

sanitary conditions must be improved as far as possible, and the infected persons isolated for treatment. The general health is improved by fresh air, liberal diet, and tonics containing iron and quinine. Vapour and sulphur baths, cupping, and massage with the application of guigun oil relieves the neuralgic pains. Sodæ. Sal. gurgun and chaulmoogra oil may be taken internally. Goa ointment is applied frequently in the eruptive stages. Daily dressing with soothing lotions and ointments does much to alleviate the sufferings from sores. Fluid antiseptics are largely used as sprays and gargles in ulcerated conditions of mouth and nose.

Blindness often supervenes owing to the lesions and spread of tubercles to the cornea of the eye. Keratotomy may be performed or caustic application may save the patient from total blindness.

Amputation of an infected limb may save the general infection of the system, and the actual cautery applied to the tuberculous growths may be successful in restricting the disease if local.

Death occurs chiefly from exhaustion and marasmus, owing to the progression of disease, or persistent diarrhœa, a frequent complication. Asphyxia is a common cause of death; tracheotomy is sometimes performed to relieve the suffocation when the larynx and pharynx are affected. Pulmonary tuberculosis is another frequent cause of death, and diseases of the kidneys likewise bring to a close the life of the afflicted person. In our scientific and enlightened country leprosy is nursed in hospital as a clinic case, the early diagnosis and treatment persistently carried out arresting and localizing the disease. In Eastern countries little or no curative treatment is thought of. Patients are treated as social outcasts, but in many cases, as long as they are able to move about, mix with the community and no doubt help to spread the disease by their untreated and contaminated bodies and belongings. Segregation of the afflicted, with removal of predisposing cause, are the two principal remedial measures to cope with this horrible disease, entailing so much suffering and waste of human life.

HONOURABLE MENTION.

The following competitors receive honourable mention: Miss H. Scott, Miss F. Sheppard, Miss E. Martin, Miss L. S. Nunnerley, Miss O'Brien, and Miss B. Smith.

QUESTION FOR NEXT WEEK.

What precautions would you take in nursing a suspected case of syphilis?

CLINICAL NOTES ON SOME COMMON AILMENTS.

By A. KNYVETT GORDON, M.B. Cantab.

PYREXIA.

In taking the subject of pyrexia—otherwise a rise in the temperature of the body—I am perhaps going a little outside the original scope of these articles, but it has been pointed out to me recently that the reasons why pyrexia occurs—being in themselves somewhat complicated—might appropriately be stated in simple form for the benefit of those nurses who have not time to extract them from the text books on the subject for themselves. As usual, I shall make no pretence to cover the whole ground, but shall purposely omit details in order that the general principles underlying the subject of pyrexia and its treatment may be the more easily grasped.

In the first place, what is pyrexia? The name itself is simply the Greek for hotness, that is to say, a condition in which the temperature of the body is raised above the normal, which in most people is 98.4° Fahrenheit. This is tested by placing a clinical thermometer in the axilla (or in children sometimes in the rectum) or under the tongue. Sometimes the terms pyrexia and Fever are used synonymously, but this is a mistake, for the word Fever is often used to denote not only the rise in temperature itself, but also the symptoms which accompany it. In order to understand what pyrexia is, we must first know why the temperature of the body in health is always the same, and we can then study the causes which upset the balance and produce a rise in temperature. We will then see what effect this rise has on the system generally, and lastly, in what the rational treatment of the condition consists.

Where does the heat of the body come from in the first place? It is produced by the burning up of the substances which we take in as food, and especially by the carbohydrates (starch and sugar) and fats. It is true that the proteids (meat, fish, vegetable seeds, and so on) give rise to a certain amount of heat, but they are used mainly for the formation of flesh. Carbohydrates and fats, on the other hand, are mainly turned by the body into carbonic acid gas and water, and heat is given off in the transition. In cold weather we want more heat, and that is why we like to eat fatty and starchy foods in winter and dislike them in summer. The burning up of the heat forming

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