

abdominal region should be encased in cotton wool, every effort being made to keep up the warmth of the body.

The evacuations from the bowels will probably be very frequent and loose, and these must be carefully noted by the nurse and reported upon; as the disease advances, and part of the peritoneum is involved, sloughs, mucus, and blood will probably be passed by the bowel.

The diet is of the greatest importance, especially where vomiting is persistent.

In many cases, milk cannot be retained at all in any form; in which instance, albumen water often proves invaluable, milk being introduced very gradually, and as it can be digested, probably starting with 1 drachm of milk to 1 oz. of water or albumen water. It is usually best to give nourishment hourly, and in very small quantity, each individual case depending, of course, on prognosis of disease. In every case all water or milk must be perfectly sterilised before use. It is sometimes found easier of digestion if the casein is removed from the milk by rennet; or ass's milk, for a time, often proves invaluable when it is procurable.

In almost every case the doctor will prescribe brandy, either by mouth or to be injected, and in case of shock, strychnine to be injected hypodermically.

The nature of the stool is very irritating, therefore the child must be changed frequently, washing each time with plenty of soap and warm water, and with as little exertion as possible. The parts around the anus may be kept smooth with a little boracic or other ointment. The nurse should be alive to the danger of intussusception occurring, from the irregularity of the peristaltic action, which is usually present, owing to the sluggish condition of the nerve centre and the nerves governing that system.

As recovery progresses, the digestion must be watched, the food at first being very light and nourishing. Throughout the attack all symptoms must be carefully watched, the pulse being the chief guide as to the general condition, and full and accurate reports made.

HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss H. Scott, Miss Grace Nash, Miss Irene Parkerson, Miss M. Paterson, Miss G. Roberts, Miss F. O'Brien, Miss J. G. Gilchrist.

We much regret that Miss Gilchrist's admirable paper arrived too late to compete for the prize, as it was only received at eight o'clock on Monday evening. Will competitors note

that to be in time for the competition papers must be received by the Editor not later than the first post on Monday morning?

Miss Gilchrist writes:—Summer diarrhoea, or zymotic enteritis, is a preventible disease causing a high mortality amongst infants. It is the action of poisonous products in the intestinal tract. Is essentially a filth disease, occurring where overcrowding and dirt prevail, combined with the consumption of polluted food, and indirectly from the results of want of sufficient nourishment. The disease manifests itself most actively towards the later summer months and early autumn. The mortality rate is highest after a hot, *dry* summer, a marked difference being observed when the summer season is cool and rainy, thus proving the theory of fly-borne infection and the conveyance of disease germs through the medium of dried dust and dirt of all descriptions.

It is not a sudden disease, but rather the result of gastric and intestinal disorders, the diarrhoea being the last resource of nature to eliminate the harmful putrefactive contents from the irritated and weakened intestines.

QUESTION FOR NEXT WEEK.

What is Gastritis? How is it usually treated?

THE CARE OF EPILEPTICS.

Miss T. Guinan draws attention to the following precautions which should be observed in caring for an epileptic patient:—

Treatment.—Keep under constant supervision. Attend to general health. When warning cry is heard, endeavour to prevent patient falling and hurting himself. Bowels must be kept well open; take outdoor exercise, avoid all excitement and worry. The greatest tact is necessary in dealing with an epileptic; he must take plenty of nourishing food. Meat must be taken sparingly. The patient should sleep on a low bed, in case he should fall off during a fit. Artificial teeth should never be worn at night. Climbing heights, standing near water or open fires should be avoided, in case a fit comes on. During a fit, lay patient flat with a low pillow under the head; a piece of wood should be inserted between the teeth to protect the tongue; loosen tight garments. Nothing should be given by mouth during a fit. If there is food in the mouth a piece of wood or spoon handle is inserted between the teeth, the finger is passed to the back of the throat, and every particle removed in case any is drawn into the trachea and causes choking. Bromides are the most effective medicines, but are given as directed by the doctor.

[previous page](#)

[next page](#)