

brain recovers more or less completely from the injury which it has suffered, the nervous, and therefore the muscular, power will be more or less recovered, so that movement may be more or less completely restored. It can be easily understood that in many instances this is a slow process, and that the patient will be more or less helpless for weeks or months. Or the brain may so far recover that the patient becomes able to take an intelligent interest, and even to work; but the motor nerves first affected may not recover from the damage they have suffered; and then, of course, the power of the muscles supplied by those nerves can never be restored, the link between the controlling brain and the controlled muscle being permanently destroyed. Between these two classes of complete and permanent paralysis, and complete recovery, there are, of course, great variations; and the extent of the recovery of the muscle-power often depends upon the carefulness with which the patient is nursed. For example, the use of massage or galvanism, which is usually adopted to assist in the recovery of the muscle tone must be most carefully and systematically carried out, if the patient is to have a good chance of recovery. The realisation of this fact was the chief reason for the institution of instruction and training in massage. And although much discredit has been thrown upon the system by some who have professed it, and although much want of faith has been caused in the public mind by the carelessness and ignorance of other so-called masseuses, there is no doubt that massage will become more generally employed in the future, and that as nurses who adopt the work are trained in it more carefully, and carry out their duties more conscientiously, the popular and professional appreciation of masseuses will steadily rise. When one realises that a muscle which has been paralysed, and is left severely alone, tends every day to shrink and contract, to dry up and become more and more useless, one easily understands the great benefit which may accrue from the careful use of passive movements by the nurse, or of the galvanic battery, helping the muscle to contract and relax, keeping it, therefore, in activity, and preventing the muscle degeneration, which want of use inevitably brings about.

(To be continued.)

If a frightened or refractory child will not open its mouth, a good plan, says a contemporary, is to pass a probe between two teeth, and back to the palate. Instantly the mouth will open and a gag may be slipped in.

The Visiting Nurse's Part in the Anti-Tuberculosis Work in America.*

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(Concluded from page 145.)

The work of the tuberculosis nurse is very practical and very far-reaching, and gives opportunity to a large play of ingenuity.

When a case is reported to the nurse she at once makes a visit to the home. If the patient has been to the dispensary she provides herself with a report of his case and the details as to his social condition. If he has not been to a dispensary and is able to go, she persuades him to do so in order that his case may be properly diagnosed and the general instructions given. She then makes a careful note of his home and surroundings, she explains to him and to his family that it is absolutely necessary that the patient sleeps alone, instead of in the same bed with two or three others. This, at first, perhaps, seems impossible, but by a shifting of the family a single bed is often managed, and when that is impossible a cot is procured from some organisation already pledged to provide cots when necessary. The next point insisted upon is fresh air. To procure this day and night necessitates the greatest tact and also the greatest ingenuity. Sometimes it is obtained by merely opening the windows, or placing a steamer chair or a hammock in the yard. Sometimes a porch or a balcony is transformed into a bedroom; or the flat roof of a house is utilised. At times a landlord can be induced to knock out a wall, or add a balcony or a platform. If it is impossible to procure fresh air in any of these ways the nurse persuades the family to move to some other quarters where air and sunlight are obtainable. When a proper place has been arranged for the patient he is taught how to take his rest. The medical day is instituted, the hours are prescribed, and the minutest detail of every hour of the day is planned for. If he is unable to work, and has been spending his time sitting over the fire or dragging himself miserably about from place to place this is comparatively easy; but if he is still endeavouring to hold his "job" it is more difficult. It is then necessary to make arrangements whereby he can either take a few weeks' rest, and have his place held for him; or get him a place on half-

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