

OUR PRIZE COMPETITION.

DESCRIBE THE MANAGEMENT OF CASES OF HEART DISEASE.

We have pleasure in awarding the prize this week to Miss Alice M. Burns, East Suffolk and Ipswich Hospital, Ipswich.

PRIZE PAPER.

Whichever of the many forms of heart disease our patient is suffering from, rest is the most important item of treatment—mind rest and bodily rest.

Place her, if possible, in surroundings that suggest mind restfulness: a large and airy room; looking out over a garden and away from the scenes of her daily routine, and see that, if possible, no worry reaches her.

If her case is distressing, allow her to rest in whatever position she finds easiest, and the nurse must do the turning from side to side. Never appear in a hurry, especially in these cases. If the upright position is allowed, choose a firm, wide, comfortable back-rest, and tie it securely to the top of the bedstead. Pillows should be soft and rather full. Owing to the lowered resistance and also to the upright position, the back and hips are sure to give trouble, and should be attended to four-hourly, and the shoulders, elbows, heels, and inner sides of knees will require attention.

In a favourable case a daily blanket bath will be much appreciated.

Temperature, pulse, and respiration must be charted four-hourly, and medicines given punctually and accurately. Signs of poisoning from cumulative effect of these must be watched for. The urine in these cases is always saved and measured, and any decrease should be reported to the doctor, and the medicine stopped until his arrival.

The signs of poisoning from digitalis, so much used for heart cases, are: very slow irregular pulse, faintness, diminished urine, vomiting, and headache. Patients taking this drug should be kept semi-recumbent.

The diet must be light and nourishing. If the patient is on fluids, she will require frequent mouthwashes, and the teeth must be well attended to.

Later on we give fish, bread and butter, and any nourishing food which does not tax digestion, and so the heart.

Heart trouble is often secondary to other diseases, and these must be treated.

When compensation (the effort of Nature to adjust itself to disease) has failed, dropsy will begin to show itself at the point of least resist-

ance—the feet—and will spread upwards. The patient will suffer from cold, and should have her hot bottles renewed frequently.

To relieve the system of the fluid which the kidneys cannot cope with, we give purgatives which cause a watery evacuation—jalap powder, for instance—and drugs to promote perspiration—diaphoretics—will be ordered.

In a distressing case, prop up your patient in an armchair. In this position the fluid will drain to the more dependent parts, and relieve somewhat the pressure round the heart and lungs. Wrap the legs warmly in a blanket, give a low footstool, and screen from draughts.

If tapping is consented to, the most rigid asepsis must be observed, as there is special danger in the very lowered state of resistance. If the patient has pain around the heart, hot applications will relieve it.

HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss C. Lilian Everest, Mrs. Farthing, Miss E. G. Andrews, and Miss Catherine Wright.

Miss Wright says that a trained knowledge of nursing, combined with tactful sympathy and a bright mentality, are a great asset in the management of cases of diseases of the heart, towards promoting the confidence and comfort of the patient, and to a great extent will control the various moods of restlessness, excitability, or depression which so often accompany this form of illness.

These cases are most impressionable, and are greatly influenced by their immediate surroundings, and quietness and an absence of fuss must be maintained.

These cases may be divided into three groups—primary, secondary, and chronic. In the primary group the tissues of the heart may be affected, causing inflammation, as in endocarditis or pericarditis. These will require most careful nursing, rest in the recumbent position, as little disturbance as possible, with the avoidance of sudden movements.

In the secondary group, when the heart disease is a complication of some other acute illness, as in rheumatic or scarlet fever, breathlessness may be present, and causes great discomfort and distress to the patient. This may be relieved by the sitting forward position.

Various appliances have been devised to enable such cases of heart disease to rest in the most comfortable position.

QUESTION FOR NEXT WEEK.

What causes Bomb Dermatitis and how is it treated?

[previous page](#)

[next page](#)