

OUR PRIZE COMPETITION.

IN WHAT POSITION WILL A BED-PATIENT SUFFERING FROM DYSPNOEA FIND GREATEST RELIEF? STATE ALL THAT A NURSE MAY DO IN DEVISING COMFORTABLE SUPPORTS FOR THE PATIENT, AND IN WHAT WAYS HIS POSITION MAY BE CHANGED FROM TIME TO TIME.

We have pleasure in awarding the prize this week to Miss F. Sheppard, Dudley Road, Tunbridge Wells.

PRIZE PAPER.

Dyspnoea, in many advanced cases, is apt to be a constant and distressing feature, even when the patient is in bed, and quite quiet. There may be paroxysms of bad breathing, and the respiration is often panting and gasping in character. The invalid is intolerant of a recumbent position, and prefers to be propped up in the bed, with the shoulders well raised; some have a desire to get out of bed, and to hang the legs down, or sit in an armchair. The breathing is often much relieved by this position, great care must be taken that the patient is properly wrapped up, a large blanket being placed in the chair, and the legs and feet, previously covered with stockings, enveloped with the blanket. Over all another blanket or eider-down quilt. A fur foot muff is almost better than a hot water bottle (protected with a bag) for the feet.

Bed rests.—The ordinary wire or hammock bed rests are a great convenience and comfort to invalids, as by the help of these they can be sustained at any angle in bed without extra fatigue. It is a relief for a patient to change his position in bed, and especially to alter the angle of the body. This is effected by well-adjusted pillows, of all shapes and sizes and various degrees of hardness, which will be found invaluable. All pressure must be avoided, and these pillows should be covered with washable cases, frequently changed.

A very good bed rest may be extemporised by means of an ordinary light bedroom chair, which must be so placed that the back and rails shall be under the patient's back, while the front legs project over the head of the bed, a firm soft pillow or pillows being placed over it. An air or water pillow is a comfort to sit on when these rests are used, to avoid any pressure on the sacrum, which may be caused by the more vertical position.

Patent lift and rack beds are useful to wind up to any angle. A large long wooden stool, padded, is useful at the foot of the bed for the invalid to place the feet against, and is of great relief to prevent slipping down in the bed, or several firm hassocks tied together, with a soft

cushion on the side nearest the patient, can be used. A large knitted hammock to envelop all the pillows, placed under the patient's hips and tied at the side of the bed, is often useful. The arms must be supported on pillows, or cushions with small holes in the middle to rest the elbows in. A head support may be necessary, a small table at the bedside, and a pillow adjusted to meet the requirements of the patient's head. A firm pulley, tied at the foot of the bed, for the hands to grasp, is of great relief in dyspnoea. There are a great many patent supports to be obtained at invalid furniture shops, which are useful in these cases.

HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss B. James, Miss M. Robinson, Miss MacAllister, Miss F. Hayes, and Miss O'Brien.

Miss B. James writes:—Dyspnoea arises from so many causes that the method of the relief afforded must have a relation to the cause of the symptoms. Many heart cases whose breathing is distressed rest most easily when bending forward resting on a table over the bed on which a pillow has been placed. So common is this position that special appliances have been devised to meet the needs of heart cases. Most patients suffering from dyspnoea are most comfortable when supported in a position almost vertical, resting against a bed-rest, which should be curved in shape, so that it supports the pillows comfortably. A rest which has no curve is not good, as a patient who is acutely ill may easily slip off it, and this is a very untoward accident. Those who have noted the difference in the ease of a patient comfortably settled into a curved bed-rest which keeps the pillows in position, and one who is supported only by one of the straight pattern so often used, will never be content with any but the former type.

Miss F. Hayes writes:—One of the most distressing forms of dyspnoea is that caused by asthma. It is most alarming to witness, although the result is seldom fatal. Attacks frequently occur quite suddenly in the night. The patient usually finds most relief when sitting upright, and his pillows or bed-rest should be arranged to support him comfortably in this position. Attacks are of varying duration; sometimes a cup of strong black coffee, when given at the beginning of an attack, seems to cut it short, and is a remedy which a nurse is justified in administering.

QUESTION FOR NEXT WEEK.

What are the duties of a nurse in the care of an infant for twenty-four hours after birth?

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