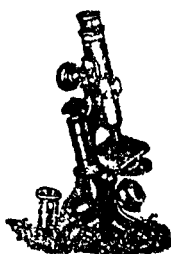


Medical Matters.

POST TYPHOID SEPSIS.



Referring to a paper by Dr. Delafield, entitled Post-typhoid Sepsis, the *Medical Annual* says of post-typhoid fever:— Quite apart from relapses, there are three conditions:—

1. The ordinary moderate rises of temperature, only lasting for a few hours, occurring within three weeks after the end of a typhoid fever. These short fevers would not be recognised at all unless the temperature was systematically taken, for they are not attended with any symptoms, and do no harm. The only important thing about them is to understand that they are not of importance.

2. The post-typhoid fevers which are of real importance, and last for one or more weeks, but yet do not make the patient very ill, and are not fatal. This form follows attacks of typhoid fever of two, three, or four weeks' duration. Sometimes the secondary form is continuous with the fever of the attack of typhoid; at other times there is an interval of normal temperature between the two fevers. In the secondary fever the morning temperature is usually normal, or thereabouts, but the evening temperature is raised, it may be, several degrees.

There are no other symptoms (such as delirium), and the tongue keeps moist and clean; but if the evening rise of temperature is excessive, there may be shivering. The patients are hungry. The author agrees with Dr. Da Costa in stating that in order to bring these attacks of mild secondary fever to an end, it is necessary to get the patients out of bed and give them solid food.

3. Much more important than these mild fevers are the severe and long-continued post-typhoid fevers, which may terminate fatally. They occur regularly after well-marked and severe typhoid fevers, which run their full four weeks' course. The septic fever is continuous with the typhoid fever. Sometimes it will even overlap it, so that both fevers seem to be going on together in the fourth or fifth week. The morning temperature is usually about 100°F., and the evening about 103°, though not infrequently, at irregular intervals, it is higher—105° to 107°. With these high temperatures there are often rigors. The patient is dull and apathetic, but not violently delirious;

the tongue is dry; there may be nausea and vomiting, and yet a desire for food. Flesh is lost rapidly. Complications may arise, especially thrombosis of the femoral veins. In fatal cases the intestinal lesions are healed or healing. The condition appears to be one of septicæmia. The treatment is to get the patient out of bed and to increase his food. "It must be confessed," says Dr. Delafield, "that it requires a good deal of courage to take out of bed a patient who is apparently dying. But I am fully convinced that the only way of saving the lives of the bad cases is to feed them and take them out of bed."

Appointments.

MATRONS.

Miss Sadie C. G. Barrs has been appointed Matron of the Bromsgrove, Droitwich and Red-ditch Hospital. She was trained at St. George's-in-the-East Infirmary, London, and has held the positions of Sister at the Borough Hospital, Plymouth, and of Charge Nurse at the Clock House Hospital, East Ham.

Miss Catherine M. Duffy has been appointed Matron of the Borough Hospital, Leicester. She was trained at the Royal Albert Edward Infirmary, Wigan, and has held the positions of Head Nurse at the Park Hill Hospital, Liverpool, and of Night Superintendent and Assistant Matron at the Lodge Moor Hospital, Sheffield.

Miss Clara Reynolds has been appointed Matron at the Cottage Hospital, Ulverston. She received her training at the Hospital, Retford, and has held the position of Staff Nurse at the Royal Infirmary, Derby, and of Charge Nurse at the Hospital, Retford. She has also had experience of private nursing.

NIGHT SUPERINTENDENT.

Miss Edith A. Hood has been appointed Night Superintendent at the Brentford Union Infirmary, Isleworth. She was trained at the Infirmary, Birkenhead, where she subsequently held the position of Sister. She has also held a similar position at the Bethnal Green Infirmary. She holds the certificate of the London Obstetrical Society.

SISTER.

Miss Katherine Ediss has been appointed Sister at the Sanatorium, Kingston-upon-Hull. She was trained at the Western Infirmary, Glasgow.

QUEEN ALEXANDRA'S IMPERIAL MILITARY NURSING SERVICE.

Sister Miss D. V. Briscoe has resigned her appointment in the above Service. Miss Ethel May Lang has been provisionally appointed Staff Nurse,

[previous page](#)

[next page](#)