

**The Nursing of Heart Diseases.**

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## CHAPTER IV.

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FOR the relief of this discomfort and the consequent disturbance to sleep, nothing is more effectual than a proper arrangement of pillows so placed as to raise the patient's chest and head on an inclined plane. By this means many who are unable to sleep in the ordinary recumbent position, because of the violent throbbing in their ears and temples, are enabled to rest comparatively undisturbed.

With reference to the drugs usually employed to relieve this condition of palpitation, there are certain practical precautions which may be remembered with advantage by the nurse. For example, Belladonna, in some form, is usually ordered because it possesses the power of soothing the nervous system and quieting the violence of the heart's action. The local effect of the drug is often obtained by the application of a belladonna plaster over the heart's area; and it has already been noted in these Lectures that a considerable irritation of the skin may result from this application, that precautions in the shape of previously washing the skin may diminish this irritation, and that, in extreme cases, symptoms of poisoning may appear in consequence of some idiosyncrasy on the part of the patient towards this drug.

It is important, therefore, that the nurse should remember these facts when belladonna is prescribed. With regard to its internal use, the nurse should carefully observe, note, and report to the doctor at once, if any of the characteristic signs and symptoms produced by belladonna show themselves. At the same time, it need scarcely be said that she must be most careful not to let the patient suspect the particular reason for her watchfulness, for fear of rendering him nervous concerning the action of his medicines.

The first symptom of toxic effect, which is usually shown, is some dryness of the throat, nose, and mouth; and this is usually followed very shortly by more or less marked dilatation of the pupils of the eyes. As a general rule, the more rapidly this appears the more severe is the action of the drug. Therefore, as soon as the nurse observes this symptom she should

immediately discontinue the administration of the drug and report the facts to the doctor.

It is worth while to notice here a practical point of considerable importance—the difficulty which sometimes arises in determining whether the dilatation of the pupil is due to the Belladonna and not to the patient's general condition. For instance, similar dilatation is usually found in cases of marked nerve exhaustion or great bodily weakness; and it is, therefore, very frequently observed in patients who are suffering from marked weakening of the heart's power. The distinction, however, can, as a general rule, be made between the two forms of dilatation by a simple experiment. In the case of Belladonna, the dilatation is due to poisoning, which practically causes temporary paralysis of the parts. In cases of physical exhaustion, it is merely due to nerve weakness. In the latter event, therefore, a sudden stimulus, like that of a strong light, is usually sufficient to cause an active contraction of the pupil; whereas if the muscle be paralysed by Belladonna, holding a candle before the eyes will not materially alter the dilatation of the pupil.

By this simple test, therefore, the doctor can, in the majority of instances, discover whether or not it is the belladonna that is causing the condition of the pupil; and of course he will be assisted in this by his observation of its state previously to the belladonna being administered. Still, as a matter of precaution, if the nurse observes this marked dilatation, when belladonna has been administered, she will err on the safe side, if at all, by discontinuing the drug until she has received fresh instructions on the subject from the doctor.

In all cases of Palpitation it will be of material assistance to the medical practitioner if the nurse notes accurately the time at which attacks of palpitation occur. For example, if the patient complains of this shortly after a meal, or after some exertion, or after the administration of medicine, and so forth. Because, in many cases of heart disease, palpitation arises from causes outside the heart itself, and especially from flatulent distension of the abdomen and the consequent upward pressure upon the cavity of the chest. These cases are especially noteworthy because they are often associated with severe attacks of Dyspnoea or shortness of breathing, amounting sometimes even to extreme difficulty in respiration, and which, as a general rule are relieved, or may even be removed, by treating the intestinal trouble.

*(To be continued.)*

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