

Practical Notes on Nursing.

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(Concluded from page 315.)

NURSING IN THE TROPICS.—II.

THE safest attitude in which to approach new experiences is to say:—"Only one thing I know exactly, and that is that I know nothing exactly." This is highly applicable to nursing under unwanted tropical conditions. In the first place, difference of climate has a most appreciable effect on the nursing of even familiar diseases; secondly, one is called upon to nurse diseases quite without a precedent in one's experience; and, thirdly, every country has its own views and methods with regard to treatment of disease.

It is both natural and commendable that one should think the methods taught at one's own training school the best, and it is also perfectly right to endeavour to carry them out elsewhere. But there must always be considerable modifications to any stereotype mode of nursing, and the great diversity of nursing features induced by climate and other influences make foreign nursing difficult to the uninitiated.

Infinite tact is required in accommodating yourself to novel theories and customs at variance with your cherished training; without this very valuable commodity, nurses abroad make their position difficult for themselves, and call out unfavourable criticism of their training and of their behaviour. I have heard it said that English nurses, when they first come out, want such a lot of apparatus when they are nursing a case, and give so much trouble to the native servants, that people dread making use of their services; and it is a great pity that, in the nurses' endeavour to give the patients entrusted to their charge the benefit of their very best nursing powers, they should, through deplorable want of tact, succeed in creating a prejudice against themselves and their methods. It is far better, for the first year or so, to step very carefully and to first gain the entire confidence of the community which forms the nurse's sphere of action by a discreet attitude and a quiet performance of the duties she is charged with. Later on, when she knows the ground better, she finds out what may safely be done to introduce a better style of nursing, and what reforms it will be wise to adopt, and which to leave alone.

The essential characteristic of tropical disease is its virulence. Diseases develop with a startling rapidity, accompanied by symptoms of the most acute and distressing form. It is only Nature

that is ever in a hurry in the tropics, and she certainly makes up for the indolence of the denizens of these enervating regions. The awful rapidity with which decomposition takes place is a striking proof of the speed with which Nature does her work; those who die during the day are buried before the same sun has set, and it takes some time before one becomes inured to this relentless and ghastly haste.

As the diseases are drastic in their character, so are the remedies adopted to cope with them; it is only by resorting to prompt and energetic measures that the sudden onslaught of some fever may be deprived of its virulence. There are infinite varieties of fever vaguely included by the uninitiated under the generic term of "ague" or "yellow fever," and the study of all their different forms necessitates years of residence and laborious work.

There is no mistaking malarial attacks, with their characteristic severe initial rigor, but yellow fever is much more insidious in its development and, in its earliest stage, may be thought to amount to merely a dull headache or general malaise. Therein lies the danger of the latter, for unless it is at once recognised and a strong aperient is at once administered, the chances of recovery are materially lessened. It is, therefore, the one golden rule in the tropics with regard to every kind of illness—when in the least doubt, take castor oil! Castor oil is administered in doses varying from one to two ounces, if not more! Quite the most successful mode of giving it, I found that of using some effervescing medium. By floating the oil on some lemonade, after carefully wetting the glass to the brim, and pouring on the top of the oil some froth procured by mixing a little citrate of magnesia with lemonade, the oil is rendered absolutely tasteless as the froth strikes against the roof of the mouth.

Malaria does not give much scope for nursing, as the subject generally prefers being left alone, and an attack soon exhausts itself.

Yellow fever is a terribly difficult disease to nurse, for the patient is suffering severe discomfort, and very little can be done for his relief. Delirium, suppression of urine, and hæmatemesis (the popularly called "black vomit") generally indicate a fatal termination. What can be done, then, from a nursing point of view, for the patient? In the first place, absolutely nothing, not the smallest detail, such as sponging his face or giving him a drink of iced water, without definite instructions from the doctor. In some places, doctors do not allow their fever patients to be touched with water, and though one is longing to sponge them when they are sticky

[previous page](#)

[next page](#)