THE SECRET OF HEALTH.

£2.00

BY A DIPLOMÉE OF A LONDON HOSPITAL

THE SECRET OF HEALTH

With the Story of

"The Missing Bag"

"A Nation's Health is a Nation's Wealth."—*Emerson.*

TABLE OF CONTENTS.

The

Missing

Bag.

CONTENTS.

The Missing Bag.

CHAPTER I.

TRAGEDY.

"What did he say, Jessie, what did he say?"

The voice that asked this question was so low and weak as to be scarcely audible, nevertheless the speaker had to make a mighty effort to ask it.

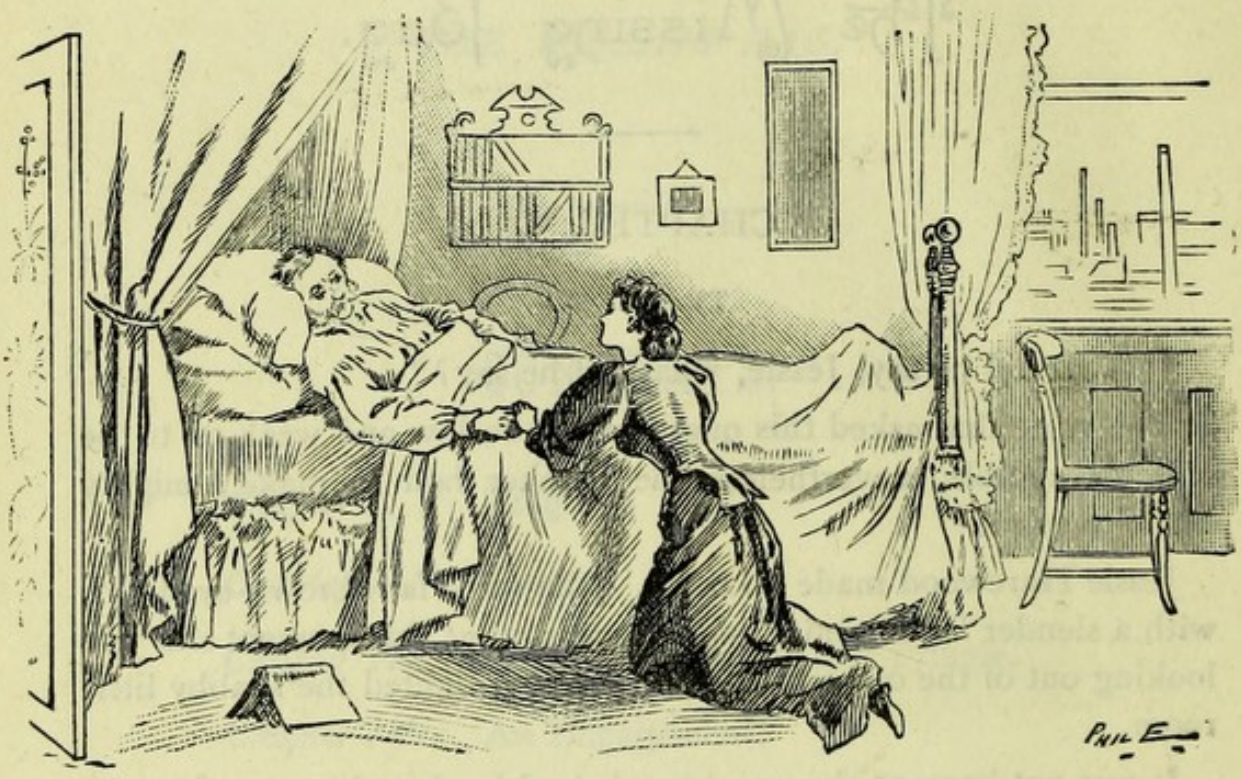
Jessie Harewood made no reply. She was a fair, brown-eyed girl, with a slender figure and a gentle face, and at this moment she was looking out of the one small window which lighted the shabby little room.

It was not because she was occupied with what she saw that she did not answer—the view indeed being only that of a sea of slates and chimney-pots, over which the mist of Manchester smoke was rapidly gathering, as the dull autumn evening closed in; she was looking out because she wanted to hide her face from the man in the bed, and she did not reply because all her energies were concentrated in trying to keep from bursting into a passion of bitter weeping. Her lips quivered convulsively, and the violent sobs which would have broken from them were choked back into gasps.

"What—?" came the voice again, only it was fainter than before, and this time did not get beyond the first word of the question. Silence followed for a moment, then it was broken—not by the failing voice, but by the storm of weeping which would be held back no longer, and giving way to her intolerable grief the girl threw herself beside the bed and buried her face in the clothes.

"My God—my God!"

The words were wrung from the dying man by the knowledge of what the doctor's verdict must have been; they were his last words, for he fainted after they were uttered, and from that drifted into stupor, and later in the evening into death.



CHAPTER II.

COMEDY.

From the sublime to the ridiculous is, proverbially, but a step.

Sometimes only a few deal boards and a whitewashed ceiling separate the tragic from the comic side of life.

The room directly under that occupied by Mr. Harewood was the bedroom of Miss Pringle, a maiden lady of means, the principal lodger in Mrs. Matterson's house. She occupied what were known as "the drawing-room apartments," and she travelled about with a maid of her own.

She had plenty of money, and nothing on earth to do. People who have very little cash, and more work than they know how to get through, may envy her, but if they knew how wearisome her life was, from having nothing but herself to think of from morning to night, they would not perhaps be so ready to change places with her.

In sheer distress for occupation, she had taken to believe that she was a great invalid. Physicing and dieting served her for an interest in life, and the attendance of the doctor or his assistant gave a certain fillip to her monotonous days, while the study of a work on "Diet and Digestion," was the cheerful occupation of her evenings.

Just as Mr. Harewood was dying overhead, Miss Pringle was engaged in an altercation with her maid. "It is really extremely tiresome of you, Yorkins," she said, "to write such an illiterate hand, and to spell so outrageously badly!"

There was some justification for the rebuke. A note had just come back from the chemist's, to say he did not keep the article Miss Pringle required. The order for this had been written by Yorkins, who hated going out in the rain, so she had sent Mrs. Matterson's little girl with an order requesting "tenn granes of Han Tie Pie Rynn."

If the chemist had been a disciple of Isaac Pitman he would probably have guessed that his customer wanted ten grains of antipyrin, but as he was only a dull man, with a busy shop and a short temper, he did not try to unravel the orthographical riddle presented to him, but returned a curt note written on the back of Yorkins' order, which, in the momentary absence of the maid, was put into Miss Pringle's hand by the little messenger.

"Well, miss, I did'nt hire with you to write letters for you, nor yet to run errands in the rain neither," said Yorkins huffily, in reply to the rebuke.

"No, but when I engaged you my digestion was not in the fearful state in which it is now," retorted her mistress, "you know that it is simple destruction to me to put pen to paper for at least two hours after any meal, it draws the blood to my brain when it ought to be occupied in the organs of digestion; you should have gone for the medicine yourself if you were not able to write for it properly. Mr. Duff must think me mad! At your age it is inexcusable to write and spell so badly!"

Yorkins was not young enough to stand reference to her age with calmness, and if the wrangle that ensued after Miss Pringle's speech was faithfully recorded it would fill a larger volume than this. It ended only with the close of day, and with notice being given on both sides.

CHAPTER III.

A THOUGHT STRIKES MISS PRINGLE.

"Colours seen by candle light,
Do not look the same by day,"

Says the old song, and certainly, causes of quarrel which have looked very black by lamplight, often fade away to the palest grey by daybreak.

Both Miss Pringle and her maid awoke in the morning each oppressed with the memory of what she had said and done overnight.

A situation like Miss Pringle's, £25 a year, perquisites and comforts, was not to be found every day in the week. And a maid like Yorkins, used to her ways, able to peptonise beef-tea, and to compound possets, did not, as Miss Pringle thought with a groan, "grow upon every bush."

Breakfast that day would have been a terrible ordeal, but that reconciliation was brought about by the news from upstairs. With anything so interesting to talk of as a death in the house, silence between mistress and maid was of course perfectly impossible. Miss Pringle being satisfied that heart disease and not anything "catching" was the cause of the death, took in all the details her maid could bring her, greedily.

"And, lor', miss," said Yorkins after one of her sallies to the kitchen, "only think, he hasn't left a penny piece behind 'im, his brother's come over, and 'as to pay for the burying, and is in a regular fume, so Mrs. Matterson says, at 'aving the daughter too thrown on his 'ands!"

"What daughter?" asked Miss Pringle, her own affairs having driven the fact of poor Jessie's existence out of her head.

"The daughter of Mr. Harewood, miss—she's left without a brass farthing."

"Well, I suppose this brother will take her?"

"Not 'e miss; he's a long family, Mrs. Matterson says, and she says the girl had best get a place; that she could teach reading and writing"—at this word Yorkins stopped. At the same moment a thought struck Miss Pringle.

CHAPTER IV.

AN ENGAGEMENT.

It is said that a flash of lightning can encircle the earth eleven times and a half in a second, so it is not surprising that thought, which is electrical, should on occasion be able to conceive an elaborate plot in the winking of an eye.

The thought that struck Miss Pringle was this, that as this girl who could teach reading and writing was in such straits for a home, perhaps her services could be had for little or nothing—not to teach, Miss Pringle did not contemplate putting any finishing touches to Yorkins' education—but to read aloud, to write notes and orders, to learn the mysteries of her digestion, and the secrets of peptonisation, and, ultimately—when she had learned Yorkins' methods, perhaps to be installed in her place.

When people are penniless they cannot make much choice of where they will go or what they will do. Jessie Harewood was roused from her overwhelming sorrow to find that, except a very small trunk full of clothes, nothing intervened between her and the grey stone walls of the workhouse; nothing, at least, except a faint and grudging invitation from her uncle, who was almost a complete stranger to her—to "come to us for a few days, if we can manage to squeeze you in anywhere."

His tone said, "You're a d——d nuisance."

Quarter of an hour after this invitation came an offer from Miss Pringle—"Free board and lodging in return for services."

Jessie's grief gave place for a moment to a tinge of joy that a way was opened which would deliver her from having to "squeeze in" on her uncle's hospitality.

The poor child thought nothing of the fact that not a halfpenny was offered for her work. She was ignorant of the ways of the world and the meanness of some of its inhabitants, and she accepted the offer as if it was something to be grateful for.

Miss Pringle very soon after found that it injured her appetite to remain in a house where a funeral had taken place; so, accompanied by Yorkins, who had reconsidered her notice to leave, and who did not suspect the treachery her mistress was contemplating against her, and with poor little Jessie Harewood as a sort of understudy to the maid, she set out for a village in the South Downs, where the air was reputed to be very bracing.

CHAPTER V.

HEARTBREAK.

"Come, come, I've brought you here to be of use to me, not to go on like this. What am I giving you free board and lodging for? Eh!"

No one would have thought that the harsh strong voice was that of an invalid, but Miss Pringle could quite forget that she was an invalid at times; she did so now, as she opened the door of the attic which had been provided for Jessie, and the boxes, in the lodgings at Stonedean, to which they had moved from Manchester. It was the evening of their arrival.

Jessie had helped the cabman up with the trunks, and had toiled up and down with all Miss Pringle's baskets and packages, while Yorkins looked on. She had unpacked everything, put away the bundles and bottles which Miss Pringle carried about in dozens, had conveyed innumerable messages to the landlady, had set a specimen of the village milk in the lactometer, and a cup of beeftea to peptonise under the cosy, and had run hither and thither fifty times for Yorkins, who had installed herself as second mistress over the orphan girl.

When all was done, she received the rinsing of the teapot the elders had drained, and a plate of dry bread and cold fat bacon.

Miss Pringle and Yorkins had dined at the Euston station, while Jessie minded the luggage, which saved a tip to the porter. When her miserable meal was over she had gone up to open her trunk, but when she had closed the door of the garret all the affliction of her grief suddenly rushed over her; the remembrance that her father, the only one on earth she had had to love, the only creature who had cared for her, was lying far away in Manchester, under a heap of clay and a stone slab, with his hands cold and stiff and powerless to help her; his feet no longer able to follow her; his voice for ever dumb to comfort her; his eyes shut and sunken, never, never, oh! never any more to look into hers. Oh, God! *how* had she lived to see him carried out in his coffin; how *had* she gone on living after he was gone; and how, oh! *how* could she go on living here without him?

With the force of a mighty wave all the bitterness of her grief rolled over her. It was the reaction from the numbness and stupor which so often mercifully follows the first days of a tremendous sorrow. The numbness now gave sudden way to a fearful volume of keen and agonised feeling, and throwing herself on her knees by the pallet which was to do duty for a bed, she burst, not into tears, for tears don't come in grief like hers, but into dry gasping sobs which shook her whole body, and made the rusty iron frame of the pallet groan and creak.

How long she had been there she did not know, when the door opened and the words spoken by Miss Pringle met her ear.

CHAPTER VI.

THE FINDING OF THE BAG.

Miss Pringle had rung her sitting-room bell four times, and no notice had been taken of it.

Jessie's attic was out of reach of its sound, and Yorkins was entertaining the landlady at the back gate, with a graphic account of her mistress's affairs and "worryin' ways"; so, fired with fury, Miss Pringle rushed to the attic to express her rage.

"Why is my bell not answered, and where is my medicine bag?" she demanded, when the sobbing girl had risen to her feet, "why hasn't it been brought into the sitting-room?"

"Indeed, ma'am—" said Jessie, when she could speak.

"Hold your tongue, and don't answer me, please, but bring the bag down at once!" And the indignant lady flounced off muttering, "sitting on the ground crying, indeed, while my bell is ringing, what next I wonder!"

The "medicine bag," as it was called, was a small, black bag, and was Yorkins' special charge, but thinking that Jessie was there to work, Yorkins had left it and the other luggage entirely to the girl's care, without troubling about it herself, and now, when Jessie went to look for it, to her horror it was not to be found!

Poor Jessie! She had never had luggage to look after before, she had always been looked after herself, while her father was alive.

No wonder that in the confusion of the crowded terminus it had escaped her notice that the wretched medicine bag had disappeared, and that in its place some puzzled porter had put another—a small, black bag—very like her own little bag indeed, and not unlike the bag that held Miss Pringle's precious nostrums, but not it; certainly not it, because upon its side two red letters were painted; two letters which seemed to Jessie to have something mysterious about them; why, she could not have said. They were merely these:

"L. S."

But they proved it was not Miss Pringle's bag, on hers was only marked the solitary letter

"P."

CHAPTER VII.

THE COTTAGE IN THE LANE.

"Oh, *please* can you tell me where to find the post office, I fear I have lost my way?"

The trembling voice sounded as if the eyes of the speaker were full of tears, and they were. They belonged to poor little Jessie, who, in her haste to send a wire of frantic enquiry after the lost bag, had taken the wrong turning, and now found herself at the end of a winding lane, with no habitation in sight but a cottage surrounded with trees and palings.

Behind the palings she had seen some one moving, and forgetting her fear of strangers she had hurriedly asked the question.

"The post office!" and appearing at the little gate she saw, not an old gardener as she expected, but a young man in a grey tweed suit, holding in his hand a little bunch of autumn leaves and flowers.

He was much taller than Jessie, and quite looked down on her as he leaned over the shabby wooden gate, and his dark blue eyes that had been full of gloom lighted up and seemed to grow as bright as sapphires, as he said, with a comical smile:

"A babe in the wood, eh! And have you a very important letter to post young lady?"

"I have a telegram to send about a bag I have lost!" said Jessie, her lips quivering.

"A dressing-bag I suppose; or have you lost your band-box, you careless little thing? You are afraid you won't have your new hat to shew in church on Sunday," said the young man, in a bantering tone, but to his consternation Jessie burst into tears, and covering her face with her hands sobbed as if her heart would break.

"Oh come! This is too bad! What a brute I am! Stop crying, there's a good child. For mercy's sake stop!"

And in a twinkling the young man had opened the gate, taken Jessie's hands in his own, and was looking into her tear-stained face with an expression of pity.

"I didn't mean to make you cry. I didn't mean to laugh at you. I am awfully sorry, upon my honour!" and as his quick bright eyes took in the genuine grief in her wan, soft, young face, his own turned pale and sad, as if he too was no stranger to sorrow.

CHAPTER VIII.

TREACHERY.

Two other things happened this same morning.

Miss Pringle found she had caught a little cold on the journey, and Yorkins was seized with a violent spasm, not of cramp—but of jealousy.

Her mistress had desired to be attended on in bed by Jessie, instead of herself.

Jessie had returned from her early trip to the post office, bringing with her a pair of rosy cheeks and sparkling eyes, and gave Yorkins an account of the kind stranger who had taken her to the post office, sent the telegram, and promised to do all he could to trace the lost bag.

"And, oh! Mrs. Yorkins," said Jessie, her eyes filling, "I am so sorry for him, he has a sister who is very ill, they are lodging in that cottage—and it is so uncomfortable—and he is so unhappy about her—the doctor thinks it may be a fever she is getting—is'nt it dreadful!"

Jessie was standing at the table holding the tray she had brought from Miss Pringle's room—she was to go back and read aloud, but in the fulness of her heart she delayed a minute to pour out her tale.

Yorkins listened with a mixture of contempt and anger on her face; the contempt was for Jessie, the anger for her inconstant mistress.

Just as Jessie said the last words a sharp tinkle was heard from upstairs—Miss Pringle's bell; she darted off, and a sudden flash crossed Yorkins' face; it expressed quite a number of things—the prominent one, victory!

* * * *

The next day, at the very same hour as the morning before, Jessie was hurrying towards the cottage in the lane; in her hand she held a bottle given to her by the kind good Yorkins, whom she now looked on as a sort of human angel, so much had she sympathised all the evening before with the young man and his sick sister. Whenever she could get out of Miss Pringle's hearing, Yorkins had almost wept over the sad story.

"Don't mention it to poor Miss P. at present, my dear," she said. "She's so nervous it would keep her awake, but do you go and see the poor, dear, young lady in the morning, you won't be wanted before nine, and take her this bottle, its known to cure fevers," and Yorkins looked very sage, "and see her yourself; we ought all to help the sick you know;" and she turned up her eyes piously, and handed Jessie an old medicine bottle she had filled with sugar and water.

Jessie was delighted—she longed to help the first person who had spoken a kind word to her since her father's death, and as she lay awake on her pallet, she did not feel its hardness as she thought of the soft pressure her hand had received when this person had said good-bye—and she longed for the morning.

* * * *

"I don't care—well or ill you must pack, I've no time to look after sick people here!" These were the words, loud and harsh, that fell on Jessie's ear as she approached the cottage. They were answered by a deeper tone—one she knew.

"Oh! do not ask me to take her away, for the love of heaven don't; I'll try again if I can't find some one to nurse her—"

He stopped short—it was the young man in the grey suit. He had been looking imploringly at the hard-faced slatternly woman who stood in the path, but at this moment he had caught sight of Jessie.

"She is very ill to-day—very ill!" he exclaimed, coming towards her, "it may kill her to be moved, but Mrs. Perks says we must go!"

"Yes, I've a houseful of children, and no time for sick nursing, let alone having fever in the house; you must pack, Mr. Ashley, and quick too; there's no nurses to be had in this village, so you'd better go elsewhere!"

"Oh!" cried Jessie clasping her hands, "if I could nurse her, I wonder would Miss Pringle let me!"

"But, *can* you nurse?" said the young man, joy shining in his troubled face.

"Ah, yes, indeed I can!" and Jessie thought, with a pang, of her father.

"You are an angel!" cried Mr. Ashley enthusiastically; "and pretty enough for one, too," he thought to himself, in his relief and gratitude.

"I'll fly back and ask for leave," cried Jessie, her fleet steps carrying her out of sight almost before they could answer.

* * * *

"You little viper, you wretched little viper, get away from that gate this instant—don't attempt to come up the garden path, I'll send for the police if you do!"

This torrent of words, screamed by Miss Pringle from her open bedroom window out of which she was leaning, met Jessie's ear as she tried to open the latch of the gate—Miss Pringle was in her bonnet, and her face was purple with passion. Jessie's heart stood still, she shook with terror. "Could Miss Pringle have gone mad?"

"Oh! what *is* the matter?" she cried faintly.

