

the standard set by the State Council to their own unofficial standards.

We hope that the Nursing Profession understand what this means. It is all very well for Miss Rundle, and other permanent officials receiving £500 a year of the nurses' money, to trifle with the economic position of the Nursing Profession because certain nurses holding prominent positions in the College are ineligible for admission to the Register. As we have already pointed out, it means flooding the Register with incompetent persons, who will not only undermine the professional status of Registered Nurses but be in economic competition with them.

OUR PRIZE COMPETITION.

DESCRIBE THE NURSING OF A CASE OF SMALLPOX. WHAT ARE THE SPECIAL DANGERS AND COMPLICATIONS?

We have pleasure in awarding the prize this week to Miss Mildred W. Corner, Surrey Corner, Southbourne, Bournemouth.

PRIZE PAPER.

Absolute isolation is imperative; patients are usually removed to isolation hospitals if available, the disease being so infectious that it can rarely be efficiently isolated in a private house.

The ward or sick room should be large and well ventilated in order to dilute the infection and remove as much as possible the unpleasant, peculiar foetor so characteristic of the disease. Deodorisers such as Sanitas or chlorine may be used. The room should be kept at an even temperature—60° F.

The skin requires special care; with regard to cleanliness, the surface should be kept as clean as possible by frequent sponging.

The hair is generally cut short, the fingernails cut short, and the hands rolled in cotton wool and bandaged to prevent scratching by the patient.

As the pustules mature and rupture the bedding and clothing are soiled and must be changed as often as necessary. Warm baths may be ordered when the patient's condition permits. These have a cleansing effect and help to soothe the irritation. Application of various oils, ointment, vaseline or powder may allay irritation. Severe irritation may be relieved by sponging the body with dilute acetic acid and water or toilet vinegar.

Bed sores are liable to form, and must be prevented by keeping the sheets smooth and soft, and by frequent changes of posture. A water bed is often necessary. Sometimes the skin, especially the hands and feet, are so tender that pressure, however slight, causes

acute pain. To relieve this a bed cradle will be needed to keep off the weight of the clothes.

The mouth, throat, tongue and nose must be kept clean by means of antiseptic mouth washes and, if necessary, syringing. Scabs forming round the lips and nostrils should be softened with oil or vaseline and removed.

The eyes also require special care; frequent bathing with boracic lotion, or other antiseptic solution, if necessary, may be ordered.

Tepid sponging, wet pack or ice cradle may be ordered to reduce temperature; owing to the condition of the skin this treatment is not always effectual. Dressing may be needed for the face, and should be made of lint; a mask, with holes cut out for eyes and mouth, must be firmly bandaged.

The patient may be delirious and even violent, and must never be left. No undue force may be used to restrain the patient. If a man, a male attendant will be needed.

Previous vaccination usually assures a modified rash. It has been said that when patients are treated in a room where only red light is admitted, the rash may be checked.

The diet in the acute stage is chiefly liquid. As the temperature subsides and the patient improves, it can be increased. Throughout the illness it must be nourishing and plentiful. Stimulants may be ordered. The bowels must be well regulated.

Complications are—formation of subcutaneous abscesses, boils, and in some cases cellulitis; the skin becomes very swollen and inflamed. These are usually treated surgically by opening, and sometimes draining, and boracic fomentations applied.

A severe complication is erysipelas.

Laryngitis and croup—if not relieved, tracheotomy may be necessary.

Other complications are pneumonia, bronchitis, nephritis and otorrhoea.

If the patient is pregnant the risk of abortion or premature labour is considerable. Bleeding both before and after delivery is often excessive.

The nurse must never forget the intensely infectious character of the disease, must never wear any article of clothing out of doors that she wears on duty. She must have a disinfectant bath and wash her hair before going out.

In smallpox hospitals, rooms are set apart in order that these precautions may be properly carried out.

HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss J. Robinson, Miss M. Metcalfe.

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