

The Nursing of Heart Diseases.

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CHAPTER IV.

(Continued from page 391.)

So far as the Nursing goes, a proper appreciation of the particular cause of the patient's symptoms may be the means of relieving him very greatly; whilst ignorance of those causes may, by preventing the adoption of the necessary measures, cause the patient to suffer quite unnecessary discomfort and pain.

If the palpitation and dyspnea, then, is due to the upward pressure on the chest, caused by the distended stomach or intestines, and the consequent interference with the action of the heart and lungs, common sense would suggest that the first step to be taken for the relief of the patient must be the drawing away of that pressure by lowering the intestines. In other words, nothing must so increase the patient's discomfort as to keep him flat on his back; nothing will so relieve him, as raising him up in bed. Properly applied pillows, therefore, so placed as to raise the body, in some cases even into a sitting position, will at once cause the intestines to fall downwards in the abdomen and thus relieve the pressure on the chest. With the removal of the upward pressure, the difficulty of breathing and the palpitation will also be speedily relieved.

There are, however, many cases of heart disease in which it is difficult or impossible to raise the patient sufficiently to obtain this mechanical relief; then, other measures must be adopted to secure the same end. For example, the doctor will probably prescribe either drugs, such as *Assafoetida*, which will act as anti-spasmodics, and so lessen the tendency to flatulent distension; or alkalies, such as aromatic spirits of Ammonia or *Sal-volatile*, or even bicarbonate of soda, which would have the effect of neutralising the acidity of the contents of the stomach and thus causing carbonic acid gas to be released, the eructations causing rapid and great relief to the distension.

When the large intestine is distended, the nurse can, in many cases, afford the most rapid relief by passing the long rectal tube; exactly as this is now employed with so much usefulness in the early after-treatment of cases of abdominal section, or in other cases in which the retention of gas in the intestines causes severe

pain or may even lead to more serious consequences by causing temporary paralysis of the intestine and thus inducing an attack of obstruction or even of peritonitis.

Whether the distended intestines be relieved by medicines, or by mechanical means, it is important to always remember the grave consequences of the mechanical pressure which may thus be caused in cases of heart disease; and this being understood, the well-trained nurse will doubtless find methods of affording her patient relief from a condition which is always one of discomfort, and may even become one of danger.

But in this, as in every case, prevention is infinitely preferable to cure; and as soon as any tendency to marked flatulent distention is observed, the doctor will probably take steps, by carefully regulating the diet, to prevent as far as possible its further development. Chief amongst these precautions, will probably be the careful limitation of starchy foods and of sweets. The patient, for example, may be restricted to a very small quantity of potatoes, peas, beans and white bread, all of which are largely composed of starch. On the other hand, sugars, jams, and pastry may, as a matter of routine, be also forbidden. It is, however, sometimes forgotten that most fruits, and especially when these are eaten in an uncooked state, are very liable to cause flatulence and, therefore, unless they are expressly sanctioned by the doctor, the nurse should not permit her patient to take these.

With regard to stimulants the more acid wines, such as Hocks or Clarets, and most malt liquors cause the same intestinal trouble; so that, in the majority of cases, these patients are restricted to well diluted whisky or brandy, as stimulants which give most benefit while causing the least disturbance. In some cases, and especially in gouty patients, Tawny Port wine is sometimes very useful. By this term, it is usual to describe wine of some age which has been kept for a number of years in the cask, and which has lost much of its acidity in consequence. Whatever the reason may be, it is now a well-accepted fact that patients who are unable to take ordinary acid wines and in whom a glass of old crusted Port would cause an attack of heartburn, can take old Tawny Port not only with the general benefit due to a good tonic, but without any apparent disturbance of their digestion.

(To be continued.)

[previous page](#)

[next page](#)