"Matter!" shouted Miss Pringle, "you little fox, after all I've done for you, to try and kill me; you ought to be hanged, you little d——l, to sneak off to a house full of fever, to carry on with a strange man. To think that I nearly was going to put you in my poor, clever, Yorkins' place, only she tracked you out; and that you would not heed, even when she begged and prayed of you not to go to a house full of infection, and risk the life of your benefactress, you hideous little hussy!"

All Jessie's blood seemed to rush to her brain—What did it mean; what had she done? But at that moment a cab drove up with Yorkins inside—and then Jessie saw it all.

The malignant look of victory on the woman's face told the whole tale. She had busted her rival, with a vengeance!

CHAPTER IX.

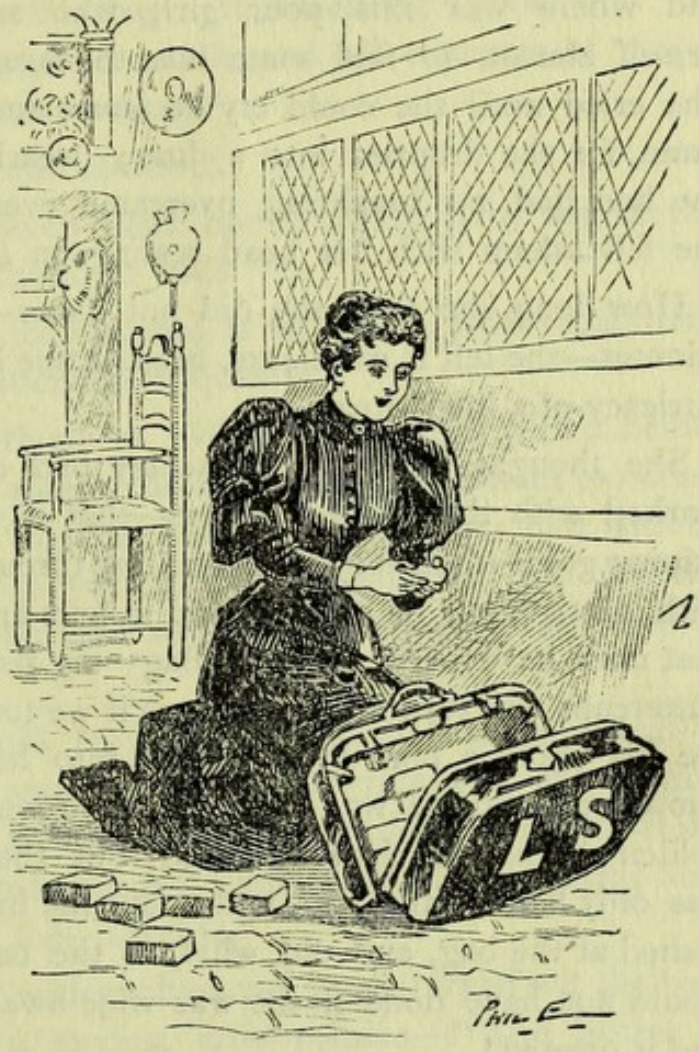
THE EMPTYING OF THE BAG.

Yes—Miss Pringle and Yorkins, with all their luggage, actually drove off leaving Jessie standing in the road as if she was turned into stone. Her innocent mind could hardly grasp the treachery of which she was the victim, and fortunately she did not realize the actual terror of her situation—left alone, penniless, friendless, in an utterly unknown place—for when she recovered from the shock she felt that she was free; Miss Pringle was gone; nothing could now prevent her from nursing the sick girl who wanted her so badly!

* * * *

"You angel girl! How *can* I thank you, but it is impossible, I *dare not* let you take the risk!"

Gerald Ashley was speaking. On the floor sat Jessie in tears, beside a small black bag, one she had seen before—marked with two red letters, "L.S."



Yorkins had completed her malignant triumph, and Miss Pringle her vengeance. They had carried off Jessie's poor little bag, and in its place had left the bag that by mistake she had allowed to take the place of the precious medicine bag, and this had just been carried into the cottage, to Jessie's dismay. But it was not this that caused her tears. They were shed because Gerald Ashley had told her that Dr. Fairleigh's opinion was that his sister was suffering from typhoid fever, and that the person who nursed it always ran a great risk of taking the disease, though the other people in the house did not.

"I cannot let you run this risk," he said, "you are not a trained nurse who understands these things, and I have no right to take your services—because—because—" "Why?" said Jesssie, "when I am willing!"

"Because we are very poor—because I may never be able to pay you a farthing for what you want to do for us; God help my poor sister, what is to become of her!"—and he rushed out of the room to hide the grief he could no longer control.

Jessie sat in a half stupor. She had gone through so much that she was at last overcome; if she could not even help here what was she to do—she had no money, not even one solitary half-penny—she had not even a change of clothing—where was she to turn; and where was this poor girl, who seemed as badly off as herself almost, to find some one to care her in her extremity? She cried until she could cry no more, and then momentary relief came, for she dropped into a dose; weariness and exhaustion, for she had had no breakfast, overcame even mental suffering, and she fell asleep with her head resting on the black bag.

How long she slept she did not know—it was really only a few minutes—she felt it was hours, because she had gone through all the intricacy of a long dream.

She thought she and Mr. Ashley had opened the bag, the bag marked with the two red letters—that it was full of gold, bright shining gold—then they were walking through a green field spangled with buttercups; he put his hand in hers and said—"Look! Jessie, that must have been a Magic Bag—my sister is well, and all these buttercups will turn into sovereigns if we touch them!" She could see his shining blue eyes looking into hers, and she awoke and jumped up—no, he was not there, the room was dull and cold—the golden buttercups had vanished, but there was the bag. She was only half awake still, and under the influence of the dream she rushed at the bag, and did what, as the bag was not her own, she would not have done if she was wide awake, she pulled the clasp, and it opened!

A sheet of brown paper covered the contents, she lifted it. The bag was not full of gold but of silver! A moment after she was overwhelmed with disappointment—it was not real silver. The bag was full of packets wrapped in silver paper! on the top was a folded white paper, on which was the word

"READ"

She opened it as if a voice had spoken, and read these words—

"All infectious diseases are caused by living germs or seeds which come from the sick. If these seeds are killed they can no longer produce disease in other people, and just as wolves, which long ago ravaged Great Britain, were exterminated by courage, care, and

energy, so infectious diseases may be exterminated and stamped out if people will learn how to destroy the seeds by which infection is spread.

One of the best ways to do this is by using LIFEBUOY SOAP—specimens of which are in this bag. It is a strong disinfectant. It will destroy disease germs, bad smells, and all elements of putrefaction, dirt, mould, must, and decay.

It will purify, cleanse, and disinfect.

Families—Use it to keep your homes healthy, to banish the doctor, and save the apothecaries' bills.

Doctors—Recommend its use, and it will make your reputations by helping to get your patients well quickly.

Nurses—Never be without it. Wash your hands with it before every meal, and you will escape the infection which nurses too often convey from their hands to their mouths. Wash your hair with it, use it in your bath—wash your clothes with it, and you will not convey infection from one case to another, and you will preserve your own health.

Advise every household to keep it, and to use it instead of ordinary soap if they want to insure *purification*, not surface cleanliness merely—and if they want the house from garret to cellar to be sweet, pure, and safeguarded from those unseen germs from which come our greatest foe—Disease."

With hands trembling with excitement, Jessie turned out the bag. Under the paper was a modest little volume—"The Secret of Health." She clutched it; then she counted the packets, there were 12. She laid them in a little stack; just as it was raised the door opened.

CHAPTER X.

THE WORKING OF THE MAGIC IN THE BAG.

"Oh! see what was in the bag; see what I have found!" Jessie was on her knees before a silver pile, her face full of a hope that made it absolutely beautiful, when the door opened and Gerald entered, followed by Dr. Fairleigh.

"See what was in the bag! something that *kills infection!!*" she cried, before Gerald could deliver the message he was bringing, which was to tell her finally that she must go.

"Something that *kills* disease! there will be no risk now; you *will* let me stay—oh! say you will let me stay."

The doctor took up the paper which Jessie had dropped. "This is the very thing that's wanted!" he said, "I heard of this LIFEBUOY SOAP, and what a wonderful thing it is, but in out-of-the-way places like this, its often hard to get hold of new things. The young lady is right; this alters the case. If she uses this soap; washes her hands, and scrubs her nails with it frequently, she may safely stay!"

Jessie almost fell on her knees to thank him.

"The great danger to the nurse in nursing typhoid fever," he went on, "is in her neglecting to disinfect her hands after attending upon the patient; this soap will be a perfect safeguard," then he took up the little book and buried his nose in it.

Gerald looked at the silver pile, at the bag, and at Jessie. "What does it mean," he said, "is that all you had in your bag?"

"It's not my bag at all," said Jessie, in a tone of awe, "it must be a good fairies' bag I think; look what was in it! It was certainly magic that changed it for Miss Pringle's medicine bag."

Gerald looked, and he too read the paper; then he drew Jessie to the window (the doctor was still deep in the "Secret of Health"). "I told you we were poor," he said, "but if you stay, you must know the whole truth; we are all but paupers!"

"And I," said Jessie sadly, "am quite a pauper, for I have nothing in the world, not even a penny."

"You have your beautiful face," rose to Gerald's lips, but he did not say the words; in his position he felt he had no right to say them.

"But Mrs. Perks," said Jessie, suddenly remembering, "will she let you stay?"

"Yes," he answered, "if we have a nurse." He did not add that he had pawned his watch, a gold repeater, and bribed the woman heavily.

"Then let me go to my patient."

* * * * *

Sickness is always sad, but when dirt and discomfort are added to it, is there anything more deplorable?

The sick girl had everything round her to add to her misery, and to retard recovery.

She and her brother were in that most pitiable of all positions—fallen with a sudden crash from wealth to poverty; they knew no more of how to make shabby things comfortable, than they knew how to earn money. Jessie had been poor for years, though she had driven in her father's carriage when she was a baby; so she knew many useful things.

When the doctor came next day, he could not believe it was the same room, and he hardly knew the patient.

"Miss Harewood, you have worked wonders," he said, "you are a better doctor than I am!"

"No doctor," said Jessie quietly, "you are not giving praise where it is due, I have had a helper."

"Who?" said the doctor, incredulously.

Jessie pointed to the wash stand, on which was a packet wrapped in silver paper. "It is simply wonderful," she said. "This room, when I came in, oh! how could the poor thing have lived in it. I took the things out in turns, and scoured them with that soap, until the room smelt so sweet, and I have

taken all the precautions the little book recommends, and I do believe it's the pure sweet air which is in the room, now that that soap has thoroughly purified it, that is reviving her; anyhow, she is not looking like the same girl to-day!"

"Undoubtedly!" said the doctor, "people are made ill by living in bad air, how then can they get well in it? Ah! that soap is badly wanted down the village; do you know, much as people think of the healthiness of the country, this place is full of fever, and scarlatina, and skin disease; and nothing but dirt and bad air, from living in filthy rooms, is at the bottom of it."

"Oh!" said Jessie, "do you know this soap *must* have magic in it, it has even changed the ill-tempered landlady. She saw what a difference it had made in the sick room, and when I went to the kitchen to make some beef tea, I got her to accept a bar of it; the place was swarming with flies, all from dirt you know; and she told me all her children had sore heads; well I got her to scrub every one of them there and then, and the kitchen too. I went down this morning, and will you believe it, there was not a fly to be seen; she told me the milk had not turned bad as usual at night—if you had seen the dirty larder you wouldn't wonder—and, best of all, the children's heads *already* are ever so much better!"

"I'll tell you what, Miss Harewood," said the doctor, seriously, "we'll not let this good news stop here. When Miss Ashley is better, you and I will go on a campaign through the village, and *make* these people understand what it is!"

"Oh! delightful!" said Jessie, "I'll tell them what it has done in this house, and let them see the magic at work for themselves!"

Gerald, who was standing by, looked rather cross; *could* it be that he was jealous of the doctor?

Jessie did not get the fever, she carefully followed the advice given in the "Secret of Health"; and she had the happiness to see poor Rose Ashley gradually recovering.

"Oh! you dear angel," said the invalid, putting her thin arms round the kind young nurse's neck, "what should we have done without you—will I ever be able to thank Yorkins enough for her treachery!"

The doctor, and the clergyman and the clergyman's wife, and the district nurse, who, as people do in small places, had all heard the story of Jessie and her magic bag, were all united in desiring to thank Miss Pringle and Yorkins for what they had done.

"Why, it's not the same place," said the district nurse a few weeks later, "there's not a sore head now in the village, and that dreadful ophthalmia that blinded so many poor children has entirely disappeared, and I can get time to go to church sometimes of a week-day evening, now that I haven't so many ulcers to dress, and measles and scarlatina are dying out—I'm sure the people that invented LIFEBUOY SOAP are national benefactors!"

"Indeed," said the clergyman's wife, "my life is quite different, I really often thought I'd have to run away from the rector, it was so dreadful being obliged to visit pigsties, as most of the cottages were, but since they've got to use this LIFEBUOY SOAP the cottages are as sweet as hay-fields, and I use actually no lavender water at all now!"

"My appetite has quite improved," said the fat rector, "I very seldom could enjoy my luncheon after a round of calls among my poorer brethren; I'll write a letter of thanks to Messrs. LEVER BROS. for LIFEBUOY SOAP; it's not so bad being a clergyman now!"

But Dr. Fairleigh and his wife were, next to Jessie and the Ashleys, the heartiest of all in their praise of LIFEBUOY SOAP.

"My dear," said the doctor, "my practice is extending, I must really look out for an assistant, and I'll have to get another horse or two. The people here have been spreading the fame of my treatment, and I've calls for nearly twenty miles round!"

"Well, I'm sure its only what you deserve, love!" said his wife proudly, "they can't but see how clever you are!"

"My dear," he replied, lowering his voice, "its all owing to LIFEBUOY SOAP; wherever it's used it brings health, it keeps infection from spreading, it purifies the air of the sick room, so that people who use it get well twice as quickly as those who don't, and you know, my dear, nothing improves a man's practice like the reports his patients spread when he cures them quickly!"

"Nevertheless, you *are* clever, my dear, *very* clever," said his wife, perhaps having her own reasons for persisting in a little flattery.

"Well, perhaps I am," said the doctor, complacently, "it was clever of me, I think, to take up this famous soap so quickly; while other fellows would have been thinking it over it has been helping me to add to my banker's balance. Oh, by the bye, you were talking of wanting an increase to your dress allowance. I can add £30 a year to it, will that do?"

"Oh! thank you, ducky!" and she jumped up and kissed the little doctor on both cheeks.

CHAPTER XI.

ANOTHER ENGAGEMENT.

Gerald had regained his good temper when he found the doctor was married, but his spirits were wretched, even the recovery of his sister could not raise them.

He was walking round the garden one morning, sunk in gloom. Rose was sitting in the sun, Jessie was coming to him over the

grass. "I want to ask you something," she said. "What is it?" he asked. "Rose is well enough for me to go," said Jessie in a low voice. She and Rose were like sisters now. "She can do without me, I must go and find a situation." Her voice shook, but Gerald actually could not speak. "Come out up the road," he said at last, hoarsely, and they went. "Miss Harewood," he said, when he had conquered his emotion and could speak calmly, "I am a pauper, I don't know how to earn money, but I am going to try. Will you promise never to marry any one but me. Am I a selfish brute to ask you such a thing, when it may be years, or never, before I have a home to offer you?"

Jessie had engaged herself to Miss Pringle for board and lodging only. She was even more unthinking now—she actually engaged herself to Mr. Ashley without the prospect of either!

CHAPTER XII.

THE REWARD OF TREACHERY.

"And now," said Miss Pringle, in a very cross voice, "I suppose I'll never see my medicine bag again!"

"You ought to thank your stars you've got clear away from that hussy, and the fever," answered Yorkins, "and not be bothering about a thing you can buy again for a few shillings." She had got her mistress into her own hands again, and felt she need not trouble over much about civility.

When they hurried away from Stonedean they rushed up to London, and were now settled in lodgings there.

Miss Pringle was one of those people who, when they have done anything decided, always begin to regret it, and wish they had done differently. She was already regretting Jessie, whose gentle hand had been so soft in rubbing her, and so different from Yorkins' bony knuckles, and whose beef-tea had never been greasy, nor her gruel lumpy, but she did not dare to hint at such regret.

* * * * *

She regretted her more, however, a few weeks later.

"I feel very ill, Yorkins," she said one morning when she awoke, her throat was in pain, her head burning; "you must send for the doctor at once!"

"Pah!" said Yorkins, "there ain't much amiss with you, I'll fetch him after my breakfast."

"Oh! and *do* get me a cup of hot tea, it may ease my throat," said the sick woman, but it was nearly an hour before she got it.

The fact was, that Yorkins hailed her mistress's illness with delight. Although over forty she had lately fallen in love. The landlady's brother, who had a thriving shop, was a frequent visitor downstairs, and in her excursions to the kitchen she had lost her tough heart to this gentleman. Whether his being proprietor of a "going concern" had anything to do with the romance, does not concern anyone but herself. At all events, Miss Pringle's being off her legs was an unqualified comfort to her attendant.

"It is a serious case," said the doctor; "the principal treatment consists in disinfecting the throat, in purifying the air of the room with disinfectants, and in keeping up the strength with nourishment. If the throat grows worse she won't be able to swallow, so you must swab it out with a disinfectant constantly, you can understand how important this is when I tell you that if it is neglected she may suffocate. Who is going to nurse her?"

"I am," said Yorkins, tightly closing her lips, and resolving that no one should get in again to poach on her preserve.

"I'll send a bottle, you must wash out the throat every half hour, and you must be most particular about the air of the room. Have you any LIFEBUOY SOAP?"

"What's that?" said Yorkins, who thought she shewed her importance by being unmannerly.

"It's a most valuable disinfectant. You must wash every utensil in the sick room with it. You must steep all your mistress's handkerchiefs, or anything upon which the discharge from the throat comes, in a strong lather of it made with hot water."

"La, sakes! what for?" said Yorkins rudely.

"*Because*," said the doctor sternly, "your mistress has got *Diphtheria*, and it has been proved, by scientific experiment, that the microbes of diphtheria (that is the living seeds by which this terrible disease is propagated) are killed in two hours if soaked in a solution of LIFEBUOY SOAP, such as I've desired you to use. *You* must also wash your own hands *thoroughly* with it every time you have attended on your mistress; you may lose your own life as well as hers if you are not careful to disinfect yourself, as well as disinfecting the air of the room, and keeping her throat constantly cleansed. You had really better have a trained nurse to help."

"No nurse, trained or untrained, comes in here," said Yorkins stoutly, and she put out her lip contemptuously as the doctor reiterated—

"Well, remember, disinfection is your best weapon, disinfect the throat continually with the bottle I will send; disinfectants are our chief means of treatment here."

"Disinfectants!" she muttered scornfully to herself, "new-fangled fads!"

"But medicines, doctor," said Miss Pringle, when he returned to her bedside, "what medicines am I to have?" and because he did not order a number of different pills and potions she set him down as a fool. "Disinfectants, indeed," she groaned to Yorkins, "you must send for another doctor."

"Oh, yes—by and bye," replied the maid; her mind was full of something else. Mr. Tompkins, having heard from his sister, the landlady, that her lodger's will was made in favour of her maid, and hearing that the doctor was in attendance, had made up his mind to pop the question without delay, not doubting the truth of the story he had heard, and he carried out his intention when he dropped in at the dinner-hour.

It is not to be expected that just after receiving an offer of marriage, Yorkins should have been in a humour to carefully carry out all the doctor's instructions.

"My patience," she thought, "he's making all this fuss and saying she's so bad so that he can run up a big bill;" and the selfish wretch spent the afternoon listening to the landlady's description of her brother's big business, and turning over Miss Pringle's trunks to see what articles would suit her to add to her wedding outfit.

"Yorkins!" Miss Pringle's voice was almost inaudible, neglect was making the unfortunate woman rapidly worse, the fell disease was making deadly inroads. Yorkins was kneeling at an open trunk—she had wound a crimson shawl of Chinese silk, that she had long coveted, around her square

shoulders; "Won't he think it fine?" she said. She thought her mistress was asleep, so she went to the glass and admired herself, not noticing that Miss Pringle's eyes were following her. "The old cat, she don't want all these fine things!" In her admiration of her own reflection in the mirror she spoke aloud. Miss Pringle struggled furiously. "Send for Jessie, send—", but her voice failed. Yorkins had heard, however; "Oh, Jessie is a long way off," she said, "you keep quiet, Miss Pringle, I'm engaged to be married, and if you don't behave handsome I'll walk off and leave you this blessed minute."

