

Farewell to Miss Brown, A.R.R.C.

On Friday evening, September 26, at the Otago Women's Club, Mrs. Arthur Barnett gave an enjoyable "kitchen evening" for Miss Brown, Lady Superintendent of the Dunedin Hospital, who is shortly to be married. The room was arranged with yellow primroses and daffodils, and looked very pretty. Mrs. Barnett, after introducing Miss Brown, who had been presented by Mrs. Barnett with a posy of violas and roses, called upon Mrs. M. Macdonald to speak. Mrs. Macdonald in a few words sketched Miss Brown's career as matron of the Dunedin Hospital, showing how successful she had been and how much her departure would be regretted. In conclusion she thanked Mrs. Barnett for giving Miss Brown's friends such a

splendid opportunity of saying farewell to her. Miss Brown suitably replied, thanking Mrs. Barnett for the very enjoyable evening. Two large basketsful of parcels testified to the popularity which Miss Brown holds amongst her numerous friends. Songs were rendered by Mrs. F. Wilson, and two competitions were played. Among the many guests present were the matrons, sisters and several nurses from the different hospitals in Dunedin, also some of the lady doctors and a good many of the doctors' wives. After supper three cheers were given for Miss Brown, and the singing of "For She's a Jolly Good Fellow" and Auld Lang Syne brought a very happy evening to a close.

Osteomalacia

(By E. Annie Rossiter, Tai Yuan Fu, Shansi, China.)

Our hospital is in a district where Osteomalacia is found in a large number of women. The Chinese call it "Yao tui teng," because it is characterised by pains in back and legs. There is also deformity of the bones, which is particularly brought to our notice in midwifery work because of the pelvic contraction. This contraction progresses rapidly, sometimes to such a degree, in one or two years, as to make anything but a Cæsarean Section impossible, and this in spite of the fact that the previous labour was normal. Some of the patients suffer severe pain, while others, although perhaps equally deformed, suffer far less.

In our experience, Osteomalacia is not a disease confined to one class: all classes get it. Many rich people, however, live as though they were poor, and it is difficult to find out exactly under what conditions some of them do live. One thing is certain, that in this district the women spend most of their time sitting on "kangs" (brick beds) and get very little fresh air and sunshine. We once had a single woman suffering from Osteomala-

cia in the hospital. She was well over forty and was terribly deformed, and suffered severe pain. She is the only case we have had in an unmarried woman, although some patients give histories of having had pains in back and legs before marriage. We even heard of a man in our men's hospital having the disease. Our work, however, is among women, and we can only speak of them.

We have patients from various places in Shansi, but by far the greater number come from Yu Tsi, a place about twenty miles (60 li) from this city. The fact of a midwifery patient with pains in back and legs coming from that district seems to help considerably with the diagnosis! Many are the women who have come from there far too late for any human being to help them, and we imagine that surgeons at home would strongly object to performing abdominal operations on many of them, for in some cases they have been three or even more days in labour, and have probably been examined by several native midwives and others, whose hands, to say the very least, are not surgically