

OUR PRIZE COMPETITION.

We have pleasure in awarding the prize this week to Miss Amy Phipps, St. George's Infirmary, London, E., for the following article on the question:—

WHAT ARE THE SPECIAL POINTS TO BE OBSERVED IN NURSING MENINGITIS?

In nursing a case of meningitis, inflammation of the membranes (usually the pia-mater) covering the brain, the first point is to procure perfect rest and quiet in a darkened room, with plenty of fresh air. Attention must be paid to the bowels, and if constipation be present it should be relieved by enemata, or an aperient, such as calomel, by mouth; or there may be incontinence, in which case the patient must be changed frequently, and with as little movement as possible. If there be retention of the urine, it must be drawn off with a catheter, and a specimen saved for inspection.

The doctor will probably order the head to be shaved, and cold to be applied to the scalp in the form of an ice-bag, ice-poultice, or Leiter's tubes. By means of the latter a continual flow of iced water may be applied to the inflamed area. In these applications it is important that a piece of lint (which should be kept as dry as possible) be placed next to the scalp.

If an ice-bag is in use, the nurse must see that it is light, and that it always contains ice; otherwise, the water in the bag becomes warm, and does harm rather than good.

Leeches are sometimes applied at the temples or behind the ears; and bromide of potassium or chloral is sometimes injected to relieve pain or convulsions and procure sleep.

The headache is very severe, causing a sharp characteristic cry, even in sleep, which once heard is never forgotten.

The mouth will require constant cleansing with glycerine and borax, and any discharges from nose or ears must be bathed away frequently. The temperature, pulse and respiration should be taken and recorded every four hours.

Nourishment should be administered frequently, and this will need great patience on the part of the nurse. It may have to be given with a teaspoon, if the patient is unconscious, and as he takes very little it should be as highly concentrated as possible. Occasionally it is necessary to resort to rectal or nasal feeding, if vomiting persist, sips of iced water only being given per mouth.

The patient should be nursed in a recumbent position, with perhaps a small soft pillow under the head. He should be clothed in flannel, with a blanket next to him.

The extremities should be kept warm by hot bottles, well protected by flannel bags, as it must always be remembered that the patient is specially susceptible to burns, on account of the paralysis which is probably present. The limbs may be wrapped in cotton wool.

When the hands are tightly clenched, the fingers should be opened out and a pad of cotton wool placed in the palms to avoid injury to the hands. If the illness be long, there is always great liability to bed sores, on account of the muscular wasting which is always present. Therefore, from the beginning, the usual precautions must be taken, and the patient kept clean and dry. Bed sores are specially apt to occur at the sides of the head, the elbows, ankles, ears, sacrum and hips.

Any fresh symptoms arising should be reported to the doctor, his orders should be carried out faithfully on all points, and the effects of any treatment employed carefully observed and noted.

HONOURABLE MENTION.

Miss E. James (Birmingham), Miss E. Marshall (London), Miss M. Taylor (Gloucester), and Miss M. Atkinson (Hawick), receive honourable mention.

Miss James writes that the acute form of meningitis usually occurs in childhood, but adults are also attacked. The symptoms are intensified by bright light and noises, therefore lights should be lowered, visitors excluded, and perfect quiet maintained in the sick room. Those persons who enter it must wear noiseless shoes.

Miss Marshall states:—These patients should never be left alone, and need careful watching and attention, the circulation is so defective and uneven, and collapse may suddenly occur. Hot water bottles must always be in readiness, carefully wrapped in flannel, and placed in a position so that no injury can occur by burning the skin. Unconscious patients so easily blister by the application of heat, owing to inactivity of the nerve cells. The room should be darkened and the patient kept as quiet as possible, soothed and humoured absolutely; no discussion of any kind should take place in the patient's presence, however unconscious he appears to be.

QUESTION FOR NEXT WEEK.

"What are the Common Non-alcoholic Beverages, and How are they Best Made?"

[previous page](#)

[next page](#)