

great there will be rapid blanching of the skin, and a rapid, thready pulse. The diagnosis is settled in the course of a few hours, or occasionally of a few minutes, by the passage of the blood per rectum.

When perforation occurs the symptoms may be identical with those of hæmorrhage, but the blood does not appear and the pain persists. It is, however, but seldom that such marked signs are present in perforation. I wish to impress upon you most strongly that perforation in enteric fever is often a comparatively gradual occurrence. This is but another way of saying that its onset must be suspected, if not detected by the nurse, and when I tell you that the patient's only chance of recovery lies in the promptness with which the diagnosis can be made, the abdomen opened, and the perforation sewn up, you will see that the nursing forms a very important part in the treatment.

The diagnosis of perforation may be a matter of extreme difficulty, and I do not propose to discuss it at length here. The symptoms that suggest it, however, are all discoverable and should be discovered by the nurse. Perhaps the most important is the presence of any abdominal pain that persists for more than four hours, especially if it is accompanied by a change in the aspect of the patient. Another sign is loss of mobility of the abdomen with respiration. If the muscles of the chest are doing too much and those of the abdomen too little of their share in the mechanism of respiration, suspicion should always be aroused.

If in association with abdominal pain, however slight, there is quickening of the pulse and vomiting, the presumption is that perforation has occurred. I know nothing more distressing to the surgeon (leaving the patient out of the question for the moment) than for him to be informed in a casual sort of way that the patient has had some abdominal pain (I have even known it described as a slight stomach ache) for some hours, and for him then to find an immobile abdomen and a rapid pulse. His discomforture is completed when, on opening the abdomen, he finds the whole cavity full of turbid fluid or pus.

I think that there is a tendency amongst hospital sisters not to risk the chance of a snubbing from the doctor by sending for him on what would appear to be a very slight change in the condition of the patient. I want to assure you that there is no medical man of any experience whatever in the treatment of infectious disease who does not welcome the opportunity of seeing these slight changes. As I have so often said, the surgical treatment of acute disease is a joint affair, and is not merely

the property of the operator. It is often easier to do an operation than detect the symptoms which make that operation necessary. If an operation is decided upon it is as well to remember that speed is a very vital factor in success. It is as well to inform any probationer who has to assist, that she is not to consider for a moment whether she is, or is not doing rightly. In other words, she must not be self-conscious, or, as it is sometimes erroneously called, "nervous."

In an operation of emergency the one thing necessary is for each nurse to do what she is told immediately: precise directions always are, or should be given by the surgeon. But the response to these directions must be prompt.

You will notice that I have not touched on such points as the necessity for keeping the patient absolutely still, or preventing bed sores, and so forth: these are but the elements of all nursing, and it is not necessary for me to enlarge upon them here. Only do not forget that your probationers have not the same knowledge, and that you must impart it to them.

(To be continued.)

International News.

Mrs. Bedford Fenwick, Hon. President of the International Council of Nurses, will attend as a Fraternal Delegate the meeting of the International Women's Suffrage Alliance, at Copenhagen. The Conference opens on Tuesday, August 7th, and delegates from the following countries will be present:—United States of America, England, Australia, New Zealand, Canada, France, Germany, Russia, Norway, Sweden, Holland, Switzerland, Finland, Hungary, and Iceland.

The International Alliance was formed in 1904, at a Conference held in Berlin, and its objects are: To secure the enfranchisement of the women of all nations, and to unite the friends of Women's Suffrage throughout the world in organised co-operation and fraternal helpfulness.

The present Conference, which promises to be a very important and significant one, will have at least one special feature of interest connected with it, namely—the presence of delegates from Finland, the first European country to enfranchise its women.

It has been decided to close Princess Christian's fund for the Colonial Field Force in Natal on Saturday next, and all donations should be sent to Princess Christian, at Cumberland Lodge, Windsor, on or before that date. The total amount received so far is £1,163.

[previous page](#)

[next page](#)