

"LYMPH LAVAGE" OF WOUNDS.

Mr. Jos. J. H. Holt, F.R.C.S., writes in the *British Medical Journal*:—

I beg to bring to the notice of your readers a method of the lymph lavage treatment of wounds adopted by myself, as the result of my own investigations some two or three years ago. I have found it very successful, and it is apparently much simpler to use than the hypertonic salt solution now being brought forward.

The basal fact by which it produces a continuous lymph lavage depends upon the hygroscopic properties possessed by glycerine. If pure glycerine (specific gravity 1260) is exposed to the atmosphere it will absorb moisture from it. If exposed long enough, 69 parts by weight will absorb 31 parts of water. It is then a eutectic mixture, being in a state of balance. If additional water is added it will evaporate back to the same proportion. Hence, if such a mixture be applied (on lint) to a wound, the temperature of which is about 98° F., whilst that of the atmosphere varies, say, from 40° to 80°, the warmer wound will evaporate a certain amount of the water; but this loss will be immediately made good by the glycerine absorbing a similar amount of water (lymph, &c.) from the wound below, and will thus maintain a constant flow of lymph to the dressing. By virtue of this property also the lymph is stopped from coagulating, and there is, therefore, no interference with its free exudation.

In order to prevent decomposition in the discharges, I add a little perchloride to the water which is used to dilute the glycerine. My practice is as follows:—To make the solution, I take any given quantity of *pure* glycerine (specific gravity 1260) and add to it one-half its volume of a solution of mercury perchloride (1 in 1,000). This gives roughly a solution containing glycerine 2,000, water 1,000, mercury perchloride 1.

When dressing a wound, I wash it out with plenty of warm water (in my own case drawn from the common hot-water supply of the house), suture the skin where it will meet easily, wash next with perchloride solution, and then wipe off the surplus moisture. I wring out some ordinary white lint with sufficient of the glycerine solution to leave it in a rather moist but not a dripping condition. I make this just sufficiently large to cover all the wound, and upon the top, and sufficiently large to overlap the margins of the wound by about 1 inch, I lay a strip of oiled silk, and then cover this with a little more lint, and bandage loosely. I leave it for twenty-four hours if much dis-

charge is expected. In lesser wounds it may be left for forty-eight hours. The oiled silk is used to prevent the superficial dressings sucking up the glycerine solution. It does not interfere very much in practice with the aqueous osmotic action of the glycerine.

The perchloride of the strength named has practically no irritating action upon the sound skin adjoining the wound. The advantages of the method are obvious. There is no trouble about sterilizing dressings. The perchloride sterilizes that next in contact to the wound. Glycerine and ordinary dressings are the only other things required. In deep wounds the glycerine-saturated lint acts as a drainage tube. An additional recommendation is that it gives practically no pain.

The method is exceedingly simple, and, so far as I can see, gives all the advantages and is less trouble than the hypertonic salt solution so favourably spoken of.

INTERNATIONAL COUNCIL OF NURSES.

We received last Thursday with pleasure, and some sense of relief, a cable from Miss Hulme and Miss Kent, notifying their safe arrival at New York, so that the good ship "Philadelphia" was permitted to pass the war zone in peace. Our National Council delegates were to spend a week in New York with Miss Dock before proceeding on their sightseeing journey on the Nurses' Train to San Francisco. The Nurses' Convention is invited to attend a service in the First Congregational Church on Sunday, June 20th, when the Reverend C. F. Aked, D.D., LL.D., will speak on "The Nurse: Her History and Mystery," which is sure to be a very wonderful and eloquent address.

The Nurses' Meetings are to be held throughout the week in this new and very beautiful church, where there is ample room for section meetings and round tables.

We hear the Californian nurses are preparing a most kind welcome for those attending from Europe, Canada, and other American States, and that a very delightful meeting of the American Nurses' Association is anticipated. But for this appalling war it is probable that the Triennial Meeting of the International Council of Nurses would have equalled, if not exceeded, in brilliance and happiness all previous conventions. We can but hope for harmony in our ranks long before 1918, when we plan to meet in Copenhagen, and in this connection we have to offer to our Danish colleagues, and the women of Denmark, our warm

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