

OBSTETRIC NURSING.

— BY OBSTETRICA, M.B.N.A. —

PART I.—MATERNAL.

CHAPTER VII.—THE LOCHIAL PERIOD (DUTIES DURING).

(Continued from page 124.)

THE last dietetic point we shall touch upon for our sick patients is wine. Fierce controversies have raged over the subject of stimulants, and like smoke upon the field of battle, have obscured the issue of the fight, and led each combatant to claim the victory. We will not mix in these strifes, but thoughtfully consider when, why, and how wine may be of service to our patients.

This question of stimulants is a thorny one in our path of Nursing, requiring on the part of a Nurse firmness, kindness, and that "discretion" which in this case is by far "the better part of valour," for we are not zealous to "air" our own opinions, so much as to conciliate and guide those of others. The first point I would earnestly impress upon the minds of my younger Nursing sisters is, that stimulants, like drugs, should only be administered subject to the *knowledge* and consent of the Medical Attendant, for under the ordinary conditions of childbirth they are not necessary, and their indiscriminate use by patients or Nurses is entirely to be deprecated. I have so recently—and I fear to some of my readers, tediously—dwelt upon the preparation of simple nutritious foods for our patients, because we must all recognise how important judicious feeding is, and how it will, by *uniformly* sustaining the patient's strength, do away with the desire and excuse for stimulants.

Remembering that alcohol is not necessary to life any more than gunpowder, we must not forget that it *is* necessary for the *defence* of it under certain conditions; and there is no drug in the Pharmacopœia that can compare with it for efficacy in the hands of a wise and able physician, and in my judgment the men of past generations recognised that fact more than the men of to-day as far as medical practice was concerned. Our opponents frequently assert that patients only take, and doctors only give wine to them for the sake of the alcohol it contains. Can we admit this when we know that those wines which are the most serviceable to our patients contain the least alcohol? Potatoes, parsnips, and fifty other things, including old boots for all I know, will yield alcohol under fermentation; but can we allow that these miscellaneous substances have the efficacy and value that *wines* of choicest vint-

age have? And remember, when we *do* give wine to our sick, no wine is too good for them. Where then does the objection, "merely a question of alcohol," come in? Again, we are told that "wines" (?) can be manufactured in the laboratory of the chemist from substances that bear no resemblance to grapes. These similitudes may be marvels of synthetical chemistry, but they are worthless for our sick; they are *not* wine.

What we understand then by wine is the fermented juice of grapes, black or white; and these last are sometimes dried, and from them are made the *vins de paille* of so many renowned vintages. A wonderful property about wine, to my mind, is what I will call its "heredity," the productions of celebrated vineyards being the same through countless generations, and they who understand wines know the place of their growth by their flavour, even though it be only from one side of a hill to the other. The productions of wine-growing countries differ remarkably. Sherry has no resemblance to port, nor the Rhenish wines to those of France, and yet they all contain *alcohol*, the very least part of their merits; and in wine-growing countries and wine-drinking nations inebriation is *not* a national vice; hence we may infer that the virtue of wine is something better and different to alcohol.

Man has for ages fermented his bread for food. Are we to admit that he eats it for the *sake* of the "leaven," and that he would be just as well upon "damper"? Man has for generations fermented the grape to make his drink. Are we to infer that the potential energy as food of corn and grape is destroyed when they are converted into bread and wine by the somewhat analogous action of a leaven? I merely suggest these matters to the consideration of my Nursing readers, in order that they may bear in mind that when we give wine to our patient it is *not* as a stimulant only, but in virtue of certain sustaining powers that *good* wine affords when foods fail us, and the strength of the patient begins to flag. It is far otherwise with brandy or other spirits. They *are* given as stimulants only. There is no sustenance in them, and the less we use them the better, and, as I said before, subject to medical direction. Wine is most serviceable in certain phases of convalescence, and in our portion of Nursing work the more frequently prescribed are clarets (including Burgundy) and champagne; and we have resort to them under very different conditions.

The first point to give us anxiety is, can we trust the weapon (?) upon which we rely? Is it not but too often as a case of "twisted" bayonets, faulty swords, and the rifles that are more to be dreaded by ourselves than our foes? The adul-

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