

## The Midwife.

### Oedema and Albumen in Infants.\*

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A case of oedema and albuminuria in an infant having occurred in this hospital, a brief description of the case may prove of interest to some of the many readers of our nurses' journal. A case of this sort, being the more interesting on account of its rarity, and proving how closely the pre-maternal condition of a mother affects the after condition of her child.

Patient (Mrs. N.), a young primipara, was admitted in an almost prostrate condition, despite the ante-partum treatment during latter months, the oedema remained most marked all over patient, the vulva and perineum hanging in long blisters, resembling the large blebs of a scald. These were reduced by frequent applications of cold water and methylated spirit before the delivery, which terminated under an anæsthetic about 6 p.m. on April 21st, 1908. Albumen was almost solid in urine.

"Matron, baby N.'s left leg is very swollen," was the announcement I received the following morning, the infant then being about fourteen hours old.

On examining the child, I found both feet very puffed, especially the ankles, which looked like large scalds, the swelling of left leg extending to groin; the skin being tense and glassy did not pit on pressure as the mother's had done. I rang up our doctor, but she was out, so I bandaged both legs, and raised them on a small pillow. Later on the doctor prescribed the following treatment (by which time the oedema was much more extensive):—

1. Urine to be tested, if possible, for albumen.
2. Long saline injection to be given per rectum.
3. Steam pack.

When the infant was undressed the oedema was found to have extended over the whole body, excepting face, the vulva being glassy and distended.

A hot pack, lasting half-an-hour, induced profuse sweat, after which child was rolled in hot dry blankets.

Next morning oedema was found to be

greatly reduced in lower limbs; child was then given hot bath and dressed.

As oedema remained marked in vulva, cold applications were kept to parts with the result that the swelling gradually disappeared.

The little hands were the last to lose their oedematous condition.

Saline injections were given twice per rectum, urine was scanty, being passed only once in first 24 hours, once in next 16 hours, thence twice daily in small quantities. Test of urine revealed albumen, marked at first, gradually lessening. Both mother and child made a good recovery, although albumen remained heavy in the mother, who gave the history of having had kidney trouble for years. She is now only 19 years of age, and has been under treatment for threatened Bright's disease.

N.B.—The hot pack for baby was given in the following manner:—A large blanket lined a cot, over this a mackintosh was placed, next a small blanket rung out of hot water, infant being undressed, was placed on the wet blanket, another hot, moist blanket (small) was placed over chest and limbs, then mackintosh folded over, enveloping child from chin to extremities, completely covering the moist blankets, over this the large blanket was tucked tightly, and hot bottles placed in cot outside outer blanket.

The child was watched closely the whole time, and pulse felt in common carotid artery.

Teaspoonfuls of mother's milk, or sugar of milk solution, were administered to infant to prevent exhaustion.

### Rotunda Midwifery for Nurses and Midwives.

A very admirable manual for nurses and midwives is that by Dr. G. T. Wrench, late Assistant Master at the Rotunda Hospital, published by Henry Frowde, of the Oxford University Press, and Hodder and Stoughton, Warwick Square, E.C., price 6s. net.

Dr. Wrench, in his preface, says that when teaching nurses at the Rotunda Hospital he was often impressed with the difficulty they had in understanding the manuals provided for them. Technical language has, therefore, been avoided as far as possible, but when its use is necessary it has been fully explained in the text, and the derivation of the words has been given.

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