"Jessie—Jessie!" muttered the unfortunate woman.

"Jessie wouldn't come to you now after the way you went off and left her," said Yorkins harshly, "so be quiet"—and she left the room to pack the crimson shawl in her own trunk.

When the doctor came again he found the case hopeless. Yorkins vowed she had carried out his instructions, but he knew it was a lie. "I'll send a proper nurse at once," he said, "we are bound to try to save her while life remains." But before the nurse arrived Miss Pringle was dead.

Yorkins, whose disposition at times was fiendish, heard her muttering, "Jessie!" again, before she died, and said, "Yes, Jessie, indeed, she never went into the house where the fever was at all, you old fool. I only wanted to see if you'd turn on her, as you turned on me, and you did; serves you right that you're dying alone, and I've got all your gowns!" The shock of these horrible words put the finishing-touch to the miserable woman.

Yorkins prepared a splendid *trousseau;* all Miss Pringle's clothes, the gathering of years, were displayed with pride to the landlady. The banns were quickly put up, and Yorkins proudly felt she would be mistress over her own household now. But fate had revenge in store. She had scorned the doctor's warning about infection—she disinfected nothing—she took Miss Pringle's lawn handkerchiefs for her own use—even the one that was under the pillow on the death-bed, which she put in her pocket when she heard the nurse was coming; and before the "second time of asking" the dreaded disease had gripped her own throat, and laid her low.

The landlady, who found that Yorkins' stories about her mistress's will having been made in her favour, had no foundation in fact, sent for the parish doctor, who ordered her removal to the workhouse infirmary, and instead of joining the noble band of the matrons of the land, and flaunting in Miss Pringle's silks and satins, the wretched woman was buried in a workhouse coffin.

CHAPTER XIII.

THE CLAIMING OF THE BAG.

"Is there any torture worse than to love a girl with your whole soul, and then to realise that you have been cruelly selfish in inducing her to promise never to belong to anyone but you?"

Gerald Ashley asked himself this question as he wandered up the lane, when Jessie, having promised faithfully never to marry anyone but him, had insisted on returning to the house to attend to Rose. He had prevailed upon her to allow him to have one kiss and had taken a dozen, and then, as he continued his walk alone, he began to reproach himself with having drawn the girl he loved into a share in his dismal prospects, and he vainly tried to devise some way by which he could cut through the meshes of the poverty closing so darkly round him.

"I never thoroughly understood what a calamity that bank failure was until to-day!" he said to himself, looking gloomily at the ground, "nor what a *horrible* thing poverty is!"

"Can you tell me if a Mr. Gerald Ashley lives anywhere near here?"

A strange voice asking the question, made Gerald look up with a start. The questioner, a handsome man with keen dark eyes, was close to him; Gerald, looking at the stones, had not heeded his approach.

"*My* name is Gerald Ashley," he said, "perhaps it is for me you are looking, sir?"

'Very likely," said the stranger, "I have been directed to Sycamore Cottage."

"Yes, that's my address, we are close to it, will you come in?"

"Thank you; my name is Atherton, I have come to make some enquiries concerning a missing bag."

"The Magic Bag, as sure as fate!" cried Gerald, his elastic spirits regaining their buoyancy for the moment. "I'll wager that's what your after!" and he began to laugh, but then recollecting that Jessie had opened a bag not belonging to her, and that they had distributed its contents far and wide, and that now the owner had come to claim it, he stopped laughing and looked rather blank.

"The *Magic* Bag," said the stranger, "No, I am not looking for such a thing, the days of magic are passed, I fancy. I am looking for a bag of samples of a new soap which possesses very remarkable qualities. I mislaid it at Euston Station a few weeks ago. I have traced it here, as you were kind enough to enquire for a bag marked "P," which got amongst my luggage instead of the one I am in search of.

"A true bill, sir!" said Gerald, "by all that's unlucky we've got your bag, but I'm afraid I can't say as much for your samples!"

"How so?" asked Mr. Atherton, looking annoyed, "what's become of them?"

Gerald considered for a moment. "Just come with me," he exclaimed, taking the stranger's arm, "and I'll prove to you that the days of magic aren't over; will you promise not to proceed against us for making away with your samples, if I prove it?"

"Yes," said Mr. Atherton laughing.

"Come along then!" and he led the stranger up the pathway, and into the parlour of the cottage.

It was a plain little room, but Jessie had brightened it up with plenty of scouring with LIFEBUOY SOAP, and jars full of Christmas roses, crysanthemums, holly, and ivy. It was lighted with a cheerful fire, and the winter morning's sunshine.

The strange man's eyes softened as if the home-like scene touched him, they softened still more as they rested on Rose's face, fair and fragile. She was lying on the old black horse-hair sofa, wrapped in a blue dressing-gown, and her great blue eyes, so like her brother's, rested lovingly on the girl kneeling at her side, holding her hand. Jessie had just been acknowledging her promise to Gerald!

"Jessie, here is the owner of the Magic Bag!" It was the first time he had called her Jessie. She jumped to her feet, the rosy colour rushing over her face. Mr. Atherton's keen eyes took in the relationship of the two at a glance.

"He has come to claim the bag," said Gerald. Then Jessie remembered that she had opened the bag, and used its contents.

Her face turned white, and she looked at Gerald beseechingly; he came to her rescue.

"Mr. Atherton has promised not to prosecute us," he said, laughing, "if we can prove there was magic in the bag; well, there is one specimen of its powers!" pointing to his sister. "Tell about the rest, Jessie," patting her reassuringly on the shoulder, "you can do it better than I!"

CHAPTER XIV.

A WAY OUT OF THE WOOD.

"Angry!" cried Mr. Atherton, "my dear fellow, if you had used every sample I've ever had, do you think I'd be angry when I see what that soap has done here; it was quite natural when it came into your hands, just as your sister's life was hanging in the balance, that you should all have thought only of trying its powers!"

He had spent the afternoon at the cottage, had walked in the village, interviewed the doctor, and now Gerald was seeing him to the train.

"I never can be thankful enough, Mr. Ashley," he continued, "that I lost that bag. I only wish I'd lost a thousand of them all round England!"

"And how thankful must I be," said Gerald, "when only for it I would not have my sister to-day!"

"Nor someone else," said Mr. Atherton, slily.

But Gerald only answered this with a sigh that was more like a groan.

"Forgive me, if I offended you," said Mr. Atherton. His voice was cordial. Poor Gerald was miserable. With a sudden impulse he poured all his misery into the ears of his new-found friend.

"Think what it is for me," he ended, "to love that girl and have no hope of ever being able to make a home for her!"

The evening before, Mr. Atherton would have been rather inclined to laugh at a lover's sorrow, but somehow this evening he felt more inclined to do just the reverse.

A hopeless love seemed suddenly terrible to him, as he thought of a fair face he had seen that day, and of two large blue eyes. He made no reply, he was buried in thought.

"My boy, I have it!"

"Have what?" cried Gerald, astonished.

Mr. Atherton's arm was through his, and the sudden jump he gave as he cried, "I have it!" had nearly overturned his companion.

"Why, I've a way out of the wood for you! You may marry her next month!"

"Don't joke," said Gerald, in a low voice that sounded harshly, "I can't stand it."

"My dear fellow, I never was less inclined to joke in my life, I'm in dead earnest. You must know that I am making a handsome living as head agent for the sale of LIFEBUOY SOAP. Now I can offer you a district agency under me. You know from practical experience what the value of the soap is; it will depend on your own ability to make an income sufficient to support a wife, and family too!"

Gerald clutched his arm, "Is this *true?*" he said.

"As true as steel, there's only one condition, if you comply with it I'll appoint you agent to-morrow!"

"What is it?" said Gerald, breathlessly.

"That you put in a good word for me with that sweet girl, who is sweeter than any Rose I ever saw!"

CHAPTER XV.

A DOUBLE EVENT.

Gerald was appointed district agent for the sale of LIFEBUOY SOAP.

He would willingly have put in a good word for Mr. Atherton with Rose, but good words were not needed. Mr. Atherton's bright dark eyes were more eloquent than her brother's tongue. She rapidly regained strength, and one day late in the spring, the fat rector, as he sat on his lawn eating some early strawberries, had a note put into his hands.

"A double wedding!" he said, piteously, "really, it's too much for one morning's work!"

"Come, come!" said his wife, "you don't often have a chance of looking at two such pretty brides, so don't grumble!"

* * * * *

Gerald Ashley proved himself to possess such remarkable commercial abilities, that he rapidly rose until he was making a large income, as the sale of LIFEBUOY SOAP increased every day. The public found what a safeguard and blessing it proved in every household, and its fame grew in every country, so that it was very hard for the makers to keep up with the demand.

After some years Mr. Atherton retired; he bought land, because his wife, to whom he was more devoted even than to business, loved the country, and wished for a pleasure-farm where her own and her brother's children could romp in the hayfields in the holidays. Gerald succeeded him, and became head agent for LIFEBUOY SOAP in that district, and in time he grew as rich a man as he had been before the bank failure.

"I met an old friend in town to-day, darling," he said one evening, "he too was looking in at the carriage factory to buy a new carriage as a birthday present for someone at home!"

"Who was it, Gerald, dear?" asked Jessie. She had her arm through his, and they were strolling through the rose bushes growing thickly in the lovely old garden surrounding their pretty house.

"Why—it was Dr. Fairleigh, love! He has just been appointed physician in ordinary to Her Majesty!" Jessie opened her large brown eyes. "And he is moving into Cavendish Square. He tells me he too owes all his fortune to LIFEBUOY SOAP. When you found the Missing Bag, he had never seen the soap, though he had heard a great deal about it, and he says its use with his patients did him more good than any drug in the pharmacopeia. His reputation for rapid cures spread all over the South Downs, and then to London. He came to town, and from the bottom of the ladder as a country practitioner, he has now his foot on the top rung, and I expect he will be a baronet before he dies!"

"And all owing to the Missing Bag!" said Jessie, softly.

"Yes, to what was in the Missing Bag," said her husband, "which has given me what one day I despaired of having—a home of my own, the three prettiest children in the country, and best of all," he whispered, putting his arm round her, "the careless little thing who lost her bag—my dearest treasure, my little Jessie!"

THE END.

The Secret of Health.

"Who would not give a trifle to prevent
What he would give a thousand worlds to cure."

Young's "Night Thoughts."

The Secret of Health.

"AN ENGLISHMAN'S HOUSE IS HIS CASTLE," is the Englishman's boast, and he believes that he is as secure nowadays within the four brick walls of his Cottage as his ancestors were behind their Moats, and Dykes, and Drawbridges.

This creed he imbibes with the contents of his pap-boat, and he grows up never doubting its truth.

What will he say, then, to hear that such a belief is but a miserable delusion, and that his house, so far from being as safe as a Castle, can be entered at any moment by an intruder who waits neither for leave, welcome, nor permission to stay; an intruder who can disable his body, waste his time, take his work from him, rob him of the savings of years, and can even take from him for ever the treasures that are still dearer to him than any money, while he is forced to stand by powerless, when once this intruder has gained an entrance.

How can any house accessible to so terrible a presence be compared to a Castle?

There may be people who will deny that any intruder exists who can thus devastate our homes against our will.

"These things," say they, "may be done in the country of the Czar, or in the land of the Great Mogul; but in England the land of the free! where the liberty of hearth and home is sacred! Never! It is absurd to say such things can be done here."

Alas! Truth is stranger than Fiction. This picture of the Enemy who lurks within the shadow of our homes, who comes when least expected, and whose course is marked with woe, is drawn in colours all too faint, this Enemy's name is

INFECTION.

In view, then, of the fact that this unseen and terrible foe is always on our track, waiting to force an entrance within our doors, can anything be more important to learn than how this foe may be kept out?

Science teaches us that there are a number of diseases which *ought not to exist at all*, and which *will not exist* when we take the trouble to learn how they are propagated and how their propagation can be prevented.

Sir John Simon, the distinguished Medical Officer to the Privy Council, tells us "that the deaths which occur in this country are fully a third more numerous than they would be if our existing knowledge of the chief causes of disease were reasonably applied throughout the country. Of deaths, which in this sense may be called preventable, the average yearly number in England and Wales is about 120,000." Including Scotland and Ireland it has been computed that 150,000 deaths occur, even now, every year from causes which are *preventable!*

If for every such death we reckon an average* of 12 cases that recover, but which, with proper knowledge might never have been ill at all, we find that there are about two millions of sick rooms filled every year which ought to be empty, and hundreds of thousands of purses empty which might be full, if their contents had not gone to pay for medicines, doctors, *and funerals*, not even counting the awful loss caused by that dreary follower of sickness,

LOSS OF WORK.

How many houses have been broken up, how many women and children have been driven into the workhouse by *this* cause, who can calculate?

To what extent our present death and disease rates are capable of being lowered, we can judge best by looking for a moment at the statistics of the prisons of our country. From these, strange to say, we learn an invaluable lesson of what may be done in preventing disease.

"For years back," says Dr. George Wilson "the prisons of this country have been proved by the most rigid statistics to be far healthier than our homes, and so-called preventable disease of any

*—This is a low average.

kind is so rare within their walls, that when any isolated cases do appear they at once give rise to surprise and are sure to call for inquiry."

Why should this be? Why should our prisons be so much healthier than our homes? Why should the death rate in the free cottage be 20 per cent. and the sick rate nearly 100 per cent. higher than in the captive's cell?

Because in the prisons of to-day the great scientific fact is recognised, that all infectious diseases are propagated by *living seeds or germs*, and therefore means are taken to prevent their propagation.

If people understood this, we should not hear such mischievous nonsense talked about Whooping Cough, Measles, etc., being diseases which *children must have.* They would know that there is no disease under the sun which any one *must* have, but that there are many which no one ought to have if proper means were taken to prevent them.

The practical question for us all then is "How shall we prevent infectious diseases from entering our homes?"

The answer is, "By destroying the seeds of infection."

"But how can this be done, as the seed is invisible?"

The answer to this is fortunately simple.

1. By Boiling.
2. By Burning.
3. By using LIFEBUOY SOAP.

Thorough boiling or burning will destroy every kind of disease germs, but we cannot obviously always employ such means. We cannot boil our hands or bodies, on which the germs may lurk unseen if we have been near sick people, or people whom we suspect have been ill. The nurse who is attending a case of Typhoid, though she knows that the unseen infection on her hands, if in an incautious moment it gets near her mouth, may convey the disease to herself, cannot burn her hands or boil them. If we are not rich we cannot burn everything in the room where Measles or Whooping Cough is nursed. No, in hundreds of such cases we cannot destroy the living seed in this way. "What are we to do then?" Why, we can destroy it in another way which is simple, cheap, and sure—

"By the use of Lifebuoy Soap."

"How will this do it?" Because, hidden within this Soap is a weapon, which, in the hands of even the weakest woman is powerful to *destroy* all those unseen germs by which infectious diseases are sown and spread.

In plain English, LIFEBUOY SOAP is so strongly impregnated with a potent disinfectant *(i.e., a killer of infection)* that its use will ensure the utter destruction of all germs of disease, which, because unseen, are often unsuspected until they have produced their deadly fruit.

Where there are dirty boards, filthy sinks, musty cupboards, foul smells, there disease is *surely* germinating and will thrive.

One bar of LIFEBUOY SOAP will stop this deadly work. It will not only *remove* the seeds of sickness which thrive in dirt, because that might be done by any soap, but it will *destroy* them. If merely removed they will undoubtedly spring up somewhere else, but once LIFEBUOY SOAP has been applied, all lurking disease germs, not only those of infectious disease, but the germs of putrefaction which produce sores and skin diseases, mould and decay, are killed, and therefore can never again produce disease.

FINALLY—

It must be remembered that in preventing infectious diseases, we prevent many others whose connection with infectious illness is often entirely overlooked. It should never be forgotton that Rheumatism, Heart Disease, Bright's Disease, Dropsy, Deafness, and Throat diseases often follow Scarlet Fever and Scarlatina ; that Consumption and Lung complaints are not infrequently the sequel to Measles and Whooping Cough; that Blindness and permanent ill-health frequently follow Small Pox; and that the *inherited tendency* of many diseases (as Scrofula, for example) may lie dormant through life if not awoken, as they often are, by an attack of some infectious disease.

The means of stopping the spread of infection has now been discovered. The realisation of the ambition of sanitary reformers to *stamp out infectious disease* is now within measurable distance, but can *never* be attained by the efforts of a few. No combination of doctors or scientific men will ever succeed in banishing infectious disease from our midst until the men and women of Great Britain

take the matter into their own hands; till they realize that infectious disease *can* be banished (just as wolves, which long ages ago devastated England, have been banished) by determination and energy; and until they use the means provided to effect its banishment.

The careful experiments of scientific men have *proved* that LIFEBUOY SOAP will completely destroy all living seeds of disease, and that its use will *destroy infection.* Here then we have *the means.* It needs only that we put out our hands and use it.

"LIFEBUOY ROYAL DISINFECTANT SOAP."

Scientific Expert's Opinion.

REMARKABLE EXPERIMENTS with this soap, made by Dr. Karl Enoch, Chemisch Hygienisches Institut, Hamburg.

LEVER BROTHERS, LIMITED, Port Sunlight, near Birkenhead, have received the following report on "LIFEBUOY ROYAL DISINFECTANT SOAP"—

"The examination of the sample of LIFEBUOY ROYAL DISIN-"FECTANT SOAP furnished to me by the Hamburg Agents "of Messrs. Lever Brothers, Limited, of Port Sunlight, England, "gives the following results as to its action as a disinfectant.

"Solutions of one, two, and five per cent. of LIFEBUOY "ROYAL DISINFECTANT SOAP in water were made. These "solutions were brought to bear on a variety of clean "cultivated germs or microbes *(Bacillus)*, in each case a certain "exact time being allowed for the operation; and thus the "capacity of this soap for destroying the various live and "growing germs was proved. To carry out this, the following "species of germs or microbes, amongst others, were used:—

"1. Typhoid Microbe.

"2. Cholera Microbe, taken from Hamburg water.

"3. Diphtheria Microbe.

"4. Carbuncle or Boil Microbe.

SCIENTIFIC EXPERT'S OPINION—*continued.*

The results were as follows:—

"1. The obstinate Typhoid Microbes, with the five per cent. "solution, were dead within two hours.

"2. The operation of this soap on the Cholera Microbes was "very remarkable, and showed this soap to be in the highest "degree a disinfectant. These were taken from Hamburg "water, and showed a result as follows:—

"With the two per cent. mixture, Cholera Microbes were "dead within fifteen minutes.

"With the five per cent., same were dead within five "minutes.

"3. The Diphtheria Microbes were killed after two hours, "with the five per cent. solution.

"4. The five per cent. solution was tried on fresh Carbuncle "germs, and the result showed that the Microbe life was "entirely extinct after four hours.

"From the foregoing it will be seen that the LIFEBUOY ROYAL "DISINFECTANT SOAP is a powerful disinfectant and exter- "minator of the various germs and microbes of disease, the "principal item being the effect of the operations in the case of "Cholera.

"(*Signed*) KARL ENOCH,

"Chemisch Hygienisches Institut, Hamburg."

