

or later resulted in the occurrence of serious symptoms, and was a frequent cause of sudden death.

These two illustrations are employed, because they show that, while on the one hand, some cases of heart disease are of comparatively trifling importance, on the other hand, the lives of some patients who are so affected are always hanging by a thread. This distinction will be more clearly seen as we discuss the various diseases to which the heart is subject, and it is one which the nurse must ever keep in mind.

What are the cardinal rules in the nursing of all patients suffering from Heart Disease? It is always valuable to begin the study of a subject, if possible, by ascertaining its foundation principles; and it may be said that, in the nursing of nearly every class of disease, there are certain well marked principles which direct the work.

In the case of Acute Heart Diseases, the first golden rule of Nursing is to keep the patient at *absolute* REST. That is to say, rest in bed; rest of the body so as to keep the muscles of the frame from being used, and thus to lessen, as far as possible, the work of the Heart—a point upon which it will be necessary to dwell at considerable length in due course. Rest of the mind, so as to keep the nervous system free, as far as possible, from worry or excitement, and thus to prevent that reflex nerve action, which, as every one knows, is so liable to excite the action of the Heart.

In *Chronic* Heart diseases, on the other hand, we shall find that an essential part of the Nursing depends upon *carefully regulated* EXERCISES. Exercise of the muscles so as to increase the steadiness and strength of the circulation through the limbs, and thus assist in the proper nutrition, and encourage the action, of the probably weakened Heart.

In both Acute and Chronic diseases of the Heart, the second great principle in the Nursing is the enforcement of a carefully regulated DIETARY, and, as we shall see hereafter, this is often of great, if not of essential, importance to the patient's recovery.

CHAPTER I.

THE HEART AND ITS WORK IN HEALTH.

It will be well to commence our consideration of the Nursing of Heart diseases, by a brief description of the Heart itself, and the work which it performs in the healthy state.

The organ is placed somewhat obliquely across the front of the cavity of the chest, between, and mostly in front, of the lungs. It is broadly triangular in shape, its base being just underneath the sternum, or breast bone, at the level of the third rib, and it extends downwards and towards the left, so that the apex is situated between the fifth and sixth ribs on the left side. The apex touches the inner chest wall, so that the beating of the heart can be easily felt through the muscles which connect these two ribs. In the normal condition, the apex beat should be felt most strongly about one inch below, and half-an-inch to the inner side of the left nipple. This position should be always carefully remembered, because, in disease, the apex beat is shifted more or less to the right or to the left of the particular spot mentioned. For example, in the affection known as Hypertrophy—in which the muscle of the heart is increased in size and strength—the apex is usually pushed *inwards* towards the middle line of the chest; while in Dilatation—in which the muscle of the heart is usually thinner than normal—the apex beat is usually displaced *outwards*, and is felt under the nipple line, or even outside it.

The shape of the Heart is usually defined by *Percussion*, that is to say, by the sound produced when a finger placed flat on the chest wall is smartly struck by one or more fingers of the opposite hand. The sounds of the heart are defined by *Auscultation*, that is to say, by listening to the movements of the organ, either by the ear placed directly upon the chest, or by the medium of a stethoscope, an instrument which condenses and conveys the sounds to the ear. Sometimes, in cases of Heart disease, the use of *Palpation*—the movements of the organ being conveyed from the chest wall to the hand—is also a valuable assistance; because, by this means, in some cases of valvular disease, a distinct tremor, or "thrill," can be felt over the apex of the heart, and in aneurism of the aorta, a pulsating swelling can be often distinguished.

These three methods, then, of Palpation to ascertain the point of the apex beat and the presence or absence of a thrill; of Percussion to ascertain the superficial dulness of the Heart's area; and of Auscultation to ascertain any alteration that may exist in the ordinary sounds of the organ, furnish the chief means of diagnosing the condition of the Heart in health or disease.

(To be continued.)

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