

## OUR PRIZE COMPETITION.

IN WHAT CASES MAY PROFUSE SWEATING OCCUR AS A PROMINENT SYMPTOM? WHAT ARE THE CAUSES OF THIS SWEATING, AND WHAT ITS SPECIAL NURSING?

We have pleasure in awarding the prize this week to Miss Winifred M. Appleton, University College Hospital, Gower Street, London.

### PRIZE PAPER.

Perspiration (derivation Latin *perspirare*) is fluid evaporated through the excretories of the skin, and is produced by microscopic sweat glands scattered over the surface of the skin; the process of its evaporation by means of sweat ducts is constant, and amounts to over one pint in twenty-four hours; this is known as "insensible perspiration."

Under various conditions, as exertion, diseases, and many fevers, drops of "sensible perspiration" appear on the skin, and are generally termed sweat; sweat is a watery fluid, containing a small percentage of solids, germs, and fatty material, and is faintly acid.

The chemical fact that the combination of oxygen with an organic body generates heat applies also in chemistry of the body. Oxygen inhaled by the respiratory organs is recognised as the "staff of life," and in the body produces CO<sub>2</sub> and H<sub>2</sub>O, which is constantly eliminated by the excretory organs, especially the skin.

Circulation of blood and lymph distributes heat over the body, and the chief object of perspiration is to maintain an even body temperature by regulating the loss of body heat, which is largely dissipated by radiation and conduction from the skin. Metabolism is largely affected by heat produced in the body; and the curing of diseases and healing of wounds is brought about by healthy activity of the tissues, hence the need of careful personal hygiene, efficient ventilation, and nourishing diet.

Hyper-hidrosis, or excessive sweating, when accompanied by foetid odour, is known as bromidrosis, and may be general or local. It occurs in general diseases, as tuberculosis, rickets, malaria, rheumatic fever, sepsis, and many acute diseases, particularly where there is pyrexia. Otherwise the cause may be disease of the sweat glands. Persons of weak muscular power perspire often on slight exertion or when exposed to heat; profuse perspiration is associated with marked debility; sometimes it is due to emotional causes, and occasionally occurs without apparently an adequate cause.

In rickets a child often sweats freely when asleep, mainly about the head.

"Night sweats" are a special symptom of the later stages of phthisis, and, when associated with an oscillating temperature, are due

to sepsis, caused by the presence of pyogenic organisms in the broken down lung tissue. If they occur in earlier stages they are probably due to reflex-vaso-motor disturbances. Excessive alcohol interferes indirectly with the excretory functions of the skin by producing dilatation of its blood vessels.

When profuse perspiration is present the excretion of urine is frequently diminished. A cutaneous affection known as sudamina may be seen on persons who perspire freely, either in health or where there is febrile disease. It is characterised by an eruption of minute vesicles, due to retention of sweat in the skin. Chromhidrosis is a condition where there is secretion of coloured sweat.

The use of certain drugs increases perspiration, and are known as diaphoretics, the chief being pilocarpine, opium, and ipecacuanha. Anhidrotics are drugs which diminish the amount of perspiration, and are used either for general conditions, as in phthisis, or for local conditions, as "sweating of the feet." Many of these drugs act peripherally. The chief are atropine, hyoscyamus, and stramonium; local application of cold has also a similar action.

Appropriate treatment of the disease causing excessive sweating is essential; meanwhile it may be checked by the carrying out of general principles, namely, sponging the skin with vinegar and water or methylated spirit, and dusting with talc powder, or a powder composed of equal parts of starch, boric acid, and zinc powder. The administration of astringent drugs, especially belladonna, which may be applied in liniment locally, or by extract and preparations given by mouth or hypodermically. The heavy sweats and feeling of weakness found in patients are mainly due to exhaustion of nervous system, therefore stimulating drinks, as hot beef tea, Benger's Food, milk, &c., at night are useful in diminishing exhaustion and sweating.

The patient must wear wool or flannel next skin, but avoid overloading with heavy clothes.

Garments and bedclothes soaked with perspiration must be quickly removed, and the patient rubbed briskly down with warm towels and clothed in fresh warm clothes and given a hot drink. Tepid baths, followed by brisk rubbing, are beneficial, and carefully graduated exercise if patient is able to be about.

### HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss Jean M. Scott, Miss P. Thomson, Miss M. Drummond, Miss Amy Matthews.

### QUESTION FOR NEXT WEEK.

How would you feed a baby, eight months old, after an operation for intussusception?

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