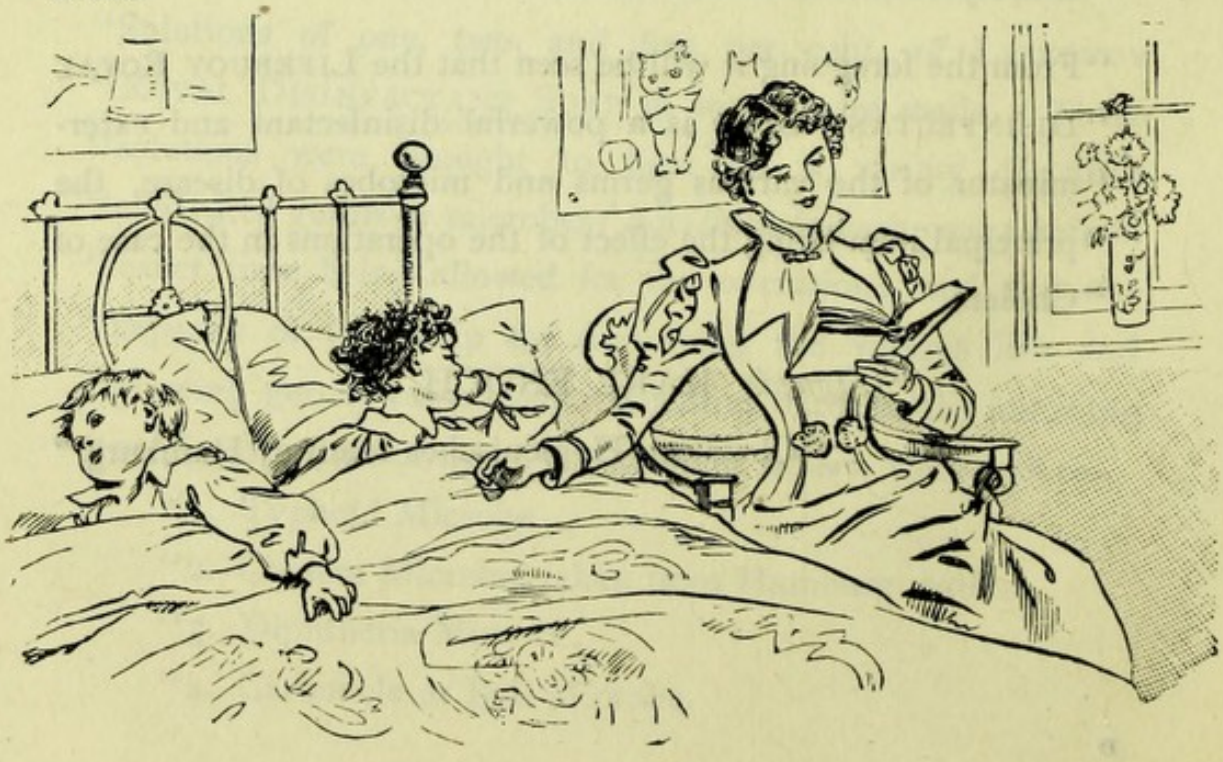
A Guide to Home Nursing.

"It is the physician who prescribes, but it is the nurse who saves life."—*Victor Hugo.*

INTRODUCTION.

"Ignorance in a sick room is very objectionable, even when combined with any amount of family affection,"—so says Dr. J. Milner Fothergill.

Nevertheless, family affection is an invaluable ingredient in home nursing. The ceaseless care, given by love, has pulled many a one through dangerous illness, who, without it, would have died, but the love must be tempered with knowledge. It is this knowledge—of the general details of sick nursing—which this little guide undertakes to impart, in the hope that it will be found of use in many a home.



THE SICK ROOM.

Its Management.

There are four things absolutely necessary in the sick room if the patient is to have a chance of getting *quickly* well in it; and to get the patient quickly well, as well as *quite* well, should always be the nurse's aim. These four things are:—

1—Cleanliness. 2—Quiet. 3—Fresh Air. 4—Sunshine.

1. CLEANLINESS.—One of the most celebrated surgeons in Europe, Professor Billroth, of Vienna, writes as follows, concerning cleanliness in the sick room:—

"Keeping the sick room clean is of the greatest importance. Air, light, and warmth, are necessary for the welfare of man, yet we now know that infectious matters are not atmospheric gases, that they are not soluble in liquids, but that they are most minute bodies (seeds, or so-called spores, of the minutest fungi) which float in the air or in liquids, and settle on, or obtain entrance into the body with dust or with liquids. Dust, therefore, must be banished from the sick room as far as possible."

Dust is also very injurious because it is irritating to the bronchial tubes and air passages.

Patients suffering from any affection of the chest, throat, or nose, may be rendered much worse, and their recovery seriously delayed by lying in a dusty room Remember that *dust is a mechanical irritant* as well as a probable holder of disease germs

For this reason bedrooms should *never* be carpeted all over with carpets nailed into every corner, and under beds and heavy furniture; rooms so carpeted cannot possibly be kept free from dust.

It should always be remembered that bedrooms *may* have to become sick rooms, and in furnishing them, for this reason, and also because they will be much more healthy so, the floors should either be stained or oilclothed to a width of three or four feet all round,

and carpeted with rugs, strips, or squares of carpet fastened with a few carpet tacks. The sick room carpeted thus can be kept free from dust with ease, the rugs and strips can be rolled up every morning, taken to the yard and shaken, and the floor wiped over with a damp cloth. All this can be done without disturbing the patient, whereas, if the room be carpeted all over it must be twigged; and is *anything* more annoying to a sick person than to have their room twigged out—to say nothing of the injurious dust that must be raised?

An eminent physician recommends that if a patient *has* to be nursed in a room carpeted all over, a crumb cloth should be laid down, which can be taken away and washed. This is excellent advice. There should, if possible, be two of these cloths, and they should be washed with LIFEBUOY SOAP, so that they may by it be *disinfected* as well as cleansed; if there are two, one can be always ready to go down when the other goes to the wash. Carpets *under* beds are a sure sign of ignorance of the first principles of health and cleanliness. Besides keeping the floor clean, the wash-stand, china-ware, and furniture should be kept as clean as possible. If they are thoroughly washed with LIFEBUOY SOAP, they are certain of being purified as well as cleansed.*

In a room where serious illness has to be nursed, the fewer things there are in it to be kept clean the better. Useless furniture, ornaments, etc., should be taken away. Where there is illness in a house there is always extra work, therefore needless cleaning should be avoided by locking up for the time all nicknacks that can be dispensed with.

In getting a room ready for a patient the chimney should be swept, and the windows cleaned, because if the illness should last long it may not be possible to do them for a considerable time. If there is time for the room to be thoroughly dry before the patient is moved into it *(not otherwise)* the floor and painted wood-work should be thoroughly scoured with LIFEBUOY SOAP and hot water.

2. QUIET.—It hardly needs saying that sick people need quiet, but some people when they have secured the quietest room in the

---

*—In dusting the sick room always *wipe* the dust off with a cloth, and shake the cloth into a fire.

house for the patient forget the *little noises*, that, almost unheard by a person in health, are sorely trying to the sensitive nerves of the sick. Here are some of them and their remedies:—

(1) Creaking windows (these may be in the lobby or next room as well as in the sick room). *Remedy:* Put in a wedge of wood; soap window cords if stiff.

(2) Clattering fire-irons, coal scuttle, etc. *Remedy:* Remove fire-irons, and use stick for poking fire, or cover handle of poker with a bit of soft stuff. Put a bit of felt, or carpet, or flannel in coal scuttle as lining. Keep an old glove or make one of cloth, and lay lumps on fire between finger and thumb. Make screws of newspaper, which fill outside room with slack and small coal for replenishing fire.

(3) Creaking locks, doors, handles. *Remedy:* Oil or grease them.

(4) Creaking shoes, rustling petticoats. *Remedy:* Don't wear them.

(5) Creaking wicker chairs, loud-ticking or striking clock, etc. *Remedy:* Turn them out. Clattering of cups, glasses, etc., on wooden tables or marble wash-stands. *Remedy:* Cover the wood or marble with a napkin.

(6) Loud voices. *Remedy:* Modulate them.

(7) Whispering. "Whispering in a sick room," wrote a doctor some time ago, "is worse than a down right row." This is no doubt a great exaggeration, nevertheless it puts the matter forcibly. Patients are full of fancies, and whispering often makes them fancy something very bad is the matter. The nurse should never whisper to the doctor, nor to anyone else, particularly outside the door. If she has anything to say to the doctor that the patient is not to hear, let it be said in another room—*with the door shut.*

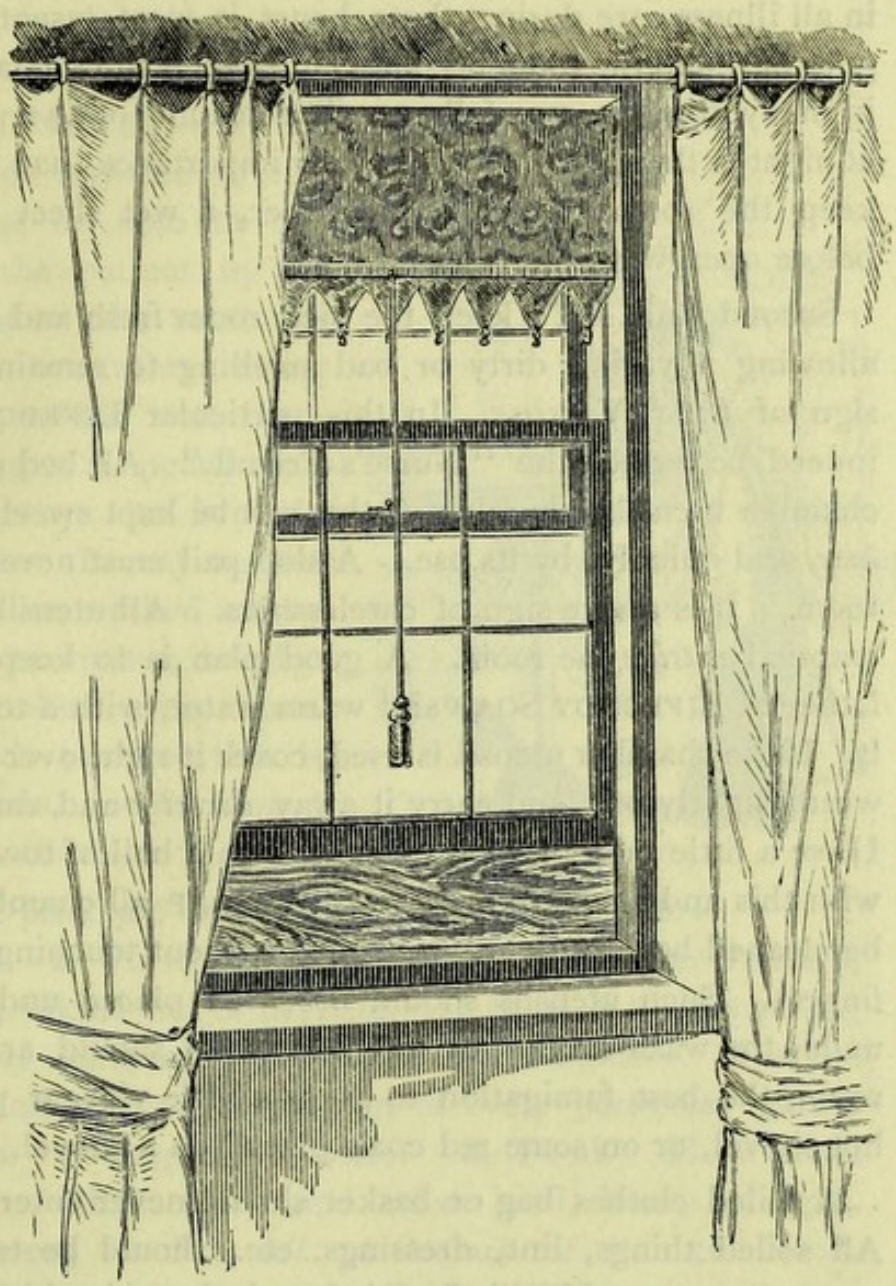
3. Fresh Air.—We are all—sick and well—*poison-making machines.* This is not a pleasant idea, but it is true, and it is a fact which every one who nurses the sick should thoroughly understand, because, if they do, they will know *why* fresh air is so important in a sick room. The principal poison we are always making is *carbonic acid gas*, which is generated within the body of every living creature, human and animal, and given out in their breath.

Now, in the atmosphere there is a certain amount of a gas called *oxygen*, which has a wonderful power in purifying the blood. There *must* be some oxygen in the air we breathe, or we should very soon die. When a room is kept closely shut up very little oxygen can enter it. If a number of people are in it, all giving out carbonic acid gas with every breath, and with every breath also using up some of the oxygen in the air, we can see how soon the air in that room must become very impure, and after a time poisonous. When people are sick the exhalations from the body are even more impure than when they are well, and therefore they require as much oxygen as it is possible to have in the air they breathe, because the air of sick rooms becomes much more quickly vitiated than the air in rooms whose occupants are healthy. This is one of the reasons why *overcrowding* the sick room is *positively dangerous*. A crowded sick room *may* cause the death of the patient. This is the opinion of all experienced doctors. The nurse must therefore never forget this, and unless on some *very* special occasion she must never allow more than one friend at a time into the sick chamber. It is no kindness for friends to crowd up the sick room; each one of them should remember that he or she all the time is consuming some of the precious purifying oxygen in the air which is so badly needed by the patient. Now, to keep the sick room fresh and sweet, and to ensure a sufficient supply of oxygen, two rules must be remembered:—

(1) Always have some opening by which fresh air *from the outside* can enter.

(2) Never allow anything that is dirty or smells badly to enter or to remain in the room.

First Rule.—The chimney should *always* be open. It is a good means of ventilating the room. A fire ventilates, because warm air always *rises*, thus if a fire is burning it draws the bad air up the chimney, in hot weather a lamp standing in the grate will help in ventilating the room. Then the *costless ventilator* is excellent, as well as the chimney. This is a picture of it. It merely consists of a piece of wood of any kind, which fits into the window frame, and will take in and out. When the lower sash is raised, the wood put in, and the sash closed on to it, a space is left between the two sashes, and a slight gentle current allowed to enter



which gives no draught, but which always ensures that some oxygen enters; but, if the weather, or the doctor, does not forbid it, the best way to ventilate the room is to keep the window as well as the chimney wide open. In diphtheria this is necessary night and day. But when the weather in ordinary cases is too cold for this, then have the costless ventilator and the open chimney.

It is very important to keep the temperature of the sick room equal. A thermometer, which can be bought for a shilling, should be in every sick room, *and should hang near the head of the bed.* About 60° F. is the right temperature, except in some special cases when it must be higher.

The nurse must look at the thermometer now and then, and by regulating fire, window and door, keep the temperature as equal as possible by night as by day. The vital powers of the body are at their lowest from midnight till about six in the morning, therefore

in all illness care during these hours is most essential. If the fire goes out, and the room becomes chill at this time, fatal consequences, in many illnesses, may follow. The keeping of an equal temperature at night is therefore of even greater importance than in the day. To keep the room cool in hot weather, a wet sheet or blind hung before open windows is useful.

Second Rule.—To keep the sick room fresh and sweet, by never allowing anything dirty or bad smelling to remain in it, is a sure sign of *Good Nursing*. In this particular LIFEBUOY SOAP may indeed be termed the "Nurse's Friend." All bed pans, slop pails, chamber utensils, chamber cloths, can be kept sweet and clean *with ease*, and quickly, by its use. A slop pail must never enter the sick room. It is a sure sign of carelessness. All utensils used must be emptied *outside* the room. A good plan is to keep a basin with a lather of LIFEBUOY SOAP and warm water, with a towel steeping in it. If the chamber utensil is used, cover it right over with this towel wrung lightly out, and carry it away *directly* and empty it at once. Have a little mop of a bit of stick with a ball of tow tied on it, and with this and a square of LIFEBUOY SOAP all chamber utensils can be cleaned beautifully, and purified without touching them with the fingers. Such utensils should *never* be placed under the bed, but under the wash-stand. If any bad smell should arise in the sick room, the best fumigation to use is a little vinegar poured on a red hot shovel, or on some red coals placed on a shovel.

A soiled clothes bag or basket should never enter the sick room. All soiled things, lint, dressings, etc., should be taken out of the room at once. If soiled or infected they should be put *at once* into a tub containing a strong lather of LIFEBUOY SOAP, in which they should remain for two hours before they are washed and boiled.

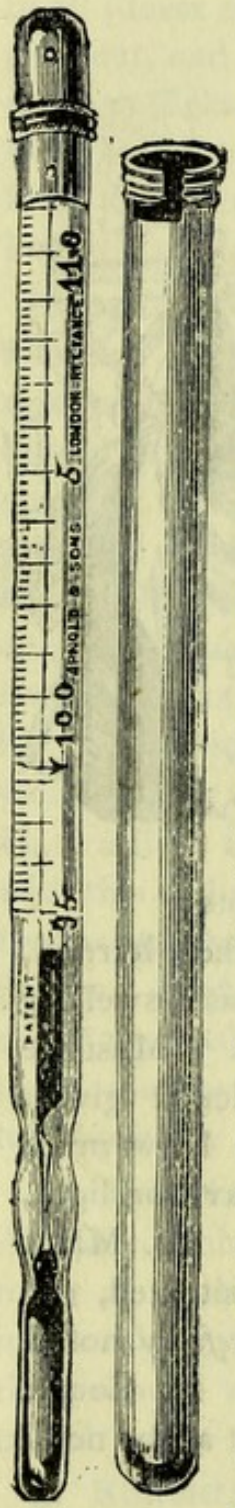
4. SUNSHINE. All doctors now agree that the sick room should be a sunny one, if possible. It has been remarked in hospitals, that patients on the sunny side get well quicker than those on the dark side. Sunlight gives vigour and life; of course the window blinds should be drawn if the patient wishes for a dark room, as people do in pain; and in some cases a dark room is necessary, but these are the exceptions, in general a sunny room is a good medicine.

The Nurse's Duties.

1. TAKING NOTES.—If the nurse is to be of any use to the doctor she must be able to tell him all about the patient in his absence. Therefore she must use her eyes and remember every detail, and if possible note them down in writing. A pencil and paper should always be kept in one special place. In any serious case this should be marked off by pencil lines in 24 spaces, so that notes may be taken every hour. With a very little practice this is very simple to do, and is a *most valuable help to the doctor.*

These are the principal things the nurse should note: 1. Temperature. 2. Pulse. 3. Respirations: whether hurried, laboured, etc. 4. Skin: hot or dry, etc. If there is rash, swelling anywhere, or *any* unusual appearance. 5. Bowels. Must be carefully noted and correct information of every particular given. 6. Urine. Ditto. 7. Appetite. Ditto. 8. Food. How much taken. 9. Sleep. How much and what kind, heavy or light, delirium, uneasiness, in fact *all* particulars of it. 10. Mind. Whether irritable, peevish, etc. 11. Pain. Where situated, etc. 12. Shivering fits. If these occur they must be *carefully* noted, how long they last, etc., etc. This is important. 13. Cough. The kind of cough; if there is expectoration, etc., must all be noted accurately.

HOW TO TAKE THE TEMPERATURE.—Taking the temperature means ascertaining the exact heat of the body; this cannot be done by mere feeling with the hand, it must be done with a clinical thermometer, which is a very important help in modern medical practice. The clinical thermometer is a little instrument in which the mercury is so placed, that when heated (by the bulb containing it being placed under the tongue, for instance), a small part of it, which



is separated from that in the bulb, moves up the tiny glass tube which runs up the middle of the instrument. This part is called the index. Along the tube are marks by which can be told at what degree of heat the blood is. These marks are numbers and lines. The numbers begin generally at 95° Fahr. and go up to 110°. Between each number there are lines, one long line, then four short lines, and so on till the next number is reached. From one long line to the next is called a degree; the short lines between each represent two-tenths of a degree and are called *points*. From one number to another, as from 95 to 100 for instance, there are five degrees. At 98·4° there is a little arrowhead; this is the degree of heat which is normal or natural. When the temperature of the body is taken, if the quicksilver in the thermometer rises much over this, say to 102°, it is a serious sign, as it shews great fever. When the quicksilver falls below the arrowhead it is a sign of exhaustion or weakness

The temperature can be taken in various parts of the body, the most usual being in the mouth or the armpit. It requires practice to learn to take the temperature correctly; everyone ought to know how to do it, as it is quite simple, with a little practice on themselves, but they should ask their doctor to tell them if they can do it properly before they rely on their observations.

To take the temperature in the mouth, place the bulb *under* the tongue resting well into the root, the lips should close on it, and the teeth touch it very gently. With ordinary instruments, it takes from three to five minutes to take the temperature in the mouth, but special ones are made to take it in half-a-minute. In the armpit, the thermometer should remain ten minutes, the part must first be wiped dry, the patient should not have been washed or uncovered for half-an-hour previously, the thermometer must fit up into the hollow of the armpit, taking care that all clothing is quite away from it, and

only the flesh surrounds it, and that the arm is folded firmly across the chest, otherwise it may slip down, and the heat of the body not be registered at all. Before putting the thermometer in place, it should be firmly held between the fingers and given a shake, so as to send the index down, but it must not be done violently, or the mercury that forms the index may be driven into the bulb, if it does this, the instrument becomes useless. When the mercury has risen in the tube to show the heat of the patient's blood, it should not run back till shaken down. Remember that thermometers are very easily broken. When removed from the patient, before being put into its case, a clinical thermometer should *always* be well washed. Nothing is more *disgusting* and more *dangerous* than the loathsome habit of using thermometers from one patient to another without this care. The very best thing to wash thermometers with is LIFEBUOY SOAP and warm water. The nurse should make a good lather of the soap, and wash the instrument well in it, and then rinse it in plenty of warm water and wipe it dry. If this is neglected this valuable little instrument may become a fruitful means of spreading infection.

