

tied to sides of bed, to prevent injury by touching the eye or dressings when suddenly awakening from sleep.

Give fluid diet, beef tea, broth, tea, etc., for the first 18 hours; then gruel, Benger's Food, custard, or milk puddings, with light soups, etc., and on the 3rd day fish, minced or pounded chicken, or any other easily digested foods. Crusts, hard biscuits, and meat should be avoided for a week.

A feeding cup must be used for fluids, and it is often necessary to feed the patient as long as both eyes are bandaged. The after treatment of these cases differs; sometimes they are dressed the following day, and atropine used; but, if the case is likely to be normal, the eye is usually left for three days.

If atropine is ordered to be used in the early stages, it must be introduced by pulling down the lower lid; on no account must the eye be actually opened by the nurse then.

The presence of pain, or rise of temperature, should be reported at once.

Complications such as iritis, atropine-irritation, hæmorrhage, and conjunctivitis, may appear during the following week, and must be treated as the surgeon directs. Septic conditions are rare, and need not be mentioned.

Rheumatism, cough, gastric disturbance, and constipation are common enemies to be fought, and patients almost invariably complain of backache. A good rub with a mild liniment, or a small pillow placed in the hollow above the hips, will greatly relieve the latter; and a hot drink, fomentation, hot flannels, or even a rubber hot water bottle (well protected) will ease the pain in the stomach or abdomen.

The ophthalmic nurse requires a good stock of patience, especially with the aged. They must be kept bright, and hopeful, and encouraged to talk moderately. This is often weary work, especially when the hearing is impaired as well as the sight.

Care should be taken to prevent any jarring sound in their neighbourhood, such as doors slamming, fire-irons or coals clattering, or chairs being knocked against the bedstead.

When allowed to get up, on the 5th to 7th day, patients must not be allowed to stoop, and should be guided when walking, if the sight of the uncovered eye is not good; hæmorrhage caused by sudden contact with a door or other article of furniture has been known to occur a fortnight after operation.

Sterilised woodpads covered with cyanide gauze or plain sterilised gauze tissue are usually the favourite dressings used for these cases.

Bandages vary, from the 2-inch roller, to the more elaborate forms, with tapes, and made of linen, or other washing material.

A very simple, but useful, one may be constructed by sewing long pieces of tape to the upper side of a strip of woven bandage, about 4 inches long and 2 inches wide; shorter strings should be attached to the lower edges, 3 inches long, which should be sewn to the former to form loops for the ears. As this is passed round the head and fastened over the forehead, there is very little unnecessary movement, when the eyes are dressed.

When all wool, etc., has been left off, usually about the fourth week, sometimes earlier, dark glasses, or large shades, are worn as a protection from dust, cold, and strong light.

LILY BALE.

## International Council of Nurses.

### AN OPEN LETTER TO NURSES.

As the Honorary Secretary of the International Council of Nurses, and as the Secretary of the American Federation of Nurses, I should like to make one or two statements regarding the coming Conference in Paris.

The *enemies* of self-governing associations of nurses, the *opponents* of advanced education, of State Registration, and of improved economic status for nurses, are making some attempt to frustrate, in advance, the undoubtedly important and serious contribution to nursing progress that will be made by the reports and papers brought to this Conference. Much of this hostile propaganda is of a character that makes it unworthy of notice, being characterised by an ill-breeding and jealous rage which remove it from the sphere of dignified journalism.

My first statement I would make as the Hon. Secretary of the International Council.

The International Council of Nurses exists for the purpose of attaining the following objects:

*Objects of the International Council of Nurses.*

(a) To provide a means of communication between the Nurses of all Nations, and to afford facilities for the interchange of international hospitality.

(b) To provide opportunities for nurses to meet together from all parts of the world, to confer upon questions relating to the welfare of their Patients and their Profession.

The regular or official meetings of the Council are provided for by its Constitution in the following explicit terms:

*Meetings of the International Council of Nurses.*

The International Council of Nurses shall hold Quinquennial Meetings at which the President, Hon. Treasurer, and Hon. Secretary, for the ensuing quinquennial period shall be appointed.

[previous page](#)

[next page](#)