The Mursing of Ibeart Diseases.

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CHAPTER IV.

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WE may go a step further, in the nursing of these patients, and, by a proper disposition of the bed-clothes, the Nurse can not only prevent over-heating of the patient's body but can to a large extent reduce the temperature in cases when it is above the normal. And by reducing the temperature, as already shown, the rapidity of the circulation through the lungs, and therefore the quickness of the breathing, can also be lessened.

The method of effecting this, is, in principle, that which is described at length in Lectures on the Nursing of Lung Diseases; it being especially applicable in cases of Pneumonia. The bed-clothes are raised from the patient's body by means of a light iron or cane cradle; and thus not only is the weight of the bed-clothes lifted from the chest, but a certain amount of air is permitted to surround the patient, and thus the heat of the body is more easily radiated, and its temperature therefore lowered.

In cases of pyrexia, the cooling process is materially increased by hanging small pails filled with ice on the upper bar of the cradle, thus placing the patient, to all intents and purposes, in an air refrigerator. The result is that the temperature is naturally and steadily lowered, and the ill effects of pyrexia are therefore prevented.

It is comparatively rare, in simple cases of heart disease, that the latter method is needed, it being sufficient to restrict the amount, and the weight, of the bed clothes as much as possible; or at the most to raise the clothes from the body by means of the cradle.

The next, and most common cause of dyspnœa is the occurrence of an attack of Bronchitis, in consequence of some slight chill acting upon the enfeebled congested mucous membrane of the air tubes. In these cases, the patient begins to breathe too quickly and to wheeze with the expiration; the cough is generally short, dry, and frequent, and not only exhausts the strength, but increases the shortness of breath by the accumulation of mucus in the bronchi. The first essential in these

cases, therefore, is to obtain such a free secretion from the tubes that the mucus shall be easily expelled and the facility of breathing reestablished.

The difficulties, of course, are that, on the one hand, these cases are so complicated with the heart disease that they cannot be treated as actively as an ordinary simple case of Bronchitis can be; the depression caused by the drugs employed to combat the lung affection, being often sufficiently considerable to weaken the action of the heart; and on the other hand, if the bronchitis is not speedily checked, the power of the heart to perform its work and especially to maintain the efficient circulation through the lungs may be materially lessened. So it need not be insisted upon that the nursing in these cases is often all-important to the safety and welfare of the patient; first by preventing the occurrence of a chill; and secondly, if, despite every precaution, an attack of bronchitis occurs, in so tending the patient as to enable the medical efforts for his cure to have their fullest effect.

For example, the possibility of the patient becoming chilled whilst perspiring freely, as a result of the medicines administered for the relief of his lung trouble, is obvious. And, if the nurse did not comprehend the extreme danger to the patient which such a chill would cause; or if she did not realise that the medicines which she was administering for the relief of a bronchial attack would probably have the effect of exciting the action of the skin, and so would render the patient specially susceptible to chilling of the surface by a draught of cold air; the advantage of her work for her patient's relief would be greatly diminished.

For instance, a patient in such a condition, exposed to a draught of cold air from an open window, has often developed an attack of Pneumonia. The comparatively harmless condition of the bronchial tubes has passed on into the condition of acute inflammation of the lung substance; his dyspnœa and his temperature has at once increased, and in too many instances the enfeebled heart has proved unequal to the strain, and the patient has died within a week.

The point is worthy of special emphasis therefore; and it illustrates incidentally the necessity and the great advantage of the modern system of training that a nurse should, for her patients' sakes, be given the fullest possible education in the causes, the progress, and the results, of disease.

(To be continued.)

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