

in only 6.7 per cent. of cases and improvement in 25 per cent. While this mortality is high, it is 30 per cent. less than that of non-operative treatment. In the presence of slight lesions operation should certainly not be undertaken; in the event of severe injuries with other than spinal lesions likely to cause death, operation should be delayed to determine the outcome; if the injury to the cord is so great that it is impossible to determine whether cure or improvement can be expected, it seems best to give the patient the benefit of the doubt and operate. Three cases are reported. A man fell from his wagon whilst intoxicated and suffered paralysis of the bladder and rectum, and almost complete paralysis of the legs. He was able to pass urine without a catheter in a week, soon gained control of his bowels, and at the end of five months he could walk without difficulty. No operation was performed, the treatment consisting in absolute rest on a hard mattress. In the second case a gibbosity of the second dorsal vertebra and complete paralysis of the legs, bowel and rectum followed a fall from a hand-car. No operation was performed. Bed-sores appeared in a few days, and death followed at the end of five months. In the third case a miner was crushed by a heavy mass of slate whilst bending at his work. Total immediate paralysis of the lower extremities, bladder and rectum followed, and the condition had remained unimproved up to the time of admission to the hospital, about four months later. After a few days' treatment of the bed-sores and cystitis, laminectomy was performed and the arches of the last dorsal and first lumbar vertebrae were removed. There was slight shock and primary union of the wound. On the fourth day sensation was found to have extended slightly downward and improvement has continued, until now the muscles contract under the influence of the faradic current. The case is probably one in which either the damage to the cord was too serious for complete restitution, or pressure changes had advanced so far as to limit the benefit from operation.

#### RAW MEAT FOR PHTHISIS.

The *Medical Annual* says that Professor Richet, of Paris, finds that the ingestion of raw meat, or of its plasma, constitutes one of the most powerful remedies known for phthisis. From a pound to a pound and a half of raw meat is given each day.

## Nursing of Diseases of the Eye.

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### OCULAR THERAPEUTICS.

(Continued from p. 310.)

Treatment by drugs in ocular diseases may be local or general. By local measures we can, to a certain extent, control the circulation of the ocular fluids—thus by applying to the conjunctiva lotions containing lead, zinc salts, or other astringents, we can reduce the superficial vascularity directly. Such lotions are usually applied in considerable quantity, and as used by the patient in most instances their action is wasted on the outside of the lids. The nurse may apply them in one of several ways. The lids may be everted or the eye may be held open, and a few drops of the lotion wrung from a fragment of absorbent wool on to their surfaces. If more copious douching be needed, a gentle stream from an irrigator may be directed under the lids. Another method, and one especially useful in children, is to throw the head back and let a few drops fall on to the closed lids, where they will form a shallow pool near the inner canthus; if the child can be induced to blink his eyes a few times rapidly several drops of the solution will make their way between the lids into the conjunctiva. Some patients find the so-called "eye bath" the most convenient method. This is a small oval cup, which is filled with the lotion; over this the head is bent, so that the oval-shaped edges fit closely to the soft skin round the eye. The head is then raised and thrown back, the pressure against the skin prevents the fluid escaping, and movements of the lids allow the drug to reach the conjunctiva. Other drugs seem to act by means of the local nervous system; cocaine (and to a less extent, its neighbours eucaine and holocain) stimulates the sympathetic vaso-constrictor fibres, so as to produce a local anæmia. Atropine has a somewhat similar action on the bloodvessels—Eserine and some others increase the vascularity of the conjunctiva.

Such powerful drugs as the alkaloids cannot be used with the same free hand as ordinary lotions, and are usually instilled into the eye drop by drop. For this purpose a special drop bottle is required, or may with advantage be used. Chalk's pattern is one of the most convenient, but Stroschein's flasks have the great advantage that they can be boiled without injury, and thus it can be made certain that the contents are sterile before they are dropped into the eye. If these

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