

OUR PRIZE COMPETITION.

DESCRIBE THE MODERN SYSTEM OF TREATING AND NURSING PNEUMONIA.

We have pleasure in awarding the prize this week to Miss Edith M. Rogers, Holly Bush, Hamworth Road, Hampton, Middlesex, for the following paper:—

PRIZE PAPER.

There are two forms of pneumonia, or (inflammation of the lungs)—

- (i.) Broncho-pneumonia.
- (ii.) Acute or lobar pneumonia.

(i.) *Broncho-pneumonia* is a combination of bronchitis and pneumonia, and is most commonly met with in aged people and children.

The patient should be kept at rest in bed, in a warm and well ventilated room (temperature 65 degrees). Light, nourishing diet given. The temperature and pulse recorded every four hours. Keep a steam kettle going.

A pneumonia jacket should be made for children, to keep the chest warm. It should be large enough to cover the entire chest and back, having tapes each side, which are tied under the arms. An aperient will be ordered if the bowels do not act regularly. The sputum should be saved for the doctor's inspection.

(ii.) *Acute Pneumonia*. If one lung only is affected, it is spoken of as single pneumonia; if both lungs are diseased, it is then termed double pneumonia.

The patient should be kept absolutely at rest, and on no account be allowed to sit up or talk, as the great danger of acute pneumonia is failure of the heart. This is denoted by a steady rise in the frequency of the pulse rate, or the appearance of lividity about the lips, ears, or beneath the finger-nails.

The patient should have abundance of fresh air, and wear a flannel nightdress. An oil lamp may advantageously be used in the place of gas.

A light, stimulating diet may be given, consisting of milk, beef tea, cream, and broths, with iced water or lemonade to quench the thirst. The temperature and pulse rate should be recorded every four hours, and the sputum saved for the doctor's inspection. If the temperature remains high, ice poultices or ice bags applied to the inflamed portion of the lung give relief; or linseed jacket poultices applied every four hours. In case of relapse, the doctor will probably order stimulants, such as strychnine, alcohol, and ammonia.

The crisis usually comes about the end of the first week, and if delayed beyond the ninth day the case is critical.

HONOURABLE MENTION.

The following competitors receive honourable mention: Miss Bertha Bottomley, Miss Mary Thompson, Miss S. Simpson, Miss A. M. Ashdown, Miss M. Farmer, Miss P. Macfarlane.

Miss Bottomley writes: The clothing must be as light as possible but quite warm. A jacket made of gamgee tissue, and fastening down the side, should be worn next the skin. The bedgown should be of flannel if possible, made open down the back, and fastened at the top to prevent unnecessary movement of the patient. The feet must be kept warm by carefully protected hot-water bottles. The bowels will require careful regulating. The tongue and mouth should be kept clean by swabbing out with glycerine and borax before and after each feed.

Miss S. Simpson points out the importance of skilled nursing in cases of pneumonia. Attention must be paid to the ventilation and temperature of the room. The temperature should be evenly maintained from 60 degrees to 65 degrees Fahr. The patient should never be allowed to sit bolt upright. Never let him get out of bed. Every want should be anticipated. Do not select a position for him; let him choose his own. In cases where there is dyspnoea he should be carefully and gently propped up with pillows. After the crisis he will need every attention and careful feeding. He has come through a very critical and exhausting period, and will need a very nutritious diet to support the strength.

Miss Ashdown says that cases of pneumonia should be treated as infectious. The symptoms to watch for are pain, dyspnoea, heart failure, delirium, pyrexia, hyperpyrexia, sleeplessness. The sputum should be disinfected and burnt after inspection. The elimination of toxins is procured through the skin, the bowels, and the kidneys. The skin must be kept clean and active, the bowels kept freely open by means of saline laxatives, the kidneys assisted by drinking plenty of water or lemonade. Vaccine is sometimes given, and in some cases has been thought to hasten the crisis.

Miss Farmer remarks that the administration of oxygen at an early stage of the disease, and before dyspnoea and cyanosis appear, is now often ordered with markedly good results. Patients feel the benefit of it, and do not as a rule object to it. If necessary the action of the heart is assisted by cardiac stimulants, such as strychnine and really good brandy.

QUESTION FOR NEXT WEEK.

Give some information on the training of infants.

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