

## THE NURSING OF TROPICAL DISEASES.

To the Editor of the "*British Journal of Nursing*."

DEAR MADAM,—I agree most cordially with your correspondent as to the desirability of at least an elementary knowledge of the principles underlying the treatment of tropical diseases, before a nurse goes abroad to take charge of patients suffering from these diseases. She may be trained and certificated, but she will find that a varied amount of knowledge of matters of which she is totally ignorant will be expected of her as an ordinary, everyday occurrence.

Take so familiar an instance as the reception of an ordinary case of malaria into hospital. The temperature stands, perhaps, at 100 degs. Fahr. in the shade, and the nurse surveys the shaded ward and the bed, with its cool linen sheets, ready to receive the patient, of whose advent she has had due notice, with satisfaction. Her first case of malaria; how comfortable she will make him; how she will demonstrate to him the value and comfort of an up-to-date nurse, fresh from an English hospital. And then her complacency receives a rude shock. The patient on arrival politely but firmly refuses to get inside the sheets; they will be the death of him, he says; and so they very well might be if he had not the wisdom to make a firm stand. A patient in the acute stages of malaria should always be nursed between blankets and in flannel clothing (pyjamas or nightdresses, as the case may be), and when the sweating stage comes on even those in a few moments will be soaked through and through, and clothing and even blankets will have to be changed. Thanks to the knowledge possessed by the patient, the bed is quickly "made over," but what confidence is he likely to possess in his nurse when, in the first few moments of their acquaintance, it is necessary for the skilled and professional worker to be instructed by the amateur on such a very elementary nursing point? I may say I am not stating an imaginary case. I have actually known this happen; I just cite the instance to illustrate my meaning. Nothing can take the place of practical experience, as a nurse in the tropics will soon learn; but, at least general points, such as the above, could be perfectly well explained to nurses during their training.

Again, take blackwater fever, that disease dreaded before all others. What do most nurses know of that, practically or theoretically? I doubt if the average nurse, who has not been abroad, would know what one meant if one referred to hæmoglobinuria, and as to the symptoms to be watched for and reported, she is absolutely ignorant.

Then, take dysentery. At any moment an isolated nurse may have to tackle alone an acute case of dysentery. What does she know of it? Yet, as your correspondent justly pointed out, "her knowledge or ignorance may turn the balance of life or death in the case of a valuable life." Truly, the heads of our training schools have more responsibilities than they sometimes appear to realise. For there is no more dangerous person than the worker who is presumed to be

skilled while, in fact, she is ignorant. A thousand times safer is the one who is known to be unskilled, because responsibility is not placed upon her. I should like to urge this with all the energy at my command.

Yours faithfully,  
ONE WHO HAS SEEN THE DANGER  
OF IGNORANCE.

To the Editor of the "*British Journal of Nursing*."

DEAR MADAM,—The writer of the letter signed "Matron" in your last issue expresses the opinion that lectures on tropical diseases should be included in the three years' curriculum for trained nurses, but if we are expected to cram much more into that short period, our heads will burst with the effort to absorb all this theory as well as to perform the hard work in the wards which leaves us physically exhausted. I think those who propose to take up work in the tropics should go in for a special course in the nursing of tropical diseases, but I am of opinion that the memories of those who are not likely to need the knowledge should not be burdened with it.

Yours truly,

A WEARY NURSE.

[Other correspondence is unavoidably held over.  
—Ed.]

## Comments and Replies.

*Nurse R.*—It is not an easy matter to get a free passage out to India, as, of course, invalids rarely make the outward journey. It is sometimes possible, by advertising, to find a passenger who requires a nurse to take charge of an infant or young children, and is willing to pay her passage in return for her services. It is necessary to be a good sailor to take a position of this kind.

*Certified Midwife.*—We should advise you to write to Messrs. W. H. Bailey and Son, 38, Oxford Street, W., for a copy of their catalogue, which gives details of their bags for midwives. No. 10 bag, in cowhide, with white, removable lining, and fitted for 30s., is to be recommended.

## Notices.

### THE SOCIETY FOR THE STATE REGISTRATION OF TRAINED NURSES.

All those desirous of helping on the important movement of this Society to obtain an Act providing for the Legal Registration of Trained Nurses can obtain all information concerning the Society and its work from the Hon. Secretary, 431, Oxford Street, London, W.

### CONTRIBUTIONS.

The Editor will at all times be pleased to consider articles of a suitable nature for insertion in this Journal—those on practical nursing are specially invited.

Such communications must be duly authenticated with name and address, and should be addressed to the Editor, 20, Upper Wimpole Street, London, W.

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