

## OUR PRIZE COMPETITION.

### GIVE AN ACCOUNT OF THE DIET AND TREATMENT OF SCARLATINAL NEPHRITIS.

We have pleasure in awarding the prize this week to Miss Gertrude E. Weeks, Northern Hospital, N.21.

#### PRIZE PAPER.

The cause of nephritis is that the kidneys become inflamed; therefore if we consider the work the kidneys have to perform we shall understand the changes in the urine. It will be remembered that their function is to remove waste matters and surplus water from the blood. They may, in fact, be regarded as a pair of living filters, which allow all impurities to pass through. This is their action in health. When attacked by disease they behave very much like filters that have got out of order. They may become blocked, so that very little is able to pass through; or, on the other hand, they may permit the passage of substances which it is their duty to keep back. The kidney secretion is diminished in quantity, and contains blood corpuscles and albumen. The urine may vary considerably in appearance. If there be much blood it is almost black, but more commonly it is red or smoky, while the deposit is of a chocolate colour. These peculiarities are very characteristic, but tests should be applied. The quantity of urine passed should be carefully noted, and the amount for the twenty-four hours entered on the chart.

In the treatment of the case the following are the main points. The patient must be kept warm in bed and carefully protected from draughts. A long flannel nightdress should be worn, the sheets should be removed, and he should lie between blankets. Our object is to increase the action of the skin, so as to compensate in some degree for the failure of the kidneys to do their work. In severe cases, when the flow of urine is much diminished, it may be necessary to promote perspiration by baths of warm water, hot packs, or hot air. As a rule they should last about twenty minutes, and afterwards the patient should be wrapped in a warm blanket and take a drink. A free action of the bowels should be secured daily.

The diet should be light and simple, and if the case be severe only liquids should be given. The patient must be encouraged to drink freely, in the hope of flushing the kidneys and removing the inflammatory products which are choking them up. Milk is our sheet anchor, but lemonade, imperial drink, weak tea, barley or plain water are all useful. Beef-

tea or any animal broth or extract must never be given. As the urine becomes free from blood and albumen the diet is gradually increased, and the other restrictions cautiously removed. Convalescence is, as a rule, slow.

At times the case presents symptoms of a graver character. Vomiting may be troublesome, and rigors or shivering attacks may make their appearance. A blotchy rash is occasionally present, best marked on the limbs and back. To check vomiting, the milk must be given in small quantities, and, better still, peptonised. When a rigor begins give the patient a hot drink, put hot bottles in his bed, and wrap him up well in his blanket. In the worst cases, in which the urine is greatly diminished or even entirely suppressed, symptoms of uræmia may supervene. The most characteristic of these are convulsions and drowsiness deepening into coma. The former are usually ushered in by a slight twitching of the face and limbs, which should be at once reported to the doctor; also excessive drowsiness. The usual treatment under these conditions is the administration of an aperient, or an enema if vomiting be present, and a hot bath. For the convulsions chloroform is frequently used.

The great majority of patients suffering from scarlatinal nephritis make a good recovery, and the urine becomes quite normal again. The latter result is most common when the case has been neglected in the early stages, as, for instance, when it has not been recognised that the patient is suffering from scarlet fever until the actual onset of nephritis. In these cases, too, well-marked dropsy is frequent, whereas in patients properly treated it is absent, or present to a very slight extent.

#### HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss Rachel Dodd, Miss M. Bryan, Miss P. Thomson.

Miss Rachel Dodd writes:—"During the acute stage the diet should be restricted to milk, whey, barley and lemon water, imperial drink, and quantities of water, which has the effect of washing out the effete materials and inflammatory products deposited in the kidneys. If there is much œdema, fluids may be required to be restricted, and arrowroot, gruel, or Benger's food given instead. If the urine is scanty, and the dropsy rapidly increasing, it may be necessary to restrict the fluid to one pint of milk in the twenty-four hours."

#### QUESTION FOR NEXT WEEK.

What points would you emphasise in giving pre-natal instruction, and what special matters would you attend to in giving post-natal care?

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