

OUR PRIZE COMPETITION.

DETAIL THE NURSING OF A PATIENT SUFFERING FROM FAILING HEART WITH GENERAL ŒDEMA.

We have pleasure in awarding the prize this week to Miss Rachel Dodd, Woolwich Home for Ailing Babies, Eglington Road, Plumstead, S.E.

PRIZE PAPER.

The nursing of a patient suffering from failing heart, with general œdema, consists in complete rest and depletion. Absolute rest in mind and body is essential.

The patient must be moved with extreme care, two people at least assisting, and special care taken to prevent bedsores, which are liable to form, chiefly due to the affected circulation. The patient should not even be allowed to feed himself.

Position.—All cases with marked dyspnoea are nursed in the upright position, and propped up with a bedrest and pillows, arranging pillows for the arms to rest on, and a pillow for the knees to rest on, also small ones to support feet, thus relieving pressure.

For cases requiring to lean forward arrange a bed-table (if no heart table procurable) in front of patient, and cover it with a pillow; it should be raised to such a height that the arms may rest comfortably on it. If ascites is great, the patient may prefer to lie on one or other side.

In cases of localised dropsy, elevation of the dropsical part is of great importance, and the patient should adopt the recumbent position if comfortable for him. A water-bed or cushion should be used if obtainable. If the dropsy is advanced, it may be necessary to use an armchair for the patient to sit up in.

The diet must be simple but ample, and of a kind to be easily digested, fluids being restricted. The stomach should never be overloaded, as flatulence and distension may ensue. The diet should chiefly consist of diluted milk, Bovril, Benger's Food, weak tea, fish, chicken, and toast. Alcohol is sometimes prescribed in small quantities at regular intervals.

The depletion (withdrawal of fluid from the body) is accomplished by the use of purgatives, such as blue pill, and diuretics (substances which produce diuresis).

The free action of the bowels and the increased quantity of urine passed relieves the circulation.

Diaphoretics (remedies to promote perspiration) are also used to promote the action of the skin.

If there is much fluid in the lower limbs they are punctured or drained by Southey's tubes.

In cases where the fluid is in the abdomen (ascites), tapping is resorted to.

Venesection may be of service in advanced cases.

The bowels are kept relaxed in order to prevent straining and to relieve the heart and kidneys from work, by eliminating fluids by the intestine.

A urine chart should be kept, and a twenty-four hour specimen tested every other day, as the urine is frequently diminished in quantity, and often contains albumen.

Temperature, pulse, and respiration should be taken night and morning, but in cases attended by pyrexia a four-hourly chart should be kept. Particular attention should be paid to the pulse and counted for the full minute, and taken frequently in acute cases, noting rhythm, volume, and frequency.

Drugs consist of cardiac tonics, stimulants, aperients, and hypnotics. Elaterium relieves the distension and allows the circulation in the kidneys, impeded by the distension, to proceed. Laudanum fomentations are sometimes prescribed to relieve abdominal pain due to distension. Patients taking drugs, particularly digitalis, require very careful observation, and any unfavourable symptoms reported at once, such as excessive vomiting. All heart cases are apt to be sick readily, because, owing to the errors in the circulation, the gastric juice is comparatively inactive, and therefore dyspepsia is particularly apt to arise. In addition to which both the stomach and the heart are supplied by the same nerves (namely, the vagi), and therefore when either organ is diseased it is apt to upset the other.

An extreme degree of slowing of the heart when digitalis is given should be watched for. Some patients exhibit an idiosyncrasy, the administration of the drug leading to increased rapidity and irregularity of the heart's action, with vomiting, orthopnoea, and increasing cyanosis. The drug should be immediately stopped.

Oxygen, when administered, should be given with great care, not exciting the patient.

HONOURABLE MENTION.

The following competitors receive honourable mention:—Mrs. C. Williams, Miss Mabel Robertson, and Miss Susan Carey.

QUESTION FOR NEXT WEEK.

Describe in detail the preparation of a patient to be operated on for cancer of the tongue. What special points require attention in the nursing after treatment?

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