

## OUR PRIZE COMPETITION.

WHAT IS CHOLERA, ITS SYMPTOMS, THE TREATMENT USUALLY PRESCRIBED AND THE NURSING POINTS TO BE OBSERVED?

We have pleasure in awarding the prize this week to Miss S. Simpson, Borough Sanatorium, Bridlington.

### PRIZE PAPER.

Cholera is an acute disease, of which the principal features are the profuse discharge of watery evacuations from the bowels, vomiting, collapse, cramps in the calves and feet, and suppression of urine.

Cholera is communicable from man to man, and may occur in epidemics; it makes but little distinction of sex, age, or condition. There is frequently a premonitory stage of diarrhoea, or, in the absence of diarrhoea, the patient is depressed and uncomfortable, and complains of headache, vertigo, noises in the head, or oppression at the epigastrium, and this stage lasts from one to two or three days. Then the patient is seized with violent diarrhoea, and the discharges soon lose all biliary colouring matter and look like whey, or water in which rice has been boiled (rice-water stools). These are neutral or slightly alkaline. Sometimes the stools have a pinkish tinge from the admixture of blood. The purging is accompanied by very little pain or griping. After one or more hours of purging, vomiting sets in; at first food is ejected, then a whey-like fluid like the intestinal discharges. The vomiting is easy, often a mere regurgitation. The patient suffers from anorexia and thirst, the tongue is white and may become dry, and the epigastrium is sensitive to pressure. At the same time there are severe and extremely painful cramps in the calves and the legs and feet, and less often in the hands and trunk. Soon the patient sinks into collapse—the algide stage. The surface of the body becomes cold and livid, the hands and feet, face and nose are pinched and blue, the eyes are sunken and the breath is cold.

The axillary temperature falls four or five degrees below normal, although in the rectum it may register 100° to 104° F. The pulse is small, thready and almost imperceptible, numbering from 90 to 100. Respirations are short and quick, from 30 to 40 a minute. There is great muscular prostration, but the patient is restless, throwing his limbs about, and the voice is hoarse or he may lose his voice altogether. In cases that survive the collapse there is a gradual rise of temperature. The skin begins to regain its natural colour and lose its shrunken appearance, the cramp and rest-

lessness cease, the pulse improves and may become slower than in health. The face becomes congested with patches of dusky redness; the conjunctivæ are injected. This is the first stage of reaction, and, if there is no relapse, it goes on to recovery.

In the first stage the diarrhoea may be treated with opiates or astringents, but these are no good in the pronounced stages of the disease itself, as whatever is introduced into the stomach will be vomited again or will be unabsorbed from the inactive condition of the circulation. Stimulants may be given with caution, and some relief may be obtained from sucking ice.

Cold compresses will relieve the præcordial distress. Small doses of morphia subcutaneously or gentle friction with chloroform will relieve the cramps. The condition of collapse may be combated by supplying heat by means of warm blankets, hot bottles (protected by flannel bags) placed to feet and thighs.

The intravenous injections of saline solutions do good in cases of profound collapse. In the stage of reaction, the patient should be kept cool; diarrhoea, if it continues, should be treated by opiates and astringents; the vomiting by effervescing draughts or by opium. Light, nutritious food should be given frequently and in small quantities. If there is much vomiting it may have to be given per rectum.

Continued suppression of urine will require small doses of salines and counter-irritation, or cupping glasses to the loins.

### HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss A. Wellington, Miss O'Brien, Miss S. A. G. Lett, Miss M. Dods, Miss Macfarlane, and Miss B. James. Several of the papers were of a high standard, so that there was some difficulty in awarding the prize.

Miss A. Wellington states that the word "Cholera" comes from two Greek words meaning "bile" and "I flow."

Cholera has two distinct forms—simple cholera and malignant cholera—and though essentially different they may present many symptoms of resemblance.

Miss M. Dods defines cholera as a severe, malignant, infectious disease due to a definite germ (Koch's bacillus). It is rarely seen in temperate regions, or in places where sanitation and water are good, and only then when introduced by persons already suffering (probably in a mild form) from the disease, having brought it from the tropics. It is usually epidemic, though in many places it is

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