

themselves, and make the especial and great demand upon the intelligence, judgment, patience, firmness, justice, and wisdom of the one whose lot it is to have to nurse them. This department of the nurse's duty and activity is the one that is so difficult to explain or write about, as it depends above all things upon that inner perception or feeling on the part of the nurse of that interior perverted state, thought, or feeling which in the mind and character of the patient is the cause or root of unwholesome sentiment, conviction and motive, and therefore the cause of a correspondingly unwholesome and unhealthy state and conduct.

So we may say the neurasthenic patient is one in whom all the component parts of being are, for the time at least, thrown out of the normal course of sensibility, conception, and discernment, as well as of action, whether moral, mental, or physical; and one who, by reason of his or her condition, is rendered peculiarly susceptible to all the disturbing influences that tend to interfere with the normal and peaceful course of life, by whatever channel (body, mind, or soul) they may approach the one so afflicted; and it becomes the part of the nurse in her patient's necessity, while so incapacitated from playing his or her part in life's fight against those influences, to watch continually and exercise all her intelligence, knowledge, tact, strength, and grace to shut out as far as possible everything, whether of material or immaterial origin, that would disturb; and in many (I might say most) cases to set in their true light to the mind of the patient things that seen in the perverted vision appear to be monsters ready to swallow up the hopeless victim, but are in reality only in the nature of those ordinary trials and experiences that come into the lives of all people, and that are like necessary developing elements in life, without which is never built up the character of true manhood or womanhood.

Personally I must say that I have no confidence in the method of systematically continually antagonising (or, to use the more common word, "fighting") neurasthenic patients; it may answer well enough as far as building up the body is concerned and as far as a recuperated body may refit one to resume his or her customary work; nor could I look upon or treat such patients as though they were children.

My conception of these cases, which I have always found confirmed in practice, is that the most important factor in producing the abnormal condition, and consequently the same in bringing about a return to health is in the character (soul) of the patient; and that the

object of the nurse, while giving unceasing attention and care to the purely physical part of the treatment, should always be to reach and to arouse to activity the highest sense of manhood or womanhood that her patient is capable of feeling or acting upon; and I have not found that this could be done otherwise than by treating them as responsible men and women, and seeking to arouse in them that sense of wisdom and duty that will strengthen character and mind, and enable one to ignore the lesser ills and assailments of life, and combat and overcome the greater one; and this I believe to be possible only to the nurse who is always kind and sympathetic, never exclusive, sentimental, or emotional, always firm and reserved, sometimes stern, and, when occasion calls for it, and justice and wisdom are with her in it, even angry, sometimes very angry.

As the physician prescribes the treatment for nervous patients, it is difficult for the nurse to say much about treatment without appearing to encroach on the field of the physician, but as, unfortunately for the nurse, the physician does not have the carrying out of his prescription, it will not be out of place for me to enlarge somewhat on treatment, treatment applied, more particularly, too, as there is so much in each case that never comes under the observation of the physician, that demands immediate attention and action on the part of the nurse; also the nurse is always with her patient, and her own personality and presence, consciously or unconsciously, must always be no small factor in the treatment of such cases.

As to the material part of treatment, the nurse's most relied upon resources, and usually quite sufficient, are cold baths, massage and exercise and feeding.

As full directions are assumed to be given by the physician in each individual case, and an understanding on the part of the nurse of the methods used in these cases, I shall confine my remarks on the details of physical treatment to a few practical points that present themselves to my mind as calling for more particular attention.

In the matter of cold baths, the usefulness of which can hardly be over-estimated, the object is to obtain their stimulant, bracing, and permanently tonic effects without depression or exhausting and wasteful reaction, and the two most particular points in this connection are to avoid chilling, and to secure efficient restoration of circulation and body heat. To avoid chilling, the patient must be gradually led up to the habit of endurance by beginning first, if necessary, with tepid, or even warm water, followed by cold spray or sponging, and then gradually developing into the full cold

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