## AN ADDRESS TO EX-STAFF TORONTO GENERAL HOSPITAL.

By Alexander Taylor, M.D., Goderich.

Gentlemen,—At the last meeting of this association I thoughtlessly promised to read a paper on the treatment that was usually followed when I was on the house staff of the Toronto General Hospital. The house staff at that time consisted of Dr. Hampton, the medical superintendent, four nurses and myself. I am not so sure about the number of day nurses, but there was only one night nurse, poor old Eliza, a faithful old nurse who tried to do her best with the training she had received previous to her entrance into the hospital. nurses were all young women, many of them from the country, without any special training, and probably never saw a hospital before they entered it. At that time if a patient had pneumonia, pleurisy, bronchitis, or even typhoid fever, if the bowels were very much distended, he was poulticed with linseed meal as hot as our hand could bear. It made no difference how high the temperature was; in fact, the higher the temperature the hotter the poultice should be if it were possible to do so. At that time the professional qualifications of a nurse depended greatly on her ability to make and apply a poultice. Many of the physicians would not allow us to put any cheesecloth on it, thinking that the poultice, when applied to the skin, would "draw out the disease." I have seen patients with pneumonia, when the respirations were 45, and with a temperature of 104 or 105, raised up in a sitting posture to enable the nurse to properly apply the poultice, and, what was still worse, the weaker the patient got the oftener the poultice had to be ap-If the patient survived this treatment for five or six days, the next thing we had to do was to sponge the patient with soap and water, and then apply a fly blister. After the blister was on from six to eight hours it was removed. A poultice As soon as the part healed another blister was again applied. was applied. On the other hand, if the patient lingered on for a long time, and did not respond to this treatment, I would have to introduce a seton and have to turn it around daily, to the great discomfort of the patient, for weeks. The physicians

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