

rather *pad*, must be carefully packed, as it were, all over and round the pile; an absorbent pad will be softer than a napkin to place over it, and both must be renewed when necessary; this plan will subdue the inflammation. To soothe pain the topical application of opiates is resorted to, and as we have to reduce swelling as well, they are combined with astringents. The familiar gall ointment, *c. opii.*, is serviceable here; but I prefer to use the gallic acid dissolved in glycerine rather than mixed with fat. The glycerine *acidi gallici B.P.*, with equal parts of *tinct. opii.*, applied from time to time all over the tender surfaces with a good-sized camel's-hair brush, is more cooling and comforting than the more popular preparation. When the inflammation and swelling subside, we must endeavour to gently press the pile to its place, using the linseed-meal pad for the purpose. To prevent its returning we can exert still further pressure by taking the vaginal tip of our syringe, and covering it half-way down with lint or old rag smeared with vaseline, passing it into the rectum for an inch or two. This may have to be done after every action of the bowels. Saline aperients are about the best; at all events they are recommended by accoucheurs of considerable eminence. The diet should be purely farinaceous foods, served, but not made, with milk, and no better farina than the finest Scotch oatmeal can be found; strong broths or stimulants should be avoided; fish may be partaken of. These rules apply only so long as the malady lasts. Under ordinary circumstances the measures I have described to you afford relief, and the trouble is ended in a few days. In severe cases it is only surgery that can effect a cure; but no operation can be attempted until some time after delivery; but what we have done will palliate the evil, even if that sad necessity should arise.

Before concluding this portion of my work, I will say a few words upon the subject of linseed meal poultices, having been asked to do so. Happily we do not often require them in Obstetric Nursing (and it is to that only my remarks are confined), and when we do, they are almost always for abdominal application. How shall we make them? and how shall we apply them? Use only the *best*—that is the linseed meal that has *not* had all the oil crushed out of it—and remember always to put the meal *to* the boiling water, and not the water to the meal; and furthermore to let the meal boil up well, before pouring it out; the proportion of water to meal is soon learned by ex-

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perience, so that you avoid the two extremes of sloppiness and stiffness. Sometimes mustard is added; the *proportion* of mustard to meal must be fixed by medical direction. A random order to make a linseed meal and mustard poultice is no order at all; a Nurse should know whether the counter-irritant is to be a third, or a fourth, or a sixth part of the poultice; in any case you stir the mustard in dry. What shall we spread a poultice on? There are a number of things, but I will bring before you what I think best for our purpose. I advise *coarse* book muslin that has had all the stiffening soaked out with cold water, or old muslin that has been made soft by frequent washing. For the sake of illustration, we will assume we want to make a poultice eight inches square; the muslin must be folded to that size double, and spread half open, ready for the meal. Now what shall we put our muslin on before pouring out the meal? We do not *often* get slate slabs in private houses. I *once* requisitioned a *marble* pastry slab! How many times would that happen to us? so we will modestly content ourselves with a large-sized meat dish and turn it upside down, and so extemporise a *clean* slab. Rub a little olive oil all over it, with a bit of flannel or swab of cotton wool; place half the muslin over it, and pour out your meal and level it; then turn the other half of the muslin over the meal—in fact, wrap it up, turning in the open sides and corners to keep the poultice together. Have two large dinner plates quite hot, slide the poultice off the dish and on to one of the plates, cover the other over, it and take the poultice to the bedside for application, say, over the uterus. I like to smear vaseline over the part myself, and then uncovering the poultice, slip it off the plate, smooth side downwards, into position; by this plan you do not disarrange the poultice in the least, nor scarcely touch it with your hands. Place over it some of Southall's absorbent sheeting, cut the right size to cover the abdomen; over that the binder pinned firmly but gently, to keep both pad and poultice *in situ*; you may have medical instructions to supplement these by some *impermeable* substance in the way of oiled silk or waterproof sheeting, but for my part I neither use nor recommend them. You may ask, why all this? For this reason—we do not want the meal to be *next* the skin; there is no abscess to "draw," no wound to cleanse. We use the poultice for its heat-giving and heat-retaining qualities, combined sometimes with irritating ones. The *coarse*

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