

Elementary Anatomy,
AS APPLIED TO NURSING.

By BEDFORD FENWICK, M.D., M.R.C.P.,

Physician to The Hospital for Women.

LECTURE III.

(Continued from page 224.)

FROM what I have said, it will be evident to you that venous bleeding, as a general rule, is of a much less dangerous and much more easily controllable a character than arterial bleeding, and it may be said that venous bleeding can almost invariably be checked by pressure upon the wound; for example, severe bleeding may be taking place from a cut in the forearm, yet the pressure of the finger upon the spot is sufficient to restrain it. To some extent, this is equally true of arterial bleeding, but not invariably so. The first point, therefore, for the Nurse to remember when confronted with external hæmorrhage, is, if possible, to see the exact spot from which the hæmorrhage comes; then to place her finger on the spot for the moment to check the loss. If the hæmorrhage be venous she will probably need to apply firm pressure by means of a pad of lint and a turn of bandage. But if the bleeding be arterial—if the whole force of the heart be behind it propelling the blood through the torn vessel, common sense would prompt the treatment which practice proves to be necessary—the placing of pressure upon the artery between the heart and the wound. For example, if the bleeding in our imaginary wound in the forearm be arterial, a turn of bandage tightly round the limb above the wound, that is to say upon the artery between the heart and the open vessel, would immediately control and stop the hæmorrhage. Such is the general treatment then of ordinary surgical accidents in which bleeding is present, as for example, from cuts or stabs or other external wounds. There are, however, other forms of hæmorrhage in which the Nurse is often required to act, and act with decision, prompted by knowledge and experience, if she is to do her duty to her patient.

Hæmoptysis is the medical term to denote bleeding from the lungs. It is distinguished from other hæmorrhages which may come from the mouth by the fact that it is usually scarlet in colour, accompanied with froth and mucus, and usually expelled with more or less violent fits of coughing. It is rare and almost unknown, except in cases of advanced lung or heart disease. In consumption, one of the vessels, larger or smaller as the case may be, in one of the lungs, becomes ulcerated through, in the progress of the disease, and blood is therefore poured out into the air passages. In some forms

of heart disease, in which extreme congestion of the lungs is caused by obstruction to the return of blood through the pulmonary veins, a condition of these vessels sometimes occurs, which may be not unfairly compared to the varicose condition of the veins in the legs of elderly people. This latter form of bleeding represents nature's effort to relieve the overloaded heart, and is rarely so severe as to demand active local treatment, if, indeed, it be wise that such treatment should be carried out to check what, theoretically, is of great benefit, and, practically, is often of great relief to the sufferer. But in the bleeding of consumptive patients, which may be, and often is, to an extreme amount, the patient not only suffers from the possibility of death from bleeding, but of death from suffocation by the air tubes becoming full of the blood, which he is unable to expectorate. Whatever the reason of bleeding from the chest may be; whether it be in cases of consumption or of heart disease, or of comparatively rare cases of aneurism, the first essential is that the patient shall be kept at perfect rest, flat on his back in bed, and with the head but slightly raised. If medical aid cannot be obtained it will do the patient no harm to have pieces of ice to suck. Ice bags are ordered to the chest, it is of the first importance that they should be bags of ice, and not be allowed to become bags of warm water in consequence of careless neglect in refilling the apparatus with fresh ice.

Hæmatemesis, or bleeding from the stomach. This is characterized by the blood being usually of a dark, sometimes of an almost pitch-like, character, mixed with food, and expelled by vomiting. It is usually caused by diseases of the stomach or liver, most commonly by ulceration of the former; but it must be remembered that it may proceed from causes entirely independent of disease at all, a fact which is sufficiently important for the Nurse to remember as a means of checking her observation, for me to relate to you an illustrative case. I was recently called to see a young lady who had that morning alarmed her friends, herself, and her medical attendant, by vomiting a large quantity of blood. She had had none of the ordinary signs of commencing ulceration of the stomach, she had never suffered from indigestion, and, in fact, she had been in excellent health; but there was no doubt as to the nature of the dark, pitch-like fluid which she had rejected, nor as to its quantity, which was nearly a pint in amount. The origin of the blood was a mystery until I pursued the plan which should invariably be adopted in every case of disease, and that is, of *inspection*. On examining the interior of the mouth, I found blood welling up from the cavity of a tooth, and then learnt that, the day before, she had had an offending molar removed, from which blood had evidently been coming more or less ever since, and which she had

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