

Lauder Brunton quotes* the case of a lady who was severely burnt and died in a few days from shock, but who suffered very little pain because she was "put into a bath at about the temperature of the body and kept there the whole time." You may be instructed to use the bath during the daytime only, and to apply wet boracic dressings during the night.

A patient treated by immersion must be carefully watched, and on no account left alone; great care must be taken that the head is properly supported, and that the temperature of the water is kept between 95° and 100° F., preferably at blood heat.

NOURISHMENT.

The question of nourishment is difficult but all-important. Whilst doing all in your power to support the patient's strength, you must not unduly press food upon him—his digestive organs are most probably out of gear, and remember that during the first six or eight days there is always a fear of intestinal congestion and inflammation. During this period he should have a light diet, consisting of milk, eggs, cocoa, strong beef-teas and beef essences, and such starchy foods as arrowroot, bread and milk, &c. If there be no great constitutional disturbance, he probably soon will be allowed a little boiled fish and chicken, but, generally speaking, milk should be the staple food for the first week or so. Still, every case must be treated on its own merits, as different individuals, even in health, vary so widely in their powers of assimilation.

CONTRACTION AND DEFORMITY.

After burns of the fourth, fifth and sixth degrees, when a large area is involved, there is always a certain amount of scarring and deformity, due to the contraction caused by the formation of fibrous tissue. The surgeon will do all in his power to mitigate this by skin grafting and the use of suitable splints, bandages, and other appliances. It will be your duty between his visits to see that these are kept in the proper position, even though this causes discomfort and some pain. Carelessness in this respect may entail serious consequences on the patient in his after life.

BURNS BY CHEMICALS.

I was astonished to read in a nursing paper a short while ago instructions, in cases where the injury had been caused by an acid, to plunge the burnt limb into water before removing the clothing. Whoever gave this advice made a grievous mistake; the writer surely cannot have known that mixing water with a mineral acid will produce heat. If you are present when the accident occurs, or you happen to see the burn whilst the acid is still wet and the skin unbroken, your proper course would be to cover it immediately with a neutralising alkali, such as powdered chalk, magnesia, or soda; but if the burn be of the third or higher degree, you

* "Action of Medicines."

should use a dressing of eucalyptus ointment or cyanide gauze wrung out in sublimate solution—1 in 6,000. The same applies to injuries caused by the caustic alkalies, the neutralising agent to be employed under these circumstances consisting of vinegar or dilute acetic acid, applied on strips of lint.

GENERAL HINTS.

If either as a district nurse or when dressing out-patients in a cottage hospital or district dispensary it is your duty to look after a patient suffering from burns, whom you can only see once or twice during each twenty-four hours, remember not only to take the pulse and temperature, but also to watch the respirations, and to inquire if there be any cough, and to note if one seems to be developing; children, especially, are liable to the complication of septic pneumonia, which frequently proves fatal, and it is one for which you must watch. You will also have to be on your guard against the substitution for your dressing of some favourite form preferred by the mother, who may pin all her faith on some such application as slices of raw potato placed next the wound and then covered with flour. You may also have to combat a deeply-rooted theory that holding a burn to the fire will "draw it out." I have known cases where one has had much difficulty in persuading the patient's friends that such heroic treatment will only aggravate the injury and cause needless pain instead of bringing about a speedy recovery.

And now one last word as to the best means of extinguishing burning clothing. Doubtless you are all aware that this can best be done by smothering the fire with rugs or anything of that nature at hand, but I do not know whether you are also cognisant of the fact that the clothing of a person in an upright position will burn much more fiercely, and the fire will be much more difficult to put out, than if the person be lying down. In the latter case, if the clothing be not highly inflammable (flannel and not flannelette, for instance), the flames will almost die away of themselves, and in any case the patient's head and neck are much less likely to be injured, a matter of some importance when we recollect that burns of any magnitude are especially dangerous to life in this position, and the shock from them is very intense.

Wedding Bells.

The marriage recently took place at All Souls' Church, Willesden, of Mr. Edmund T. Tingey, of Hatfield, and Miss Flora Mansbridge, niece of Mr. and Mrs. Pratt, of Harlesden. Mrs. Tingey holds the certificate of the London Homœopathic Hospital and of the British Lying-in Hospital, Endell Street. She worked for three years on the staff of the Registered Nurses' Society, resigning this position in January last, and was a most successful and popular private nurse.

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