

ing two of the most frequent; from the former two evils, only too likely to happen, are to be feared, hæmorrhage from rupture of a vein, mostly in the leg, or ulcer from abrasion of the coats of the vein, which, as most Nurses know, leads to ulceration of the most intractable character.

You may ask, Why does not every lying-in woman have a "white leg" if the liability to it is so extreme? For the reason that, as a powder magazine cannot explode without a spark, a parturient woman cannot have phlegmasia without a *poison*; and you can recognise the importance of those antiseptic measures I brought before your notice in former papers. It has been thought that phlegmasia follows more often after puerperal hæmorrhage than anything else. Speaking merely from my own experience, I have found it occur most frequently and *severely* after difficult labours requiring instrumental aid, and am of opinion that lesions to the utero-genital tract, by favouring the admission of poison into the blood, are factors in the disease not to be overlooked.

I have dwelt somewhat fully upon this singular and interesting complication of convalescence from parturition, and to some of my readers it may appear "quite ridiculous" for Nurses to have *anything* explained to them. To which I reply that nothing can be more "ridiculous," more *mischievous*, more degrading to the Nursing art than ignorance; and I earnestly commend to my younger sister workers in our portion of work a strengthful, intelligent *study* of it. Knowledge not only adds immensely to the value of experience, but it gives dignity of mind, elevation of thought, and consummate feeling to every woman engaged in the Nursing art. One of the *first* requirements of our day is that Nurses should receive not only technical, but clinical instruction as well, during their Hospital course. To talk about raising the Nursing art, and even go to the length of spelling it with capital letters as a *profession*, and not raise the Nurse from the slough of ignorance, is so past my powers of comprehension I cannot explain it, and, therefore, leave to younger and clearer heads than mine to think it out for themselves. My readers must excuse this little digression, for I think they will find it contains matter not altogether unworthy of their attention. In my next paper we will set to work and enter upon duties of an important character.

(To be continued.)

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NOTES ON LECTURES GIVEN BY THE MEDICAL OFFICERS OF WITHINGTON HOSPITAL.

TAKEN BY MISS MARY JOHNSON, M.B.N.A.

(Continued from page 186.)

LECTURE III.

BY DR. ORCHARD.

CIRCULATION OF THE BLOOD.—The *heart* is the main agent in *circulating* the blood throughout the whole body, by means of blood vessels, which are divided into three distinct classes—namely, *arteries*, *veins*, and *capillaries*. The heart compared to a tree will form an idea of the circulation of the blood.

ARTERIES.—From the trunk of a tree branches are projected, so the heart. From the heart the arteries may be compared to branches, for they carry the blood over the whole body, the blood being pure and of a bright red colour.

CAPILLARIES.—The capillaries differ from the arteries only in size, and the simple structure of their walls. The blood is sent all over the body by means of various large branches, which, after dividing again and again, become so small as to form capillaries.

Veins are vessels which contain the venous blood; the blood in the veins passes through the various tissues and organs of the body, returning back to the right side of heart, not, however, to remain there, but forced by the contractions of the heart into another set of vessels, which convey it to the lungs, where it is purified, after which it is returned to the heart.

The right side of the heart is the venous blood, and the left the pure arterial blood. The whole process of the circulation of the blood, throughout the whole body, from when it leaves the heart and becomes purified in the lungs, occupies about forty-five seconds.

The heart beats normally seventy-three times a minute.

HÆMORRHAGE.—It is most dangerous to leave a patient who commences with hæmorrhage; the hæmorrhage should be made, without delay if possible, to cease.

ARTERIES.—If an artery is wounded it flows in jets of a bright red colour; if the finger be pressed firmly over the artery, or by tying a handkerchief with a piece of wood or stone to cause pressure over the artery, the hæmorrhage can be arrested until the arrival of the surgeon.

If the *artery* is wounded in the leg, a handkerchief should be placed over the limb to form a bandage. By placing a stick between the hand-

[previous page](#)

[next page](#)