the little live things that hop about and burrow into the skin so happily. After all, it does cost a certain amount of time and thought and temporary discomfort to have a bath, and incidentally soap is not so easily got in the villages, let alone hot water.

In teaching I found examples were very helpful. For instance in a family of children, the baby had dreadful eyes; its elder brother had the same and went blind through neglect. 'Oh well' said the parents, 'it was God's will he should be blind'. But they had heard that the hospitals and health centres sent people out with medicines to cure blindness! It takes time and patience to explain the why and the wherefore of this blindness which they so readily accept, but the proof of the pudding is in the eating. The infant was allowed to be treated, and wonder of wonders, was cured, and the child is now a living example and quite a curiosity of the villages as to what can be done. Now the people who have witnessed this do allow other children to be treated and so cured.

Talks on the correct kind of diet, the value of sun and air, the necessity of washing one's person and clothes from time to time were quite successful, but one does need to persevere and continue to show repeated examples.

Training in Mothercraft to girls of school leaving age met with a good response, especially after they had overcome the usual shyness at the thought of marriage and babies, which after all are the main objects of an Indian girl's life.

Ante-natal talks on the care of the health of the mother-to-be were given, and help in the preparation of the small layette of the infant. The habits of babies were gone into in detail, and I found the girls most interested. Most of them apparently knew very little about confinements and rather dreaded the event and depended on the old 'in laws' to make arrangements, which usually resulted in the village dais. Later the girls proudly came to show their babies, which was proof in itself that at least some of the talks had penetrated. Truly some of them were 'got up' for the occasion, but their condition was good and showed they had understood what the Miss-Sahib was driving at, and they tried in their small way to please her and incidentally to produce a healthy nation.

It's a long, long task, needing unlimited patience and results are slow in coming. But there is lots of material to be found and if rightly used and handled, improvement is bound to result eventually.

Two Village Health Exhibitions

The Delhi Health and Baby Week Committee vary their programme from year to year. This year exhibitions were held in two villages instead of in Delhi itself. Gheora about fifteen miles out of Delhi was one of the villages chosen, and there marquees were erected on a space of land near the station. The exhibits were confined to various Health subjects such as clean wells, the prevention of Malaria, dietetics and welfare Centre work. A drama which attracted enthusiastic and rather unruly audiences on both days of the exhibition, was staged to teach the benefits of curtailing expenditure on weddings and increasing expenditure on food and comforts.

In Alipur the Health stalls were a part of a very much larger general exhibition which included demonstrations in improved agricultural methods and a variety of kindred subjects such as dairy farming, bee-keeping and also spinning and weaving. At both exhibitions stalls were arranged by the Lady Reading Health School staff and students, and both first and second year students as well as the Superintendent and Assistant Superintendent took turns to act as demonstrators. The stalls were intended to show how by forethought and cleanliness the food products of an ordinary village, and the clothes and utensils of an ordinary village home, can be utilised to promote and safeguard the health of mother and child.

In the ante-natal and post-natal sections Dal, Atta, Rice and Sugi were exhibited in earthenware saucers as common articles of diet. A display of fruits and vegetables such as Sag, Cauliflower, Carrots and Tomatoes was made in order especially to draw the attention of villagers to them as pre-eminently important articles of diet for the expectant and nursing mother and the growing child. It was interesting to note in connection with the tomatoes that there was quite a controversy, some villagers declaring that they could never get them and others assuring the stall-holders that they were already growing and eating them as a matter of course. Those who were demonstrating wondered whether Agricultural Departments could do something to encourage their production in all districts in North India in the cold season, since they are an excellent source of several of the essential vitamins.

At the ante-natal stall by means of an old clean saree and clean rags, and a cake of cheap desi soap, demonstrations were given to show how

simple preparations can be made for a safe confinement. By examples of small garments and patchwork quilts the mothers were shewn how, by utilising scraps of material and clean pieces of old chaddars and kurtas etc, clothes, napkins and bedding can be prepared for the coming baby.

In the post-natal section some of the mothers were much amused when their babies were put into an inverted charpoy to play with wooden toys for a few minutes. It was hoped that they realised how great a saving of their own time might be effected by this device of a home-made playing-pen, even if they did not grasp how important independent play is for the physical and mental development of the child.

In Gheora it was obvious that the women were very unsophisticated and it is doubtful whether they were able to get over the surprise and novelty of the exhibition sufficiently to learn anything that they would put into practice, but it is possible that some of the men may have got a glimmering of the connection between dirty dais and maternal and infant mortality. In Alipur the women's minds were open to suggestion because of the work being done in a Welfare Centre there which was started a year ago. The women crowded round the stalls, and it was possible to give short talks on such subjects as regularity in breast feeding, the best method of weaning, diets for infants and toddlers, ante-natal care, etc., etc., and these talks sometimes evoked questions. It was of course an immense gain to be able to tell these women that if they attended the Alipur Welfare Centre they could get more detailed teaching in all these matters and on the making of garments for their children like those displayed. Also that they could there arrange for trained dais to attend them at their confinements.

Besides those from Alipur itself large numbers of women came to this exhibition from villages three or four *kos* away. Some of these also appeared to be very much interested, but it was disheartening to realise that it was not possible to tell them to go back to their own Centres to learn more, and their very enthusiasm emphasised the need for a network of Health Centres throughout rural areas.

MISS H. R. BRADLY,
Lady Reading Health School.

STUDENT NURSES' ASSOCIATION SECTION

Reports and Articles for this Section will be welcomed by the Hon. Organising Secretary, Miss Pitman, Women's Medical College Hospital, Vellore.

The Government General Hospital, Madras, Student Nurses' Unit has sent us this month two contributions for the Student Nurses page and I thank them very much for this contribution and hope that other hospitals will send along news of their activities.

V. K. PITMAN,
Organising Secretary.

Gifts

To help us in our work each day
And make life worth its while,
To greet each other on our way
God made,—a pleasant smile.

To soothe the throb of aching hearts
Too sad, and sore to weep
To comfort those in pain and loss
God made,—a dreamless sleep.