The Madras Flag Day

There was great enthusiasm in all the city hospitals, and at the Trained Nurses' Association Office on March 17th when workers were astir early preparing to go out selling flags. Nurses in spotless uniform were spared from their usual duties to be out, making house to house, and office collections, and selling at stationary places also. The stations, cinemas, bus and tram stopping places, hospitals, etc., were all besieged from early morning to evening. By the kindness of the Mayor of Madras, a large room was allotted to us as a central depot in the Ripon Buildings which are the headquarters of the Madras Corporation. The 'hospital' office of the Editor has been an empty tin collecting depot for the past 3 weeks—daily have arrived from the various hospitals, tins of all kinds—Glaxo, Cow and Gate, Bengers, Barley, Allenbury's, Ovaltine, cigarette and even empty jar tins. They were washed, bored, taped, then closed by soldering, afterwards emerging duly labelled, every label being signed and numbered to a total in use of 208. As we had never run a 'Flag Day' before, and arranged it in so short a time we were inclined to be pessimistic about the result—but when at 5 p.m. we had counted Rs. 1,000, our spirits began to rise, and at 9:30 p.m. when the last tin was emptied we had in hand over Rs. 2,000. The final balancing up shows after all expenses are paid a profit of Rs. 2,181. This has been divided into two-thirds to the 'Florence Nightingale Memorial Fund' and the remainder to the association capital fund which very badly needs strengthening. Every member in Madras co-operated whole-heartedly, and great credit is due to them.

To run a 'Flag Day' is an experience, and if one could only register all the facial expressions of people when asked to buy—the result would be a most interesting study. Flag days in Chingleput and Vellore have been held and the amounts realised are included in the Madras total. Further particulars will be issued in the May Journal.

Diet in Diseases of the Nervous System

By Miss D. K. Graham

In dealing with neuralgia it was stated that tea and coffee should be forbidden in chronic neuralgia or where there are frequent attacks. This does not apply to attacks of migraine that are not affected by coffee, or may even be relieved by a cup of hot, strong coffee taken as the attack is about to come on.

Alcohol is frequently a cause of severe neuralgia, often simulating migraine. When no other cause for the disease is found, all alcohol should be forbidden. According to Bowers, vegetarianism may be a cause of neuralgia. In these patients the addition of meat to the diet will give relief. Care and experience alone will help in deciding whether the patient is getting too much food, and whether his diet should be cut down and his elimination increased, or whether the case is dependent on an insufficient or improper diet.

As a general rule, plain wholesome food should be given at regular intervals. The patient should not be allowed to eat between meals.
All rich and highly seasoned foods should be forbidden; also all fried foods, pastry and anything known to disagree with the patient. Care should, however, be taken that the diet be not too restricted. True idiosyncrasies for different articles of food are not very common. The excessive use of tobacco may be the cause of neuralgia.

In cases of gastralgia, excesses of alcohol, tea, coffee, sweets and tobacco must be avoided. In some cases, taking of food increases the severity of the attack; there are other cases where pain comes on when the stomach is empty. In these, relief is often afforded by giving a cup of hot milk or beef-tea with a biscuit in the middle of the morning and afternoon and last thing at night on going to bed. If the pain begins in the night from the same cause, a glass of milk should be kept at the bedside, and when the patient is awakened by the pain he may take a few drinks of hot milk. Sufferers from visceral neuralgia should be put to bed and kept on a milk diet.

It was stated that migraine, or sick headache, should not be confused with ordinary neuralgia. The food should be plain, wholesome, and taken at regular intervals; eating between meals should not be allowed. Excesses of all kinds must be studiously avoided. Patients suffering from migraine are apt to attribute the cause of the attack to some article of food. This is not likely to be the case and the patient should not be allowed to cut off first one and then another necessary article of his diet.

Starch indigestion may be present in many of these cases and the nurse must report this without delay to the physician, as it should receive careful attention. These patients very often get along best on a diet that is largely vegetarian, but this is not so in all cases. Coffee should not be prohibited; for, generally, it is not the cause of the trouble, and in some instances, when taken at the beginning of an attack, it may even afford relief.

In toxic conditions the matter of prime importance is that the stomach should be given absolute rest; if possible alcohol should be withheld entirely. As soon as the stomach will retain fluid, a saline purge is generally ordered. Milk or broth is next to be prescribed, and, as the desire for food returns, a light diet of soft eggs, milk and toast, and the like should be allowed. When the patient is better, all rich and highly seasoned food should be avoided. In the severe forms, the diet should be that prescribed for chronic gastritis. Liquids and broths, together with beef extracts, eggs, barley and rice are given. Milk is useful in most cases. To this list may be added fish, chicken, sweetbread, vegetables in the form of puréés, mutton and mashed potatoes.

In all cases fat should be given in an easily digestible form, such as good fresh butter. Saline waters are often useful and alkaline saline waters are especially to be recommended. Water should be taken in small quantities between meals. Alcoholic stimulants should, as a rule, be omitted; when utilised they should be given in small quantities, and are best when diluted with water.

In a general way, small frequent meals are best. In very severe attacks the patient should take as much fluid as possible to flush out
the system and the intestinal tract should be thoroughly purged. The food should be given in a partially digested form and at frequent intervals.

Detailed menus were given indicating the kind of food which should be supplied.—(From the British Journal of Nursing.)

**Medicine Dealer Convicted**

The November 30th issue of The Times of India along with other important publications of Bombay published an item of the arrest, trial and conviction of Atma Ram for selling spurious Antiphlogistine. The accused was charged at the instance of Mr. C. W. B. Rayner, Bombay, Manager of Messrs. Muller & Phipps, the agents in India for the Denver Chemical Manufacturing Company of New York, manufacturers of Antiphlogistine.

The accused was sentenced to fine and imprisonment by Mr. Oscar H. Brown, Presidency Magistrate, Mazagon Police Court. It was urged upon behalf of the accused that he was but a petty dealer and that he was unaware of the fact that the substance contained in the tin was not the genuine Antiphlogistine. His Worship was unable to accept this contention as the accused had been formerly employed in a firm of chemists and was well acquainted with the general appearance and get up of such articles. Continuing, the Magistrate said that the accused should have been warned by the fact of the low price at which he was able to purchase this article and from the evidence it was clear that the accused was not the innocent, unwary person he now gave himself out to be.

The Denver Chemical Manufacturing Company of New York proposes to take every step to safeguard their interests, and the imitators, counterfeiters and substitutors will be prosecuted to the full extent of the law. In a number of instances, complications to a fatal termination have been brought about through the use of imitations of Antiphlogistine and it is gratifying to know that the courts recognize the necessity of protecting the public from the use of inert and harmful products which are made to replace preparations of superior merit.

**WHAT IS DIRT**

A good definition of dirt is: 'Matter out of place.' Jam in a child's mouth is jam; on the child's hair it is dirt. Hair on a milkmaid's head is her glory; in the milk pail it is dirt. Microbes in a flower bed are not only harmless: they help the flowers to grow. But microbes under a child's nails are dirt, sometimes very dangerous dirt.

The first and most important point, then, with regard to dirt is its position, in place or out of place. The next point of importance is the presence or absence of virulent germs in dirt. Most germs are more or less harmless. Between the quite harmless and the deadly germs there is every intermediate grade. We cannot at a glance tell one from