OBSTETRIC NURSING. ----- BY OBSTETRICA, M.R.B.N.A. ---

PART II.—INFANTILE. CHAPTER III.—DUTIES AFTER BIRTH. (Continued from page 64.)

At their completion, this Course of Lectures will be published as one of the Series of "Nursing Record Text Books and Manuals."

A^S an Obstetric Nurse, it will be your duty to carry out any course of treatment the Doctor may desire, and perhaps the few remarks I shall have to make upon the subject will be of more practical value to women engaged in Midwifery practice than in Midwifery Nursing, though it must not be forgotten that the matter of infantile ophthalmia is one of gravest importance to *all* women employed in our portion of Nursing work.

The care of the eyes begins at the moment of birth, when they should be wiped clean with a soft napkin as soon as the head is expelled, and if possible before the eyes are opened—in an inward direction towards the nose. Should there not be time to do this, buoy up the head with your hand until you can attend to the eyes. When the infant is bathed, the eyes must be well washed, and here one of the great advantages (in my judgment) of distilled water comes in for infantile bathing. It is the opinion of many accoucheurs that the eyes should be treated with an antiseptic lotion at birth, Dr. Cullingworth advising the corrosive sublimate (excessively dilute) for that purpose, and there are numerous other antiseptics besides. I shall not express any opinion upon the subject other than that, in my judgment, they are not necessary to begin with. Millions of infants are born who never have ophthalmia at all, and when they do, the trouble can be dealt with at once, and I confess that professionally I feel more confidence in the cure than the prevention (?). On the third day from birth (most commonly) you may observe that one or both eyes begin to water and look weak. I have often found the following a simple and efficient remedy : Six ounces finest double-distilled French rose-water, powdered alum twelve grains—you must weigh it, as it is essential that the quantity used should be exact and small-and the lotion must not be used until the whole of the alum is perfectly dissolved; drop the lotion into the eye three or four times a day. I have known numbers of cases where this painless safe and application has

effectually stopped the effusion from the eyes. But such is not always the case; the discharge rapidly increases in quantity, and alters materially in character, becoming thick and purulent; the eyelids are greatly swollen, tender and inflamed-we have declared ophthalmia, and we have at once to meet the disease. And here let me remind my young readers that in all cases of ophthalmia, it is advisable to have recourse to manual disinfection; before and after dressing the eyes dip your hands up to the wrists in a solution of Condy, and wipe but not absolutely dry them. The remedy most commonly adopted by ophthalmic surgeons is nitrate of silver-two grains to one ounce of distilled or rose-water, and this lotion must be dropped into the eyes every four hours. This preparation is poisonous, and stains, hence it must be used carefully-kept apart from all other medicines, put into a dark blue bottle, and labelled "Eye Lotion-Poison." The lotion must be applied with an eye-dropper; it is made of glass. Of the two kinds most commonly used, one is called a pourpette; it has a long narrow tube at one end, the other larger and upper end is somewhat globular, open at the top, and over this a piece of membrane is tightly stretched; you insert the tube into the lotion and draw it up into the upper part by pressing upon the membrane, and drop the lotion into the eyes through the tube. Theother, also glass, is a more simple affair ; it is four and a-half inches long, open at one end, and has a narrow pencil-like point at the other, and it is about the calibre of an ordinary drawing pencil. When about to use it, hold it between the thumb and finger of your left hand, open end up, and press the pointed end well down on to the bulb of your little finger of the same hand, then drop in the lotion to about a third of the tube, take the eye-dropper between the thumb and forefinger of your right hand; turn it pointed end up, and press the bulb of your thumb firmly on to the open end. You now have the tube ready charged for use, but before doing so you must prepare and position the little patient. This is a somewhat important matter, as the nitrate of silver stains and spoils, and you must bear this in mind when using it. The infant should be laid down on a bed or his cot, and a napkin put under his chin, to save his gown from staining, and in the way I told you of recently. Some old napkins or handkerchiefs should be kept for this purpose, as they become greatly stained, and, when washed, often fall into holes for the want of this precaution-I have known numbers of good

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