COUNTING THE PULSE—This also requires practice. Place the tips of two or three fingers on the wrist, inside and under the wrist joint on the thumb side. A small artery here passes under the skin, through which the blood can easily be felt beating. In health, the pulse beats about 72 in a minute in grown people; in children the pulse beats more rapidly. The pulse beats can be most easily counted with a watch with a seconds hand.

TO COUNT THE RESPIRATIONS: the hand, warmed, should be laid on the lower part of the chest, and the number of times it *rises* (not rises and falls) in a minute, should be carefully counted. If possible, it should be done without the patient's knowledge, at least

without his thinking any special observation is being made, because the breathing is to a certain degree under one's control, which the pulse and temperature are not, and the knowledge that their breathing is being counted may unconsciously affect some people, and interfere with an accurate observation being taken.

Adults in health breathe about 18 times in a minute; new born babes about 40 times in a minute. In some illness observations of the respirations are very important.

Poultices and Fomentations.

Poultices can be made of a variety of things. Linseed, oatmeal, bread, carrots, starch, yeast, charcoal, etc. They are principally used to relieve pain, to disperse inflammation, to check the formation of matter, and to cleanse wounds. Dr. Sydney Ringer gives some important advice about poultices and their uses, which every nurse should know. "Poultices," he says, "should always be applied as hot as can be borne, and should be frequently changed lest they become dry and hard; indeed, they can scarcely be changed too often."

"When applied to disperse inflammation, or to hasten the maturation of abscesses, the poultices should be large, reaching beyond the limit of the inflamed tissue, but as soon as the abscess or boil bursts, the poultice should be very little larger than the opening in the skin through which the matter escapes; a large poultice applied over long, soddens and irritates the skin, and is very liable to produce an eruption of eczema, or to develop fresh boils around the base of the original one." "Poultices are not only soothing when in direct contact with inflamed tissues, but they appear to act in the same manner on deep-seated parts. Large poultices applied very hot, and removed as soon as they become cool, are of great service in pneumonia, pleurisy, bronchitis, pericarditis, peritonitis, etc. To avoid exposure of the warm moist skin, the old poultice should not be removed till the new one is ready to replace it. These applications are extremely useful to children attacked with bronchitis or pneumonia. As young children are apt to be restless, and to toss about in bed, the entire chest should be enveloped in a jacket poultice. The ordinary poultice soon becomes rucked up, and

converted into a narrow band, encircling only a small part of the chest, whilst the uncovered part is exposed to cold."

The easiest way to make a 'jacket' poultice is to have two pieces of linen or strong brown paper, cut out in the shape of a chest protector, cover each piece quickly with the poultice to within an inch of the edge all round, pop them on as fast as possible, and bandage on with a roll of flannel which can be fastened with safety pins, and pinned over shoulders, so that the two poultices are kept in place. If very hot, an inch thick, and well covered with flannel, they need not be changed for two-and-a-half or three hours.

"In peritonitis (inflammation of the bowels)," says Dr. Ringer, "it is of great importance to spread the poultice thin, and cover it with a layer of cotton wool; if heavy it aggravates the pain. Poultices," he says, "are useful in acute rheumatism, lumbago, sciatica, and in those so-called rheumatic pains which often attack limited parts of the body, as one arm, etc. They are soothing and pleasant to the inflamed joints in rheumatic fever, although cotton-wool is often preferred. In acute lumbago, poulticing often brings speedy relief, the severest cases being greatly benefited in a few hours, and generally cured in one or two days. The poultice must be very hot, and large enough to cover the whole loins or part affected, and thick enough to remain quite hot for half-an-hour, when it must be changed. If the pain is persistent, this treatment should be continued for three hours or longer, the skin must then be covered with a piece of flannel, and the flannel covered with oiled silk; this after-treatment promotes what is most desirable, free perspiration."

To make a Linseed Poultice.—This wants a little care. Use either half linseed meal and half ground or crushed linseed, or the latter only, which is much the best, because if linseed *meal* alone is used, the poultice will soon get dry and hard, as the *meal* has little of the valuable *oil* of the seed left in it. The crushed linseed should be got as fresh as possible, and of the best quality, as it deteriorates very much in keeping, and often becomes acrid and irritating. A pudding basin is the best thing to mix the poultice in. It should be thoroughly heated by rinsing in boiling water. If the water the poultice is made of is not *boiling*, the poultice will be a bad one. Not quite half-a-pint of water will make a chest poultice. Pour this into the hot basin (if this basin can stand in another half full of boiling water so much

the better), sprinkle in as much linseed as the water will absorb, stirring well all the time; it should be soft, rather firm, and come clean away from the sides of the basin. When well mixed, spread it quickly with a broad knife dipped in hot water (this spreads it smooth much better than a spoon); it may be spread on calico, or a piece of stout brown paper—paper is a *non-conductor*, and, if thick enough, is very good for laying poultices on; when spread, pour over the surface a little oil or vaseline, and turn up the edges of the paper or calico all round—the poultice should never reach to within an inch of the edge of the stuff on which it is laid, so as to allow of room for this turning. It must be put on the *bare skin;* if rag or anything is laid *between* the poultice and the skin, as is sometimes ignorantly done, the rag will absorb the oil of the linseed, which ought to be absorbed by the skin of the patient. If tried against the *back* of the hand, we can make sure that it will not scald the patient, the oil on the surface enables it to be borne better very hot. A poultice that is not *very* hot is worse than useless, for this reason the stuff on which it is spread should always be warmed, and the spoon and everything used in making it should stand in a bowl of hot water till they are wanted. When the poultice is on, it should be covered with flannel or cotton-wool—when it is changed, the new one (if not made in the room, it should be brought up in two hot plates) should be ready at the bed side before the other comes off, and when the final poultice is removed, the part should be wiped dry and covered with *heated* flannel. Poulticing makes the skin more susceptible to cold, and if not well protected when the poultice is removed, more harm than good will be done. No one should be poulticed unless they can stay in the house, *and in bed*, after it.

A Mustard Poultice is one in which half mustard and half linseed is used; the dry mustard should be stirred in after the linseed and boiling water are mixed. With this poultice sensitive skins will need a thin muslin spread over the surface, otherwise the skin may be blistered.

A good substitute for a linseed poultice, when there is no one at hand to make one properly, is to take a square of good thick cotton-wool, hold it to the fire till very hot, put it on the skin, cover with a square of equal size of oiled silk, and bandage all lightly over with flannel. Many doctors order this instead of linseed, it is much

less trouble to apply, does not need changing, and a constant gentle heat and moisture are kept up by it. The cotton-wool and oiled silk may cover back and chest in bronchitis, etc., and may remain without change for several days. It is very useful in colds on the chest; but it will not take the place of a linseed poultice in severe cases, as it acts *much* more slowly.

A Charcoal Poultice, useful in putrefying ulcers or sores, is made by mixing a quarter of an ounce of wood charcoal with a bread poultice, or a little muslin bag full of charcoal may be laid over an ordinary poultice covering the foul spot.

Starch Poultices (soothing for skin eruptions, some forms of cancer, etc.) are made by mixing starch and cold water to a smooth paste, then *boiling* water till a thick jelly is made, which spread on linen.

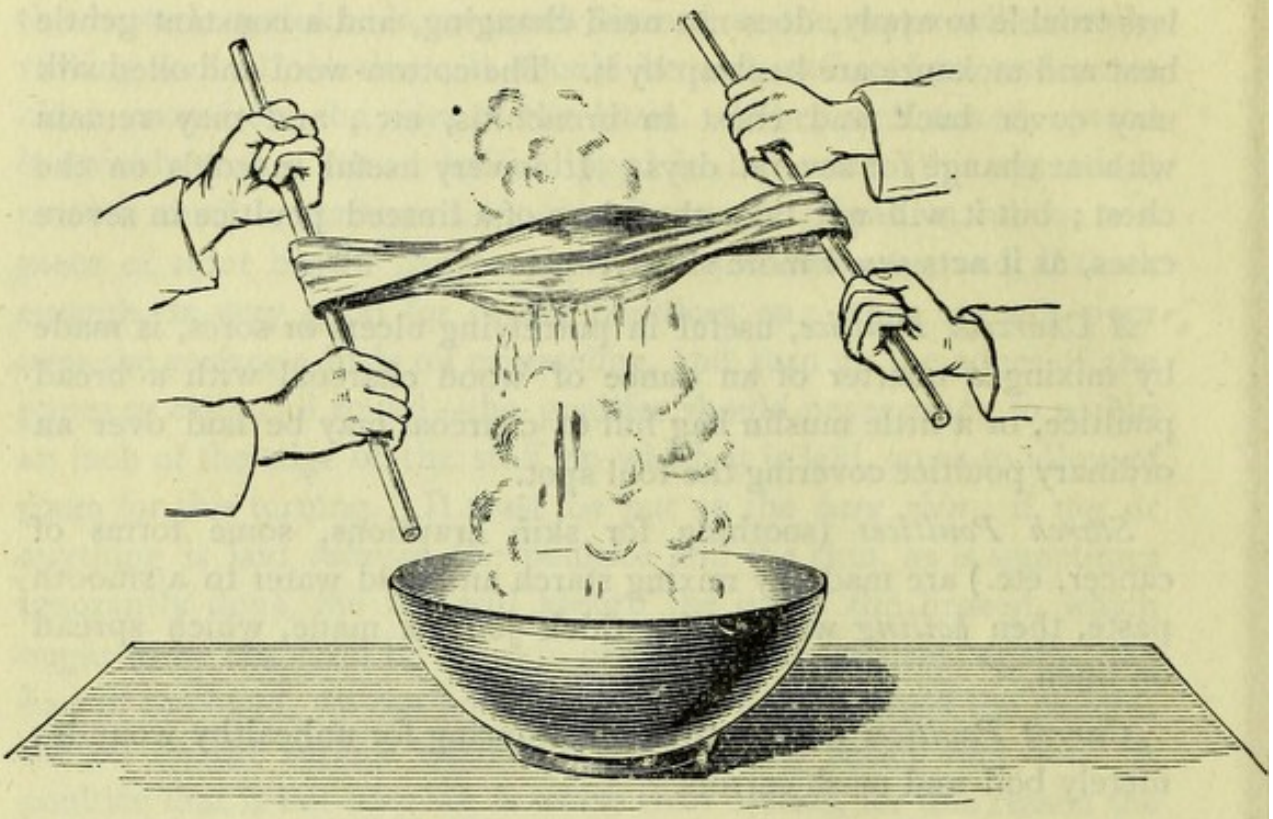
Carrot Poultices are considered cleansing for unhealthy wounds; merely boil and mash carrots.

An *Alkaline Poultice* is often found useful in gout, and relieves the pain; one part of bicarbonate of soda to nine parts of crushed linseed.

Fomentations, or Stupes, are merely flannels wrung out of boiling water, or water in which poppy heads have been boiled, and applied as hot as they can be borne.

The best way to make a fomentation is as follows: place a roller towel, or two ordinary towels stitched together at each end, over a heated basin, put a stick (walking sticks, hoop sticks, or hearth-brush handles will do) into each end of the towel, on which, lay a square yard of house flannel, or piece of a blanket, pour boiling water over the flannel till it is thoroughly saturated, and then the sticks should be twisted as in the sketch.

They can be twisted by one person, but of course two pairs of hands can do it better. When thoroughly wrung in the towel till all the water is squeezed out, the flannel is lifted out, given one shake, folded into a pad, and laid on the patient as hot as possible. It should then be covered with a piece of waterproof stuff, or several folds of flannel, not only to keep in the heat, but also to keep the bed and night-clothing from being damped by the steam from the flannel.



PREPARING FOMENTATION.

A very useful fomentation is made quickly by putting a sponge into a towel, pouring boiling water on it, and twisting the towel in each hand in opposite directions. This is valuable to apply to the windpipe in children threatened with croup. It gives great relief if applied to the forehead or face in neuralgia or *tic*.

A Turpentine Stupe is an admirable remedy in stomach-ache from eating unripe fruit, etc., and for rheumatic and other severe pains, and is very often useful in cases of pain from sluggish liver. Proceed as above, but when the flannel is shaken out sprinkle over it, on the side that goes next the skin, a tablespoonful of turpentine, see that the turpentine has soaked into the flannel or it may blister, then immediately apply.

Laudanum may be used in the same way if ordered, and serves the same purpose, but gives less trouble than boiling poppy heads.

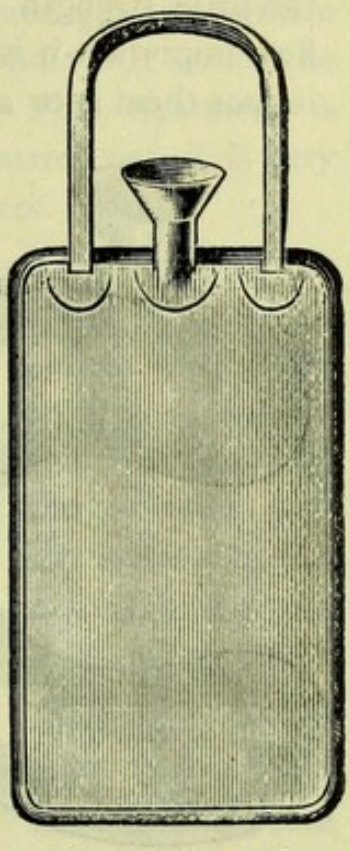
Fomentations cool quicker than poultices, and should be changed every quarter of an hour.

Mustard Plasters are made by mixing dry mustard and *tepid* water. A piece of tissue paper should always be laid over the face of the mustard plaster. For children and old people, half mustard and

half flour is generally used. It should be taken off when the skin is scarlet, if left longer it may rise a troublesome blister. Vaseline or oil should be smeared on the skin when the mustard is removed, and a clean rag laid on.

Dry Heat is very useful in all sorts of pains and aches. It is a valuable and safe household remedy.

Here is a picture of an excellent Family Doctor—the Hot Water Bag. It should be filled with *very* hot water but not water actually boiling, which may injure the india-rubber of which the bag is made. Bricks or tiles may be heated and wrapped in flannel. Salt, sand, or bran, heated in the oven or iron pot, and put in a flannel bag or worsted stocking, are good for sore throats, and these are all useful ways of applying dry heat. Remember that the skins of people suffering from paralysis or dropsy are more easily injured by too much heat than other people. Hot bottles, etc. applied to them should *always* be wrapped in flannel, indeed in all cases this is much more comfortable.

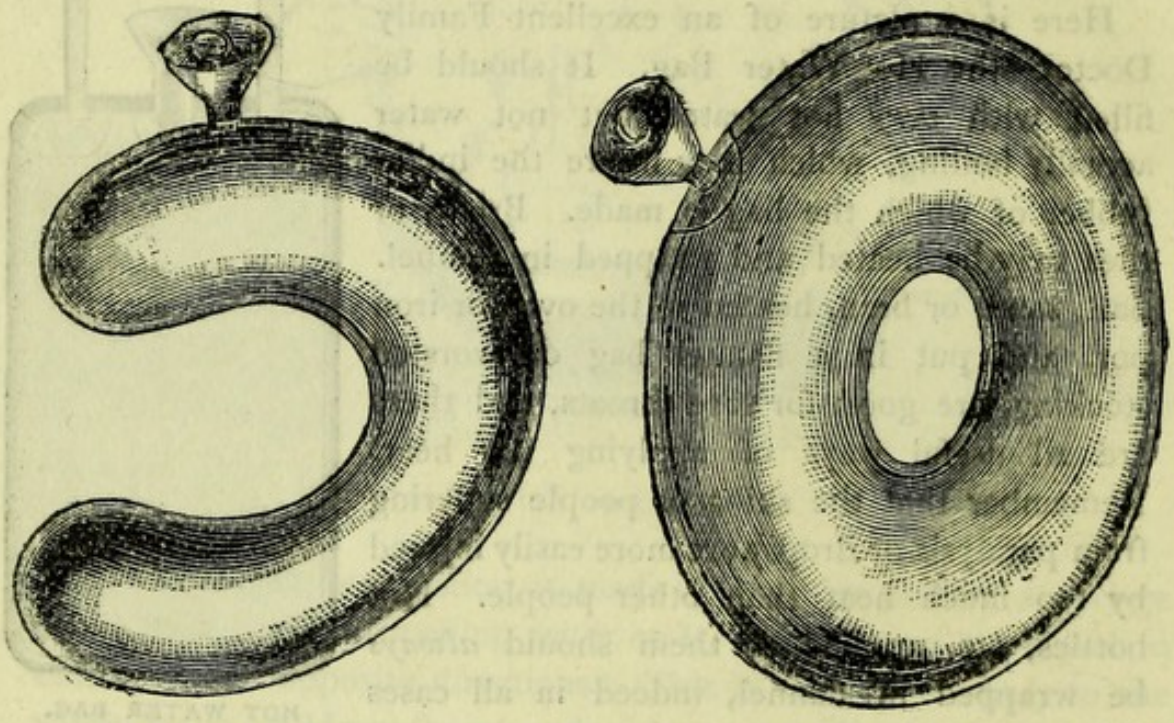


HOT WATER BAG.

But, remember that *dry heat* and *moist heat*, as in poultices, have each their special application, and if the doctor orders poulticing don't substitute dry heat in its place.

BEDSORES—These are caused principally by *neglect*. There are a very few cases in which it seems impossible to prevent them; fracture of the spine is one such case, but, as a general rule, bedsores are a certain sign of neglect and bad nursing. It is often noticed by doctors that some of their nurses have many more cases of bedsores among their patients than other nurses. People who lie long in bed, who are very weak and helpless, or paralysed, and who lie continually in one position from weakness or inability to move, are sure to have bedsores if means are not taken to *prevent* them, and in general they *can* be prevented. From continual lying in one position, and pressure against the bed, the circulation is impeded, and the skin becomes liable to mortification, sloughing, and ulceration. This is

the usual course of a neglected bedsore. *Death not infrequently follows* upon the formation of bedsores, and no wonder; they first set up irritation, then actual suffering, then form into a sore hard to heal, and discharging matter which quickly assists in running away with the little strength left in the patient. From all this it will be seen how important it is to *prevent* bedsores forming at all. The way to induce them is to allow the patient to lie constantly in one position,

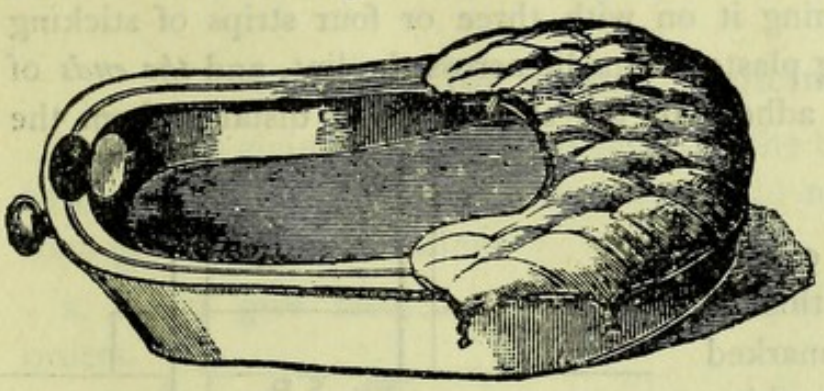


AIR OR WATER CUSHIONS FOR APPLYING DRY HEAT, OR FOR THE TREATMENT OF BEDSORES.

wet, dirty, and with night-clothing and sheets crumpled and full of crumbs. How can a poor helpless creature avoid bedsores if so treated? In every serious illness the nurse must remember the *possibility* of bedsores forming, she must therefore, if the doctor does not object to it (as some cases must *not* be moved), occasionally turn her patient from resting on his back to lie on his side, by taking one end of the draw sheet (which is explained at page 75) and rolling the patient gently in it he can be moved easily from his back to his side, even if quite helpless. Then great care must be taken to keep the sheets, draw sheet, and night-dress *very* smooth under the patient. Whenever he is moved from one side to the other, the bed must be quickly swept free of crumbs with a large towel. The sheets can be kept from creasing by being fastened to the mattress at each side by safety pins. Then every morning the

parts where bedsores are likely to form, which are the shoulder blades, back of hips, elbows, backs of legs, and heels, should be washed with LIFEBUOY SOAP and warm water, and thoroughly dried, then a little spirit of any kind should be rubbed in (methylated spirit is as good as any), or a piece of cut lemon, or some glycerine cream may be rubbed on. When this has dried the whole part should be well dusted with boracic acid in fine powder. This treatment is *preventive*, and if all its details are carefully carried out, it is very unlikely indeed that the patient will have bedsores.

