culosis, and "while the ordinary barrage on the Western Front made you shrink sometimes, it did not make one quail as does the storm of coughing that greets one on his entry into a tuberculosis dispensary. These people were more dangerous to you than any amount of high-explosive shells, yet the nurses would face this danger. They take it as part of their ordinary work."

And, said Captain Elliott, "they risk far more deadly and far more loathsome diseases than tuberculosis. I know, and all medical men must know, of cases where women have contracted syphilis through the nursing of syphilitic cases. I say that women who are willing to take these risks, and expose themselves to these dangers, are worthy of the highest honour that this House or any body of British people could possibly give them."

## OUR PRIZE COMPETITION.

STATE SOME CAUSES OF INSOMNIA. HOW WOULD YOU RELIEVE IT?

We have pleasure in awarding the prize this week to Miss E. O. Walford, 235, Malden Road, Colchester.

## PRIZE PAPER.

Insomnia may be either occasional or habitual. Occasional insomnia may be caused by indigestion, hunger, pain, skin irritation, insufficient or too much clothing, coldness of the feet, some temporary worry or overwork, &c.; habitual insomnia may be due to prolonged worry or over-study, lengthening the working day at the expense of the night's rest, arterial degeneration of old age, hysteria or neurasthenia, pyrexia, coughing, heart disease, asthma, &c., and the circulation of poisons in the system, as in gout, uraemia, constipation, alcoholism, and the excessive use of tobacco.

Relief of Insomnia.—The first thing to do in the relief of insomnia is to find the cause, and, if possible, remove it. Sleep may often be encouraged by quietness and darkness; a drink of hot milk or the application of cold to the head and heat to the feet. Indigestible articles of food should be avoided, especially at night-time, the last heavy meal being taken at least four hours before bedtime. The patient should be kept quiet for an hour previous to retiring. If he is able, he may find reading conducive to slumber.

Overwork must be avoided, and regular hours be observed; in some cases a hot bath

at bedtime will aid sleep, though in others it has the reverse effect. If, as is often the case, a patient wakes during the night and is unable to fall asleep again, a little nourishment, such as a warm drink and a biscuit, a fresh hotwater bottle, &c., will often produce the desired effect.

If the insomnia be due to pyrexia, tepid sponging will generally be beneficial. A patient who has a troublesome cough, and is ordered a mixture for it, should have one dose reserved for bedtime or for use during the night, and if the mixture has to be diluted, hot water should be used in preference to cold.

In many cases massage will have excellent results, the limbs being first treated fairly vigorously to withdraw blood from the brain and nervous system, and the trunk and head then being treated with gentle and soothing movements. If, after the massage of the limbs, every last preparation for the night is made, and the patient has a hot drink, a hotwater bottle, and then settles into a comfortable position, and the lights are lowered, by the time the treatment is finished she will probably be nearly, if not quite, asleep. If the insomnia is due to pain in a limb, such as may be caused by a fracture, gentle effleurage round the seat of pain will probably ease it and enable the patient to sleep.

Hypnotics should only be given as an occasional measure, and not unless ordered by the doctor. A drug habit once acquired is not easily broken; also, by the continued use of hypnotics, their power to relieve insomnia may be entirely lost. Sometimes, when massage or hypnotics separately fail, their combined use may be successful, or the former may enable a smaller dose of the latter to be used effectually. If a hypnotic be ordered, it is well to ask the doctor how he wishes it given; some tabloids must not be immediately followed by a hot drink, as that would render them insoluble, and they often act more quickly if crushed.

Again, veronal takes several hours to act, so if ordered it should be given some time before the patient is ready to settle down for the night.

HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss J. G. Gilchrist, Miss M. E. Thorpe, Miss Winifred Appleton, Miss E. A. Noblett, Miss M. Cullen, Miss A. M. Burns, Miss M. M. G. Bielby, Mrs. Farthing, Miss P. Thomson.

## QUESTION FOR NEXT WEEK.

How would you improve the care and observation of the parturient woman?

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