

## OUR PRIZE COMPETITION.

### WHAT ARE THE SYMPTOMS OF MENTAL FAILURE, AND WHAT IS THE NURSING TREATMENT?

We have pleasure in awarding the prize this week to Miss J. G. Gilchrist, Gillespie Terrace, Edinburgh.

#### PRIZE PAPER.

The symptoms of mental failure are manifested by the disturbance and alteration in habit of the functions of one or several or the whole of the cerebral organs. This may be brought about by many causes, chiefly by accident, shock of fear and emotion, from a weakened condition of the brain from fever, loss of blood, starvation, excessive worry or such debilitating cause.

The condition may also be temporary or progressive in character. One of the first symptoms is want of concentration, confusion of thought, and impairment of memory; the nervous irritability is often seen in a person of gentle, pleasant manners becoming fault-finding, difficult to please, and saying rude, unkind things; this state is often intensified when the person, aware that his self-control is slipping from him, vainly endeavours to retain a grip of himself. This is often the case where the cause is excessive mental strain and exhaustion. Sleeplessness, loss of appetite, and constipation are present, and the patient may be unusually active, walking up and down ceaselessly, taking up work feverishly for a few moments at a time; or in the opposite direction, when the patient may remain perfectly inert, with a great objection to be moved or bothered with any attentions.

The patient may complain of local pain, confined to one part of the head, with a feeling of confusion, weight, or constriction. Noises in the ears, with dullness in hearing, peculiar expression of the eye, and sudden giddiness are usually noted, smell and taste being impaired also.

Gastric derangement is nearly always present, making the patient restless, irritable, and depressed; there is want of appetite, bad taste in the mouth; nausea, flatulence, and discomfort after taking food; there is usually constipation also. Any other organ which is naturally weak or predisposed to unhealthy action may be deranged, due to a secondary irritation of the nervous system from the brain condition. The nervous sensations may be abnormal, the patient having diminished sensibility to cold or heat, or too acute perception of ordinary outside stimulus, or may imagine things, such as insects, crawling about over the skin.

There may be morbid sensation of the mind proper, such as perversion of affection to relations, different ideals in thinking to those usually held, and altogether false perceptions.

Treatment is both remedial and preventive, the aim being to restore, as far as possible, the impaired condition while keeping the unimpaired parts in a sound and healthy state of activity. The patient may be treated at home, in a special rest-cure home, or by travelling and change of scene. If at home, the nurse should have sole control of all matters relating to the patient, the medical attendant prescribing the scheme of treatment, which varies with each individual case. Perseverance in all details is essential, and this the stranger nurse is able to urge without the anxious discouraging effort of the relations, though in some cases good friends of cheerful and encouraging disposition may be very helpful at times if regarded by the patient with affection and respect.

Open-air treatment is invaluable, the patient requiring abundance of oxygen, light, and sunshine, which has a soothing and vitalizing effect, and is a great aid in combating sleeplessness, drugs such as veronal may be ordered for a time. Regularity of all body functions must be established, a sponge bath given twice a day, and massage or electrical treatment may be ordered. Food should be given about every three hours, the most nourishing and easily assimilated where there is indigestion. Whenever possible the patient's tastes may be consulted. There is usually a great deal of trouble with regard to feeding, in spite of all efforts to make dainty and attractive meals, and the nurse requires to exercise much patience and firm persuasion to get the necessary amount taken.

The patient should be treated as rationally as possible, and encouraged to enjoy some congenial occupation or game of recreation. Some are physically energetic, and require to walk, perhaps, two hours daily at a stretch in order to settle down later to rest. If the nurse has a knowledge of natural history and open-air life, the patient can be interested and benefit his mental faculties.

In moving a mental patient the nurse should leave nothing unguarded which might harm the patient; a disturbed brain function may cause a patient to act on sudden impulse, which may result from a bad dream or fancy. All drugs should be under lock and key, lethal weapons out of reach, and if any peculiar symptoms are observed, they should be reported to the doctor in charge, and guarded against by unobtrusive means.

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