

in it one way or the other, and once "down" I never remember seeing it ejected. You may ask, Why this form? Firstly, because the albumen of the egg dissolves more readily in water than anything else, and we wish to render it soluble. Secondly, a valuable alimentary substance like an egg is better given to our sick separately and plain, so as not to overtask the digestive powers; *one* thing at a time, and that thing of the best, is the wiser way to build them up again, than *over-doing* foods, however valuable in themselves. Thirdly, that the alcohol in the form of brandy or wine, which *does not* dissolve albumen, nullifies on that account the good we hope to get out of it. My remarks apply only to our sick. I do not say it is a *pleasant* way of taking eggs, but I most earnestly think it a wise one, and I have known excellent restorative effects follow upon *one* egg a day, taken in this way fasting. How many more will depend upon Medical direction. Brandy in milk is highly serviceable under certain conditions, but I think very differently as to brandy or wine with eggs.

We will now turn our thoughts to cooked eggs—much nicer to take and most valuable during convalescence, when we are patiently endeavouring to build up the system after the devastating ravages of disease. In cooking eggs (and there are countless ways of cooking them), the first point to consider is, shall they be given plain or mixed with other things? To my mind, the former is more desirable, for, in feeding our sick—women especially—I have found it wiser to simplify meals and vary them as much as we can, for in our task of renovation we *must begin* with stomach, and do all we can to tempt appetite. For cooking eggs, no way approaches the omelette, which can be made sweet or savoury, and taken at any meal. This elegant preparation requires dexterous manipulation and judgment; but it is so rarely compassed by our English cooks that a Nurse is not often able to get it for her patient, for our E. C.'s utmost efforts in this direction begin and end with a *soufflé* of more or less (and generally less than more) merit. Next to the omelette, the best form for our patients of egg cooking is the familiar "buttered egg," and I have found the following way of preparing it acceptable to most ladies, especially for their breakfast. You will require a small block-tin (or silver) saucepan, into which you put a piece of best fresh butter about the size of a hazel nut, and place it on the hob (a Nurse generally has to prepare this little confection in her own or the lady's room) to melt. Crack a perfectly fresh egg (newly laid, if possible) into a teacup; take out the "tread," and with a small, silver fork stir white and yolk *gently* together. Into another

teacup put as much dry mustard as will lie on the end of a teaspoon, a little ground white pepper and a pinch of salt. To these ingredients add a tablespoonful of cream. You now make a slice of thin toast, and butter it on one side and place it before the fire on a small plate till you are ready for it. Put the cream, &c., to the egg by degrees, and *stirring* all the while; when the ingredients are well mixed, pour them all *quickly* and at once into the saucepan; hold it *over*, not on, the fire, with one hand, and commence stirring with the other, and do not leave off stirring until the end. And now comes in all the "science" of this simple concoction. How are you going to stir? In this wise: as soon as the egg begins to set draw the "flakes" away from the sides and bottom of the saucepan with the silver fork, turning them lightly about; when all are set lift them out of the saucepan with a silver teaspoon, and place them at once upon the hot toast; the egg should be pale straw colour all over, light, flocculent, and about the consistency of boiled custard. Most patients like an egg in this form. If prepared for lunch or supper, omit the seasoning, add a little castor sugar instead, and serve it with preserve or fruit syrup. The next form in which eggs can be utilised for our patients is in custard to eat cold. As Nurses we cannot make the custard, and must rely on the cook or *chef*, and meekly suggest to those exalted functionaries that the cream should be well *en evidence*, and used with no niggard hand, and that blanched and freshly grated almonds—sweet and bitter—to be strained out when the custard is done, are safer and more delicate for flavouring than the shop ratafia; the addition of a little of the best pale French brandy, put to the custard when cold, brings out the flavour of the almonds, and is altogether an advantage; but this point must be subject to the wishes of the patient, or Medical attendant.

My Nursing readers will observe that in these egg preparations we have just touched upon, in the first instance the egg is not cooked at all, and in the two last very lightly. Overcooking diminishes the reparative value of the egg; the routine baked and boiled custard puddings fail in this particular, and are more suited to the well than the sick.

Soups have a great dietetic value for our convalescents, but we cannot enter upon so wide a subject in these pages. Speaking generally, the clear are better than the thick, and the addition of vegetables to either may be regarded (as far as our patients are concerned) as doubtful, in the face of digestive troubles. Perhaps of all soups the *potage a la Reine* has the most nutritive value for our recovering sick, being a felicitous combination of flesh and fish.

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