

We hear of 600 nurses being needed in the hospitals of the Metropolitan Asylums Board alone, of wards in children's hospitals being closed for lack of probationers. There are still many employable women who are unemployed. Surely the need has only to be understood to be met.

The bureaucratic nursing committees in connection with the War Office have proved themselves totally incapable of elasticity of mind and action, and it is high time the Minister of National Service called in the aid of experts possessing creative faculty and power of organization.

### OUR PRIZE COMPETITION.

WHAT DO YOU KNOW OF EX-OPHTHALMIC GOÛTRE, ITS SYMPTOMS AND NURSING CARE?

We have pleasure in awarding the prize this week to Miss M. D. Hunter, Section Hospital, Kington, near Warwick.

#### PRIZE PAPER.

Ex-ophthalmic goitre or Grave's Disease is due to excess of secretion of the thyroid gland. It is commonest in girls of from 18 to 25 years of age. The chief symptoms nearly always appear in the following order:—

(1) *The heart is quickened*, therefore these cases have a quick pulse due to the frequent heart action. Pulsation of the carotids will be noticed. Usually, too, there are sweats and hot flushes.

(2) *Protrusion of Eyeballs* is very noticeable, and this, *ex-ophthalmos*, suggested the name of the disease. It is supposedly due to dilatation of vessels and increased connective tissue and fat of the orbit. By holding up a finger and telling the patient to look at it while gradually bringing it lower, the eyelid will not quite follow the eye, but lags behind, thus proving "Von Graefe's sign" to be present. If there is weakness of the convergent muscles, it is known as "Mobius' sign."

(3) *Swelling of the Thyroid* occurs, but not till some months later than the two previous symptoms. If the hand is placed over it a thrill can be felt. The enlargement is quite symmetrical.

(4) *Fine Tremor* is present, and also extreme nervousness and excitability. The tremor is best seen by telling the patient to hold out her arms straight in front of her, when it will be easily detected in the fingers.

Other minor symptoms are headache and giddiness. The patient feels languid and has little appetite. She is usually anæmic and thin. The skin will feel quite moist, which is, of

course, the exact opposite to that found in myxœdema. Nearly always there is acute constipation, and some doctors have a theory that this is the primary cause of the disease. The voice is often feeble. In rare cases vomiting occurs, and is a serious symptom, as it has been known to persist in spite of all treatment, thus eventually causing death from exhaustion.

The nursing care is likely to be very prolonged, as the treatment takes a long while. Rest in bed is essential, with plenty of fresh air and no excitements. In fact, a sort of modified rest cure is needed, but isolation is not necessary. Sometimes electrical treatment is ordered, consisting of prolonged daily applications of a moderate faradic current to the neck. Cold applications are best applied by Leiter's tubes, which in many cases are very effectual in reducing the thyroid swelling. Surgical interference is not generally recommended, as in mild cases medical treatment answers best, and in severe cases operative measures are so risky, and therefore inadvisable. The only operation generally possible is a partial re-section of the gland and ligaturing of two or three of the thyroid arteries. Feeding is very important, and plenty of milk must always be given—the constipating effects counteracted by suitable aperients. Tea and coffee should not be allowed, but cocoa is an excellent substitute. When possible, it is a good plan to give the patient the milk of goats from which the thyroid gland has been removed. The diet should be light, and fruit is generally allowed. As the most usual drugs given are arsenic or belladonna, the nurse should be well acquainted with symptoms of overdose. Belladonna is a great sedative, but if the patient complains of dryness of mouth, the medical man should be informed at once.

#### HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss M. Cullen, Miss S. Simpson, Mrs. Farthing, Miss P. Thomson, Miss J. Robinson, Miss E. Bleazby.

Miss Cullen writes:—Anæmia, also debility, are present, and a feeble action of the heart. The stomach in many cases becomes irritated, causing vomiting, and sometimes diarrhoea. The urine should be frequently tested, as sometimes sugar and albumen are found to be present. This disease is most common in women between the ages of 20 and 30 years.

#### QUESTION FOR NEXT WEEK.

What is the function of the blood? Why may hæmorrhage cause death?

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