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## EDITORIAL.

## THE NECESSITY OF PERSONAL DAINTINESS,

Personal daintiness in a trained nurse is a quality which always commends her. It is the outward sign of inward refinement, and, to a helpless patient, himself fastidious, it is a token that the small things which make for his personal comfort will not be overlooked.

To take only one instance: the daily care of patients' nails, ignored by some nurses, attended to so punctiliously by others, may make all the difference to his comfort, and, in regard to the hands of the nurse herself, it is very repugnant to many patients to be attended to by anyone whose hands are carelessly kept.

In these days we know also that any slight deviation from rigid personal cleanliness in a nurse may be a real danger to her patient, and that her spotless uniform should be the outward and visible sign of a scrupulous personal cleanliness in every detail. This is understood by all welltrained nurses, but there is one point which they may not always appreciate, and that is the danger of decaying teeth.

Many surgeons nowadays insist upon attention to a patient's teeth before performing a serious abdominal operation, because they fear the absorption of septic poison in the intestinal tract. In the same way nurses should be exceedingly careful to have all unsound teeth stopped or removed, as it is quite possible for them to be prejudicial to the progress of a surgical case if they do not observe this rule.

We recently heard of a surgeon in a large London hospital who was not satisfied with the recovery of his cases after operation. None of them recovered quite as well as he

could desire, and stitch abscesses were not unknown. He thought of all possible causes, he enjoined greater care upon the nurses, and still the results in his wards did not please him. At length, being a liberal and fair-minded man, it occurred to him to wonder whether he himself was responsible for the failure, and eventually came to the conclusion that the trouble arose from some defective teeth in his own mouth. He thereupon put himself in a dentist's hands and had his teeth overhauled and defective ones stopped or extracted. The result was extremely satisfactory, for since then the healing of surgical cases in his care, by first intention, has been the rule, and his results all that could be desired.

The lesson to nurses is plain: no source of possible contamination in themselves should be overlooked. Decaying teeth, and suppurating gums, the presence of ulcers on the legs or elsewhere, contra-indicate the care of a surgical or midwifery case, until these matters have been attended to and rectified.

It follows also that no detail of the nurse's personal toilet is too trivial to be overlooked; hair, teeth, nails, all should be attended to with a minuteness which places them, like Cæsar's wife, above suspicion. So we return to our original proposition with added force. Personal daintiness is a necessary quality in a trained nurse, not only because it is an index of her personal refinement, but because without it she is a source of danger to her patient.

Cases are on record in which sepsis in a lying-in woman has been directly traced to some sore, or septic condition on the part of the midwife in attendance. And, with our present day knowledge, it is reprehensible of any nurse or midwife to subject a patient to the risk of infection.

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