

ciently clear pyelogram for diagnosis. If desired, an ascending pyelogram may be made afterwards.

EXAMINATION OF URINE AND ESTIMATION OF BLOOD UREA.

Only a catheter specimen is of use for female patients when renal disease is in question. Substances, which may be found in the urine which denote renal failure, are blood, albumen and sugar. The presence of sugar does not necessarily imply diabetes mellitis; it may be that the renal threshold for sugar is lowered owing to disease of the kidney. Tests for blood urea are of great value in estimating renal function. The normal blood urea is from 15 to 40 mgr. per 100 cc. If the test shows a greatly raised blood urea it implies that one or both kidneys are not functioning correctly. Urea in the blood has itself no harmful results, but its presence in large quantities is a guide to the presence of much more harmful substances.

STONE.

When a stone passes from the kidney to the bladder the patient suffers from severe renal colic. This is a very acute abdominal pain, usually radiating downwards. When the stone is in the bladder it can be broken up by means of a lithrotrite. Not very long ago, this instrument was "blind," that is to say the operator could not see what he was doing inside the bladder, and, as a result, was liable to nip and crush part of the mucous membrane of the bladder along with the stone. The modern lithrotrite is combined with a cystoscope so that no such accident can occur. A method of removing broken up fragments after the lithrotrite has done its work is by the use of a cystoscopic evacuator. This is a cystoscope to which is attached a syringe. The bladder is filled with fluid; then the pressure is suddenly released, and the fluid carries out with it any gravel which may be in the bladder.

THE USES OF DIATHERMY IN SURGERY OF THE URINARY TRACT.

Mr. Ainsworth-Davies gave many practical demonstrations of what he had described by the ingenious adaptation of a few ordinary things to his purposes. He had brought with him diathermy apparatus to illustrate his lecture, and by using a piece of meat and an egg showed his audience the difference between the actions of the cutting and coagulating currents. The electric current employed in diathermy is a very rapidly alternating one, the number of oscillations being one million per second for the coagulating current and five millions per second for the cutting current. One terminal of the apparatus is in the form of a lead plate, or belt, which is attached to the patient's arm, leg, waist or neck, and the other terminal, the active one, is passed through a cystoscope and used to destroy or to cut away any growth. With the cutting terminal there is just sufficient coagulation to seal the blood vessels and prevent hæmorrhage. The cutting current may be used to help in the removal of a stone impacted in the ureter. The orifice of the ureter is first enlarged slightly with the diathermy, then dilators are passed up the ureter until it is sufficiently enlarged to allow the stone to pass. In the last few years it has been discovered that certain forms of prostatic enlargement can be treated with cystoscopic diathermy; this applies particularly to cases in which the part of the gland enlarged is that which borders on the floor of the bladder. Such a growth obstructs the passage of urine and prevents the complete evacuation of the bladder; to remove it the surgeon makes use of a cutting terminal in the form of a loop. This is passed through a cystoscope, and with it the operator then scoops away slices of the growth until the floor of the bladder is level. When a growth is small, even if it is malignant, the spread of metastases is prevented by the use of the cutting current,

as this seals the blood vessels, thus preventing fragments of the growth from spreading along the veins. When the bladder contains a growth too large to be removed, the surgeon may perform an operation to transplant the ureters into the rectum. At a later operation the bladder is removed along with the growth. It is important to remember that in their early stages 75 per cent. of malignant growths of the urinary system are encapsulated, and, therefore, if they are treated sufficiently early, give rise to no secondary deposits.

Mr. Ainsworth-Davies closed his lecture with some remarks concerning the nursing care of urinary cases. The urinary case has to suffer very great pain and inconvenience and should be treated with sympathy and understanding. Mr. Ainsworth-Davies also deplored the false modesty of some nurses which prevented them from giving sufficient attention to the treatment of male patients with urinary complaints.

LECTURE.

On Friday, January 22nd, Dr. Tempest Bennett, M.C., D.P.H., M.D., will lecture on Tuberculosis and the State, at 3 p.m.

194, Queen's Gate,
London, S.W.7.

ISABEL MACDONALD,
Secretary to the Corporation.

THE INTERNATIONAL COUNCIL OF NURSES.

THE CONGRESS INSCRIPTION FORM.

Thos. Cook & Son report good progress in overseas arrangements for the forthcoming Congress. In November they sent appropriate supplies of the Congress Inscription Form, printed in English, French and German, to all Presidents of the Affiliated National Associations of Nurses. Further, they have communicated specially with their various Offices, advising the agreed arrangement for collection of Subscription Fee, *i.e.*, the completed Inscription Form and Identity Certificate will be presented to their nearest local Branch and the Office will collect the 10s., the official receipt to be obtained by Thos. Cook & Son, from 39, Portland Place, for the intending delegate.

They have already received acknowledgments from Belgium, Bulgaria, Canada, Greece, South America, Norway, Sweden, Poland, Czecho-Slovakia, France, Austria, Switzerland, Egypt and the U.S.A., that contact has been made with the various Presidents, and they have already received advice to effect provisional hotel reservations in London for a party of 500 delegates from Canada and America, 200 from Sweden, 40 from France. The delegations require varying grades of accommodation from superior first grade to ordinary second grade.

Provisional reservations have been made at the Mayfair, Victoria, Grosvenor, Langham, Howard, Berners, Rubens, Rembrandt, York, Imperial, Palace Hotels, and 50 beds in the Court Hotels in the Kensington Area.

Delegates are being locally advised that early application should be made for accommodation, owing to the influx into London for the Coronation.

In Great Britain.

We advise all nurses in Great Britain wishing to reserve accommodation for the Congress in London to do so through Thos. Cook & Son, unless they have friends offering them hospitality. In the latter case Congress Tickets will be available at Headquarters, 39, Portland Place, London, W.1, on the presentation of Identification Certificates, on or after March 1st, 1937.

[previous page](#)

[next page](#)