Utilisation of Patients' Relatives in Neurological Nursing

G. Sandanasamy and B. Ramamurthi*

IN ANCIENT and medieval times, nursing the sick was the responsibility of the relatives and friends of patients, though nursing as a speciality was beginning to be recognised. Reference has been made in ancient medical text books of India, namely, Charka about nursing, the qualities of a good nurse and her training. Men and women nurses were recognised in those days for their different roles.

The speciality of Neurosurgery in India is of recent origin as in many other parts of the world. Soon after the Second World War there was a rapid exchange of scholars between different countries which enabled neurosurgical centres to be set up in various parts of the world. Madras was the first centre to be started in India by the Government of Madras as early as 1950. Since then, the department had grown into the Institute of Neurology with 103 beds for surgical and medical neurology and all the other departments like neurochemistry, neuropsychology, neuropathology etc. An important feature of the Institute is the Head Injury Unit which takes care of all the head injured patients admitted to the General Hospital, Madras. There are 20 head injury beds, 32 neurological beds and 51 neurosurgical beds. These are in addition to 8 paying ward beds.

The types of patients admitted to the Institute are similar to the patients admitted in any busy neurosurgical centre in the world, with the exception of rather low number of admissions of patients with cerebral aneurysms. On the other hand, stereotactic surgery being an important field of activity, a large number of patients with cerebral palsy, behaviour disorders and dystonia are cared for in the Institute.

PATIENTS : The type of patients that we have to care for in India are generally in poor health and many of them even show signs of malnutrition, though this feature is gradually improving over recent years. The preoperative and postoperative care of such patients is found to be more difficult than ordinarily expressed. On the contrary, it must be conceded that the patients are intelligent, obedient and cooperative. They have also immense faith in their doctors and nurses which helps in the maintenance of disciplined care.

EXTRA LOAD OF PATIENTS : Another difficult factor to be mentioned here is the extra load of patients that hospitals in India have to carry. Though the sanctioned number of beds in Institute of Neurology, Madras, is 103, usually there are about 130 patients in the Institute. As there are only a few centres of neurosurgery in India, it is not possible to turn out a patient with papilloedema or spinal compression and ask him to take an appointment or to come back after a few days, when beds are available. At the same time there is a shortage of nurses in the hospitals with inadequate nurse-patient ratio. Nurses are also required to undertake a number of non-nursing duties.

SOCIAL ATTITUDE : The social attitudes also have to be taken into consideration. In the orient, it is a common sight to see relatives cluttering around the sick patients. In many cases it is difficult to admit a patient into the hospital without permission being given for a relative to stay with him. Though this attitude is gradually changing, it must be emphasised that it is widely prevalent specially amongst the rural folks who come to the city for treatment. This is particularly true in serious conditions like neurosurgical illnesses.

In this context it may be relevant to examine how best the services of the relatives of patients could be utilised in caring for the sick. The areas where relatives can help are the following :

PREOPERATIVE PHASE : The neurosurgical nurse gives orientation to the patient's relatives regarding the environment, the set-up, the various utensils used and the discipline of the ward. This makes it possible for the relatives to stay with the patient and render the needed care. The first reception and impression are the most important. Therefore, to get

(Contd. on page 149)

* G. Sandanasamy, Nursing Tutor, and Prof. B. Ramamurthi, Neurosurgeon (also Prof. of Neurosurgery, Madras Medical College) of the Institute of Neurology, Government Gen. Hospital, Madras. (Summary of a paper presented at the First International Congress of the World Federation of Neurosurgical Nurses in Tokyo in October, 1973).

Mr. G. Sandanasamy is the first Indian nurse who attended the International Congress of the World Federation of Neurosurgical Nurses held in Tokyo in October 1973.

He completed his general nursing in 1949, Dip. in Nsg. Admn. in 1957, Tutors' Diploma (Australia) in 1962 and B.Sc. (N) in 1970. He also attended a 6-month course in neurological nursing in Australia in 1960.

After serving in the Govt. General Hospital, Madras from 1951 to 1972, he joined the Institute of Neurology, Madras, as Nursing Tutor.