

Lectures on the Nursing of Lung Diseases.

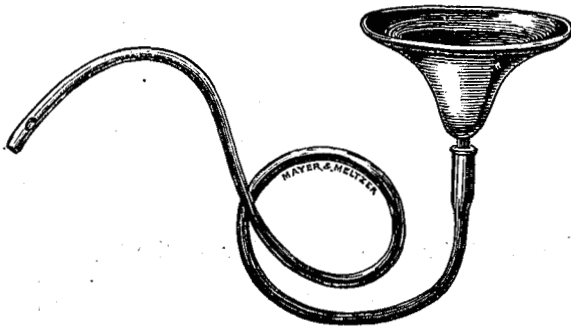
By BEDFORD FENWICK, M.D.,

Late Senior Assistant Physician to the City of London Hospital for Diseases of the Chest.

CHAPTER I.

(Continued from page 388).

To the open end of the catheter, an india-rubber tube is fixed, which is attached in its turn to a glass funnel, into which the beef-tea, or milk, or whatever liquid nourishment is ordered for the child, is slowly and steadily poured. This flows down the tube, of course, into the stomach, without the child being aware of the passage of the food; without, in skilful hands, causing it the slightest pain, and even with comparatively little discomfort.



A very important practical point to remember is that once the fluid is poured into the funnel, the latter must be kept nearly full until the whole of the amount to be given has been poured in. It is not unusual for an untrained nurse to allow the funnel to become empty and then to pour in more fluid, and when that has passed down, pour in a further supply—unaware or forgetful of the fact that, on each occasion, air rushes into the empty tube and funnel, and is forced by the next flow of fluid down into the oesophagus, and into the stomach. Such repeated gushes of air cause painful distension of the latter organ, and probably violent eructations, and perhaps vomiting; causing the patient pain, and making the administration of food do more harm than good. Whereas, if the flow of fluid is continuous, the only air which is forced down is that which filled the catheter at first—a quite inconsiderable amount. It is always well to amuse the child meanwhile, and so divert its attention as far as possible from the procedure, because, in some cases, observation of the method causes the child to retch

violently. In cases where the throat is hyper-sensitive, the doctor may order the simple manoeuvre to be adopted of smearing the catheter well with cocaine ointment; the effect of which is to dull the sensibility of the passage so greatly that the catheter will cause no pain, and its presence no discomfort. In cold weather, the nurse should remember to warm the instrument carefully in hot water before using it, so as to make it not only flexible, but also less repulsive to the sensitive mucous membrane, in consequence of its coldness.

In the majority of cases of Croup, however, the child will be able to swallow naturally, and can be persuaded to take a proper quantity of nourishment by tact and firmness on the part of the nurse. Then it is well to remember that it is better to give small quantities of food frequently, than to give a larger quantity less seldom; because in these cases the violence of the coughing very frequently produces nausea and vomiting; and, as is customary amongst children, the little patient will probably swallow the phlegm from its throat rather than expectorate it—which again is a frequent cause of gastric disturbance and sickness. In either event, the presence of a considerable quantity of food in the stomach increases the tendency to vomiting, and, as it is all important to maintain the child's strength by proper feeding, any precaution which can be taken to save irritation of the digestive organs must be adopted. In some children, the attacks of vomiting are so frequent, that it is almost impossible to get any food retained. In these cases, excellent results sometimes follow the application of a mustard leaf to the pit of the stomach; the counter-irritation relieving the irritability of the organ. In such cases, again, the white of an egg, with half a teaspoonful of brandy and some sugar, has an excellent effect—the mixture coating the inflamed stomach walls with a thin layer of albumen, which has a most sedative effect on the mucous membrane.

It should be remembered that in all children, as indeed to a less extent in adults, coldness of the hands and feet during the progress of an illness, is a practical sign of much importance; for it shows that the heart's action is not as strong as it should be. This symptom, therefore, should always be reported to the doctor, who will probably order appropriate stimulants; but the nurse can help in preserving the bodily heat and saving the child's strength, by placing a hot-water bottle to its feet and extra clothing on its bed.

[previous page](#)

[next page](#)