Her temperature was about 103, pulse 120 and she had vomited. Blood count showed a leucopenia and the diagnosis made was malaria. Recovery under quinine medication was prompt.

We see a great many cases of ascites in all stages, and I am convinced that the fundamental cause in most instances is malaria. In some the heart, kidneys and liver are so badly diseased that no amount of quinine effects recovery but if taken in time careful and steady quinine may see the ascitic fluid to disappear, the big spleen can then be palpated and the diagnosis is plain.

A child of about three years was brought to hospital. She appeared to be an idiot with spastic paralysis of almost all the voluntary muscles, blind, dumb and deaf. Had to be forcibly fed and bladder and rectum incontinent. A most pitiable case. The history was that she had had high fever about a year previous. Had been a normal child and the present symptoms had remained after the fever left. Upon examination she was found to be running an evening temperature of about 99°—100°. Blood and spinal fluid were negative Wassermann. Diagnosis made was cerebral malaria. Quinine was given hypodermically along with pot. iodid mixture by mouth and to-day—a year later—the child appears as a normal child again.

Thus it is that malaria can simulate almost any known disease and complicate all of them. It is insidious and destructive and persistent, and I believe is one of the largest factors in retarding progress that can be found in all India.

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PROGRESS IN INDIA—THE MALE NURSE.

By Miss C. B.A.Linning, S.R.N., Civil Hospital, Dera Ismail Khan.

It was while in Military work in the Indian War Hospital, Karachi, in 1918 the thought of the great need of trained male nurses first came to me. I obtained permission from our Superintendent, Miss Bonser, to give nursing classes to the ward orderlies, and their response was so good, their adaptability and general interest so great, one saw the rise of a new profession for men in India. On my return to mission work I was sent to a male hospital (my previous 15 years had been spent in Zenana hospitals).

At once I realised the tremendous difference in the whole system of “nursing treatment” as received by men from our “dressers” compared to the care and attention female patients in our Zenana hospitals and outpatient departments derived from female nurses.

For eight years we have tried to get a recognized course of nursing training for males. The difficulties have been great, at first the men themselves resenting “new teaching,” and but for the loyal support of our doctors and some of the older workers we might have given up the task. We were told repeatedly that the better class “boy” would never do the cleaning of wards as our girl nurses do in Zenana hospitals. That we would only get the “sweeper”
class to touch "kidney bowls, bed-pans, etc." Time has proved all this to be untrue and now my male probationers consider it the ordinary routine to clean what previously they would not touch!!

Then came the subject of "Lessons, examinations and certificates." Here a difficulty arose in that many doctors (male) do not realise the actual lectures required by nurses. They could lecture to medical students easily; but the practical details required by the nurse they did not know, general ward management and hospital hygiene, etc., such things they had always accepted as necessary and the usual accompaniment of a good hospital, but how to obtain the same with a staff all new, was quite beyond their grasp. However "Rome was not built in one day," so on we went, gathering from England, Africa, and China, the progress made in those lands of the training course the male nurses are taking and the benefit accruing to the patients in their hospitals, and now at last the North India United Board of Examiners have kindly consented to the affiliation of male nurses, and will in due course issue to male nurses the certificate of the Board.

Thus our men can now have a complete training in Medical and Surgical Nursing with compounding, and a recognized certificate at the end of the course. A nursing text book in Roman Urdu for male nurses has been compiled as we felt the need of a book without any feminine details to be a very necessary requirement to put in the hands of our men and boys in training.

This may be obtained from Dr. A. C. J. Elwin, C.M.S. Hospital, Dera Ismail Khan, at the price of Rs. 2 per copy, V. P. P. extra.

It comprises surgical, medical, and urine test lessons in a concise form. We trust that this new profession for men in India may be the means of saving many lives, and be a "noble" one in every sense.

COMPETITION.

Miss Graham and Miss Griffin offer two book prizes for the best article made from any materials. Anything may be made but the total cost of materials must not exceed eight annas. The articles, with a detailed statement of cost, to be sent to Miss Griffin, Farhat Manzil, Nicholson Road, Delhi, before the end of June 1926. The articles will be sold for the Capital Fund.