

## Notes on Practical Nursing.

### BEDS, BEDDING, AND BEDMAKING.

I AM tempted before beginning this paper, to quote rather extensively from Charles Lamb's delightful essay on "The Convalescent," where he speaks of "the regal solitude of the sick bed."

"How," he says, "the patient lords it there: what caprices he acts without control! how kinglike he sways his pillow—tumbling, and tossing, and shifting, and raising, and lowering, and thumping, and flattening, and moulding it to the ever-varying requisitions of his throbbing temples."

Fancy the feelings of an excellent, neat staff Nurse in a London Hospital if she beheld a patient "swaying his pillow" in that fashion!

"He shifts sides," he proceeds; "oftener than a politician. Now he lies full length, then half length, obliquely, transversely, head and feet quite across the bed; and none accuses him of tergiversation"—but I am sure the Staff Nurse would accuse him of making his bed untidy. As he becomes convalescent he complains about his bed being less interesting, as follows: "The trimness of the bed has something petty and unmeaning about it. It is *made* every day. How unlike to that wavy, many-furrowed, oceanic surface which it presented so short a time since, when to *make* it was a service not to be thought of at oftener than three or four day revolutions, when the patient was with pain and grief to be lifted for a little while out of it, to submit to the encroachments of unwelcome neatness, and decencies which his shaken frame deprecated; then to be lifted into it again for another three or four days' respite, to flounder it out of shape again," &c. No, we have at all events passed that stage—neither in public or private Nursing do we leave a patient to flounder about in an unmade bed for three or four days. The first thing we teach a Probationer, is how to make a bed without moving the patient out of it, and the favourite little amusement of amateur Nursing classes is to "change the sheets" of an imaginary fractured femur, or bad typhoid. Yet when I remember how many kindly, well-trained Nurses do *not* make good beds, I am tempted to believe that good bed makers must be inspired geniuses, and only a gifted few can really make thoroughly comfortable beds for sick folk.

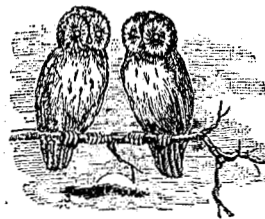
But is there anything upon which one's comfort in sickness depends more than upon one's bed? What depths of misery lie in hot, heavy coverings in fever, what heights of wretchedness one scales when awkwardly propped up with lumpy pillows that leave a gaping hollow at the lower part of the back, and drive one's head forward on to one's unfortunate chest, how an unevenly shaken bed gives one the sensa-

tion of sliding down an avalanche on to the floor, and how soon a fat wrinkle in the under sheet assumes the dimensions of a thick rope! No, a comfortable well-made bed is an absolute necessity in sickness.

From time immemorial people have striven according to their lights to be warm and comfortable—or cool and comfortable—when composing themselves to sleep—in other words, when going to bed. The Highland Chief who kicked the snowball from under his son's head, saying he was an effeminate lad to need a pillow, was exceptionally hard-hearted; the most savage tribes use hay, heather or deerskins, or something to lie on when sleeping.

The very word bed is of immense antiquity, whilst the Anglo-Saxon bedridden—*i.e.*, to ride a bed, instead of a horse—gives an idea of the misery sickness must have been to a warlike people—by whom it was accounted more or less contemptible—and "a straw death," a death in bed, shameful for a warrior. For straw, fresh for the rich and noble, and far from fresh for the poor and ignoble, was the great material for beds for centuries in England—till it came to be supplemented by the noble feather bed—which is, however, slowly being replaced by mattresses and wire springs of various kinds. Many houses still contain the handsome and stately four-post bedsteads of our ancestors with the enormous feather beds, that require notable housemaids to shake them thoroughly, and that are, as many private Nurses can testify, so difficult to nurse patients on. Of course, in private work, we have to make the best of what the house we are working in can provide, but in Hospitals the best possible, and the most convenient form of bedstead for patients, doctors and Nurses, should be used. It is my intention first to discuss the various kinds of beds, bedsteads, &c., in common use, and then the best arrangement of beds for special diseases and operations. M. MOLLETT.

## The Matrons' Council.



THE second of the series of Practical Demonstrations will be given under the management of the Matrons' Council, on Thursday, February 27th, at 8.30 p.m., at the Medical Society's Rooms, 11, Chandos Street, Cavendish Square, by Mrs. Bedford Fenwick. The subject will be "The Nursing of Operations on the Intestinal Canal." Cut-dressings, bandages and surgical appliances necessary for the nursing of abdominal and rectal operations will be exhibited.

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