

and housing schemes, with the acquisition of land where necessary; pointing out that the progress of Sanitation is greatly impeded by the want of Sanitary Engineers; showing that Malaria surveys have brought important facts to light already; recommending efficient screening of bungalows in Malarious areas; emphasizing the importance of dealing with the villages which carry over plague from one season to the next, and recommending the further investigation of the etiology of Beri-beri.

The importance of the Conference was well recognized socially. On the first Tuesday the inhabitants of Lucknow invited the delegates to a garden party to meet Sir Harcourt Butler. On Wednesday Sir James and Lady Meston were at home at Government House, and in the evening Sir Harcourt Butler held a reception. On Friday the Taluqdars of Oudh held a dinner to which Sir Harcourt Butler and the delegates were invited, together with the ladies who had accompanied their husbands to the Conference. The termination of the Conference was celebrated on Tuesday 24th January by the officers of the Indian Medical Service attending the Conference, who held a dinner, to which their professional brethren were invited as guests.

Looking to the quality of the papers read and the criticisms made by those with experience of the different subjects discussed, it may be said that the Conference has again justified its annual existence as an indispensable factor in the Sanitary progress of the continent of India.

OPPORTUNITIES FOR SERVICE.

By MRS. H. R. L. WORRALI, M. D., MUSCAT, ARABIA.

PICTURE a woman doctor in an isolated mission station trying to carry on a large dispensary work, trying to do whatever operations timid women may consent to, with only the help of ignorant and careless native women helpers. What portion of a nurse's work falls to the lot of such a physician? First and most important of all the minutiae and toil of preparations for operations. The afternoon of the day before while she is still tired from the dispensary work of the morning, she must see to the preparation of all the things necessary to be sterilized. The native nurse may indeed prepare the gauze for the sterilizer, but the rolls of towels, gowns, sheets, cotton, etc., and placing the same in proper position for conveniently taking from the sterilizer in a hurry, if she wishes to avoid confusion at the time of operation, the doctor sees to herself. Also selecting the basins, trays, etc., to be boiled. Then the sterilization of all the dressings carefully done. If this were trusted to the native nurse there might be an accident as she does not understand the principles of the machine. Selecting of instruments for the next morning's operation,

seeing that the operation room is absolutely clean, boiling of water in the water sterilizer in order to have cold sterile water ready for the next day; giving last orders as to the cathartic to be given to the patient at bed-time, being sure that the patient has had her preliminary bath and necessary shaving of parts, telling nurse to be sure patient has nothing solid to eat the next morning. Then after seeing about all the small details of hospital routine, so apt to be neglected by the native mind, she goes to her home tired out, and once more reads over all the details of the new operations to be done the next day, wondering if she has forgotten anything of importance. If the operations are to be very serious ones, as she is overtired she may sleep very little, worrying lest the patient may die under the chloroform, or lest she may not be able to cope with all the emergencies which may arise. Next morning she wakens early and tries to push everything else aside that she may begin soon on the important duties of the day. She sends to inquire if the native nurse has put the basins, etc., on to boil. Answer comes back that they are already boiling. So, as she has ordered that she herself must see them boiling before they are timed, she goes over to hospital as soon as possible, only to find that although twenty minutes have passed since she received word that boiling had commenced, only a slight steam is as yet coming from the boiler. So she goes often herself to make sure when it begins to boil and times it twenty minutes or half an hour. This done she feels it safe to handle any of the basins herself during the operation as she may have to do, having so few helpers. She has already made sure that the patient has had a rectal enema and has had no solid food. She tells the nurse just when to put the instruments on to boil, sees that she puts washing soda in to prevent rusting in the hard water and asks the nurse to tell her when they begin to boil, and times them herself. Now to her dismay some paying patients come from a long distance who must be seen to, operation or no operation. They monopolize precious time and delay everything. Finally they are gone and as everything else is ready she can begin to scrub up and have the native nurse do the same. She must watch the latter very carefully to see that once her hands are aseptic, she does not touch all sorts of things. She herself, after donning the sterile gown lifts out the sterile trays, basins, etc., placing them in order on sterile towels on the tables, goes to sterilizer, takes out the sterile gauze, other towels, etc. She may have had to go to calm the patient in the meanwhile as sometimes they are so frightened. Patient is now brought in and the operation begins. All through it the eyes of the doctor must watch the native nurse lest she spoil the asepsis in one way or another. By the time the operation is half over she can begin to breathe freely, and feel that in spite of all the drawbacks, the helper has been of considerable use. But every order for hot water or lotions to be brought, must be given by the doctor, and the preparation

of the same watched. She must reach for her own instruments and do double work in every way because of few assistants. But finally the case is finished, and though her back is aching, yet her heart is happy, because in spite of difficulties, things have turned out successfully, and she has been enabled to relieve another poor suffering creature, and start her back to health and happiness. So it goes with the other operations if she has succeeded in persuading more than one to submit to the dreaded knife. When the work is all finished she is almost too tired to move, but full of the joy of tasks well accomplished. But she herself must keep a close watch over the patients while they are coming out of chloroform, as even then accidents may happen.

