

Elementary Anatomy,

AS APPLIED TO NURSING.

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LECTURE VI.

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THERE is another form of curvature which is both angular and lateral, and which is most commonly found amongst young children of the very poor. It is caused by rickets, and is distinguished from the other varieties by the distortion of all the limbs. It is, as a rule, very difficult to treat, because it is usually far advanced before it comes under medical observation, and the constitutional weakness of these children, and the insanitary surroundings in which they live, are almost insuperable drawbacks to the necessary improvement of their health.

The first principle to be observed in the nursing of such cases is, that the child shall be kept at perfect rest either on its back or face, because even the pressure of the body, when it sits up, is frequently sufficient to increase the distortion of the spine. Then the administration of various salts of lime which have the effect, as we have seen in a previous lecture, of hardening and developing the bone tissue, is of the greatest importance. Next to these comes, undoubtedly, Cod Liver Oil; and, very often, the measure in which the child can be persuaded to take this preparation denotes the future of the case. It is well, therefore, to remember that most children can be persuaded to take this oil if it be only presented to them in a sufficiently palatable form. An old-fashioned and very useful method consists in pouring into a wine-glass about an ounce of orange, or cowslip, wine, letting the child sip a little of this so as to obtain the taste of wine in its mouth and to moisten the edge of the wine-glass, then pouring the dose of the oil into the exact centre of the wine, preventing it, therefore, from touching the edge of the glass, and then persuading the child to rapidly drink the whole contents of the wine-glass by gulping it down. In older patients, it is sometimes necessary to give a pinch of salt after the administration of the oil, and this, as a rule, effectually removes the disagreeable taste. At any rate, it is well worth any amount of trouble, in some cases, to obtain the successful administration of this invaluable form of medicine.

LECTURE VII.—THE CHEST.

THE main injury of importance to which the chest-walls are liable, is fracture of one or more of the ribs. This is invariably due to direct violence; most commonly in the form of sudden powerful

compression, such, for example, as occurs when a man is jammed between a van and a wall. The symptoms are extreme pain at the moment of the injury, followed by shortness of breath, a dry hacking cough, and other signs either of irritation of the *pleura*—the bag lining the inside of the chest and covering the lung—or perhaps even of perforation of the latter organ by a splinter of the fractured bone. It is very common to have this accident followed by pleurisy, or by inflammation of the lung substance. If the lung is affected at all, there is usually some amount of hæmoptysis. The treatment consists, of course, in uniting, as soon as possible, the fractured bones, and this is the more easily accomplished because the ribs, above and below those injured, act as a kind of artificial splint, and so maintain the broken ends in fairly good apposition. Still, it is necessary to secure perfect rest to the bones, and especially so if there be any evidence of commencing pleurisy or pneumonia. And to effect this it is customary to apply strapping over the broken rib to render it, as nearly as possible, immobile, and then a bandage round the chest. The opposite side of the chest then will, by greater expansion than under ordinary circumstances, carry on the action of the lungs until the strapping can be removed and the affected side once more allowed to expand naturally. The same principle, it is well to remember, is often adopted with much advantage in cases of chronic pleurisy or muscular rheumatism of the chest walls; the beneficial results, in either case, being attained partly by the physiological rest which is secured, and partly by the effects of pressure.

By a natural gradation, we now come to consider the various injuries and diseases to which the breast is subject. Of the former, the most common, naturally, is a bruise from blows or falls. In unhealthy people, this condition not unfrequently goes on to the formation of an abscess which must be treated on the general principles already explained. In any case, bruises of the breast often cause unusual extravasation of blood in consequence of the comparatively large size of the superficial vessels of the organ, and their tendency, therefore, to become ruptured on the occurrence of direct injury. The resulting blood clot may be some time before it is completely absorbed, and thus a hard lump, more or less tender upon pressure, may remain for weeks or even months. Sometimes, by pressure on a nerve, this lump may set up troublesome neuralgia, and there can be no dispute that, in a certain number of persons who are predisposed to the formation of malignant growths, such blood clots may prove the starting point of a cancerous deposit. Quite recently, for example, I have seen two patients in whom this occurrence has taken place, and in each the malignant disease was observed to form in a

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