

members of the Medical Profession. They certainly were extremely active in getting State Registration for Nurses, and they have been responsible for other benefits to us, and we are grateful. If Nursing as a Profession is to survive, we shall gladly accept help, advice and friendship again, but we know what we want, and we want the doctors to help us get what we want. We want independence, loyalty and courtesy, and we want to go on cultivating our own garden, though we would not refuse any rare blooms from more expert gardeners, nor the advice on how best to cultivate these proffered blooms.

G. M. H.

HYPERPIESIA.

By L. GODDARD, S.R.N.

Hyperpiesia is a symptom due to many causes, mental worry, causing mental depression, use of alcohol, bad diet and over work without sufficient sleep causing frontal headache, especially when bending down.

Nausea and vomiting, giddiness, dyspnoea and constipation is often complained of.

In some cases there may be hæmatemesis and in women menorrhagia.

Diseases such as Chronic Nephritis may be the cause. Hyperpiesia may also be due to or complicated by arterio sclerosis, when the patient complains of muscular pain, especially in the chest.

The term Hyperpiesis is used when there is an abnormal high blood pressure and Hyperpiesia as a symptom for it.

The blood pressure is the force of blood from the heart supplying the blood vessels, and a patient with an abnormal high blood pressure usually suffers with disease of the arteries and often apoplexy may occur.

The blood pressure, when it is below normal may be due to diseases such as Addison's disease, Myxœdema, Anæmia, Hæmorrhage, Shock, Exhaustion and any chronic wasting disease where the body strength is generally weakened or even after a hot bath when fainting and giddiness may be present.

Some people may have a low blood pressure, without showing any signs of disease.

The estimation of the blood pressure is in some cases of great importance and a matter of life and death, so every care must be taken that the reading is accurate.

A Sphygmomanometer is used to estimate the blood pressure, an instrument which is graduated in millimetres.

Care should be taken that the patient is resting before the blood pressure is estimated and preferably not after a meal or after any excitement.

The patient is sat up in bed if possible, or in a chair, and the instrument which also consists of a rubber bag, in an armband which is placed around the arm above the elbow and strapped into position.

The interior of the bag communicates with a pressure gauge and hand pump by two rubber tubes, this hand pump possesses a valve for the air to escape as required.

The tube communicates with the lower part of the glass in which the mercury rises as the air is pumped into the rubber bag causing the pressure on the mercury.

As the bag is pumped up with air it constricts the veins of the arm. The fingers should be placed on the

radial artery at the wrist or a Binaural stethoscope is used, and the chest piece placed on the basilic vein. The mercury is seen to ascend and should read 200 mm. and until no sounds are heard.

The Systolic pressure is that at which the pulse can no longer be heard and on its immediate return.

The air is slowly released from the valve at the hand pump and the mercury slowly falls, still listening, the sound of the pulse will continue, when it suddenly becomes inaudible.

The mercury is read at this point and is called the Diastolic pressure.

The blood pressure at each heart beat is at its greatest volume, Systolic pressure, as it falls between the beats, Diastolic pressure.

The systolic pressure varies and in healthy children under twenty years of age, averages 100 to 120 mm.

In healthy adults 120 to 150 mm., and the diastolic pressure from 60 to 90 mm.

Advanced age 100 is added to the age of the patient.

The difference between the systolic and diastolic pressure averages between 30 to 60 mm.

A high blood pressure may be as high as 200 mm. systolic pressure and the diastolic pressure to 130 mm. and are signs that the blood vessels may burst and often it is the arteries of the brain and so causing an apoplectic seizure.

Low blood pressure of Hypopiesis may be 100 systolic pressure, but below this, such as 80 mm. would indicate the danger of death.

Treatment.—When the blood pressure is excessive, it may be lowered by the administration of a daily dose of Mag: Sulph.; and low diet. Thyroid extract and Iodide of potassium may be ordered.

Low blood pressure can be treated if urgent with blood transfusion.

THE BRITISH COLLEGE OF NURSES, LTD.

After four months' residence and treatment at St. Bartholomew's Hospital, London, Mrs. Bedford Fenwick has now accepted the most kind invitation from the Rev. Thomas and Mrs. Barber to avail herself of country air at their residence at The Vicarage, London Colney, near St. Albans, and with her nurse hopes to make progress in convalescence.

Mrs. Bedford Fenwick has received flowers and a number of kind letters from various Nurses' Organisations, from the Executive Committee of the Royal British Nurses' Association, from the Council of the British College of Nurses, Ltd., and from a great number of nurse friends at home and abroad for which she desires to express very sincere thanks.

FIFTH ORDINARY GENERAL MEETING OF MEMBERS.

We regret to report that the Fifth Ordinary General Meeting of Members of the British College of Nurses, Ltd., has had to be deferred from November 21st until Friday, December 13th, owing to the difficulty in getting the Accounts audited.

We hope, therefore, that members who intended to be present will not be inconvenienced, and will attend at 19, Queen's Gate, London, S.W.7, on December 13th, at 2.30 p.m.

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