# OUR PRIZE COMPETITION.

DESCRIBE THE NURSING CARE, AND THE TREAT-MENT YOU HAVE SEEN PRESCRIBED, OF A CHILD SUFFERING FROM ACUTE RHEUMA-TISM. WHAT COMPLICATIONS MAY ARISE?

We have pleasure in awarding the prize this month to Miss Amy Phipps, F.B.C.N., Longmarton, Ashford, Middlesex.

#### PRIZE PAPER.

Acute rheumatism is a fibrile disease, characterised by inflammation of the fibrous tissues and serous membranes, the existing cause being a micro-organism closely allied to the streptococcus, the toxin of which is accountable for the symptoms. Heredity probably acts as a powerful predisposing cause.

It is essential that nursing should be in the hands of a highly skilled and trained nurse, who has a sympathetic and intelligent appreciation of the working of

the child mind, viz., child psychology.

The choice of a nurse may mean not only the life of the child, but also the avoidance of the effects of complications, which otherwise might remain for life.

The main objects of treatment are:

(1) Relief of pain and discomfort and efforts to deal with the toxins of the disease.

(2) To prevent the heart from becoming implicated.

(3) When heart trouble arises, to limit it as far as possible.

The child should be placed in bed between blankets, clothed in a flannel gown opening at the back, and restricted to a milk diet.

A special rheumatic bed, narrow, with a firm flat mattress, and well placed in a warm, well ventilated room, free from draughts, is desirable. Symptoms must be treated promptly as they arise.

## Local Treatment.

Swollen or painful joints may be painted with belladonna and glycerine, and covered with warm wool and a light bandage, and, if necessary, immobilised.

When joints are affected, such as ankles and hands, baths at 100 deg., to these limbs, if given with great gentleness, often bring relief. A bed cradle is usually necessary to relieve the weight of bedclothes.

Later, treatment will include massage and exercises to prevent stiffness or contraction and to assist meta-

bolism.

In selected cases, baths and hydro-electricity are often of value. Of the latter, the Schnee hydro-electric 2- and 4-cell baths are in common use.

For the Vichy douche bath, the patient is immersed beneath a series of fine showers, massage being applied under the spray.

A hot pack is sometimes ordered, to help rid the body

of poisonous matter by free perspiration.

Hyperpyrexia is treated by tepid or cold sponging: the temperature and pulse must be watched unremittingly.

In all applications, it must be remembered that: (1) Every movement probably means pain to the patient, who dreads the least jar; (2) absolute rest is necessary in the effort to save damage to the heart.

#### General Treatment.

Every effort should be made to calm the little patient. Drugs include salicylate, usually of sodium, in frequent moderate doses, according to the cardiac condition. When the child takes salicylates badly (and the bad effects of them should be known and noted) alkaline treatment may be prescribed. In the latter, the object is to keep the urine alkaline by giving large doses of bicarbonate of potash (10-15 grains), often with full doses of quinine. Dover's powder (2-3 grains) is often given to relieve pain and induce sleep.

A variable amount of success has followed the vaccine treatment of patients, where symptoms are persistent.

Other attempts at cure, still the subject of research. are based upon the isolation of certain chemical substances from the urine, as the result of disordered metabolism. During convalescence, a preparation of iron is usually prescribed, and a good nourishing diet is gradually introduced.

### Prophylactic Treatment.

When there is a known predisposing cause to rheumatism, or any possible early symptoms, full use should be made of the rheumatism clinics scattered about the country. In these cases, very special note should be taken of the condition of the tonsils, and any dental cases should be dealt with promptly.

#### Complications.

These include:-

Relapse.

Chronic or sub-acute rheumatism, probably with some arthritis.

Endocarditis or myocarditis, of varying degree, and in some cases associated with initial stenosis.

Pneumonia and pleurisy, usually of the left side.

Chorea, occurring most frequently when the heart is affected.

Thrombosis and embolism, the highly fibrinous condition of the blood predisposing to the formation of clots.

Rheumatic nodules, found chiefly about the joints, varying in size from a pin's head to an almond and which, pressing on a nerve, may cause great pain.

Erythema nodosum, showing as bright red node like swellings, on the limbs, and sometimes on other parts.

Purpura rheumatism, occurring as hæmorrhagic spots in the vicinity of affected joints.

## Skin Eruptions.

Of these, the marginate and papular forms of erythema are most common; also, urticaria and dermatitis may occur, the latter sometimes being the result of local or general treatment.

Tonsilitis, or pain, stiffness and inflammation of the fauces frequently precede an attack, but may occur as a complication.

Anæmia is usually present in some degree. In severe cases, there may be headache, great restlessness, persistent constipation, and delirium.

As a result of disease, the prophylactic powers of the child are much decreased, and therefore there is a tendency to take infectious diseases readily.

Intelligent nursing is obviously of vital importance.

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