

an historical fact that, while a French army of 12,500 men were crossing a river, no less than 2,000 fainted, and 26 of them died. There was no question of Sunstroke in this case, but merely heart failure from prolonged over-exertion. The symptoms of syncope, when compared with those of sunstroke, show distinctly the differences in the two conditions. In syncope, the patient breathes easily, the pulse is perceptible, although small, the skin is not hot, in fact, it is colder than natural, pale and moist. The pupils are usually dilated, and the loss of consciousness is, as a rule, only of a temporary nature. The symptoms of sunstroke are widely different; the attack is not so sudden, the skin is burning hot, and the temperature always high; there is almost invariably congestion of the lungs, and the patient becomes comatose. To show that the affection cannot be due to mere exposure to the sun's rays, it has been pointed out that the Chinese habitually expose their closely-shaven heads to the hottest sun without any ill effects, and that both the black and white races can work in the tropics in the fiercest sunlight without having their health affected. This is especially noticeable amongst the tea planters of Assam, who are forced to be in the fields in the hottest season at the hottest time of the day, yet it is authoritatively stated that sunstroke is almost unknown amongst this large class of workers. On the other hand, it is a well-known fact amongst Anglo-Indians, that those who are suffering from malaria are most liable to be attacked by sunstroke; and there is the undoubted fact that cases of the latter affection occur in the form of epidemics, quite irrespective of the heat. For example, in 1872, and again in 1892, there were most remarkable outbreaks in the Central States of America, more than a thousand people suffering from the complaint, in New York alone, in the months of June and July of the former year. It is noticed that sunstroke very rarely occurs at sea, and almost invariably in crowded communities. Investigations which have been recently made seem to prove that sunstroke, or, as it is technically called Siriasis, is due to a distinct bacillus, which is produced in the soil, and inhaled into the human system in the form of dust. If this fact be fully confirmed by more complete investigations, it will only be another illustration of the strange manner in which all diseases, however diverse in their appearance or conditions, are now being traced to the influence of bacteria.

Practical Diet-Kitchen Work as a part of the Training School Curriculum.*

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Of course, there is the first cost of fitting out the room with a gas or coal range, kitchen tables, various cupboards, refrigerator, and utensils (a list of those necessary will be found at the end of this paper); it will be found, too, that some of these utensils can be dispensed with if necessary.

HOW TO ORGANISE A DIET-KITCHEN.

First select a room as well ventilated as possible, one with two windows is desirable; all the air that can be obtained in summer is needed, for the discomfort from the hot air is made the more intense by the moisture given off by the cooking food. Have the room as centrally located as possible and near the source of supplies and general kitchen, as the food from this kitchen is sent to the wards with the food from the general kitchen. See that it is near the water pipes, and that it can be connected with waste pipes and gas.

Having secured the best room available for the purpose, plan out the furnishing for the convenience of the work to be done. Provide a gas or coal range, preferably the former, it is cleaner, it is always ready to light, it takes but a short time to heat the oven or the broiler; there is no danger that the fire will "go out" leaving the nurse in despair, and causing great delay in the serving of food ordered for patients. Few nurses understand the management of a coal stove. If the nurse does not, the fire will burn low at times, and there must be a long wait before it comes up again. With the gas range, if the flame goes out it is easily relighted. A kitchen table, with zinc top, three feet by four, with two shelves beneath for saucepans, griddles, broilers, double boilers, etc., two drawers for knives, forks, and spoons, a standard above for hanging iron spoons and small ware up, may occupy the centre of the room. Another table, perhaps, five feet long by three feet wide, may extend along the side of the room from the gas range to the sink. A refrigerator, a chair, and a dresser for china, with small closets beneath, for tin boxes of various sizes, to contain spices, sugar, flour, salt, cereals, and supplies of all kinds. There should be two drawers for napkins, towels, aprons, etc. Another table fitted with drawers and open shelves for tin cans, kettles, and other kitchen

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