

dants upon the Register of Trained Nurses, of degrading the Register, and of inflicting incalculable discredit upon the Association. The chief argument which has been advanced in its favour is that so many fees from these Asylum Attendants are expected, in return for the prestige of Registration, that the officials will be able to cover the extravagant expenditure in which they have been, and are still, indulging. In other words, it has been deliberately schemed to sell the privilege of Registration, and the status for which Nurses have worked so hard. We imagine that this is a last despairing effort, and it is evident to us that both the public and the Nursing profession are determined to frustrate such an endeavour. We have done all we can to save Nurses from such injurious proceedings, and we are glad to learn that their patience is at last exhausted, and that they now intend to take measures to protect themselves.

Lectures on Elementary Physiology, in relation to Medical Nursing.

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LECTURE V.—THE NERVOUS SYSTEM.

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MENINGITIS, or inflammation of the membranes of the brain, is a disease which is by no means rare amongst children, especially amongst those who belong to families in which there is a strong tendency to Consumption. It frequently begins with sudden and violent pain in the head; the child perhaps awakening from sleep with a loud scream, and after some minutes becoming unconscious, and then convulsed; or the attack may begin when the child is playing about and seemingly in good health; or, again in some cases, the child may for some days seem to be out of sorts, complaining of *malaise* and nausea, and may then have attacks of vomiting. But, in nearly every case, whatever the commencement of the complaint may be, the chief symptoms are the severe headache, attacks of screaming, grinding of the teeth, sleeplessness or delirium, preceding or accompanying attacks of unconsciousness and convulsions. The face is usually highly flushed and the

eyes bloodshot. Vomiting is very common, twitchings of the limbs and squinting of one or both eyes, often precede an attack of convulsions; and when the disease progresses the patient usually becomes comatose and dies in that condition. Ordinary, as distinguished from Tubercular, Meningitis is not uncommon as a consequence of disease of the middle Ear; and for this reason, therefore, children who show any discharge of pus from the ear require to be most carefully treated and watched. It has been known to follow a blow upon the head; and is no means an infrequent result of scarlet fever, and smallpox, while it occasionally follows measles and typhoid fever.

The Nursing consists in keeping the child as quiet as possible and the room carefully darkened, because there is great intolerance to light and sound. Cold applications to the head, if prescribed by the doctor, would be given as described last week. It is most important to notice and report the condition of the various bodily functions, especially the appearance of the stools, and the quantity and character of the urine. One of the greatest difficulties is the administration of proper nourishment, and as a rule this requires to be given with the greatest care. In many instances, in which the child is nearly or quite unconscious for a lengthened period, it is necessary to resort to artificial feeding; because fluid put into the mouth may flow down into the trachea and lungs in consequence of the inactivity and insensibility of the epiglottis.

In such instances, a safer method of feeding is to lay the child on his back with the head well raised with pillows; to oil a No. 9 rubber catheter, and to pass the rounded end up one nostril and so down along the back of the pharynx into the œsophagus; then to the open end of the catheter a glass funnel is attached; and the latter being filled with milk or strong beef tea the fluid will run down into the stomach naturally. The two great precautions to be observed in this proceeding are, that the child should be on its back and with the head well raised, and that the catheter should always be passed some inches down the œsophagus before any nourishment is poured into the funnel; because if it is only passed into the pharynx the fluid, as already said, may flow down the trachea into the bronchi.

(To be continued.)

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