

OUR PRIZE COMPETITION.

DESCRIBE THE BEST METHOD OF FLUSHING THE BOWEL.

We have pleasure in awarding the prize this week to Miss Hannah Scott, Eastern Hospital, Homerton, London, N.E., for her paper on the above subject.

PRIZE PAPER.

In flushing out the bowel, one must bear in mind that the object is to clear the canal of toxic poisoning and bacteria, these being present in great abundance in the lower bowel.

If time permits, and the bowel needed special care, a purgative of mag. sulph. 1 oz. given the night previous, helps to clear out bacteria, and the toxin manufactured by them, followed by a good soap and water enema of two or three pints (sterile), given with a Higginson's syringe. The measured quantity is put into a basin, and soap rubbed down till a good lather is obtained. The patient lying on his side, with the bed protected by a mackintosh, the syringe is then filled, the air expelled, the nozzle oiled and inserted. Care must be taken that the other end of the syringe is covered with fluid. The action of the soap and water is made more effective by adding *assafoetida* ʒss.

Boracic lotion, about two pints, may be given high up into the bowel by a rubber tube and glass funnel. A catheter is attached to the tubing, and passed about eight inches into the rectum. The patient's head is lowered, and the hips raised by placing a pillow under them, and the foot of the bed is raised as high as possible on blocks. This position will send the fluid higher up into the bowel. After allowing the fluid to remain for a short time, the patient should be lowered, and the fluid syphoned back into a receptacle. This may be repeated if necessary, and is called a high enema.

A special flush after an operation consists of Epsom Salts, half an ounce; Glycerine, one ounce, and water, six ounces, given by a long tube and funnel. This irritates the wall of the bowel, and is soon expelled (a good method for flatus). In constipation excellent results are often obtained from an enema of equal parts of warm castor oil and olive oil, followed by enema saponis two hours afterwards, the quantity given being about two pints. In cases of colotomy the bowel may be flushed out with boric lotion, hot water, or creolin if offensive. The tube in this case will have to be inserted

into the false anus, the point being diverted downwards.

In appendectomy for ulceration, saline solution or protargol (1-100) two or three pints daily given by catheter and funnel.

In a case of hæmorrhoids, a soap and water enema is often ordered, followed by boracic lotion (1-30).

If there is any difficulty in inserting the tube, no force must be used. Should the enema give the patient pain, the nurse must wait until the pain has passed, then gently continue till all the fluid is given.

Flushing out the bowel with barley water or gruel is very soothing to an irritated membrane.

HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss E. Gertrude Brady, Miss Macfarlane, Miss M. Robinson, Miss J. Stoner, Miss P. Latham.

Miss Brady writes:—Before giving a nutrient enema, it is necessary to wash out the rectum and sigmoid flexure of colon with plain soap and water enema. To wash out the bowel a teaspoonful of bicarbonate of soda to one pint of water is the usual strength given: bicarbonate of soda solution is very useful when there is any acid secretion, as in an eclamptic patient, two or three quarts are required. To wash out the bowel, have a glass funnel, a couple of yards of red rubber tubing, and a strong male catheter. Have the water at normal body temperature, and fill the tubing up until the water comes up at the glass funnel before introducing the catheter into the rectum. By so doing you avoid forcing air into the passages. About six ounces should be run in at a time.

As more might cause some irritability of the rectum, it is then run out by lowering the funnel into a basin on the floor, on the principle of a syphon, before raising the funnel for the second lot of water, the tube must be nipped, and the funnel raised and filled before letting go, otherwise the water in the tube returns to the rectum and the tube becomes filled with air, which subsequent filling of the funnel would drive into the rectum. The principal object of this treatment is to wash away undigested portions of food, and so prevent any cause of irritation being present in the rectum.

QUESTION FOR NEXT WEEK.

Give the general rules for the disinfection of each of the following in the case of infectious diseases:—(a) Discharge and excreta, (b) linen, (c) utensils, (d) the nurse's hands.

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