

**Our Foreign Letter.****PLAGUE NURSING IN INDIA.**

No 3.—IN A NATIVE STATE.

*(Continued from page 100.)*

PLAGUE at this time was not only holding its own, but gaining ground in Gundiali, as well as the villages round, and an attempt was made to stop its spread-

ing and prevent its recurrence, by having all the rubbish—the accumulation of years—as well as the high hedges made of thorns, tightly packed together, and often close round the houses—removed. Wherever a case occurred, the patient was removed to hospital, and the bedclothes burnt, the tiles stripped off, and the interior well white-washed by men employed by the durbar for the purpose; then the house was locked up and sealed for a month. The people were encouraged to leave the village and go out into the gardens round about to live.

The first cases in Gundiali had occurred in May, and this was August, and plague was epidemic now, so that it was time more thorough measures should be taken to get rid of it; but there was no segregation of those who came in contact, and the friends of the patients came and went, or remained as long as they pleased, so long as the hospital was not overcrowded.

When we could spare the time from hospital, one of us accompanied the search party, which was composed of the Dhroo (head-man), native doctor, and sowars and sepoys on horses, camels, or on foot. Our presence was almost necessary if thorough searching was to be done, for in almost all the Cutch villages were some relatives of the Rao—very distant no doubt, but recognised. Their women were purdah or veiled, and could not be seen by men, as also are the higher caste Mahomedan women, but they did not object to our going in alone. The examination consisted of looking at the tongue, which is furred in plague; the eyes, which are injected, and have a very characteristic humid appearance; feeling the pulse, which is weak, quickened, and may have frequent dropped beats; and feeling the body; if high temperature is suspected, the thermometer is given. Of course all this can be done in less time than it takes to write. Search parties were necessary because the people hid the cases, so that each case was in danger of becoming a centre of distributing the malady.

Plague is not a monotonous disease to nurse, all cases do not mean buboes, fever, high mortality merely; but all kinds of diseases were developed, previously perhaps latent in the patients. When apparently convalescing, phthisis has rapidly carried some off. Two cases of ozaena in patients whose buboes had re-absorbed ended fatally in a few days, lunacy, epilepsy, paralysis, fatal cases of thrombosis, septicæmia, pyæmia, primary pneumonia, which was always fatal, while pneumonia and bronchitis developed later, were curable.

Then our out-patients increased daily and knew no limits, animals as well as people being brought to us. Camels with sore, torn noses to be dressed, horses with bad backs and legs, bullocks, goats, &c. We also went to the homes of the people when requested. The Mahomedan mother of twin children, one of which died, and the other at this moment bears our Christian names, was our patient. Mamoo's father, with a very bad leg from the bite of a dog, his mother with weakness and faintness, and his brother with intermittent fever, were my patients at one time.

They all developed a fondness for iodoform, from the Hindu native doctor to the poorest villager, it was always "tora pila dowa do memsahib" (give me a little yellow medicine) in a coaxing tone, and they were satisfied. After one of the native doctor's dressings, the coating of iodoform was so thick, it was impossible to see what was going on underneath, they never cleansed it off, only added a little more daily, so that we only allowed them to assist us with the dressings, as theirs was too slow a process of healing. We found after trials of carbolic, mercury, boracic and iodine lotions, that the latter gave the best results, and always used it when it could be obtained.

Early in September, 1897, Plague broke out in Moondra City, about 35 miles from us, and the English doctor wished one of us to go over there with him to organize the hospital while he saw to the City affairs, making up search parties, whitewashing the houses, cleansing and disinfecting the streets, &c. Being ever ready for new work, and my friend preferring to remain in Gundiali, I went with Dr. and Mrs. M. It was a pleasant little voyage of four hours on the sea in a steam-launch, with an intelligent Mahomedan as skipper from Mandvi to Moondra, which is on the Gulf of Cutch, but unimportant as a sea port. The city is 2 miles from the bunder, and being monsoon weather, the first mile was over a wretched road. A pair of pretty greys in a victoria met us, but we had not got far before they refused to move, one began kicking violently, and catching his foot in one of the traces, fell heavily on his side, almost dragging the other over too. We walked the rest of the bad road.

Moondra is a well-built city of 20,000 inhabitants, surrounded by strong walls, with massive, battlemented gateways. We drove through the city noting everywhere the beautiful mouldings and wood carvings over doors, windows, and balconies, for which the Cutchees are 'so justly noted. But whole streets had padlocks on the doors, showing the people had fled in terror from the plague.

Our tents were pitched in a compound half-a-mile out of the city on the other side—large roomy, almost new double tents, with a corridor all the way round, and doors on every side.

Up to the evening the day had been fine and very hot, but just as I was about to start for the hospital the rain began to fall in true tropical fashion, and in half an hour my tent was flooded. A drain had been made round it, but was not large enough to carry off the water at once, and I had to have the carpet taken up and a runnel made down the centre. The doctor's tent was almost as bad as mine, and to make matters worse, through some blundering of the Moondra officials, none of our baggage had come up from the bunder, nor did it come until 11 o'clock the next morning. Not having a blanket or anything dry to cover one at night, and in the morning having to drag on wet stockings and

[previous page](#)

[next page](#)