

NOTES ON THE NURSING OF PHTHISICAL CASES.

IN no illness, I believe, is more real and tender Nursing required than in a case of Advanced Phthisis. I have heard it called the "death of the elect," and heard people say, if they could have their choice, death from consumption is what they would choose—"it is so quiet and gradual." But these people are, for the most part, entirely ignorant of the disease, and have formed their opinions from seeing patients taken out in bath-chairs day after day, looking most interesting, seemingly having only a cough, and getting thinner and weaker by degrees.

But how different it is in reality! The months, sometimes years, of suffering, not the less real, because it be not so acute as in other diseases. The terrible exhaustion, the constant fits of prostration, taking the patient to the very brink of death, only to bring her back to experience the same suffering over and over again. They do not see the profuse perspirations after hours of fever, which so weaken the patient that, when at last the action of the skin relieves her of her fiery trial, she is scarcely able to lift her handkerchief to dry her streaming face. They do not see the weary form turn from side to side, unable to breathe with comfort on whichever side she lies; yet her back is so thin, that she would rather lie nearly suffocated, than bear the pain of pressure on the tender skin over the almost protruding bones—for, do what she will, a Nurse cannot prevent the tenderness, but it is a disgrace to her to allow a sore to form. If these people saw more of this dread disease, they would pray that their last illness might be anything rather than the so-called "death of the elect."

Having had some experience of Phthisical cases, I feel only too glad to have been asked to put down on paper any hints that may prove helpful to the younger and less experienced members of our profession. My first piece of advice would be, never think it a trouble to do anything for your patient, night or day—perhaps night *and* day; let her find you the same—kind, thoughtful, quiet, gentle, bright, and willing to indulge her smallest whim. Bear in mind that your patient depends chiefly upon you to smooth, and lessen the pain of, her dying days; therefore, no matter what it be she asks you to do, do it—always provided, of course, that it be not against the Doctor's orders. As a rule, Phthisical patients are most amenable; and if they like their Nurse, and find she is willing to do anything she ought for them, a word of dissent on her part will be quite sufficient to prevent them worrying for what they ought not to do, or have.

If possible, let there be two beds in your patient's room—one for night, the other for day. Always try to obtain a water mattress for the night bed, as you never know when a change for the worse may come. The fatigue of watching the movements of those filling the bed is great, and excites the patient, making her think she is worse; whereas, if you can manage to fill it one day when she is bright and sitting up—just because you "think she will lie more comfortably"—it will be ready when really needed. Always make your bed with a draw-sheet, and have a mackintosh at hand to put on if necessary. With a water-bed, it is, of course, not needed. Let the clothing be warm and very light; when the clothes are a burden, a body-cradle to support them is advisable, but be sure to tuck well in all round, and cover your patient with a warm shawl or blanket. Some prefer to rest in an easy chair during part of the day: always allow this if possible; the relief to the back is so great. Phthisical patients ought always to be clothed in woollen garments. The reason is easily seen, as wool absorbs the moisture of the constant perspiration, and continues to feel warm, whereas damp linen or cotton strikes chill at once. Dr. Jaeger's woollen night-gowns I have found most convenient, for they may be obtained double-breasted, with a fastening on each shoulder, by the undoing of which you can easily get to the chest to rub, blister, or poultice, as the case requires. Give as many clean clothes and sheets as your patient's means will allow; at any rate, you can have two night-gowns going—one for night, and the other for day. Let the unused one hang and sweeten *out* of the patient's room, until it be needed; it should never be folded up, but be careful that it does not get damp. If there is an inclination to a bed sore, a piece of linen—or, better still, white satin—smoothly tacked inside the gown, so that the sacrum shall rest upon it, is very comforting, as damp wool is apt to act as a poultice to any inflamed part. This is a troublesome thing to do, as it requires to be quite flat, with no rucks or hard places; be careful not to knot your cotton.

Wash your patient all over every day; but remember, where there is great debility, exertion increases the weakness, so always give a little nourishment or stimulant about ten minutes beforehand. Never wash her while perspiring, but you may with benefit do so if she be feverish. Let her take her time to move; never hurry. If you see her very exhausted, let her rest and recover a little before you proceed, as it is not necessary that everything should be done at once. The lower part of the body may be washed in the evening; the back, whether inflamed or not,

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