

OUR PRIZE COMPETITION.

WHAT IS RABIES? DESCRIBE THE NURSING TREATMENT.

We have pleasure in awarding the prize this week to Miss Winifred M. Appleton, University College, Hospital, W.C.

PRIZE PAPER.

Rabies is an acute, and often fatal disease affecting the lower animals particularly the dog.

The specific virus is transmitted to man by the bite of rabid animals and the disease he develops is then usually known as hydrophobia (derived from Greek words meaning fear of water). A characteristic symptom is a dread of water, the patient, even though very thirsty, fears to drink; and an attempt to swallow or even the sound of running water is sufficient to produce a spasm.

The virus is in the saliva, which may be infective for a few days before development of the disease.

Every person bitten by rabid animals does not contract the disease, but every precaution should be taken. Wounds on uncovered parts are more dangerous than those made through the clothing.

The incubation period varies but averages usually from six weeks to two months; though bites on the head and face generally quickly lead to especially acute symptoms. The best preventible measures are attained by strict muzzling regulations, and the slaughter of animals bitten by or in contact with the rabid animal; which animal should be killed and the brain examined for the virus and at the same time a rabbit is usually inoculated intracerebrally from the medulla; the latter is for the preparation of emulsion for injecting the patient.

As a rule the wound soon heals, with nothing noticeable about the scar until after about six or eight weeks, and scar becomes painful and irritated, and the patient shows manifestations of nervous disturbances.

Symptoms.—Irritations round the scar; digestive troubles, sleeplessness, irritability, mental depression, and a sensation of choking round the throat.

Later as the disease is fully developed there are intense muscular spasms especially involving the respiratory muscles and those of deglutition, which somewhat resemble those of tetanus; there may also be opisthotonos (arching of the back).

During an attack the face is usually flushed and livid and contorted, or may have a terrified aspect.

There is excessive flow of saliva which collects with thick mucus in the mouth; the patient makes noisy and difficult attempts to eject this secretion. Raving, delirium, delusions and hallucinations may supervene.

There is some fever; the temperature ranges from 100° to 103° F.

A paralytic stage may develop in the course of two or three days; usually after the development of characteristic symptoms the patient dies from exhaustion in from two to ten days.

Treatment.—If possible the bitten part should be put under a running tap of warm water for a few minutes.

The wound should be cauterised with the cautery or silver nitrate, or pure carbolic acid as soon as possible. The wound is sometimes sucked and if practicable the part above ligatured. As soon as it is definitely known the bite is that of a rabid animal Pasteur's treatment of injection should be begun as should this treatment be started within a week of the bite it is almost certain to prevent rabies developing.

When the disease is developed the treatment is merely palliative. Morphia and chloroform given for the spasms, and cocaine for lessening the sensitiveness of the throat.

Nursing treatment is important, and thoughtful care must be taken to avoid anything that provokes the spasms.

Isolate patient and keep absolutely quiet in a darkened room.

Avoid noise, sudden movement or light.

Never leave patient alone; all ministrations for his welfare must be done quickly and quietly.

Rectal saline infusion is good to assist in the elimination of the poison. Enemas should be given if necessary. It is important to maintain the patient's strength with a light and nutritious diet, using care and tact over the giving of feeds.

If necessary nasal feeds may have to be given under an anæsthetic.

HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss M. E. Shank, Miss Nellie Wood, Miss Annie Major, Mrs. Farthing, Miss P. Thomson.

QUESTION FOR NEXT WEEK.

State what you know about Parasitic Worms of the Intestines. How are they treated?

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