

as those caused by the acute febrile diseases, especially scarlet fever and diphtheria; by the ingestion of irritant poisons; alcoholism and gout; (b) from outside influences, such as exposure to cold when scantily clad after being heated by violent exercise, such as the work of engineers working in hot places and going into the cold unprotected, exposure to chill when the body is weakened by illness.

The nursing treatment must ensure absolute rest in bed, the patient being kept warm between blankets, flannel nightshirts being worn, and if the breathing is difficult and the patient's position is changed to sitting up, which is often advantageous, a warm bed-jacket should be worn, the back and loins being specially protected by a flannel belt or bandage. Hot baths or hot packs may be ordered, to induce the skin to act freely. Counter-irritation over the kidneys may be used in the shape of hot compresses, or, in very severe cases, cupping may be resorted to. The skin is induced to act as freely as possible to relieve the congested organs. Diuretic and purgative drugs are employed for the same purpose; the bowels should be made to act freely. The urine should be measured and tested daily, the heat and nitric-acid test being usually applied. When the dropsy is very distressing, the fluid may require to be removed locally by tapping. If there is danger of uræmia, a strong diaphoretic, such as pilocarpine, may be given hypodermically to ward off convulsive attacks, cold water being given the patient to drink at the same time. The greatest care must be taken in changing the patient's nightclothes and removing perspiration from the surface of the body to avoid exposure and chill by having towels and clothing thoroughly aired and warm. The diet is given to make the work of the kidneys as easy as possible whilst maintaining the strength of the patient. At first, liquid and fever diet, with easily assimilated light food; condiments, such as pepper and mustard, being avoided in the case of adults. Plenty of fluid may be given to drink to flush out the kidneys. Temperature, pulse, and respiration are recorded four-hourly. Symptoms of toxæmia must be carefully watched for, and any unnatural drowsiness or convulsive seizure reported at once.

As a rule, an arrest of the symptoms should be manifested in two weeks, which is marked by increased amount of urine; the gradual disappearance of albumen; the subsidence of dropsy, and a return to brightness and strength.

During convalescence the patient must be carefully guarded against chill and complica-

tions. Woollen clothing must be worn, the strength maintained, and the quality of the blood improved by strong nourishment, and some form of iron tonic to combat the tendency to anæmia.

In some cases some albumen may be present in the urine for a considerable period of time, gradually lessening, but apt to recur when the patient is chilled or subject to unusual exertion. Those patients should be specially advised as to their diet and maintaining the general health.

HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss S. Simpson, Miss F. Shepard, Miss D. Maton, Miss C. G. Cheatley, Miss W. M. Hunt, Miss I. M. Mate, Miss H. M. Springbeck, Miss A. Phipps, Miss D. Vine, Miss E. Macfarlane, Miss V. James; and Miss E. Overly, whose paper arrived too late to compete for the prize.

QUESTION FOR NEXT WEEK.

When is drainage used, and why? Name four methods and material that may be employed.

IODINE FOR EVERY SOLDIER.

Thanks to the generosity of two anonymous donors, each British soldier is henceforth to carry his own ampoule of iodine, so easy to apply that a wounded man, or his neighbour, can instantly dress a slight wound. Hitherto British soldiers have each carried a field dressing, but not iodine like the French. Yet this is held to be of great importance, since small as well as severe wounds from bullets, shrapnel, and shell fragments may become septic before they are dressed.

PSEUDO-ARTHRISIS.

A Paris contemporary makes the interesting announcement that the military medical authorities have decided to send all wounded suffering from pseudo-arthritis, or loss of bony matter, to the Russian hospital at Bordeaux, where they will be treated by the method of Dr. Voronoz, by which bones of other men, and monkeys, can be transferred to the patients, and life thus restored to limbs which are regarded as dead.

THE TYPHOID EPIDEMIC.

A contemporary says it is quite clear in Belgium that the men are falling sick in the trenches, and it is also a fact that Belgian and German front-line trenches are separated by the inundated area. This area of water therefore comes under grave suspicion.

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