

A Bad Case of Chronic Dyspepsia.

NURSE writes:—"Seeing that you have a series of articles on the Battle Creek Sanitarium, Michigan, U.S.A., I think the publication of the notes of a case I nursed at a similar institution may be of interest, as showing the practical methods and treatment used at some of these 'Health Schools.' There are many points of novelty about American therapeutics. Having trained in England, I was particularly struck when I had an opportunity of two or three years in the American training schools, with the 'many inventions' adopted by our Transatlantic cousins, of which the majority of English Nurses have never heard.

I suppose the fact that Americans possess such highly strung nervous systems, calls for special treatment, and all sorts of devices are invented—especially for nervous cases—to take away the patient's attention from his ailments and so to fill up his day that he has no time to brood on his aches and pains. The average phlegmatic Britisher would find the amount of 'treatment' which is crowded into a day in the life of a patient such as I am describing, most wearisome; but the more neurotic American is keenly interested in every fresh development in his case, and eagerly submits to the multiplicity of remedies: the rubbings, the douchings, the galvanism, the stomach washing, the massage and gymnastics, and in each he finds a certain amount of intellectual relaxation.

Miss T. S., aged 35, was admitted suffering from chronic dyspepsia of some years' standing. She presented a most woe-begone appearance, and was fearfully emaciated. Her appetite was inordinate—in fact, she described herself as 'always hungry.' Her history showed that the origin of her disease was purely nervous. She had been occupied as a school-teacher, led a busy, active life, 'felt that twenty-four hours was no good in getting through all that she had to do,' was a confirmed tea-drinker, and lived chiefly on animal and stimulating food.

Case diagnosed as primarily 'nerve exhaustion,' resulting in chronic dyspepsia.

'It's of no use treating the stomach alone,' said the doctor in charge; 'we must begin by eliminating the bad old material, and disintegrating the unhealthy structure altogether.'

She was put on general treatment, with a few special modifications as to diet and the amount of exercise advisable.

March 10th.—Treatment began; patient kept in bed first day. At 8 a.m. a 'test-breakfast,' followed in one hour by a subcutaneous injection of apomorphine. Patient vomited freely. Contents of the stomach subjected to careful analysis, so as to determine the exact amount and quality of the digestive work done by the stomach. In this way any excess or deficiency in the natural digestive secretions is detected, and thus a correct diagnosis of the exact condition of the stomach is arrived at.

Treatment consisted of the following *regime*, varied and modified from time to time:—

March 11th.—Patient wakened at 6.30. Small cup of hot peptonised cocoa and milk. At 7 a.m. very gentle massage to stomach and abdomen: constipation rather troublesome; this was generally treated by rubbing over abdomen. At first, owing to tenderness, this has generally to be done very gently, but later, quite vigorous massage may advantageously be em-

ployed—always, of course, under medical supervision. Rise afterwards, and at 8 a.m. half an hour's 'breathing exercise' taken. In these breathing exercises the patient is instructed to fully inflate the chest, so as to expand the muscles and put them in a healthy condition. Patient forbidden to wear corsets during treatment; a loose tea-gown style of dress was adopted, so that she could 'breathe'—that is to say, thoroughly expand the lungs and use the pectoral muscles, either lying down, standing, kneeling or sitting. In 'breathing exercises' all these positions should be assumed by turns.

Breakfast at 8.30. In summer for a case of this description breakfast might consist of a raw egg well whipped into a glass of koumiss. In winter the egg was whipped and added to hot water or hot peptonised milk.

Rest in easy chair and look over illustrated paper, reading not considered desirable. At 9.30 light Swedish gymnastics in the gymnasium. This was taken very gently and slowly for about twenty minutes; light Indian clubs were used, or gentle drill, or 'treadmill' exercise.

At 10.30 small quantity, about two drachms, of Valentine's meat juice taken in a wine-glass of Vichy water. A tepid bath then taken followed by rest in bed with general massage to follow. Hot fomentation over abdomen.

Dinner at 1 p.m., consisting of pounded underdone beef passed through a sieve, with a glass of hot beef-tea with dry toast, followed by a cup custard flavoured with vanilla. After this patient instructed to lie on the bed with eyes closed, room darkened, and no conversation allowed. Advised to sleep if possible.

At 3 p.m. a glass of hot water, after which she paid a visit to the consulting-room of one of the resident physicians, under whose care she was. At 4 p.m. a cup of hot peptonised cocoa and milk. At 4.45 she took 'laughing' and breathing exercise in the gymnasium. The laughing exercises were especially used in cases of dyspepsia with a view to 'shaking up' the digestive organs and relieving possible congestion. In the afternoons there was always music in the gymnasium so as to make the drills and exercises more exhilarating. Humorous recitations or readings generally followed during the necessary intervals of rest, so that the patients found their afternoon slip by in a most pleasant manner and were enabled to forget their ailments in the social intercourse and the bracing exercise and amusement provided. At about 7 p.m. the patient again lay down and had an application of electricity to the stomach or abdomen, took a light supper of poached eggs, hot beef tea, tapioca jelly and perhaps a little preserved fruit.

8.30 p.m., went to bed with the application of a moist bandage to be worn during the night. Peptonised milk in small quantities twice in night, or a little koumiss, or Valentine's meat juice in a little brandy and soda-water.

This treatment was continued with variations for about six weeks. Occasionally she had the general application of electricity, sometimes, especially if unusually constipated, electricity was applied to the abdomen and inside the bowel. If dyspeptic pain at all severe either after meals or during intervals of food, a hot 'trunk-pack' was applied—that is to say, a hot pack reaching from under the arms to the lower part of the abdomen—which generally gave great relief.

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