

The practical advantage of this simple measure is that it often relieves the patient's mind from anxiety concerning matters, perhaps of some importance, to which he desires attention should be given, but which he is unable to express in words. One of the most important, and at the same time most difficult, duties of a Nurse in attendance upon these cases is to prevent friends and relations from increasing the patient's mental irritability. It often requires the greatest tact on her part to prevent the family and friends from retailing to the patient matters of a domestic or of a business nature, which, by the very interest they would excite, would arouse the injured nerve centres to most harmful activity. If a bone is broken, it is easy to persuade the most ignorant that the limb must not be shaken about, if the broken ends are to become firmly joined together again; but when the infinitely more delicate organism of the brain is affected, and when the same physiological rest is even more essential in order to secure its repair and due recovery, it is sometimes almost impossible to persuade some people to permit the patient to enjoy such a period of absolute quietude. They will argue that he was formerly always interested in such and such a matter, and they seem quite unable to understand that such interest means *unrestful action of the brain cells*, and that such excitement of its tissues means increased congestion of a structure already over-supplied with blood, and thus involves the possibility of a fresh clot forming, or a fresh extravasation of blood, or, in popular parlance, another "stroke."

Yet such efforts on the part of friends and relations are almost invariably made with the kindest and best intentions; and it often seems in such circumstances that the Nurse who objects to her patient being "amused" or "interested" is acting in a hard-hearted and arbitrary manner. It is, therefore, an excellent rule for all Nurses who have charge of such cases, to request the doctor to give them, in writing, full and particular instructions as to the number and personality of the visitors the patient may receive, and even what subjects he may be allowed to discuss. By such means, the hands of the Nurse will be cleared from responsibility, which is often very onerous and which is very frequently misunderstood, and at the same time the patient may very probably be saved from a very considerable drawback to his recovery.

(To be continued.)

Medical Matters.

ULCERS.



A DISTRICT Nurse asks us for information concerning "ulcers," a condition which she finds very frequent amongst her rural patients. Ulceration, wherever it occurs, is a destruction of tissue by a gradual softening and breaking down process which will continue so long as the exciting cause continues. The most common forms, perhaps, of ulcers are those due to a varicose condition of the veins. In persons who have to stand for many hours a day the veins of the legs tend to become distended, enlarged, and thickened, and the blood, therefore, does not flow through them as easily as it should. After a slight blow or strain, such varicose veins may become inflamed, and the skin over them softens and then cracks, the surrounding tissue becoming also inflamed. The unhealthy sore then extends, and the softened skin peels off around it, leaving a raw surface with bluish unhealthy-looking edges, and bathed with creamy pus. If the condition is allowed to continue, the varicose vein itself may be ulcerated through, and then more or less dangerous bleeding will occur; all the more dangerous because the thickened walls of the vessel will not contract and so stop the bleeding naturally. Sometimes, indeed, such bleeding may be so profuse as to have a fatal result; and, in any case, the loss of blood may be sufficient to greatly weaken the patient. It is therefore necessary for the Nurse to remember that, with coolness and promptitude, such bleeding need occasion no alarm. A finger placed firmly upon the bleeding spot will instantly control the hæmorrhage; then the patient should be placed on a bed or couch with the leg well raised on pillows above the rest of the body. By the time this is accomplished, the finger may often be removed from the wound without any return of the bleeding; but, to make doubly sure, it is always well after such an accident to place a small pad of lint soaked in olive or carbolic oil upon the site of the bleeding vessel; a larger pad is secured over this by two or three turns of bandage, and this should be kept on for some twenty-four or thirty-six hours, the patient

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