have a fascination for all and for children more especially. Most of the stories they know are learned from pictures; and every picture affords some subject for their calculations. The pictures on the walls are often the most vivid form of their childish imaginings, and give color to the pictures they themselves create. The designs and repeats are so many parts in their chain of calculation, and the more intricate, so much the more interesting are they to them.

Children live much in a world of "make believe," and the more interesting the pictures on the walls, the gayer will be the people in their world, and the easier will be their childish calculations.

NURSING IN MISSION STATIONS

NOTES FROM SEVERANCE HOSPITAL, SEOUL, KOREA.

BY ESTHER L. SHIELDS

Sunday, October 20, 1907.

A five-year-old Korean boy was brought in to-day his father saying, "Please give him his life." The child and his eight-year-old brother had been playing with a sickle yesterday, and in their play, this child was slashed in the abdomen, so that the intestine protruded. The little patient was brought twelve miles this morning, still in his much-soiled clothes, and with a dressing of dirty cotton wrapped around the wounded abdomen. His pulse was very weak, and an active peritonitis had already set in, but Dr. Hirst and Dr. Ludlow went to work to do what they could. To our sorrow, the little fellow died—even before the operation was finished, and it was pathetic indeed to see the father start away, with the small son covered and tied on his back, just as though he were sleeping. The child's mother died a couple of years ago, and the man had not heard of Christianity—so this opportunity was used to tell him something about it, and urge him to read the New Testament and to inquire of Christians near his home that he might thoroughly understand. The Korean nurse said to the father that when he got back home, he should not whip the other child for his unintentional carelessness, for he would be terribly punished by the result of the accident, without adding anything else.

Two maternity cases have been sent to their homes within the last twenty-four hours. One was a Japanese woman with a tiny daughter. The other was a young woman who has been one of the German Hospital Medical School students—(doing nursing during the first years of

her study) and she came in a serious condition because of albuminuria, but after some days of rest and restricted diet,—steam baths and proper medication, her little son was born, no dangerous symptoms accompanied the labor and both mother and babe progressed nicely.

Yesterday a young woman was brought in to the dispensary, pale and sick looking, with the information that for two weeks she had been unable to void urine, except it were forcibly pressed out in *very* small quantities; four months pregnant; lower abdomen much swollen, and the day before the patient was brought here the “chiin” (a long needle used by the Korean doctor) had been deeply put into the abdomen to relieve the case. Relief had not been secured, but a catheter allowed the escape of over one hundred and twenty-eight ounces of urine and the patient was once more in comparative comfort. The Korean medical student, a senior, and one of the Korean pupil nurses attended to the case in the brief absence of the American doctor. We are to have a further report to-day, or to see the woman again in the dispensary.

A woman came in almost a week ago for operation upon umbilical hernia.

November 13th. She was operated upon eight days ago. To-day the stitches were removed, and the patient is very comfortable. She had chills and fever and intestinal worms when she came in, and was treated with calomel, santonin and quinine—before the operation could be done. She had a troublesome little cough for a few days after the operation. The doctor was not quite sure whether a slight bronchitis had been caused by the anæsthetic, or by a change in the weather. We very rarely have patients suffer from nausea and vomiting after anæsthetics, if they have gone through the usual preliminary treatment; and santonin is usually considered a necessary preliminary these days here, especially in abdominal cases.

Whether the raw turnips and coarse cabbage, which are “put down” for the winter in large earthen jars, with salt and water, and eaten with the rice, is the cause of so many intestinal parasites, or whether most of them are taken in water and other uncooked food, I do not know. But it is evident that most people here need to occasionally use a vermifuge.

One of the most desperate remedies I have heard of has been the treatment by Korean women of others suffering from prolapse of the uterus. My attention was drawn to the fact, eight years ago when a patient suffering from a complete prolapse was brought to our dispensary. She said that she had used the native treatment without success. The parts protruding had been wrapped in rags soaked in

oil, and while the patient was held down by others, the cloths were set on fire, and burned. Later, I learned that the principle was to burn the tissues enough so that when the uterus was pushed back into place, and the patient kept for a week in a recumbent position, there would be adhesions which, it was hoped, would keep the organ in place.

This treatment was vividly recalled, when, up in our northern station, the doctor was called to see a woman in labor who had been so cared for, and the cervix was so cicatrized and contracted that scissors and knife had to be used to allow the birth of the child.

Later, another case of the same kind, but with cervix less injured, was brought to the missionaries, and as the doctor was away, another nurse and I had to take care of the patient, but the birth was really normal.

The woman who had tried to help the sufferers decided that for women who might possibly become pregnant, she must never interfere, and since the advent of the Western physician she would entirely discontinue her practice. But do you blame either her or the patients? I do not, for the latter were perfectly miserable, and life was such a burden that they submitted to anything which gave the least hope of relief. The hospitals which are now in Korea, and the wide-spread knowledge of them,—even to little country villages, bring many patients of many kinds to a place where more modern methods are applied.

CREMATION.—*The Journal of the American Medical Association* quotes from the *British Medical Journal* as follows: Riley considers the subject of cremation historically, legally, hygienically, medicolegally, and from the theological standpoint, and concludes that there is economy, safety and security in it, no offense to the living, nothing out of conformity with the solemn reverence due to the majesty of death, no violation of divine law. While it does upset old ideas, traditions and thoughts, it must inevitably prevail in the end.