

Our Practical Nursing Prize.

Upwards of twenty articles were sent in in competition for our Two Guinea Practical Nursing Article Prize, which we have pleasure in awarding to Mrs. Westaway, Associate of the National Health Society, 1, Pemberley Crescent, Bedford, for her excellent paper on "The Care of Rachitic Children," which we publish this week.

The following eleven papers are all thoroughly practical and instructive, and we shall have pleasure in publishing them as space permits, that on "Swabs" (illustrated), by Miss Isabel H. Pennie, of the Royal Scottish Nurses' Institution, 69, Queen Street, Edinburgh, will also be found in this issue of the journal.

The remaining papers were disqualified for the competition as the majority were not of the required length, and others were not on Practical Nursing matters. Some of them we hope to use in the "Practical Points" column.

PAPERS COMMENDED

"Some Facts about Vomiting." By Miss E. Margaret Fox, Matron, Tottenham Hospital, N.

"Duties of the Nurse with Regard to the Artificial Feeding of Infants." By Miss Fountain, Assistant Matron, Her Majesty's Hospital, Stepney Causeway, E.

"On Attention to the Bowels and the Use of Aperients." By "A. Lucy."

"Different Methods of Delivery in Child-birth." By Miss Edla R. Wortabet.

"The Nurse at a Confinement." By Miss S. F. Pollard.

"Some Complications Arising in Infancy and How to Treat Them." By Miss Mary Alexander.

"The Pulse." By Mrs. K. H. Peter.

"The Artificial Feeding of Infants." By Miss N. G. Strangman.

"Hot-water Bottles." By Miss Edith M. Bunyard.

"The Admission of Accident Cases." By "R. R. C."

The Royal Red Cross.

His Majesty has been pleased to confer the decoration of the Royal Red Cross upon Mrs. E. M. Hatch.

After the terrible earthquake which occurred at Dharmasala last year, Mrs. Hatch rendered admirable service in nursing the injured.

QUEEN ALEXANDRA'S IMPERIAL MILITARY NURSING SERVICE.

The undermentioned Sisters resign their appointments: Miss A. R. F. Auchmuty and Miss L. F. A. Waller.

The Care of Rachitic Children.

By Mrs. WESTAWAY,
Associate of National Health Society.

To the motherly woman a special interest surrounds the nursing of sick children, and the younger and more helpless the patient, the greater is the desire to give relief and to promote recovery. Rachitis is a disease which is rarely seen before the age of four months, and almost as rarely after the age of two years. It is most common between the ages of seven and eighteen months, and the reason for this particular age being specially subject lies in the fact that it is the transition period between the feeding on one liquid, milk, and the feeding on a varied mixed diet of solid character. The disease arises solely from improper feeding, but it is favoured by insanitary conditions, dampness, darkness, dirt, want of ventilation and lack of exercise, and the foundation of rachitis may be laid by any disease which reduces the strength to such a low ebb that suitable food cannot be assimilated. Although the most preventible of all diseases, rachitis, or rickets, is the most common. Its symptoms and treatment should be thoroughly understood, for although rachitis by itself rarely ends fatally, the recuperative powers of the body are at such a low ebb that death is often caused by a complication to which the disease renders the patient specially prone.

The disease is of a very insidious nature, and presents well-marked characteristics according to the stage to which it has advanced. Its presence is often not suspected until the child begins to walk, when a bending of the legs under the weight of the body points to something wrong. Thus rachitis is sometimes regarded as a bone disease, but, although the bones are greatly affected, every organ and muscle of the body is also involved. The first symptoms reveal themselves in a profuse sweating of the head, neck, and chest, and particularly at night time, and at the same time it is found that the child greatly dislikes to be covered while asleep and attempts to throw off all coverings. The head alters in shape, the forehead becomes square and projecting, and the fontanelle remains unclosed. Bony prominences form at the end of the ribs, which are themselves soft and depressed. Coughing causes the breast-bone to project and shape the chest like the bow of a boat, causing what is commonly called "pigeon breast." The long bones of the arms and legs become enlarged at the ends, but the shafts of them become soft and yielding, so that the arms and clavicles are greatly curved, and the legs become either bowed or knock-kneed. The pelvis becomes con-

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