Next morning her usual dispensary work begins after the Bible woman has had prayers with the patients, and the helper has written the patients' names and hunted up the history papers. The dispensary helper, being an unmarried girl, is not allowed to prepare patients for P. V. examinations so this task falls to the physician. If the case is a new one it takes some time and strength to make her understand what is needed. Some are so awkward, and clumsy, and so afraid. Even each chest case to be examined takes much time in getting all the numerous garments unfastened. They think it of no use to begin to get ready till the doctor is waiting for them. All this is a weariness to the flesh. Pay cases take double time as they want to talk so much, but they must be humoured as the work aims to be self-supporting. Finally the long morning's work is finished, and surgical dressings can be done in the wards, and new cases examined. If there is time left the accounts of the hospital cook may be looked into, and orders given for next day. After a late lunch and a little rest, back she must go to the hospital, and see that all the details of routine are going on well, and if it is the day for it, see about the hospital linen and a hundred other things. Small wonder that she does not find much time for the spiritual talks and Bible readings she would so like to give the patients, and which she counts of more value to them, than all the medical help she can give. The Bible woman and the lady missionary evangelist have already done their share in this, but naturally the sick ones listen very well to the one who has relieved their pain; so she has an opportunity of service there she must not lose.

Surely there is a great field open to help some of these overburdened ones. Are there not some trained nurses who find that they are dissatisfied with the kind or amount of work that falls to their lot and who love the Lord Jesus enough to be willing to take the position of helpers in these needy places? They may not be able to obtain such a high price for their work, but what nobler occupation could there be than to help the poor outcast ones for whom Christ died, and to relieve some of these overburdened doctors and thus win for oneself a share in the blessings the

patients pour on the heads of their benefactors. All these little duties are a nurse's work, but when added to the heavy responsibilities of a doctor, make the burden almost too heavy to bear. After all is said and done, no one can take the place of a well trained nurse. She it is, who has had just the training necessary for this work, and knows perfectly how to go about it with the best results and the least expenditure of unnecessary energy. Try as hard as she may, the doctor must overlook many things, as her training has not been to see to all these things. It is new work to her. She cannot be all the time in the wards, hence there are many complaints of neglect and carelessness and even of unkindness of native nurses toward the patients. The doctor must make visits outside the hospital and so be away much of the time. What a great change would be wrought in many a hospital by the presence there of a European trained nurse whose heart is full of love for the sick ones. But she must be a true Christian who has consecrated all her talents to the relief of suffering and to complete the work begun by the operation, or medical treatment of the doctor. But if down in her heart she thinks that she knows more than the doctor, or that her work is more important, and hence she need not carry out orders faithfully, she will be more of a hindrance than a help. To be successful, the two must work hand in hand. The Chief Officer of the ship must not seek to supersede the Captain, even though he may often feel that he has more work to do, and that the ship could not get along without him. When he himself becomes a Captain he understands that the duties of each are difficult, and each have their responsibilities, which no one else can carry. The Captain must be kind and considerate to the Chief Officer as well as to all his helpers, and refer to each his special duties, unless he finds from experience, that he does not carry out the orders faithfully.

If these things are observed and the work carried out in love and harmony, the two may do wonderful things for the kingdom, winning souls through the Gospel of service, and be themselves sermons, easily read and understood by those too ignorant to appreciate much ordinary preaching. Souls already won from heathenism may thus be kept firm in the time of trial by sickness. How many may have fallen back by resorting to heathen charms when the lives of their dear ones were in danger no one knows. Who can estimate the good done by such a helper and who can estimate the joy which is hers except those who have experienced it?

(While in no way underestimating the nobility of the calling of the Missionary Nurse and not desiring to detract from the force of the writer's appeal for workers we would point out that there can be just as true and hallowed service for ones fellow-men in Civil Hospitals and other Institutions, and in the homes of the sick as in Mission Hospitals. The distinction in any work or profession of secular and sacred is an unwarranted one, as the matter of motive is the decisive factor in one's service in whatever sphere it may lie.

The figure of the Captain and the Chief Officer seems to us, to fail in its application, as the Chief Officer is subordinate to the Captain preliminary to becoming Captain. The relationship of Superintending nurse and doctor is much more like that of Chief Engineer and Captain, each Head in his own Department. The Chief Engineer carries out the orders of the Captain without delay or question, but if the Captain undertook to handle the throttle himself or inform the Chief Engineer how to do his work, he would soon find himself dismissed from his ship. A lady doctor is very unlikely to find a nurse resenting her authority unless she attempts to dictate in regions outside the domain of the Medical Officer. Those who heard Colonel Jennings's paper at the Bombay Conference will remember the quotation he read on the relationship of nurse to doctor. *Page 57, Journal for February.*—Editor.)

HINTS ON INDIAN TRAVELLING.

BY E. G. H.

OPINIONS are divided as to the comfort or otherwise of travelling in India; some think it more pleasant and others less than travelling at home. Like most other things, however, a little forethought and preparation will go a very long way in reducing the discomforts and unpleasantnesses attendant upon it, and for nurses, who constantly have to travel at very short notice and who should arrive in the pink of condition at their journey's end, it is essential that such forethought should be given to the matter. On the frontier it is the custom with many regiments for the officers to keep up complete service kits ready packed, so that on being ordered to take the field they can devote the whole of their energies to their military duties, knowing that their service boxes contain everything needful for their private wants for a long time, and though financial considerations will often prevent nurses carrying this ideal out completely, it is yet one which might be aimed at with advantage.

The whole thing is thinking out the journey carefully beforehand and realizing all that one will want and will have to do, writing down notes of these points, and compiling lists from them. It should be decided beforehand exactly what one means to take and to do in such an event, and as such trips and the stay at the end will vary very considerably, three or more schemes should be drawn out. For instance, the first might be for a hot weather journey of not more than two days with a long stay at the end, the second one a longer journey and a shorter stay in the cold weather and so on. As a matter of fact it will be easier first to decide what are the things necessary to do and take on *all* occasions and then have separate lists for the particular occasions of the additions necessary. These should be clearly written out and copied into a "travel note book," as well as on to a foolscap size cardboard which should be hung up on the wall where it cannot get mislaid. If one's servant can read and write it will be well if she be made to copy out the list in her own language and also be instructed how to pack, etc.