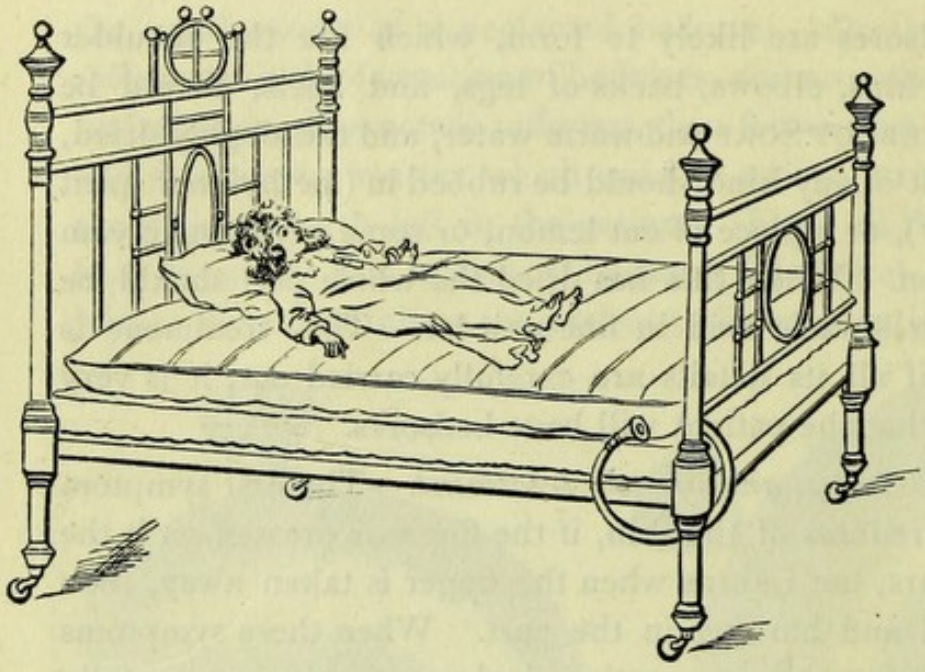
Symptoms of bedsores, and nurse's treatment.—The first symptom of a bedsore is redness of the skin, if the finger is pressed on it the redness disappears, but returns when the finger is taken away, then there is irritation and burning in the part. When these symptoms are seen, all the precautions mentioned above should be carefully carried out; if neglected, the symptoms in the affected part get worse, the skin cracks, and a sore is formed, which then turns into a running sore, *very* hard to heal, and productive of much suffering.



BED BATH.

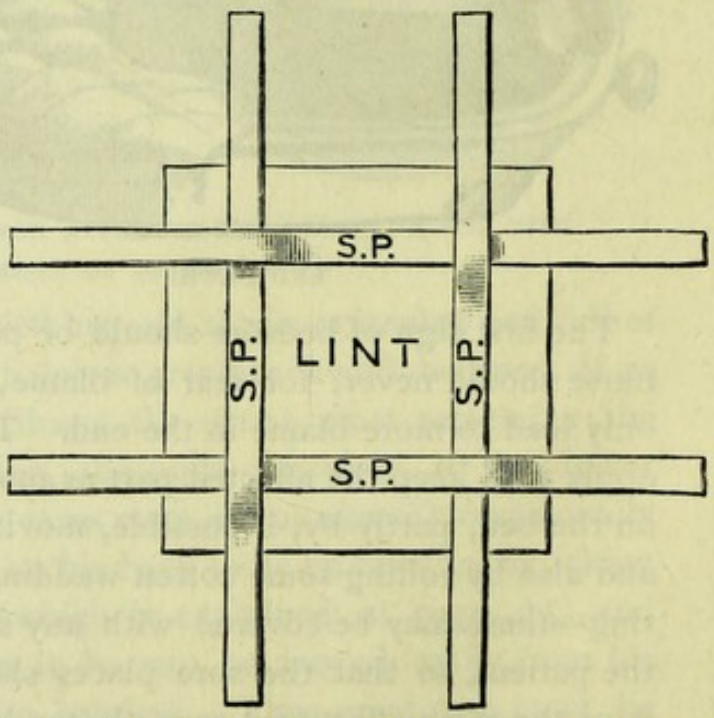
The first sign of bedsore should be pointed out to the doctor; the nurse should never, for fear of blame, try and conceal it, this will only lead to more blame in the end. The treatment the nurse can apply is to keep the affected part as much as possible from pressing on the bed, partly by, if possible, moving the patient on to the side, and also by rolling some cotton wadding into pads in the shape of a ring—these may be covered with any soft material, and laid under the patient, so that the sore places shall not rest on the bed; they have the same effect as a corn plaster has in keeping the corn from being rubbed by the boot.

The sore and reddened skin should be rubbed at least twice a day with spirit, lemon, or glycerine cream, and well dusted with the boracic powder; but if the *least* crack appears, neither spirit nor lemon should be used; they would hurt very much. The crack must be



A WATER OR AIR BED.

at once treated as follows: a piece of lint should be smeared with vaseline and zinc, or dipped in camphorated oil, this should be laid over the cracked part, and kept in place by laying another piece of lint over it, and fastening it on with three or four strips of sticking plaster, the sticking plaster strips lie across the lint, and *the ends* of them only should adhere to the skin at some distance from the sore part.



In the diagram it can be easily seen how this is done, the parts marked S.P. adhere to the skin; under the lint is the piece soaked in vaseline and zinc or oil, which, in this way, is kept from falling off the sore. The doctor may order other treatment, but this is what the nurse should do while waiting for his instructions. Air or water beds or cushions, as shewn in sketches, are very useful for people suffering from bedsores; they can be hired; care must be taken that pins or needles are never stuck into them, or any pointed instrument. Regular bedsores will require much more treatment than here given, perhaps charcoal poultices, painting with collodion, etc., but all this must be directed by a doctor, and not by the nurse.

How to give Medicine.

Weights and Measures of Medicine.

Liquids.—One drachm contains 60 drops, or one teaspoonful.
Three drachms are equal to one dessertspoonful.
Four drachms are equal to one tablespoonful.
One tablespoonful is equal to half-an-ounce.
Two tablespoonfuls make one ounce.
20 ounces equal one pint.
2 pints ,, one quart.
4 quarts ,, one gallon.

Solids.—60 grains equal one drachm.
480 grains ,, one ounce.
16 ounces ,, one pound.

Rules for giving Medicine.

1. Before giving medicine the label on the bottle should *always* be read. If this were always done we should never have accidents from giving wrong medicines.

2. Never give medicine to sick people without the doctor's orders.

3. Never substitute some medicine of your own choosing for that which the doctor has ordered. He may not have time to explain *why* he orders it, but if his orders are not carried out he cannot be expected to do the patient any good. People sometimes throw away the doctor's medicine and then blame him for not curing the patient.

4. Always ask the doctor: (1) If the medicine is to be taken *before* or after meals? (2) If the patient is to be roused from sleep to take it? (3) If it is to be given through the night? (4) If it is to be continued after the first bottle is finished? (5) If any special precautions are to be taken against catching cold, as some few medicines predispose to cold?

5. Always keep the medicine bottle in a place by itself, not mixed up with liniments and other bottles that contain, perhaps, poisons; many fatal accidents have resulted from neglect of this.

6. Always give medicine *punctually*. If it is to be given before or after meals, they must also be punctual, or the medicine cannot be so.

7. Always be sure to *note* if the medicine has had the effect it is intended to have. Thus, some medicines are given to make the bowels act, others to induce perspiration, others to improve the appetite, and so on. It is very important to be able to tell the doctor whether the medicine has had the desired effect or not.

8. *Never* give children the medicine ordered for *grown up* people. It may have a disastrous effect. *Never* give opium or laudanum to a baby. *One drop of laudanum has been known to kill a baby.* Young children are very seriously affected by narcotics.

9. *Never* give medicines or prescriptions that have done good in some cases, to other cases that *appear* to be suffering from the same symptoms. The *symptoms* may come from quite different *causes*, therefore to give medicine that does good in one case may do mischief in another.

10. Occasionally, medicines contain strong poisons; after a time, people taking such become able to take a larger dose without harm, and the quantity taken may be increased by the doctor; but when such medicine is left off it should not be resumed without medical leave, because a dose that would be harmless after being used to the drug for some time, may *kill* if taken when not used to it.

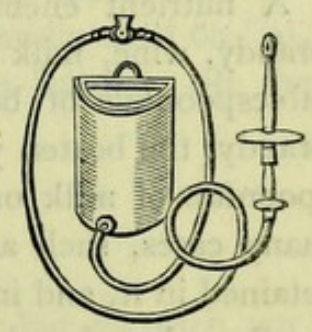
Every sick room should have a medicine glass or spoon—on these are marked tea and table spoonfuls. The size of ordinary spoons and glasses vary so much that they never can be depended on to measure accurately. When taking nauseous medicine, the patient should never *smell* it, and it should not be allowed to touch the *lips*. If the spoon holding it is put as far back on the tongue as possible, and it is swallowed as fast as possible without drawing breath, it will be tasted scarcely, if at all. When it is down, the mouth may be rinsed with camphorated or peppermint water before breathing, and thus all taste will be removed. There can now be had medicine *cachets*, a French invention; they are tiny cups with lids, all of rice paper, they can be filled with the medicine, put into a spoonful of water, and swallowed quite easily; the nastiest medicine can be swallowed without tasting in the least, in these clever little contrivances, which can be had at any chemist's. Oils should be taken out of a

spoon first dipped in hot water. Hot milk or strong coffee are the best things for taking castor oil in. In taking this disagreeable oil, a useful hint is given by an experienced practitioner. "Mix one teaspoonful of oil with one teaspoonful of glycerine, this makes a more powerful aperient than *four* teaspoonfuls of castor-oil, pure." Ginger or orange wine also make good medicines for taking castor or cod liver oils. In taking cod liver oil, so invaluable in threatened consumption, and very beneficial for delicate people, and those who easily catch cold, two things must be remembered: one is that it should be taken directly after meals, so as to be digested and absorbed with the food; another is that only a *small* quantity should be taken at a time.

Oil is very difficult to digest: if a dessertspoonful of cod liver oil is taken, only about a third of it will probably be digested, the rest merely passes out of the body, and is wasted. If *one* teaspoonful is taken three times a day after meals, it will do more good than if three tablespoonfuls were taken, because that much will be digested, and it can be taken without making the stomach sick. Many people undo all the good to be gained by cod liver oil, by taking too much of it.

Enemas—Every nurse should know how to give an injection into the bowel, called an enema. These are useful in making the bowels act, instead of purgative medicines; to relieve pain; to introduce nourishment when it cannot be taken by the mouth; and they are sometimes used to stop diarrhœa.

The best thing with which to administer an enema is a douche tin, as in sketch. This is very much better than the indiarubber syringes in ordinary use. These douche tins can be bought complete from 5/6 upwards, or any tinman will make the tin to order if shown the sketch. The tubing can be bought at an indiarubber shop for about 6d. a foot, four or five feet are required, the nozzle can also be bought at the indiarubber shop for 6d. In ordering the tin to be made, the man should be instructed to make the little pipe at the bottom, on to which the tubing is put, as close to the bottom of the tin as possible, and to make a little tap to it, the tubing will slip on and



A DOUCHE OR ENEMA TIN.

off this little pipe. To give an enema, it is only necessary to put about a quart of warm water, or soap and water, into the tin (which should be made to hold three or four pints), insert the nozzle gently into the bowel passage, and then raise the tin into the air. The higher it is raised, the greater will be the force of the water, which can be regulated in this way. If there is no attendant, the tin can be hung on a nail. Three things must be carefully remembered in giving an enema: (1) Not to have the water too hot, 95 degrees or a very little over is about right. (2) Always oil the nozzle well. (3) Always use care in putting the nozzle into the bowel passage, if the patient can do this it is much better; if not, the nurse must do it *very* gently, *never using* force, but gently insinuating the nozzle up the passage. From one to two pints of water should be given, and if possible it should be retained for a few minutes after being injected.

A starch enema is often very useful in checking diarrhœa, neither this nor an injection to introduce nourishment should be given from a douche tin, either a glass syringe or an indiarubber ball syringe should be used.

A starch enema should be given either cold or tepid, never hot. The starch should be *retained* and *absorbed* into the bowel.

To make a starch enema, blend a tablespoonful of dry starch with a spoonful or two of cold water, then pour on this *boiling* water until it thickens, stirring all the time. It should be used just thick enough to pass through the syringe, and four tablespoonfuls are enough for one injection.

A nutrient enema may consist of strong beef tea, with a little brandy, wine, milk or cream, or well beaten yolks of eggs. Two tablespoonfuls of beef tea, one of wine, or half a tablespoonful of brandy, the beaten yolk of one or two eggs, and one or two tablespoonfuls of milk or cream make an excellent nutrient enema. In many cases, such as ulcer of the stomach, when no food can be retained in it, and in conditions of the throat when food cannot be swallowed, and under similar circumstances, people have been saved from starvation by food being injected into the bowels. The great object to be attained is to have the injection remain in the bowel *and be absorbed into it*, if it is not, of course no nourishment will be derived from it. To gain this end, an enema of plain warm water

should be given half an hour before the nutritive injection to clear out and prepare the passage, and the injection itself should be given *very* slowly and gently so as to avoid exciting the bowels to act. Some doctors say that only a few tablespoonfuls at a time should be given; others insist that with care a pint may be injected at one time; it will of course depend on the case, if a pint can be injected and *retained*, so much the better. In giving any kind of enema, the patient must lie well on one side near the edge of the bed, with the knees drawn up, and a thick towel placed under them to protect the bed.

LINIMENTS—Should be either rubbed in or painted lightly on. The doctor's instructions must be the guide, as some liniments are too strong to be rubbed in, and in others the rubbing is necessary.

OINTMENTS should either be rubbed in, or spread on lint or rag, and kept in place as the bedsore dressing described at page 68.

BLISTERS.—Blistering paper, plaster, or fluid, are generally prepared from cantharides or Spanish fly. The fluid is the strongest preparation. Remember that blisters are *not* always intended to raise a blister, but merely to produce an irritation to draw the blood from some deep-seated part. The 'water' in a raised blister contains nearly as much albumen (an important part of the blood) as pure blood. To draw much of this away may be very injurious. The inexperienced nurse should therefore get special orders before applying any blister. If blistering fluid is used, the place after painting with it should be covered with cotton-wool, so that if possible the blister may not be broken. If the doctor desires it to be pricked, the water should be received into a cup to shew the doctor, and the place covered with zinc and vaseline smeared on lint, and then a layer of cotton-wool kept on with a bandage till the part heals.

Baths and Packs.

Baths are often used in fevers to cool the body, but for such purpose they must *only* be given by the doctor's orders; hot baths are sometimes given to bring out eruptions.

A hot bath should be from 100° to 110° F.; a warm bath about 95°; a tepid bath 90°; a cold bath 70°. The thermometer mentioned

on page 55 should be used to test the heat of the bath. A hot bath may save the life of a baby in convulsions; the more quickly it is given the greater hope of saving the child. It must be plunged up to the neck in water about 100° F. If no thermometer is at hand, the nurse should plunge her elbow into the water, by which its heat can be judged more accurately than by the hand. If she can comfortably bear her elbow in it, it is right for the child. In giving a cold bath to a fever patient, a long bath, half full of water about 90°, is drawn up next the bed; into it, the patient, lying on a sheet or blanket, is lowered by two attendants, and cold water is *gradually* added till it is about 70°. Hot bottles, etc., should be ready in case of chill or faintness, and such a bath should never be given unless the doctor is in the house. The bath should be covered with a blanket while the patient is in it, and he should not be left *for a moment* alone. Two large bath towels stitched together, with an aperture that the head can go through, or a sheet with a slit in the middle, should be warmed and ready to pop over the patient's head; as he is raised out of the bath the sheet or towels will fall round him.

Packs are sheets or blankets wrung out of hot or cold water, in one or other of which the patient is wrapped, according as the pack is to be hot or cold. They can be wrung as described for wringing a fomentation, only using a sheet with a broad hem at each end to hold the sticks. All the water must be wrung out, then the patient is wrapped in it (night-dress of course first removed), and over this more blankets are wrapped. How long the patient is to remain in it the doctor must decide.

Soda Baths are used for rheumatism, skin diseases, etc. A pound or two of washing soda, according to the quantity of water, makes a soda bath.

Mustard Baths are very useful in bringing out the eruption in measles, etc.; also in severe bronchitis; and whenever a counter-irritant is required. A tablespoonful of dry mustard added to a bath large enough for a child. In this it should be held till the nurse's arms smart. In tepid sponging in bed, the patient is laid on a blanket under which is waterproof sheeting, the night-dress removed, and the body quickly sponged with tepid vinegar and water, the sponge must not drip, then the blanket is rolled over the

damp body, and the patient covered up with more blankets. In half-an-hour he is dried, the blanket on which he lay removed, and the night-dress put on.

Bathing in Bed.

A screen should always surround the patient while bathing is going on. In washing people in bed great care must be taken to surround them with blankets and a waterproof, so that the bed shall not be damped; never put the basin on the bed, for fear of an upset; always lock the door before bathing begins, and only uncover and wash one limb at a time.

How to change the Sheets and Night-Gown.

The mattresses of sick beds should always be covered with some waterproof material. If there is danger of bedsore, no under-blanket, only a sheet should cover the waterproof. The waterproof and under-sheet should always be firmly pinned to mattress with safety-pins to prevent creasing. A *draw-sheet* is most useful, it saves the under-sheet from need of so frequent changing, and keeps the bed clean and comfortable. To make it, fold a sheet in two *lengthways*, roll up one end and tuck under mattress, the remainder, which should be left long enough to reach across the bed, is laid over the under-sheet, just where the patient's body lies, and is pinned under the mattress on the side opposite to the rolled up part; the roll can then, when necessary, be unpinned, the part under the patient be drawn out, rolled up, and tucked under the mattress, and so on as needed. *To change the under-sheet*—untuck all round, unpin the draw-sheet (if the patient is helpless an assistant should take one end of this, and holding it tightly across the patient, roll him in it on to his side, and hold him so while the nurse changes the sheet). The clean sheet, aired and *warm*, should be rolled up lengthways to about its middle, then the soiled sheet should be rolled up till the roll touches the patient's back—the *clean* roll laid against it, and the part of the clean sheet that is left loose tucked into place under the mattress, then lift or roll the patient over *both* rolls of sheet on

to the clean side, and going to the other side of the bed pull away the soiled sheet, draw out the clean rolled sheet and tuck it under the mattress. *To change the top sheet*—take off all bed-clothes except top sheet and one blanket over it, which loosen all round, lay the clean sheet and one blanket *over* them, and tuck these under one side of mattress, then draw the soiled sheet and blanket away, the patient will then be covered with the clean sheet and a blanket, he will not have been a moment uncovered or chilled, the rest of the covering can then be put on. *Heavy cotton* quilts are very unhealthy. *To change the draw sheet*—pin, *with safety pins*, one end of the clean to one end of the soiled; when both are folded, *draw* until the soiled is drawn out and the clean drawn into place. * *To change night-gown*—have the clean one *well warmed* and aired; if patient can sit up, see that he is not sitting on any part of the one coming off, open it at throat and cuffs, draw arm out of sleeve nearest, then put your hands through collar of clean night-dress, gather it all up over your wrists, take bottom of soiled one, gather it up towards patient's head, over which it goes off as the clean one goes on, without his being uncovered for a moment. If the patient cannot sit up, the night-gown must be made to open up the back, and then can be easily put on and off. A little practice in changing sheets and night-gown is needed. Windows and doors should be closed, and room warm, before changing or washing sick people.

