

## Notes on Practical Nursing.

### THE NURSING OF MALARIA.

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THE foundation of Schools of Tropical Medicine in this country in recent years emphasises the need for the systematic study of tropical nursing, and for placing this important branch of work on a definite educational plane if sufferers from tropical diseases are to receive the most efficient care possible. Of all tropical diseases malaria is undoubtedly the most serious and the most usual, and demands the most expert nursing; yet it is questionable whether any nurses in this country, who have not, for a time at least, lived in a tropical country, have any idea of the importance of this disease or of the fact that, like any other fever, it demands special study.

I very much doubt if much insight into the nursing of tropical diseases can be obtained in England, for the reason that all patients, by the time they arrive at home, must be in a more or less chronic condition, and it is the appalling suddenness of the changes in the condition of the sick during acute illness in the tropics which makes this branch of nursing so trying, and demands the closest observation, and the utmost resourcefulness on the part of nurses. From opportunities which I have had of becoming acquainted with the nursing of patients suffering from tropical diseases, in my capacity as Matron of the English Hospital, Zanzibar, I have formed the conclusion that a nurse who is successful in the care of patients of this class may safely be entrusted with the nursing of any case of ordinary disease, however serious it may be.

In the nursing of malaria, the most assiduous watchfulness is required. It is never safe to think lightly of an apparently mild case, for nothing seems certain except the uncertainty of its method of development, and it is quite possible that a patient with whom the disease appears to be taking a favourable course, may be dead within a few hours.

Patients who are brought into a tropical hospital, are very frequently carried for some miles in a hammock, a most fatiguing experience; and if seriously ill, are often exhausted on their arrival. In this case, in the absence of a doctor—and it must be remembered that a doctor is not always at hand, as is the case, as a rule, at home, and therefore more is necessarily left to the discretion of the nurse—it is advisable to give some stimulant, preferably champagne. The patient must at once be put to bed between

blankets, and clothed in thin flannel garments. For a man pyjamas, and for a woman a night-dress of nun's veiling, is the most suitable. The temperature must be taken at least every four hours in acute cases. A most important part of the treatment of cases of malaria is to induce perspiration if this is not present. The routine practice in the Zanzibar Hospital was to give ten to fifteen grains of salicylate of soda every four hours until the temperature was down, and then sulphate of quinine, at first ten grains every four hours, and gradually decreasing doses as convalescence progressed. Antipyrin is a drug which apparently commends itself to amateurs in the treatment of malaria, but its use is unsafe and it should never be given except under medical direction. A patient with a first fever is always a more or less anxious care, for the course the disease may take is very uncertain. Malaria somewhat resembles influenza apparently in attacking the most susceptible point, and the patient should be closely observed. In first fevers there is sometimes a difficulty in inducing perspiration; this is an unfavourable symptom, and every effort is directed to inducing the skin to act. Warburg's Tincture has the reputation of producing the required action when all other drugs are useless, but it is not invariably successful. Frequently patients, more especially when they have had several fevers, perspire profusely, and need changing many times during the day. This is a point which requires great attention, for if sudden perspiration takes place, and the patient is left in wet clothes, he is almost certain to get a chill, and serious results may ensue. Malarial patients should always be washed all over at least night and morning: often sponging in the course of the day, especially if some Toilet Vinegar, or Florida Water is used with the water, is grateful to the patient, but whether this is done or no, he must at least be rubbed dry with a Turkish towel whenever changed. It may be noted that malaria, in common with other diseases, has a distinct smell quite unmistakable to those who are acquainted with it.

A symptom which must not be overlooked is sleeplessness, for if this is persistent it indicates a serious condition of the nervous system, which may cause a fatal termination of the disease. An inordinately large appetite is to be viewed with suspicion for the same reason. The best chance of recovery for such a patient is to get into a cooler climate, and as soon as an opportunity offers, he is usually put on board ship, a nurse being sent with him, as at present no provision is made by steamship companies for the care of sick passengers.

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