Again on the white brassard, bearing a cloth red cross, which they are enjoined to wear continually, Turkey twill should be substituted for cloth.

Indeed it should be recognized as a fundamental principle of good nursing, that every article of clothing worn by a nurse in the ward, should be constructed of material which can be boiled. We base this opinion on aseptic principles, and commend these suggestions to the consideration of the Advisory Committee of the Territorial Force Nursing Service, which is primarily responsible for its efficiency.

OUR PRIZE COMPETITION.

WHAT DO YOU MEAN BY SHOCK AND WHAT CAN YOU DO TO COMBAT IT?

We have pleasure in awarding the prize this week to Miss C. Phyllis Armitage, All Saints Street, Nottingham.

PRIZE PAPER

"Shock" has been rather aptly defined as "the result of a bleeding into a man's own vessels." It is the result of paralysis of the vaso-motor system, and to understand what shock is we must know what the vaso-motor system is.

The vaso-motor system controls the blood vessels of man. It has the power of increasing or decreasing the muscular contraction of the walls of the various blood vessels. It is stimulated by cold—thus is the cause of shivering. It becomes paralysed as the result of (a) mental stimulus—the sight of an accident, for instance; (b) pain; (c) irritation of the tissues.

When the vaso-motor system becomes paralysed it can no longer control the blood vessels, and they collapse. The biggest blood vessels are in the abdomen, and these then suck the blood from the blood vessels in the other parts of the body. Then we have most of the blood in the body concentrated in the abdomen, and we get the condition known as "shock."

Signs and Symptoms.—The signs and symptoms are very much the same as in internal hæmorrhage: the skin becomes cold, white, and clammy on the withdrawal of blood; the temperature falls; the pulse-beats are quicker and thinner; the respirations are shallow; the face wears an anxious expression; the eyes are half shut, with the pupils distended. The patient is inert, and dislikes to be moved; he sees flashes of light before the eyes, and is conscious of curious tastes and smells,

and of a ringing in the ears. There may also be nausea and vomiting.

Treatment.—The object of the treatment is to withdraw the surplus blood from the abdomen, and to distribute it again to the other parts of the body. First of all, warmth is applied to the patient, externally by means of hot-water bottles, &c.; internally by administering a hot drink of coffee or of beef tea. The patient must at once be placed in a recumbent position and placed in bed if possible. The foot of the bed must be raised and the pillows taken away, so as to promote a supply of blood to the brain centres. Plenty of fresh air is necessary, but draughts must be prevented by screens and otherwise. The patient is given a stimulantbrandy, sal volatile, or æther administered hypodermically. A pad of wool, a cushion, or a pillow should be placed on the abdomen and bandaged tightly thereto. The limbs also should be bandaged, beginning at the extremities, and tightening the bandage the nearer it gets to the heart. The blood is replaced in the body as far as possible either by salineadministered hypodermically, intravenously, or per rectum—or by human blood. The latter is, of course, seldom used, as it is so difficult to obtain. Human blood only must be used, as if animals' blood were used it would clot when it came in contact with the patient's own blood. Certain drugs are given to stimulate the contraction of the blood vessels-adrenaline, or, better still, pituitary extract. Lastly, the heart is stimulated with strychnine or æther, but this must only be done after the other treatment has been tried.

Shock may be delayed for a shorter or longer period of time, especially in cases of great excitement, as on the field of battle. If it is attended with great restlessness, the condition is very grave. Care must be taken that the administration of stimulants is not carried too far, or harm may be done. Many doctors now think that morphia administered hypodermically is the best treatment. It is well to note here that hot-water bottles must be carefully covered—there should be at least a cover and a single blanket between the bottle and the patient—as in the condition of shock the patient's system is very low, and he may very easily be burnt.

HONOURABLE MENTION.

The following competitors are awarded honourable mention:—Miss Amy Phipps, Miss Alice Musto, Miss Dorothy Maton, Miss Margory Croll, Miss C. G. Cheatley, Miss U. M. Dodd, Miss Lucy C. Cooper, Miss Gladys Tatham, and Miss Dora Vine.

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