

on tubes already thrown out of gear by the inspiration of cold, dry, unpurified air breathed in by the mouth because the nose is not acting properly. Attempts at nasal breathing before mouth-breathing is completely established (and nasal breathing being natural breathing, the attempt at performing it is not given up without a struggle) fail properly to expand the chest, so that its walls develop ill, the lower ribs are sucked in, and the lungs fill badly. Children who are habitual mouth-breathers make only a minimum effort to respire, and the chest muscles perform only a minimum amount of work, so that their development does not proceed perfectly. This results in arrested lung development, and outlying portions of lung tissue fail to expand. This is especially likely to involve the apex of the lung, and render it an easy prey to pulmonary tuberculosis. The first sign of inefficient chest expansion is the sucking in of the ribs just referred to, and I always look upon it as a most important danger signal in young children and as indicating the necessity for removing the adenoids.

Secretions from adenoids are also very often swallowed, especially during the night. Such secretions generally take the form of thick, stringy mucus, which seriously upsets digestion. It irritates the stomach, and one of its most common effects is morning nausea and vomiting. I have seen such cases cured promptly by the removal of the adenoids.

Upon the mental condition of the child adenoids have a distinct and well-known effect. As the veins carrying the impure blood from the front part of the skull cavity are connected with the pharyngeal veins, the brain circulation is interfered with, and the child becomes heavy, torpid, and inapt for mental exertion. He is incapable of fixing his attention or sustaining it for any length of time. This is the condition known as "aprosaxia," or inability for sustained attention. All adenoid children do not suffer thus, but a very appreciable percentage of them so suffer. They listen without understanding, they forget what they have read, and, having learned a lesson with much labour, their memory seems incapable of retaining it. The nervous results of adenoids and nasal obstruction in infants and children are: disorders of sleep (especially night terrors), stammering, habitual headache, depression, indolence, and feeble memory.

Further, children with marked adenoids suffer from defective blood aeration, and researches upon the blood in adenoid cases show that its deterioration is not in direct relation with the size of the growths. Many adenoid

children are also in a condition of chronic septic poisoning, which alone is incompatible with a healthy general state.

(To be continued.)

OUR PRIZE COMPETITION.

DESCRIBE WHAT YOU CONSIDER THE MOST SANITARY AND PRACTICAL FORM OF BED-PAN COVER AND HOW BEST TO CLEANSE SPITTOONS FOR WARD USE.

The answer of Miss L. E. Hunting, King George Hospital, E.C., is the best received in relation to bed-pan covers, and that of Miss Lucy C. Cooper, Westminster Infirmary, Colindale Avenue, Hendon, N.W., with regard to spittoons. We have therefore divided the prize this week, and awarded half a crown to each of these competitors.

A SANITARY AND PRACTICAL FORM OF BED-PAN COVER.

Miss L. E. Hunting writes:—

In private nursing, during cases of typhoid fever, I have found the following bed-pan cover extremely useful and quite silent, and it would, I think, be quite simple and practical for hospital use also.

It is made as follows:—Obtain enough strong batiste to make a bag shaped to slipper or bed-pan, only it ought to be about three inches larger all round, to allow of easily slipping utensil into it; make a wide hem, and run a wide tape all round.

The advantages I found in using it were:—

It prevented disagreeable odours from permeating through the surrounding air, whilst conveying from sick room to lavatory, by simply pulling tape very tightly, and twisting round after having slipped bed-pan in.

It is very easy to keep sweet and clean by carbolicizing every time after use, and hanging up in an airy place to dry; it can also be boiled occasionally without damaging the material.

It must be made of batiste or rubber, but not jaconet, as it will not stand boiling. I used a batiste cover which was made at a cost of 1s. 9d., and lasted over three months with constant use and weekly boiling, and at the end was quite waterproof.

HOW BEST TO CLEANSE SPITTOONS FOR WARD USE.

Miss L. C. Cooper writes:—

Spittoons are most easily cleaned when lined with paper, and the contents emptied into a furnace. Afterwards they should be placed under a running tap of hot water and well

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