

dusted with iodoform, or some other absorbent powder, and then dry absorbent wool being applied. This not only takes up the little serous discharge which may follow the operation, but will successfully and completely exclude the air from the wound.

The use of the catheter will depend again, of course, upon circumstances. As a general rule, it should never be used unless it becomes absolutely necessary; and, in a great many cases, a little patience will obviate the necessity. But, in these particular cases, its use is imperative for the first two days, not only because, as a general rule, patients are unable to do without its aid, but also because one or two drops of urine trickling on to the wound would set up quite sufficient irritation on the raw surfaces to prevent union, and so the whole operation would fail. It is, therefore, necessary, in these cases, for the catheter to be passed most carefully, and this should always be done with the assistance of a good light, so that the Nurse can see exactly what she is doing; and the patient should be placed on her left side with the knees well drawn up. Every gynaecological Nurse should make it a special effort to obtain, as soon as possible, the ability to use the catheter easily and painlessly, so far as the patient is concerned, because, in a very large number of cases, its use may be required for the first twenty-four hours after a gynaecological operation.

The first cardinal rule to be observed in the use of this instrument is that it must be absolutely clean. The slightest impurity in the track of the catheter—and it is a difficult instrument, of course, to clean internally—may set up extreme inflammation of the bladder known by the technical name of *Cystitis*; a consequence which in old people is most dangerous, because of the frequency with which the inflammatory condition spreads to the other tissues in the vicinity, or may even affect the kidneys. Even in younger and fairly healthy people, the occurrence of cystitis means considerable discomfort, if not actual suffering, and as a rule the prolongation of convalescence by days, if not by weeks.

It should, therefore, be an invariable rule, that immediately after the use of the catheter it should be placed under a tap either of warm or hot water, and a stream allowed to pass freely through it for two or three minutes so as to remove anything which may have entered and been retained in its track. Then it should be placed in a saucer containing either Condry's fluid solution or carbolic acid or perchloride of mercury or some other equally efficacious antiseptic solution so as to render it perfectly aseptic. If it is likely to be wanted again, soon, it should be next placed in cold water, and there be kept until it is needed. If it will not be wanted for a day or two, after

being in the antiseptic solution for an hour it should be carefully dried and placed in a clean glass vessel protected from dust; and, above all things, every patient should have a catheter sacred to herself; that is to say, the same catheter should never be used for more than one patient. With such precautions as these there should be no danger, always providing that the instrument itself is carefully employed. There are a great variety of forms of catheter, but the best for all ordinary purposes consists of a gum-elastic catheter No. 7 or No. 8 in English size. The glass and metal catheters which were formerly recommended and used for gynaecological cases have fallen into disuse because of the disadvantages in their employment by the Nurse; as they require some amount of experience and anatomical knowledge to employ them, and even then may cause much harm to the patient; whereas the gum-elastic form is not only soft, but will almost find its own way through the urethra without undue pressure upon, or bruising of, that canal.

(To be continued.)

Royal British Nurses' Association.

(Incorporated by Royal Charter.)



THE Autumn Session of Educational Lectures to be delivered at 17, Old Cavendish Street, W., and which are under the immediate patronage of Her Royal Highness Princess Christian the President, are now finally settled to take place on the following dates and times:—

Elementary Anatomy.—Twelve Lectures by W. J. Walsham, F.R.C.S., on Tuesdays, commencing October 2nd, at 4.30 p.m.

Physiology.—Twelve Lectures by A. Schofield, M.D., on Wednesdays, commencing October 3rd, at 4 p.m.

Hygiene.—Twelve Lectures by Louis C. Parkes, M.D., D.P.H., M.O.H. Chelsea, on Thursdays, commencing October 4th, at 4.30 p.m.

Practical Nursing.—Twelve Lectures by Miss Isla Stewart (Matron of St. Bartholomew's Hospital), on Mondays, commencing October 1st, at 4 p.m.

Ward Management and Domestic Economy.—Six Lectures by Miss de Pledge (Matron of the Chelsea Infirmary), on alternate Fridays, commencing October 12th, at 4 p.m.

Terms:—For the Complete Educational Course, £8 8s.; for One Course of Lectures, £2 2s.; for a Single Lecture, 5s. For Members and those engaged in practical nursing, Half Fees.

At the close of each Course, an Examination will be held, and certificates granted. H.R.H. Princess Christian has graciously signified her intention of bestowing a prize on the Nurse who, after having attended the lectures and examination, shall show herself most proficient in the subject of Practical Nursing.

ALICE RAVENHILL,
Secretary of the Corporation.

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