

Lectures on the Nursing of Lung Diseases.

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CHAPTER I.

(Continued from page 408).

THERE is a well-marked affection to which the name of *false croup* is usually given. It occurs in delicate children of what is commonly termed a "strumous constitution." Such children after any slight exposure to cold, or even in damp and foggy weather, show some difficulty of breathing and hoarseness. They may wake up in the night with a harsh, croupy cough, and at first may seem to be suffering from an ordinary attack of croup; but the attack passes off as rapidly as it comes on. Similar attacks are often due to some temporary nervous affection which is rapidly relieved by appropriate medicine, and the application of a stimulating liniment, or even a mustard leaf to the throat. Such children are almost invariably of a highly nervous temperament, and generally exhibit more alarm at their condition than is usual with those who are really affected by croup. They may develop a spurious attack when suffering from teething, from worms, or any other cause of reflex irritation. It must be remembered that sometimes, in consequence of its extreme nervousness, the child's temperature and pulse will rise considerably; the breathing may become remarkably quick, and even difficult; and the child may appear to be very ill. In these cases, tact on the part of the nurse can often do as much as medicine, by calming the child and distracting its attention from itself. Incidentally, it is a practical point of great importance that in children, even more than in adults, the mental condition of the patient has the greatest influence upon the course of the bodily illness. In some children, for instance, suffering from what appears to be extreme asthma, but which is entirely of nervous origin, the effects of some simple counter-irritant is often remarkable. Placing the child's feet and legs in hot water containing a handful of mustard will quickly cause reddening of the skin, and will draw a certain amount of blood from the deeper tissues, thus relieving, to some extent, congestion of the throat or chest. But the beneficial effect of the tingling of the skin is often out of proportion to the local result. The

child will probably become absorbed in the temporary discomfort to its feet, will watch with curiosity the process of drying the reddened surface gently with a very soft towel, and will thus be led to forget its throat irritation, and may, apparently, be suddenly cured of the difficulty of breathing. The principle, of course, is the same as that which in the Middle Ages advised the cure of obstinate cases of hiccough by a feigned onslaught upon the patient; or that which, in modern times, cures an attack of hysteria by the application of the galvanic battery. An instance may be given. A child was suffering from an attack of false croup and extreme rapidity of breathing, aggravated by its great nervousness. Friends and relations tried in vain to interest the child in his toys; but at last the nurse, according to directions, solemnly prepared a basin of hot water, stirring up a handful of mustard in it—the child watching the performance with growing interest. She, then, slowly inserted first the child's thumb, and then one finger after another into the water, and then the whole hand and forearm. As the process continued, the breathing gradually became natural and the pulse fell to normal, while the cough became less frequent and irritable.

The point should be ever remembered, because there are a hundred ways in which a tactful nurse can carry it out. Stress is laid upon it, because, especially in children, the nervous system plays the most prominent part in the progress of any illness; and tact and firmness, combined with kindness, may make all the difference to the child's recovery.

In all cases of throat trouble, the nurse should examine the child most carefully while washing it, and should report to the doctor any external evidence of irritation which she observes. Small thread worms in the nostril or rectum, evidenced by local irritation, or pediculi in the hair must always be carefully looked for; for it is astonishing how often untrained nurses overlook these matters and report to the doctor that the child exhibits no signs of external irritability. Gums inflamed by the pressure of an advancing tooth will be observed, of course, by the doctor; but he will depend upon the observations of the nurse as to the excretions of the child, as to the regularity of the bowels, and as to the evidences of nerve irritation which occur between his visits.

(To be continued.)

[previous page](#)

[next page](#)