Washing Patients.—The face and hands should be washed at least twice a day, it is most refreshing; the teeth † and mouth also. If dry and furred, the tongue may be rubbed with a bit of cut lemon, this is very useful in fevers.

Beds and Bedrests.

An iron bedstead, with no valance, a wire-wove mattress and *one* horsehair mattress make an *ideal* sick bed. Feather beds are heating, and absorb and retain impurities, they are very unhealthy in sickness.

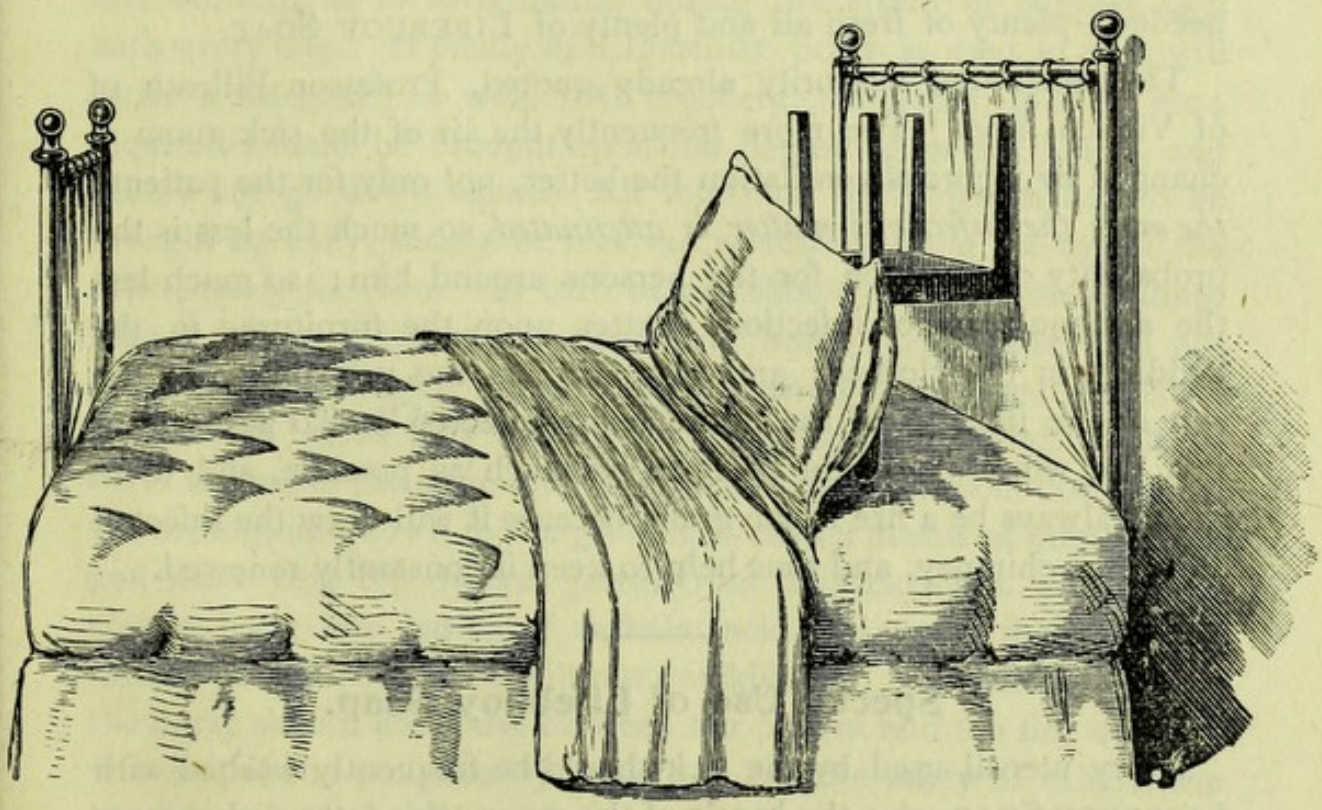
---

*—Remember, *cold or damp* bed or night clothes may give a *fatal chill.*

†—If possible, the tooth-brush should be used every day in illness.

Various kinds of *bedrests* can be bought to support people when sitting up in bed. An excellent one can be made without cost by putting a chair (a light cane one is best) as in sketch, it should have two or three pillows against it. To help the patients to raise or turn themselves, a strap, or long roller towel, fastened to the end of the bed and reaching the hand, is very useful. For helpless people who slip down in the bed it is a good plan to sew strong tapes to a small pillow, tie this at each side of the bed, so that the pillow rests under the patient's thighs and the knee joints.

In heart disease, typhoid fever, rheumatic fever, and after severe influenza, the doctor should always be consulted before any kind of bedrest is made for a patient, as sudden alterations in the patient's position may be injurious, or even fatal.



BEDREST.

CHAPTER IV.

Guide to the Nursing of Infectious Illnesses.

Preparation of the Room for an Infectious Case.

A room at the *top* of the house, or better still the whole top floor, should be chosen for nursing any infectious illness, this is the only way to keep the infection from spreading through the house, because the disease germs *ascend* with the air.

In a room where infectious disease is nursed, two things are needed—plenty of fresh air and plenty of LIFEBUOY SOAP.

The celebrated authority already quoted, Professor Billroth of of Vienna, says "The more frequently the air of the sick room is changed by vigorous ventilation the better, not only for the patient; *the more the infectious matter is attenuated*, so much the less is the probability of infection for the persons around him; so much less the accumulation of infectious matter upon the furniture, in the bedding, in the clothes; and so much less the probability of the rest of the inmates of the house being infected." To accomplish this, the windows should be open as much as possible, and there should always be a fire in the grate, because it will draw the infected air up the chimney, and thus help to keep it constantly renewed.

A Special Use of Lifebuoy Soap.

Every utensil used by the sick should be frequently washed with LIFEBUOY SOAP, also the hands of the nurse, *this latter is her great source of safety*. There should always be a table outside the sick room with warm water, clean towel, nail brush, and piece of LIFEBUOY SOAP ready for the doctor to wash his hands after his visit. Doctors ought on no account to neglect this precaution for

the safety of their other patients. The infected room is better without any carpets, if it has any small strips they should be burned afterwards. There should be no *upholstered* furniture. Curtains should be of dimity, which can be boiled. Table-covers, antimacassars, and all articles not actually needed should be banished. There must be no coming and going between the sick room and the rest of the house. This is the reason why the top floor is so absolutely required, because there ought to be a second room for the nurse to take her meals in; to keep the supplies as of tea, candles, and so on (sufficient of these to last for some weeks should be laid in at the beginning of the illness); to concoct drinks if needed; to wash up the crockery, and where she can have a good fire in which should be burnt all scraps of food, tea-leaves, dust, rags, etc., used in the sick room. *These should never be taken to the dust-bin.* They will prove a fertile source of infection for the neighbourhood. The window of this room should be always open. Then the third room on the floor should be for the nurse to take her bath and to dress in. Nothing is so invigorating during the strain of nursing as a bath every day. If plenty of LIFEBUOY SOAP is used in it, it will prove a safeguard as well. All crockery, tea cloths, glasses, etc., required should be brought up at the beginning of the illness, and should not go down again. All food and drink which has to be brought up daily, should be received in vessels put at the top of the stairs, ready for them. A bath or pail should stand on the landing, with a lather of LIFEBUOY SOAP and water (best made with hot water), all clothing of nurse or patient should be placed in this for some hours before it is removed to be washed and boiled. A large sheet soaked in the same and hung before the sick room door, up to the ceiling, and down to the ground, is also a means of intercepting and destroying the disease germs from the sick room. If the two corners hang into basins of carbolic acid and water, the sheet will imbibe the moisture, and will not quickly dry. For her own safety, the nurse should not stand between her patient and the fire or open window, if she can possibly avoid it. For the safety of others, she should wash thoroughly with LIFEBUOY SOAP and water, and put on things not worn in the sick room before she goes out, which she ought to do for at least an hour every day; if she neglects this, and does not take a sufficiency of sleep and nourishing food, she will soon wear out.

Symptoms and Special Dangers of the various Infectious Diseases.

Small Pox.—This is the *most* infectious of all the infectious diseases. The time, from exposure to infection, before the disease appears, is from ten to twelve days. The symptoms are shivering, severe pain in the back and loins, headache, vomiting, high temperature, and quick pulse. These symptoms sometimes set in with great violence, and the patient soon becomes delirious. The eruption appears on the third day, the fever then lessens. The face is the first part of the body on which the eruption is seen; it is at first only red spots pitted slightly in the middle, they change by degrees to pustules full of watery fluid, this gradually turns to matter or pus. In some the eruption is very slight, and there are but few pustules; in others there are so many that they run together (confluent small pox) and one pock can hardly be distinguished from another. These latter severe cases nearly always occur in people who have not been vaccinated. The pustules burst in six or seven days, unless the doctor has previously ordered them to be pricked, which is often necessary. The fever which decreases with the appearance of the eruption, increases about the eighth day. On the eleventh day the height of the disease is generally reached. Baths, packs, and fomentations are now constantly ordered in small pox, and in many cases prove valuable. Various means are taken to prevent the skin being marked with pits. Pitting depends upon the depth with which the pock enters the skin; if the scab is scratched off it is more likely to leave a pitmark behind. One doctor, Dr. Joseph Bell, recommends that cotton-wool cut like a mask, so as to carefully cover face and neck, leaving holes for eyes, nose, and mouth, shall be dipped in lime liniment, and applied so that no crevice is allowed; it is bound on with a large handkerchief, and should remain on till convalescence. Castor oil is recommended to be dropped between the eyelids to prevent them from sticking together, and when the scabs come away, the skin should be freely dusted with boracic acid in fine powder. It is well to tie woollen gloves on to children's hands, to prevent them from disfiguring themselves. Loss of sight and hearing frequently follows small pox. The majority of people in asylums for the blind, before vaccination was compulsory, were there from blindness following small pox. The

infection of small pox is most virulent, and no means should be neglected to keep it from spreading.

Chicken Pox.—Some doctors assert that the infection from chicken pox can give small pox, therefore care should be taken to keep it from spreading. The symptoms are feverishness, which may, however, be slight or even absent; small red spots over chest, face, neck, arms, and legs, these turn into small pustules about the second day, and dry up on the fourth or fifth day; sometimes there is sore throat, and the pustules appear on palate and tongue. Few but children have this complaint. If there is no fever the patient need not stay in bed, but should remain in one room, warm and *well* ventilated, have light diet, and be kept isolated from others.

Scarlet Fever or Scarlatina (they are the same disease, popularly scarlet fever is supposed to be the most severe form).—This disease *sometimes* develops within forty-eight hours after exposure to infection. It may not develop for four or five days after. The symptoms are shivering, headache, fever, and sore throat, generally there is vomiting; some cases begin with an attack of vomiting. The symptoms vary in severity according to the case; the skin is hot, tongue furred, tip red. Occasionally the eruption is seen at the beginning of the illness, but usually not for twenty-four hours from the beginning of the symptoms, *sometimes* not for three or four days. It is not raised on the skin, but has the appearance of scarlet dots closely crowded together; when the eruption is completely out the appearance of the skin is of a pink surface closely set with scarlet dots. The body is more affected by the eruption than the face. In some cases the eruption is much paler than in others, in some it is of a dusky hue, and in some it is only in patches on neck, chest, belly, and perhaps not at all on arms or legs. The throat symptoms are at their worst during the height of the eruption, which is usually on the fourth or fifth day. The throat improves as the eruption fades. Scarlatina, is usually divided into three kinds :—

(1) *Scarlatina simplex*—this is the mildest kind.

(2) *Scarlatina anginosa*—this is a worse description—the skin and throat are much affected, there is high fever.

(3) *Scarlatina malignant*—this is the worst form, and extremely dangerous, death sometimes takes place within two days of the attack.

It is needless to say that any form of scarlet fever needs good medical advice. Often tepid sponging with vinegar and water is ordered to relieve the itching and smarting of the skin which is a part of the disease. A method used in Germany is recommended by Dr. E. Smith: it is to rub the skin with a piece of "salted, fat, unboiled bacon." It is held by the rind, and one part of the body at a time is uncovered, and rubbed; it is said to relieve the skin irritation much more than sponging.* Dr. E. Smith also advises, if the sore throat is severe, to put a hot linseed poultice to it, and to make the patient suck bits of ice. He has seen much benefit from this.

The special dangers connected with scarlatina are from the *throat* and *kidneys.* Ulceration of the throat is always to be feared. *Any chill* may bring on dropsy, Bright's disease, or other kidney trouble. *Mothers should always remember this danger, which may follow even the mildest form of scarlatina.* The rule of all experienced doctors is that no scarlet fever patients, no matter how slight the case is, must get up for three weeks. Bed is the only safe place. If there is any puffiness of the eyes, ankles, or any part of the skin, kidney mischief is *surely* going on; and while such symptoms last, the patients must on no account leave their beds.

The skin peels off in fine flakes after scarlatina. In no disease is LIFEBUOY SOAP more important. As soon as the doctor allows a bath, the patient should be freely lathered with LIFEBUOY SOAP and hot water. It does the skin good, and it disinfects the particles of skin that peel off, these swarm with germs of the disease; but LIFEBUOY SOAP will render them harmless.

Diphtheria is a throat disease, in which the symptoms are shooting pains in the throat; feverishness, varying according to the case, in bad cases, delirium; and the formation of white membrane or skin in the throat. Sometimes, in severe cases, a complete cast of the throat in white skin has come away. This begins with white spots on the palate and throat, first clear, then milky white; these spread in patches even into the nose, the membranes sometimes even protruding from the nostrils; this is, of course, only in very bad cases.

---

*—Some doctors maintain that this method clogs the pores and renders kidney complications more probable. It should *never* be tried unless the doctor who is attending approves.

The special dangers in diphtheria are from *suffocation* from the formation of this false skin, and from exhaustion from not taking enough nourishment. The treatment must be *constant*, *skilful*, and *careful*. Experienced nursing, open windows night and day, and frequent nourishment are the only chances for life in bad diphtheria. The nurse must constantly clear away the skin and secretions that form in the throat, these are highly infectious; she should wear a respirator (special kinds are made for this) while doing this work, and frequently gargle her throat with chlorate of potash and water, and disinfect her hands with plenty of LIFEBUOY SOAP; a constant supply of fresh air from the open window is one of the best chances of life for the patient.

Measles.—The time that measles may take to appear, after the reception of infection, varies from ten to fourteen days. The symptoms are those of a common cold at first, with drowsiness, headache, feverishness, and cough, there *may* be bleeding of the nose. The rash appears about the fourth day, generally it appears on the face and forehead first, reddish-coloured spots resembling a raspberry, and raised from the skin. They run into blotches, mostly of a crescent shape, between these the natural colour of the skin remains. The face becomes swollen, sometimes very much so, and there is fever and delirium. The rash may begin to vanish in 24 hours, sometimes not for 48 hours or more. Diarrhœa, vomiting, convulsions, sore throat, inflammation of the eyes, windpipe, or lungs, deafness, and discharge from the ears, may all be complications of measles. *The special danger* is inflammation of the lungs, or bronchitis. Chills, or getting up too soon, may prove fatal in measles, which should never be looked on as an insignificant disease. It is not dangerous (except to scrofulous or consumptive children) if treated with care, and the patient is kept in bed till really convalescent. A mild case is generally well in a fortnight.

Typhoid Fever (enteric fever, *i.e.*, relating to the intestines), is caused chiefly by drinking impure water or milk, *or breathing air from drains.* It is sometimes called *Drain Fever, or Foul Air Fever.* It is not infectious as small pox or scarlet fever, *but the discharges from the bowels are very* infectious indeed. Anyone nursing typhoid fever, if not very careful to disinfect her hands, and any of her clothing (apron for instance) that is even specked with any evacuation

from the patient, will be very likely to catch the disease. She should also carefully avoid breathing in the effluvia from the patient's evacuations, and should hold her breath while emptying bed-pans, etc. It is most important to disinfect the contents of the bed-pan (no utensil but a bed-pan should be used in typhoid fever, as the patient *must not* sit up) before emptying them down the drain. Four ounces of chloride of lime *of the best quality*, dissolved in a gallon of water, should stand in the sick room. A pint of this should be poured into bed-pans after use (or over vomited matter), taken to w. c., and allowed to stand for ten minutes. It may then be emptied down the drain, and the pan washed out with LIFEBUOY SOAP. If this is not done, the infection will probably spread *through the drains* in the neighbourhood.

LIFEBUOY SOAP will disinfect the hands and clothing, and should be frequently and thoroughly used.

Symptoms: severe headache, diarrhœa, feverishness, the diarrhœa becomes like pea soup. The disease takes two or three weeks to develop from the reception of infection; after a week or ten days a rash may usually be detected on the abdomen, small rose-coloured spots, which disappear on pressure but reappear, and come out in crops successively.

The chief danger is perforation and ulceration of the bowel. There is no disease in which disobedience to the doctor with regard to food may so quickly be fatal. Typhoid fever wants careful, experienced, nursing. Relapses occur easily, and the illness may last months instead of weeks if great care is not taken. The usual course in uncomplicated cases is three weeks.

Typhus Fever is caused by overcrowding, want of ventilation, dirt, and starvation. It develops from seven to fourteen days after exposure to infection.

The symptoms.—It usually sets in with shivering, headache, and drowsiness. There is hot dry skin, and the patient sinks into a stupor. Towards the end of a week a small, dull, mottled red rash is seen, chiefly on the back and arms. The lips and tongue are dry, and covered with brown crusts. These should be cleaned off with cut lemon, and vaseline applied to the cracks. The patient will, if left to himself, lie continuously on the back, he should be occasionally moved to the side. There is generally great delirium, in which patients require careful watching or they may do serious mischief.

Special dangers.—Suppression of urine: this must be watched for, and immediately reported to the doctor. Collapse of strength may occur quickly if nourishment is not persistently given, and the heat of the body kept up at night, particularly during the close of the illness. The crisis is reached about the fourteenth day; death before the twentieth day if a turn for the better does not come. Relapses are rare.

Whooping Cough begins like a common cold, followed by feverishness, loss of appetite, languor, and cough, this may continue for some time before the "whoop" is heard; it is when the spasmodic stage of the cough is reached that the cough comes on in paroxysms, and the peculiar sound that gives its name to the disease is heard. The disease may be from two to seven or even fourteen days developing. *The special dangers* are inflammation of the lungs and bronchitis. The deaths from whooping cough last year were *more* than those from measles and scarlatina both together! This is simply because the disease is so ignorantly treated. People should know that children with whooping cough *should not* be allowed out in cold damp weather, when east winds are blowing, and when the cough comes on in paroxysms. They should remain indoors, in well-ventilated rooms, out of draughts. The diet should be light and nourishing; potatoes, farinaceous food, and sweets should be sparingly given; milk, eggs, broth, and fish are best; and a mustard poultice should be applied for a few minutes to the spine at night. All mucous or other matter vomited up should be received in a basin containing a lather of LIFEBUOY SOAP and water. All handkerchiefs, etc., should be washed in it, unless bits of rag are used and afterwards burnt, which is much the best plan in all infectious illnesses.

Ophthalmia.—There are two kinds of this disease: one from cold, which is easily cured by washing with rosewater, and alum or borax; the other is an *extremely* contagious disease, by which the eye-ball may be soon entirely destroyed if the greatest care be not taken in following the physician's instructions. *The symptoms* are yellowish white discharge from the eyes, then the lids puff up and swell so much that the eye cannot be opened, and from between the lids a creamy yellow, pink, or greenish discharge oozes. This is *purulent ophthalmia*, the discharge is *corrosive*, and if immediate

and vigorous treatment from a doctor is not at once applied, and *never allowed* to flag till recovery sets in, the *eye-ball* will assuredly be destroyed. Doctors, nurses, laundresses, have lost their eyes from handling linen or other things soiled with the discharge from purulent ophthalmia, and from neglecting to disinfect their hands when attending cases. They should, directly after attending any such case, thoroughly disinfect their hands with a free use of LIFEBUOY SOAP, and everything used by the patient, if not burnt, should be scoured with it.

Care during Illness and Convalescence.

