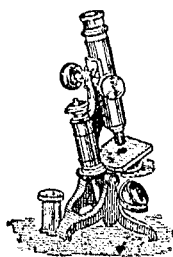


Medical Matters.

SURGERY IN THE FIELD.



Dr. Johann Reinecke who acted as Field Surgeon to the Boers during the recent war, chose as the subject for his dissertation when he recently received the degree of Doctor of Medicine from Berlin University "Some critical notes on the treatment of sick and wounded."

After stating that during the war conservative surgery stood the test of practice better than all else, Dr. Reinecke continued: "If I were asked to lay down a guiding rule for young field surgeons operating in a war, I should answer, 'a rational procedure founded on Professor Bergmann's doctrine, that wounds inflicted by small metal projectiles are not to be considered as infected, but as lesions pure and simple.' The surgeon ought, therefore, to suppress his scientific curiosity, and not touch the wound with the probe or with his hands, but clean it with soap spirit and apply an aseptic bandage. In the case of broken bones and injured joints care is to be taken that the respective extremities are immobilised. Care in carrying the patients to the nearest field hospital is also important, as well as, if possible, absolute repose for the first four or five days. There will, of course, always be exceptions where circumstances will necessitate an immediate operation, but they are very rare. The medical successes achieved during the war have placed it beyond doubt that the first bandaging is of decisive importance, especially in cases of grave injuries to the head, abdomen, joints, and bones.

"For this conservative method of surgical treatment the Boers were just the proper material. They bore even serious injuries with stoical calm. One Johannesburg commander who, in the battle at Pieter's Hill, on February 27th, 1900, had been shot through the left lung above the heart and also through the right upper arm, was taken to a neighbouring hospital soon after he was wounded. The following night the Boers retired, and next morning an English patrol came and its officer took down the names of the wounded Boers to order their transport to Ladysmith. This, however, was not to the liking of the Johannesburg commander. He got up at night, inspanned a wagon with four mules, and placed a young

field cornet, who was covered with wounds, on the cart. The commander had to drive the wagon and to hold the whip himself." After a week's travelling, during which time they were obliged to make a long detour to evade another English patrol, they arrived at Dr. Reinecke's Field Hospital at Van Reenen's Pass. The strain of the journey had apparently not done them any special harm, as, owing to the excellence of the first bandaging, the process of healing had gone on uninterruptedly.

TYPHOID FEVER WITH REFERENCE TO THE COLD BATH.

In a paper by Magayiner (*Med. Times*) it is stated that the cold bath as a method of treatment for asthenic diseases is growing in favour. Take simply a woman who has fainted, the pulse is feeble or absent, the respiration is shallow, while sensation and motion are abolished, the patient's vital powers being practically dormant. Application of cold water to the face or chest causes a reflex stimulus to be sent to the nerve centres, which produces a deep inspiration, the colour returns to the pallid cheek, the eye brightens, the pulse begins to beat again, and the asthenic condition is cured without further medication. Take another example. We have a patient suffering from an infectious disease; he has a thready pulse, shallow breathing, the dull eye, the picking at the bedclothes, and even involuntary defæcation. All these show us that we see the very apex of asthenia. Drugs are of little avail. But place such patient in a shallow warm bath, and pour with some force one or two basins at 75° over his head and shoulders, rub him gently, repeat if indicated, and the improvement is surprising. In this case, however, in contrast to syncope, this affusion must be repeated again and again, as the nerve-centres are poisoned afresh with toxic blood. Reaction and permanent improvement is at length established.

The action of the cold water in such cases is that it acts as a local stimulus to the coats of the superficial vessels; their paresis is removed, they again propel the blood, as was their wont; the heart responds to the relief thus obtained, and at the same time the central nervous system is bathed by cooler and better-oxygenated blood.

The particular hydrotherapeutic method adopted, whether by cold affusion, dip, spray, ablution, or bath, is of subsidiary importance provided it is always accompanied by friction.

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