## OUR PRIZE COMPETITION.

CLASSIFY CAUSES OF VOMITING. OF WHAT MAY VOMIT CONSIST? HOW WOULD YOU NURSE A CASE OF HÆMATEMESIS?

We have pleasure in awarding the prize this week to Miss Mary D. Hunter, Section Hospital, Kineton, near Warwick.

## PRIZE PAPER.

Vomiting may be caused by :---

1. Unsuitable or too large quantities of food, as seen in the vomiting of babies and children.

2. Large quantities of alcohol.

3. After swallowing poisons, such as strong acid, alkalies, arsenic, &c.

4. Pregnancy, the early morning sickness or persistent vomiting being among the signs of pregnancy.

5. Micro-organisms in food, resulting in ptomaine poisoning.

6. Anæsthesia.

7. Disease, such as tubercular meningitis, appendicitis, nephritis, sunstroke, Addison's disease, renal or gallstone colic, cancer of the stomach (characterised by coffee ground vomit), gastric ulcer (the pain after food being relieved by vomiting, which is frequent), cerebral tumour (with sudden vomiting, without nausea and having no relation to food), peritonitis (grass green vomit, changing to brown), dilated stomach (large quantities of fluid and food are vomited at intervals), intestinal obstruction (the vomit consisting first of food, then bile, and finally fæces).

Vomit may consist of :---

(r) Undigested food, as curds or actual food; (2) bile; (3) blood; (4) fæces; (5) fluid only, as seen in anæsthetic vomit.

Hæmatemesis, which is a symptom rather than a disease, must be very carefully treated. The great essential in the nursing is absolute rest. If a patient is brought into hospital suffering from hæmatemesis she would be put flat in bed and no pillow allowed. Just the outside clothing could be removed, but she must not be moved to undress properly or any attempt made to wash her, as would be done to a patient admitted under ordinary circumstances, for twenty-four hours. No stimulants must ever be given, but a nurse may give smelling salts to relieve the faintness, and meet the collapse by hot-water bottles and warm blankets.

The treatment will be ordered by the doctor, and a nurse would not give anything till ordered to do so. Tufnell's treatment of rest and starvation is sometimes useful.

To ensure complete rest for the stomach, rectal feeding is usual, probably consisting of four-hourly rectal saline, with glucose. A simple enema should be given every twenty-four hours, to keep the bowel clear.

Sometimes ice is given to suck, and some doctors allow an icebag to the epigastrium.

The mouth requires cleansing every four hours or oftener, as in all cases of rectal feeding.

As the amount of nourishment absorbed from the rectum is small, it is advisable not to prolong rectal feeding too long, or recovery is somewhat retarded. Feeds by the mouth must be very gradual and in small quantities. Hourly feeds of one drachm of albumen water alternately with one drachm of sterile water are generally started on the third or fourth day, and gradually increased. If stomach feeding causes no pain or vomiting, peptonised milk and raisin tea may be allowed later, and after a few days of gradual increase, full feeds of one ounce would be given four-hourly. When thought advisable to increase the supply of nutriment, eggs may be beaten up and added to the feeds. After about fourteen days bread and milk, custard pudding, or milk jelly may be given, and in the third week pounded fish or chicken, or a lightly boiled egg, may be Ordinary food would be resumed allowed. later.

Some doctors prefer Lenhartz diet to be given, which is a 28-day course.

No aperient should be given till ordered, but a daily enema will be needed.

The chief thing in the treatment of hæmatemesis being absolute rest, the patient would be kept flat in bed for at least three weeks, and normal occupations should not be resumed under three months.

## HONOURABLE MENTION.

The following competitors receive honourable mention :---Miss Beeby, Miss Doris Salls, Miss P. Thomson, Miss J. Jenkins.

## QUESTION FOR NEXT WEEK.

Describe the methods of treatment you have seen used in (1) impetigo, (2) ringworm. What precautions would you take in applying X-ray treatment for the latter?

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It is satisfactory to learn on the authority of so high an expert as Dr. Woods-Hutchinson that, whereas in Germany during the past year and a half the death-rate has been far in excess of the birth-rate, in England, partly owing to the extremely good health of the armies in the field and partly to the remarkable prosperity of the masses of the working people and the special care that is being taken by public health officers and others, the population is increasing.