During illness, the nurse cannot too faithfully carry out the doctor's instructions. He may not have time to explain why he orders things, but he has a reason for them, and his directions should be obeyed. Remember that in serious illness, care *at night* is of as much, if not of more, importance than in the day. Never *deceive* the doctor, he cannot be blamed for failing to cure if he is not told the truth about his patient. Never put off sending for the doctor in a serious case. Many illnesses could be cured if treated *in time*. *Convalescence* is a critical time, because relapses, *i.e.*, getting ill again after partial recovery, are always *possible*, and recovery after relapse is always slower than before, the patient has so little strength to fall back upon. Relapses are generally brought about by disobedience to the doctor's orders, or by getting up and going out too soon, or eating something forbidden. After serious illness it is very important *to wear woollen underclothing* next the skin*. Change of air is also very valuable, *if* the weather is fine, if too long or fatiguing a journey need not be taken, and if the patient can go to a healthy, comfortable house. In railway journeys a seat *with the back* to the engine is always the least draughty. Cod liver oil is very necessary for delicate people convalescent from illness.

---

*—LIFEBUOY SOAP is very useful for washing flannels. The soap should *never* be rubbed on woollens or flannels, but shred finely, made into a lather with boiling water, and then woollens well sluiced in it till clean, and then rinsed in plenty of warm water.

CHAPTER V.

Cholera.—How to prevent it.

Symptoms of Cholera, and how to treat them before the Doctor comes.

"COURAGE AND CLEANLINESS."

This is the motto with which to face a threatened invasion of the dreaded disease known as Asiatic cholera. Originating, as it does, in countries where a man's social standing, wealth and importance, is estimated by the size of the filth heap outside his door, this disease follows in the track of filth, and is truly called a "*Filth Disease.*"

Panic and terror predispose to cholera.

The means that everyone should use to prevent it are as follows. See that the drainage of your house is in good order, that there are no bad smells from ash-pits, dust-bins, refuse heaps. These should all be cleared away as often as possible, and frequently sprinkled with chloride of lime.

Have the *inside* of the house, the clothing, and the body, kept clean and free from infection by a plentiful use of LIFEBUOY SOAP. This will purify the skin, as well as all sinks, slop pails, chamber utensils, and so on, which should, in cholera epidemics particularly, be kept as sweet and clean as the china ornaments in the drawing-room.

"*A foul smell is nature's warning.*" A grave warning in times of epidemics. Foul smells can be destroyed (not merely *disguised*, which leaves the danger worse than before, because unsuspected) by LIFEBUOY SOAP. Traps of drains should be always covered with water, and all drains flushed *every* day.

Eating and drinking must be carefully attended to. *No* unripe, or uncooked fruit, or vegetables, should be eaten during a cholera epidemic. *No fish, no pork.* Experience of many years has taught the importance of this. Thoroughly cooked, plain, wholesome food should be taken, long fasts avoided. Milk and water, no matter where they come from, should, in a cholera epidemic, always be *well* boiled. Boiled water when cold should be quickly poured from one jug to another, this restores some air to it, and takes off the flat insipid taste.*

A flannel belt should be worn round the abdomen next the skin, *this is very important.* If possible, flannel underclothing should be worn. Avoid going into crowds, *this is important;* also exposure to cold when leaving hot rooms; and, of all things, intemperance.

Intemperate people run a bad chance in cholera times. It is next to impossible to stimulate them, and then they are deprived of an important resource.

Whenever there is cholera about, people should use purgative medicines cautiously, and should treat the slightest diarrhœa most promptly by going to bed, and taking a cup of boiled arrowroot with a little brandy in it, or twenty drops of laudanum† in a tablespoonful of brandy.

Symptoms of Cholera, and how to treat them.

Cholera sometimes begins like an ordinary attack of diarrhœa, this may last a day or two, or only a few hours, but very often it begins quite suddenly, with severe vomiting, and purging, soon followed by great pain in the abdomen, and cramps. The evacuations become watery, and the vomiting is so great that nothing is kept on the stomach. There is dreadful thirst (caused

---

*—It is recommended by sanitary authorities, to flavour the boiled water with a little dilute sulphuric acid, *five to ten drops* of the *diluted, not* the *pure* acid, to a tumbler of water, sweetened with sugar.

†—This should only be given to people over 17. Laudanum is very injurious to very young people. It is death to babies.

by the water drained from the system in the purging and vomiting), agonising cramps, prostration and collapse; if the patient lives through this he may fall into the last stage, when the diarrhœa and vomiting cease, a half-stupor intervenes, a cold sweat covers the skin, and from this stage few ever recover. Only those who know how terrible true Asiatic cholera is, can appreciate the importance of doing all we know to prevent it.

Treatment.—Get the patient to bed and send for the doctor.—Give twenty drops of laudanum. If the patient is under seventeen give *only one drop for every year of age.* Give ice in small pieces, as much as the patient likes. Apply a *large* linseed and mustard poultice as hot as possible over the abdomen. Apply hot bottles or bags, and rub the body with hot flannels. Hot baths are sometimes of great service, but they must be ordered by the doctor. Brandy or whiskey in *moderation* and mixed with soda or seltzer water is also useful. These are remedies that everyone can apply, and they should be applied vigorously till the doctor comes. If there should be no linseed at hand, fomentations (flannels wrung out of boiling water) should be applied as hot as possible.

Infection from Cholera.—Everyone should know that the attendants on cholera patients only run the risk of infection from the discharges of the patient, not from the air of the room. Therefore, what they must guard against is any soiling of their clothing or hands. These cannot but be soiled, therefore they must as soon as possible be disinfected. Nothing should be eaten in the sick room, and before putting the hands near the lips they should be thoroughly scrubbed with hot water and LIFEBUOY SOAP.

Into all utensils which receive the evacuations of cholera patients (bowel or vomit) a pint of chloride of lime solution (four ounces to a gallon of water) should be poured—after ten minutes it may be emptied away, and the utensil well washed with LIFEBUOY SOAP. The operation of this soap on the Cholera Microbes in Dr. Enoch's experiments, was very remarkable, and showed this soap to be in the highest degree a disinfectant. These were taken from Hamburg water, and showed a result as follows: "With the two per cent. mixture, Cholera Microbes were dead within fifteen minutes; with the five per cent., same were dead within five minutes."

CHAPTER VI.

Our Duty to Our Neighbour.

Infection, and how to keep it from Spreading.

There is no duty that ought to be thought more serious than the duty we all owe to each other of preventing any infection we may have among us from spreading to others. It is a sacred duty which nations, families, and individuals owe to each other. To take infection *knowingly* among others is *moral murder.* Everyone should recognise the truth of this.

The Vestries in every parish are *bound* to disinfect bedding and rooms after every infectious illness, and we have pointed out the value of LIFEBUOY SOAP in preserving from infection, but there are still some other precautions which every one ought to take, but which many wilfully neglect. These are the chief:—

1. Don't send children to school from a house where any infectious disease exists.

2. Don't go to church, meetings, inside omnibuses, or crowded shops, or anywhere of like nature when you are nursing infectious illness.

3. Don't send toys used by children suffering from ANY infectious illness to other children—they should always *be burnt.*

4. Don't send linen used in infectious illness, or in ophthalmia, to laundresses unless first soaked in a lather of LIFEBUOY SOAP—and then boiled. Laundresses have lost their eyesight from ophthalmia caught in this way.

5. Don't write letters from infectious rooms.

6. Don't have books from the circulating library taken into infectious rooms. This is a cruel way of spreading infection.

7. Don't let dogs or cats into rooms where infectious illness is. They may convey the infection in their fur to other houses. If they have got into the room unnoticed they should be scrubbed with LIFEBUOY SOAP before going about the house.

8. Remember that we may infect a whole neighbourhood if we don't *disinfect* (as directed at page 89) all the evacuations of the sick *before* they are put down the drains.*

* It is now a punishable offence to hide the existence of infectious illness.

CHAPTER VII.

Special Chapter for Women.

Puerperal Fever:

What it is; and how to prevent it.

Puerperal Fever, which many people even still imagine to be some special fever specially attending the lying-in state, is now known to be simply

Blood Poisoning.

This fact has been only fully recognised within the last few years. The same scientific teaching which shewed that what used to be called "Surgical Fever" (*i.e.*, the fever that so often followed surgical operations), was really fever caused by poisonous germs entering the blood through the open wound, also shews that puerperal fever is fever caused by poisonous germs entering the blood at the time of confinement. This has been conclusively proved to be true by the statistics of the Lying-in Hospitals, not only in England, but in America, France, Austria—in fact in all civilised countries. Since rigid precautions have been taken to thoroughly kill any infection which may by any chance lurk upon anything brought near women in their confinement, puerperal fever has been practically banished from lying-in hospitals. Five-and-twenty years ago these hospitals were frequently scourged with outbreaks of this sad disease, which robbed hundreds of husbands of their wives and children of their mothers, every year. Frequently the fever raged so that these special hospitals had to be closed, sometimes for more than a year together—but happily light came at length—and by the simple process of *prevention* no woman need now fear this fever. "Puerperal Fever is a thing of the past" in all properly conducted hospitals, and it should be equally so in the home.

LIFEBUOY SOAP should be in every house in which a confinement is expected. Every washable article got ready for the confinement should be washed with it. The room should be thoroughly scoured out with it. The bedstead *(particularly if it is a wooden one)* should be scrubbed with it, and a good supply of it, with *new* nail brushes, hot water, and clean towels (which have been washed with it) should stand ready on the washstand at the time of the confinement. Both doctor or midwife and nurse should *thoroughly* scrub their hands and nails with plenty of the soap. *Under the finger-nails disease germs may lurk in swarms unseen.* This is a fact never to lose sight of. Therefore no conscientious attendant at a confinement will run the risk of even unwittingly conveying infection to the patient, but will take the precaution, *so easily taken*, of using plenty of LIFEBUOY SOAP on their hands and nails. It is the *duty* of every woman expecting her confinement to provide herself with this safeguard. Through the fortnight following a confinement there is always risk of puerperal fever. The lying-in room cannot be kept too clean, all utensils should be frequently washed out with LIFEBUOY SOAP, which not only will leave them *clean*, but purified from chance of infection. The nurse also should frequently wash her hands and nails with it.

There is one other cause of puerperal fever—this is by bad drainage and foul smells. The drains in a house where a confinement is to take place should be in thoroughly good order, and the air of the house should be kept as fresh and sweet as possible. All sinks, slop pails, etc., should be constantly washed down with a good lather of LIFEBUOY SOAP; rooms, passages, and out-house, near the lying-in room should be all kept sweet and pure by its use. It is easy to use, and is the best friend a woman can have in the house during her confinement.

CHAPTER VIII.

A Word of Warning.

To District Nurses and District Visitors.

All district nurses, district visitors, and philanthropic ladies who work among the poor, are particularly asked to consider the merits of LIFEBUOY SOAP.

There is one very serious danger of spreading infection among poor women in their confinements, and that is by the means of what is known as the Maternity Bag. These bags, containing sheets, night-dresses, etc., and lent out by charitable ladies for the month, are a great boon to the poor—but they may, all unsuspected by any one, on occasions prove quite the reverse, because they *may* very easily convey germs of infection of various kinds from one house to another. The rule is that these bags are to be returned with all they contain, clean, at the end of the lying-in month. Now this is not enough. *Clean-looking* things may still retain the germs of disease. The rule should be that the bags and everything they contain should be thoroughly washed with LIFEBUOY SOAP, and then boiled for half-an-hour. They cannot then possibly convey any infection of any kind to the next woman who uses them. People should be very chary of *lending* things used in confinements or in illness from one to another, and they should never lend them unless they have been washed with LIFEBUOY SOAP and well boiled.

District nurses who are attending cases of erysipelas, or who have to dress sores or ulcers, or any suppurating discharges, or to attend patients convalescent from any infectious disease or ophthalmia, should on *no account* enter the house of a lying-in woman. The services of the district nurses in helping to make the bed, wash the baby, etc., are greatly appreciated by poor women who have no regular nurse in their confinements, but they should

know that they are at this period specially susceptible to infection, and no one who by the remotest possibility could convey it to them should go near them.

District nurses should carry LIFEBUOY SOAP in their bags and use it, scrubbing their hands well with it and *hot* water, *for the sake of their own safety*, whenever they have been attending the sick, dressing wounds or sores, or helping in dirty ill-smelling houses. *Many nurses die from neglecting the thorough cleansing and disinfection of their hands and finger-nails.* LIFEBUOY SOAP possesses great cleansing properties, as well as being a powerful disinfectant. The district nurse should have all the washable parts of her clothing washed with it, and recommend it as a most excellent *Disinfectant Soap* to the people she visits. District visitors will be doing much for the physical well-being of the dwellers in courts and slums by inducing them to use it.

CHAPTER IX.

Sick Diet, and Feeding the Sick.

BEEF TEA.—One pound of gravy beef without fat, bone, or skin, cut up very small, put into a jar with one pint of cold water, stir it up and let it stand for an hour, then put jar in a saucepan of cold water which bring to a boil, and let it boil gently round the jar for an hour or more ; add salt to taste, and strain off the liquor. The *sediment* contains a great deal of the goodness of the beef-tea, and should always be used. The jar may be placed in the oven (a moderately hot one) for the same time, instead of in water, if more convenient. Beef-tea should never *boil*, if it does the *albumen* in the meat is coagulated, and the beef-tea spoiled.

USE OF BEEF TEA.—It is a good stimulant, is quickly absorbed and easily digested, but it is *not* a food. Dr. Milner Fothergill, an

authority on feeding the sick, says, "All the bloodshed caused by the warlike ambition of Napoleon, is as nothing, compared to the myriads of persons who have sunk into their graves from a misplaced confidence in the food value of beef-tea."

This is important to remember. Milk is a complete food, so are eggs—beef-tea is not. Beef-tea, with an egg beaten up in it, or thickened with corn flour, is rendered more nutritious.

OATMEAL GRUEL, if made with milk, contains everything necessary to nourish the body. It is a "complete food." Mix thoroughly two tablespoonfuls of oatmeal in a pint of milk, strain through a coarse strainer into a clean saucepan, stir over the fire or gas stove till it thickens, and boil for ten minutes, taking care it does not burn. Add salt or sugar to taste. It can also be quickly and easily made from patent groats. It can be made in the same way with water, but is much better made with milk.

ARROWROOT.—Put a dessertspoonful of arrowroot into a breakfast cup, add a *little* cold water and blend into a paste, then fill up with *boiling* water or milk, stir until thick; if it does not thicken put into a saucepan and stir for a minute or two over fire; sweeten. A little wine or brandy may be added at discretion.

WHEY.—Whey is a most useful drink in illness, and very easily made by pouring a little vinegar or lemon juice into boiling milk. Very little of the acid will turn the milk into curd—this must be strained, and the curd removed—the clear whey that remains makes an excellent drink.

WINE WHEY.—A pint of boiling milk sweetened to taste, pour into this one or two glasses of marsala or sherry, boil up, and strain off the whey.

POSSET (excellent hot drink for cold).—Boil a pint of milk, stir in two or three spoonfuls of treacle, boil up, and strain off the whey.

COOLING WHEY.—A large teaspoonful of cream of tartar stirred into a pint of boiling milk, sweetened to taste and strained. This whey helps to make the kidneys act.

LINSEED TEA.—Two ounces of linseed boiled in a quart of water till like slightly thick, flavoured with lemon or orange juice and sweetened.

BARLEY WATER.—A teacupful of barley, sugar to taste, a few strips of lemon rind cut thin, and only the *yellow* part used—the white makes it bitter—boil all well until of the desired thickness. It can be made thick or thin according to the time it is boiled. Barley water can be made very quickly by using the patent barley sold in packets.

TO KEEP ICE.—Large lumps keep well if wrapped in a thick flannel, a piece of blanket is best, small pieces can be broken off the lump most easily with a big pin. To keep ice by the bedside, place a piece of loose-textured flannel over the top of a tumbler or bowl, fasten round with an elastic or tape, and put bits of ice in the flannel cup thus made; stand on a saucer.

LIME WATER is *much* more cheaply made than bought. Get from any building yard a bit of slaked lime the size of an egg, put it in a bottle (an empty wine bottle will do), fill up with water, *cork well*, shake it up, then let stand till next day. Pour as much as required off when wanted without shaking the bottle.

Solid Food for Invalids.

This should always be of the most digestible kind. Fish, chicken, rabbits, tripe, trotters, and game, are all much more digestible than butcher's meat. Mutton, lamb, or tender well-kept beef, are the best meats for delicate people. Pork and veal should *never* be given to convalescents. Fried meat is very much more indigestible than meat which is boiled, roasted, steamed, or broiled over the fire, or toasted in front of it. *Fried* meat or fish should not be given to sick people. Fish for the invalid should be boiled, or steamed, which is even better. Eggs should be lightly cooked, or if given raw should be *thoroughly* whisked. Meat warmed up the day after cooking is not fit for sick people, whose food should always be freshly cooked. Hashes and stews should never be given in the sick room.†

† The study of a good cookery book, and some practice in cooking, should never be neglected by the sick nurse.

CHAPTER X.

Useful Hints for Families.

Lifebuoy Soap Indoors.

In the cellar, larder, pantry, scullery, and sinks, LIFEBUOY SOAP has an important work to do. If the cellar is musty and dirty, food kept in it will soon go bad. If the larder swarms with flies, or if it smells badly, the meat kept in it will soon become uneatable, the milk will turn sour or putrid, fish will become tainted, in fact, without a pure, sweet larder, good food will turn to *poison*. Any larder can be kept pure and sweet (provided a drain does not leak into it) by opening the windows and washing shelves, cupboards, etc. with LIFEBUOY SOAP. The pantry should be treated in the same way. The scullery and sinks also. If they are dirty, or smell badly, the air of the whole house is sure to suffer. Professor Billroth points out how cooks may get blood poisoning from a cut with a knife that has been used on game or meat that is going bad. Knives used for such purposes should immediately be soaked in LIFEBUOY SOAP and water, also the hands that have handled such meat. This is important advice for *cooks* and *butchers* to remember. If by accident the hand should be cut by a dirty knife, the wound should be well sucked to remove the poison as quickly as possible.

In the dining-room and drawing-rooms, study, boudoir, and library, LIFEBUOY SOAP should be used in periodical cleaning. It will thoroughly cleanse and purify the floors when carpets are taken up. Will sweeten sideboard cupboards, and cheffoniers, where eatables are often kept. Will cleanse and purify wood-work, will sweeten the smoking-room, purify bath rooms and lavatories, prevent the housemaid's closet and sinks from smelling unpleasantly.

In the bedrooms. All chamber utensils should be daily washed with LIFEBUOY SOAP. The floors scrubbed with it periodically; and blankets and bedsteads washed with it at all spring cleanings.

Fleas, bugs, and all such pests can be got rid of by using LIFEBUOY SOAP for washing bed furniture.

People who suffer from perspiring feet should wash them once a day, or twice in very hot weather, in LIFEBUOY SOAP and hot water. For the bath, its occasional use will be found most purifying to the skin, particularly after exercise.

In the nursery. If children (or grown people either) are so unfortunate as to become infected with parasites (lice) in the hair, they should adopt the following treatment—first soak the head and hair well in strong vinegar and water, this will loosen from off the hairs all the eggs (nits) of these loathsome pests. Then scour the head well with LIFEBUOY SOAP and *hot* water, using plenty of the soap, rubbing it *thoroughly* into the skin of the head, and keeping the eyes shut. For the disagreeable skin disease known as *Itch*, a hot bath should be taken at night, using free lathering of LIFEBUOY SOAP, and after that, when the skin is softened with the soap and water, sulphur ointment should be rubbed into the affected parts, which are principally between the fingers and toes, and the crevices of the joints.

Lifebuoy Soap in Public.

LIFEBOUY SOAP as a cleanser, purifier, and reliable disinfectant, simple in use, and pleasant in operation, should be used in—

1.—Board Schools.

2.—Hospitals.

3.—Workhouses.

4.—Infirmaries.

5.—Dispensaries—particularly in the waiting-rooms where sick folk, often not the cleanest, congregate together.

6.—Lavatories and waiting-rooms of railway stations.

7.—Cabins of ships.—Lavatories of same.

8.—In rooms used for mothers' meetings, and all such charitable purposes.

9.—In soup kitchens, clubs, etc.

10.—Public conveyances, omnibuses, railway carriages; cabs should also be frequently and thoroughly scoured with LIFEBUOY SOAP—for the safety and comfort of *the public.*