

## Elementary Anatomy,

AS APPLIED TO NURSING.

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### LECTURE V.

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THE typical signs of pyæmia are rigors or shivering attacks accompanied by high temperature, and then the formation of abscesses in other parts of the body, and especially in the joints, in the spleen or the lungs. Once the condition of pyæmia is fully established, you will readily understand that it is almost invariably fatal, because the multiple abscesses speedily exhaust the patient's strength. Formerly, Hospitals were hot-beds of pyæmia, and especially those which were devoted to military cases in times of war, when overcrowding and lack of care and cleanliness gave rise to all those diseases which we now associate with the presence of bacteria. The advent of trained Nursing into Hospitals has in no way been productive of more wonderful results than in the diminution of these septic diseases, and cleanliness has, in many Institutions, banished this dreaded and fatal complication of wounds. Twenty years ago, cases of pyæmia were of every-day occurrence; to-day, they are looked upon almost as a surgical curiosity, in properly managed and efficiently nursed Institutions. By some, the credit for this improvement has been given to the antiseptic system. Others, more justly, attribute it to the fact that, during this period, educated gentlewomen have adopted the profession of Nursing, and have carried cleanliness and perfection of domestic detail into the management of our Palaces of Pain, so that the sick poor are not only better cared for but are better cured.

The last complication of wounds to which we need refer at present is that which is known as *Erysipelas*. This is characterized by a deep red flush around the surfaces of an open wound, which gradually fades away into the adjacent skin. There is usually considerable swelling of the affected parts with inflammation of their deeper tissues, sometimes going on to what is known as cellulitis or inflammation of the cellular tissue underneath the true skin. There is generally a steady high temperature and often a low form of muttering delirium. The latter is especially frequent when the erysipelas attacks the face or head, and such cases may go on to fatal disease of the membranes of the brain. Once more, this is distinctly a bacterial disease due to dirt, and, moreover, differs from pyæmia in being more or less distinctly infectious. It is, therefore, necessary to isolate cases suffering from this complaint from other patients, and it is also the custom,

in all properly managed Institutions, to isolate the Nurses who are attending upon such cases, so as to prevent the conveyance of the infection as far as possible.

It is important to remember that there is a close connection—a kind of first cousinship, if one may so term it—between erysipelas and puerperal fever, and that the latter disease may be caused in a lying-in woman by the contagion of the former. This has, unfortunately, been proved by clinical experience—chiefly in days now long gone by—and a curious fact was then also established that the mother would die of puerperal fever, and the child would be affected by erysipelas and die therefrom. The fact deserves to be carefully remembered, and proves beyond dispute the cardinal importance that Nurses, should never, upon any excuse, go from attendance upon any infectious disease direct to a lying-in case. The comparative infrequency also of these diseases now, as compared with the terrible mortality they wrought less than thirty years ago, is another proof of the advances which have been made in medical treatment and in the safety of Hospitals within recent years.

From wounds, we pass by an easy gradation to consider Burns and Scalds. There are usually said to be no less than six different varieties of these conditions, and these can, perhaps, be best remembered in connection with the methods of their occurrence and with their consequences. Briefly, then, these accidents fall into the following classes:—

1. There is only caused a congestive redness of the skin. The momentary contact of the surface with a burning substance such, for example, as a lighted match, or, in old people, the long continued exposure to the heat of a fire causing on the front of the legs more or less redness, are examples of the first class of burns. The contact, in like manner of the hand with very hot water, gives the same condition, and typifies the same variety of scald. The only symptom, as a rule, beyond the redness, is more or less tingling pain of the affected part, and both gradually pass away, although in the burn of the leg in old people, to which allusion has been made, the constant recurrence of the condition causes in time a permanent and more or less brownish discoloration of the skin.

2. The cuticle is affected and to a smaller or greater degree detached. This is simply a somewhat advanced condition of the former variety due to much the same causes, but of slightly longer duration. In its consequences such an accident is rather more prolonged so far as the disappearance of the congestion and the pain are concerned, but otherwise differs little, if at all, from the former class.

3. The whole of the cuticle and part of the *cutis-vera* is destroyed. Here we come to the first

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