

axis. The sympathetic system comprises a chain of nerve centres which are known as sympathetic *ganglia*, which give off nerves and are intimately associated with the cerebro-spinal system by nerve cords. There is one distinction in the constitution of the nerves of these two systems, which it is necessary to remember. In the cerebro-spinal system, the nerve fibres are filaments composed of a very thin delicate outer membrane, called the *medullary sheath*, forming, so to speak, a tube, down the centre of which runs a cylinder composed of very fine threads, and between the cylinder and the tube is a fluid which is found, on analysis, to contain a large amount of fatty material; these fibres lie side by side, bound together, as shown in Fig. 30, by delicate connective tissue to form a bundle, which is enclosed in a sheath of tissue called the *neurilemma*. In the trunks of the nerves the fibres remain perfectly distinct from one another, and rarely, if ever, divide; but when the nerves enter the central organs, and when they approach their terminations, as has been already said, they divide and subdivide into smaller branches. In any case, as they pass outwards from the main nerves, they become gradually finer and finer until at length the axis, cylinder, sheath, and contents are no longer separable, and the nerve fibre is reduced to a delicate thread ending, as far as the skin and sensory organs are concerned, in little bodies, which are called *tactile corpuscles*. There is one difference, by the way, between most nerves and those which supply the nose, and which, therefore, are endowed with the sense of smell, because these consist of pale, flat fibres without any obvious distinction between the tube and its contents.

The nerves of the sympathetic system, on the other hand, have *no medullary sheath*, and *no* outer covering or *neurilemma*, and are, therefore, usually called *non-medullated* fibres.

As we shall shortly see, there is another and essential difference between these two systems of nerves. Whereas the cerebro-spinal nerves control the movements and convey the sensations of the whole body, the sympathetic nerves, which are found inside the cavities of the trunk, and forming a chain along the front and sides of the spine, are concerned with the supply of nervous power and influence to the organs contained in those cavities, controlling and maintaining their various secretions so that in health these are always of a nearly uniform composition. It is important that the difference between these two systems should be kept in mind.

(To be continued.)

Some Hints on Nursing Cataract Cases.

The room or ward selected need not necessarily be darkened, but bright sunshine, gas, or firelight must be screened from the patient's bed; the knowledge of being in darkness has a very depressing effect, even when both eyes are bandaged.

There should be plenty of air, but no direct draughts. Eye patients feel the latter very much, and attribute neuralgia, rheumatism, etc., to any strong current of air, if felt.

The bed should be made with a good mattress, bolster, and well filled feather pillow, and light, but warm, clothes used.

With old people who are subject to bronchitis and coughs, it will be found advisable to use more pillows, thus keeping the head and shoulders as much raised as the nature of the operation will allow.

An air or water pillow adds greatly to the comfort of those who are very thin, and old, and makes the nursing easier also.

After the usual aperients, bath, etc., have been given, and quite 18 hours before the operation, the eye may be prepared in the following way: Cut the lashes, re-assuring the patient that they will grow again in about 16 or 18 days. Whilst using the scissors, lay a moist lint sponge along the lower lid to prevent any loose hairs getting into the eye. Scrub the skin around brow and nose with soap and water, then bathe with boracic lotion, some of which must be allowed to run between the lids. Cover with sterilised gauze tissue or other dressing, and bandage firmly for the night. If quite clean in the morning, repeat bathing, but if lids have a sticky appearance and there should be a yellow stain on the pad, it must be reported to the surgeon, as this generally indicates an unhealthy condition of the conjunctiva. There are various preparations used for painting the lids, to get them into a healthy state; but as these are generally dangerous, unless otherwise ordered, a nurse may only use boracic or other mild lotions.

For the operation the patient should be dressed in garments easy to remove afterwards, the dressing gown fastening at the back for preference.

Cocaine, or Adrenalin with Cocaine, is usually ordered to be put into the eye several times before an operation; some surgeons like the former used, others both.

When the patient has been carefully put back into bed after operation, he must be kept on his back for fully three days; and, unless he can be watched, his hands should be lightly

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