

The Nursing of Heart 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 428.)

FROM what has already been said, it will be readily understood that if Nature fails to produce the compensatory effect upon the Heart by means of Hypertrophy, the pressure of the blood upon the walls of the Auricle or of the Ventricle, not being resisted and overcome by an abnormal thickness of muscle, must have the effect of dilating and increasing the cavity of the Heart in which the injurious pressure occurs. So, in these cases of obstruction at a valvular orifice, we find that when there is little or no compensating Hypertrophy of its wall, there is always more or less Dilatation of the affected cavity, and, consequently, more or less thinning of its wall. When this condition occurs, it is obvious that the danger to the patient tends to continually increase. The thinned and weakened muscular walls become constantly less able to contract sufficiently to empty the enlarged cavity; and so the force with which the blood is pumped out of that cavity steadily tends to become less. Therefore, not only is the forward progress of the circulation interfered with, but the block in the circulation tends to become increasingly dangerous; until finally, the time comes when the enlarging cavity is so overfilled with blood that the thin overstrained muscular wall cannot contract on its contents; and then it falters, pauses, and halts in its work, paralysing thereby the muscle of the opposite side of the Heart; and then the patient suddenly faints or even dies.

As has been already shown, the existence of such Dilatation is easily recognised by the weakness of the heart's impulse-beat on the chest wall and by its displacement outwards, until it is felt on a line drawn straight downwards from the left nipple, or even more towards the side of the chest.

The lesson for Nurses from these facts is very simple and most important. The danger to the patient consists in the sudden failure of the weakened heart; and, therefore, in all cases of Dilatation, the nurse's first care should be to prevent him making any sudden or severe movement which might throw any extra strain upon the weakened organ; and, as

already mentioned, she should take every possible precaution to prevent him being depressed or excited.

It may be said that the distinctions between the hypertrophy of the muscle which compensates for valvular disease, and the dilatation of the cavity of the heart which is a source of constant and increasing danger, can be easily defined. In hypertrophy, a stronger impulse of the heart on the chest wall is perceptible; and this is felt more towards the middle line of the chest than is usual in health. In Dilatation, the impulse is weaker than usual and can be felt more towards or even outside the nipple line. The former, within certain limits, spells safety, and the latter danger.

To secure Hypertrophy and by thickening the wall to diminish Dilatation of the affected cavity of the heart, is the first object which the doctor seeks to attain; and in proportion as this result is gained is the treatment effective. In recent years, the part allotted to nurses, in the treatment of Heart disease has become much more important than it formerly was, because the influence both of diet and of exercise in these cases is now more clearly realised.

For example, the muscular power of the organ can be sensibly increased by graduated exercises, designed to employ the muscles of the chest and arms. These exercises will, of course, be carefully prescribed in every case by the doctor; but he will depend very largely not only upon the conscientious work of the nurse in carrying out his directions, but also upon her knowledge and common sense in modifying those instructions according to changes which may occur in the patient's condition between his visits. Unfortunately, however, this common-sense treatment by muscular exercises, which was taught thirty years ago, has been recently puffed and boomed, surrounded with a halo of semi-mystery and developed into a distinct form of quackery; so that the real benefits of the system have suffered in public and professional estimation through the ignorant misapplication and excessive laudation which it has received.

Moreover, when used with the crass ignorance generally associated with quackery, the system is sometimes employed in most unsuitable cases, so that the patient is made worse instead of better, and discredit is too often cast on the method rather than upon the ignorance exhibited in its unsuitable use.

(To be continued.)

[previous page](#)

[next page](#)