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Medical Matters.

THE TREATMENT OF TUBERCULOSIS.



Time was when to pronounce a patient suffering from tuberculosis was to sound his death knell. At present the prognosis is very different, and the burden of four articles in a recent issue of the American Review of Reviews is hopefulness. One writer says :-

"It may be an exaggerated prediction to make, that twenty years hence may see the man or woman whom. the physician has diagnosed as suffering from lung trouble starting for the health camp in the vicinity of his or her abode, to return a few weeks or a few months later restored to health, and able to again take up life's pursuits-an era when some of the hospitals which have been constructed and equipped purposely to care for pulmonary patients will be needless, and consumption in its advanced stage almost as rare as small-pox or yellow fever; yet, judging by the results which have thus far been attained, there is a possibility of this state of affairs coming to pass, and not far in the future. The fact is, that out in the open, even amid snow-drifts of winter, there are elements which have more curative properties than any compound which has yet been prepared by the chemist, and the one who is not too far advanced in illness to spend nights as well as days living in almost as primitive manner as the Indian of the last century can be restored to health without the necessity of going thousands of miles to sojourn on a mountain top or in a land where snow is unknown."

A leading Pennsylvania doctor gives the following formula for the cure of tuberculosis :--

"Eight hours a day in the open air, unless the weather is so inclement as to make this a practical impossibility; a clean, healthy diet, consisting largely of milk and eggs; and the exercise of proper precaution against infection from the disease.

In the Whitehaven Sanatorium, one of the camps in which this treatment is practised, he states :-

"The patient who comes here and is able to remain in the open air is kept in it as long as possible. From May until December more of the inmates live under canvas than under wood, in the tents which are put out upon the grounds surrounding the buildings. In the spring the pegs are driven, and until snow comes the tents are inhabited. Then the "winter camps," as they are called, are occupied by those hardy enough to enjoy them. Scattered through the groves of trees on the hillsides in the vicinity are shacks and sheds, some composed of limbs of trees, built with axes, saws, and their penknives by those who are to occupy them.

At a sanatorium in Massachusetts

"during one year, out of 141 persons treated, 56 departed apparently cured, while 30 who were unable

to remain longer were so greatly improved that the majority have since literally healed themselves. Of the 141, 75 were what physicians termed in an advanced stage, all of the symptoms being prominent.'

Diet now plays an important part in the treatment of tuberculosis, and, as it is estimated that thousands of the tenement-house population of New York become consumptive by reason of their weakened powers of resistance, the following *régime* is in force in the hospitals devoted to patients from New York :

"The temperature of the hospital is seldom above 60 degrees; there are nine hours of sleep, and the patients eat nine times a day :-

"At 6.a.m., a breakfast of cereals, bread and butter, coffee, and beefsteak or poached eggs

"At 8 a.m., cod-liver oil, with whisky or sherry.

"At 10 a.m., eggnog. "At 12 m., dinner, consisting of soup, beef, or mutton, potatoes, another vegetable, and bread.

"At 2 p.m., cod-liver oil and plenty of sherry.

"At 3 p.m., beef-tea.

"At 4 p.m., eggnog. "At 5 p.m., supper of pudding, a soft-boiled egg, bread and butter, tea.

'At 8 p.m., hot or cold milk."

We should think the flotsam and jetsam of the New York tenements must think they have got into another sphere when they enter a sanatorium for treatment.

UNIQUE OPPORTUNITIES OF NURSES.

Dr. Richard C. Cabot, of Boston, points out in the American Journal of Nursing that to fit nurses for a full and satisfying career after graduation, training - schools should do what they can to develop the taste and capacity for original observation. In the nurse's professional life there is rarely any cumulative. element, any steadily-developing project which each year's work can carry a step further. For the lack of this the nurse's life is apt to fall apart into a series of disconnected cases which make up no whole, further no specific end. Dr. Cabot adds :----"The nurse has unique opportunities of which no one else can take advantage, the opportunities accorded by her continuous attendance upon the patient. The nurses of the Massachusetts General Hospital are now at work upon a cooperative research into the conditions and significance of vomiting. For this study they have far better opportunities than the physician, and it is my impression that they already know more about the subject than most text-book writers. Once accustomed during her school year to observing and tabulating facts, the dignity, interest, and value of the nurse's work after graduation will be greatly increased,"



