

## OUR PRIZE COMPETITION.

WHAT ARE THE SIGNS AND SYMPTOMS OF PUERPERAL SEPSIS? HOW DOES THE CONDITION ORIGINATE? WHAT PRECAUTIONS WOULD YOU TAKE TO PREVENT ITS OCCURRENCE?

We have pleasure in awarding the prize this week to Miss S. Simpson, Louise Margaret Hospital, Aldershot.

### PRIZE PAPER.

Puerperal sepsis is blood poisoning, and is caused by infection being absorbed. There may be an initial rigor, the temperature rises suddenly about the third day, in some cases earlier. Lochia may become offensive or may cease. Temperature remains high, pulse rapid, becoming weak, and there may be repeated rigors. The patient is often unaware that she is very ill. Her mental condition may be quite clear, or there may be delirium. Rashes may appear on the skin.

Signs of grave import are—vomiting, distension of abdomen, diarrhoea, dryness of the tongue, weakness of the pulse, and sleeplessness.

The temperature may come down below normal, but if the pulse remains rapid the prognosis is bad.

Puerperal sepsis may be caused from infection conveyed to the passages, or aseptic fingers and appliances may become reinfected by contact with the vulva, or sepsis may already exist in the vaginal discharge. The wounds in the genital canal become contaminated either by septic germs gaining access to them, living in the living tissue, or by the dead poisons from septic germs which have multiplied in dead tissue lying in the canal.

Sponges, towels, or cloths applied to the vulva, if they are not thoroughly aseptic, may be the cause, as may also faecal stains on the body or bedclothes. Attendants coming from an infectious patient without first thoroughly disinfecting, or from laying out a dead body, may convey it, as they might also if suffering from inflamed throat or fingers, ulcer or abscess discharging pus. Frequent vaginal examinations also predispose to infection, and if wounds which might have been stitched are neglected, septic absorption may take place through them. Douches, unless aseptically administered, may cause sepsis, or the use of a lubricant which is not aseptic.

To prevent its occurrence the nurse should wear clean, washable dress and apron. All instruments and appliances should be thoroughly disinfected before and after a case. The hands and forearms rendered aseptic by scrubbing in soap and water, and soaking for several

minutes in disinfectant (lysol 3i to water Oi, or perchloride mercury 1-1,000). The fingertips and nails should receive special care.

The vulva and surrounding skin should be thoroughly cleansed before vaginal examinations. The room should be well ventilated; soiled clothes, pads, &c., should not be allowed to remain in it. Prolonged labour favours sepsis.

Hæmorrhage and albuminuria lower the patient's resistance, so that her tissues have not power to resist bacterial invasion.

### HONOURABLE MENTION.

The following competitors are awarded honourable mention:—Miss J. G. Gilchrist, Miss M. D. Hunter, Miss E. Fenn, Miss D. Fairbank, Miss F. Sheppard, Miss M. Punchard, Miss E. J. Townley, Miss W. M. Hunt, Miss M. G. Bielby, Miss J. J. Jackson, Miss E. Brook.

Miss F. Sheppard points out that "The local manifestation of the disease, consisting of inflammatory changes, varies in kind, degree, and site. Almost all the organs may become involved, more especially the uterus, peritoneum, kidneys, and liver. In some cases the influence of the poison is so overpowering and rapid that death ensues before any gross change in the tissues occurs, but usually there is abundant evidence of the extent of the anatomical changes. Once the disease is fairly established, the prognosis is grave in a high degree."

Miss M. Punchard writes:—"Puerperal sepsis is due to absorption of septic material, either from the decomposition of retained placenta in the interior of the uterus, or introduced from a wound caused by the laceration of either the cervix, vagina, or perineum. It may also be caused by introduction of septic material from without by nurse's hands, clothing, or instruments used. Also by bed or body linen of patient or unsterile pads. It may follow tedious or instrumental labours."

Miss M. D. Hunter mentions that a rise of temperature may be sometimes caused by nervous or intestinal influence.

Miss J. G. Gilchrist defines puerperal sepsis as "an infective condition occurring at childbirth; due to the invasion of the genital canal and uterus by germs, which may later enter into the blood stream and poison the whole system. The pus-producing organisms, *streptococcus pyogenes*, are the most common."

### QUESTION FOR NEXT WEEK.

What are some of the conditions under which tracheotomy is performed? How would you prepare for the operation?

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