Notes on a Lecture given at the Refresher Course

I have been asked to speak to-night on the manner in which the V.D. Clinic is conducted at the Christchurch Hospital.

The V.D. Department for Women is conducted in the Out-Patient Depart-

ment of the Hospital.

In all, there are five clinics weekly. Monday, Wednesday and Friday evenings, at which treatment for gonorrhœa is given, consisting of douching with Ac. Lactic, and plugging in some cases with ichthyol and glycerine. Tuesday evening new cases are examined. Diathermy treatment and special treatment by the Medical Officer is given, as well as injections for syphilitic patients. Friday afternoon is set aside for married women and children—children with vulvo vaginitis and congenital syphilis.

There are various types of patients.

First, the unfortunate married women infected by their husbands. Fortunately

they are not numerous.

Secondly, the office and servant girl class. These comprise the majority of the patients. They are not immoral, but are really unmoral. They do not realise the gravity of their condition, or how they abuse their bodies, and often require a lot of care in handling to induce them to attend.

Thirdly, the depraved type—really bad girls who attend spasmodically, and often under coercion, and who lead an immoral life, despite their condition. They have frequent changes of address and are difficult to get hold of. This is the class who are mostly notified.

Notification, as you know, is only done when patients do not attend for treatment to the satisfaction of the medical

officer.

Fourthly, the professional prostitute class. The number is not a high one, and

is represented as a rule by elderly women who are thoroughly depraved and often very alcoholic.

Classes two and three may be described as the amateur prostitutes.

The average attendance for:—

V.D.G. 270 per month V.D.S. 80 ,, ,,
New cases average 12 ,, ,,

New cases come under our care as follows:—

Firstly—Some patients come of their own accord, being worried over the appearance of a discharge and vulval irritation.

Secondly—Some are sent along by some girl friend or ex-patient, to whom they have explained their condition.

Thirdly—Some are sent along by the young man who has contracted the dis-

ease from them.

Fourthly—Occasionally some are reported from the Health Department.

The work is most interesting. Each patient has to be studied individually and treated accordingly. We do not condemn them nor do we condole with them, but aim to raise their mental outlook to such a level that they may regain their self-respect.

I appeal to the trained nurses to help always in this work for the sake of the health of the young women who are to be the future mothers of our country.

Every opportunity should be taken to teach the young people their responsibilities from the point of view of the sacredness of their bodies and the responsibility that they hold in trust for the unborn child.

In order to gain our objective we must work in unison and harmony in this branch of the Public Health work.

A memorial church to Edith Cavell is to be built in Jasper Park, in the heart of the Canadian Rockies. It will stand on the shore of Lake Beauvert, facing the snow-capped mountain which bears her name, and in design will follow Norwich Cathedral, where the nurse worshipped as a child, and in whose shadow she is buried. The proposal to build the church has grown out of the custom of holding annual memorial services on August 4th at the base of Mount Edith Cavell.—(From the "London Times.")