

nursing schools is a matter of urgent and imperative importance. With well-equipped teaching within the reach of medical and nursing students, and their skill at the disposal of the people, the huge sums required for derelict humanity would naturally decrease—just one more lesson of prevention being less costly than cure.

We hope the General Nursing Councils will take counsel together on this question.

OUR PRIZE COMPETITION.

HOW WOULD YOU PREVENT FOOT-DROP, ACUTE THIRST, CONSTIPATION, AND VOMITING AFTER AN OPERATION?

We have pleasure in awarding the prize this week to Miss Mildred W. Comer, Wolverton Road, Boscombe.

PRIZE PAPER.

(a) Foot-drop may be prevented in the following manner. If the patient's condition permits he should be encouraged to practise the movement of drawing up the foot in an exaggerated flexed and everted position, and held so for ten seconds at least twenty-five times.

The foot and leg may be bandaged from below upwards, pulling up the foot on the inner side, which forms a support.

Also it may be put up on a back splint with an adjustable footpiece, so that the foot can be dorsally over-flexed if necessary. A cradle may be put in the bed to prevent the weight of the bedclothes pressing on the foot. A pulley consisting of a roller towel or a piece of rubber tubing, passed beneath the sole of the foot and attached to the cradle, so that the patient can himself flex and extend the foot.

Electrical stimulation or massage to the muscles of the anterior surface of the leg.

(b) Acute thirst may be prevented by avoiding taking anything sweet, especially ordinary sweets and syrup, anything salt or salt flavours.

Effervescent soda water may be taken, or sips of fluid—especially lemon water—will relieve much better than large draughts. Lemon, and especially acid drops to suck are most useful.

Keeping the mouth closed, *i.e.*, nose breathing, is very effective in preventing dry tongue and accompanying thirst. A rectal saline injection is sometimes ordered.

(c) Constipation.—If a normal healthy person, this may be prevented by: Regular habit

chiefly; taking a daily exercise such as a good walk, or swimming.

A glass of hot water or cold water taken every morning fasting.

Diet consisting of such articles as green vegetables, oatmeal, brown bread, fresh fruit or stewed fruit and a liberal amount of fluid.

Abdominal massage and abdominal exercises are also very useful.

If this does not suffice, aperients such as Liq. Paraffin taken two or three times a day. Senna Pods, Liq. Cascara, Compound Liquorice Powder, Syr. of Figs taken at night, or Epsom Salts in the morning before breakfast.

If the person is a patient it will depend upon the nature of the illness and the decision of the doctor in charge of the case as to what aperients may be given.

Unless the patient is strictly dieted, and not allowed even water by mouth, a liberal amount of water, barley water or lemon water may be given and fruit, vegetables, &c., as above. If the bowels do not act satisfactorily once daily, such aperients as mentioned above would be given or ordered.

If the patient is not allowed to take an aperient, a simple enema or olive oil enema will very likely be ordered, or glycerine suppositories. Patients on milk diet need careful observation. To prevent constipation, therefore, in these cases, an aperient should be given every alternate evening, unless the bowels act once daily without such treatment.

(d) To prevent vomiting after an operation, an aperient should be given the evening before, usually Ol. Ricini, followed by an enema in the morning. No solid food should be given for at least four hours before the operation. Some surgeons allow a teacup of beef tea or milk two hours before.

After the operation the patient may have a mouth-wash of hot water. Sips of hot water (to which Sod. Bicarb. half a teaspoonful to a tumbler has been added) may be given. A mustard plaster applied to the epigastric region is a good preventive. No solid food may be given for two hours after.

HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss Mary Cumming and Miss Stella Green.

QUESTION FOR NEXT WEEK.

What are the principal biting and stinging insects? What diseases do they convey, and with what preventive or remedial treatment are you acquainted?

[previous page](#)

[next page](#)