

Lectures on the Nursing of Lung Diseases.

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CHAPTER II.

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THE Nursing, then, of a patient suffering from capillary bronchitis will be directed chiefly to secure two objects—the maintenance of the bodily strength, and the clearing of the tubes from mucus. With regard to the first point, the careful and regular administration of stimulants, foods, and medicine, is, of course, most important. The quantities of alcohol which the medical practitioner considers necessary, in the particular case, will, of course, be exactly defined. But the nurse should remember that, the object being to maintain the patient's strength, it is better to give small quantities of alcohol frequently, than to give a larger amount proportionately less often. The reason for this is very simple, and should be always remembered. Alcohol acts as a stimulant, but nothing more—a stimulant to the nervous system, and thus as a stimulant to the heart's action. But its effect is followed by an exactly proportionate reaction, and therefore is merely temporary. At the same time, the full value of the stimulant will obviously be better obtained if it be not followed by too great a depression. It is, therefore, a good general rule in cases of illness to minimise the reaction and so increase the effect of stimulants, by giving only small doses and repeating them with corresponding frequency.

The rule in a less degree is applicable to the administration of medicines, because being much less volatile than alcohol, they do not so rapidly lose their effect; but in order that they should exert their full influence they should be administered at regular intervals so as to maintain their action on the system. In the case of food, the weakness, which the patient generally exhibits, calls for the administration of nourishment in small amounts, but frequently repeated for two different reasons; first, because the appetite is generally affected and it is impossible to persuade the patient to take a regular meal; and, secondly, because the powers of digestion suffer in sympathy with the other bodily processes, and, consequently,

to overload the stomach would only lead to its irritation, and probably to its serious derangement.

There is a symptom closely connected with the digestion—flatulence—which is found in almost all cases of chest complaints. Some measures are usually necessary to relieve the patient from the excessive abdominal distension from which they, therefore, suffer. It occurs in consequence of the patient being debarred from his customary amount of exercise, and is consequently most marked if he is confined to bed. Its results are twofold; because the distension of the abdomen not only causes local discomfort and even pain, but also involves an upward pressure upon the diaphragm, and thus diminishes the capacity of the chest. When the lungs are already embarrassed by disease, in their power of expansion, it must obviously increase their difficulty if the area of the chest cavity be at all encroached upon by the pressure of the distended intestine. Extreme flatulence is, therefore, not only a most common symptom, but it often becomes most important to relieve it and to prevent its recurrence. The doctor will probably prescribe medicines which will have that effect; and will probably direct the nurse to prop the patient well up in bed, so that by the falling down of the intestines the pressure on the chest may be relieved. The nurse may also be able to afford much relief by rubbing the back and sides. In many cases, in which the patient seems quite breathless, a teaspoonful of bicarbonate of soda in a wine glass of water will often enable him to eructate a large quantity of gas from the stomach with the most marked and rapid relief to the breathing. In some cases, again, the greatest relief is afforded by the passage into the rectum of a long rectal tube or even of a largish catheter, by which the lower bowel is emptied of gas. For the same reason, in these cases, glycerine suppositories are frequently prescribed—the object being, of course, to clear the rectum with the least possible disturbance to the patient. In fact, no inconsiderable part of the successful treatment of a severe attack of bronchitis depends upon the care with which the intestines are regulated, and upon the measures adopted to secure that result. As a general rule, it is therefore better for the patient to have some diarrhoea than any constipation; and the doctor will depend upon the nursing reports on this matter in directing his treatment.

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