

Suggestion removes symptoms, but the physician must dive down to remove the focus with analysis.

Obsessional patients are more difficult to analyze than hysterical ones.

—(Notes from a Lecture at the College of Nursing, London.)

THE NURSING CARE OF BURNS AND SCALDS

Using Tannic Acid, Dettol and Anti-Streptococcal (Scarlatinal) Serum.

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In the Glasgow Royal Infirmary, where this treatment has been carried out, we have two wards reserved for patients suffering from burns and scalds. These wards are specially equipped for the treatment of such injuries, each ward containing continuous baths and a shock-room. The baths are fitted with hammocks and adjustable head rests, on which the patients rest; these rests are a great help to both nurses and patients. The shock-room contains two beds, it is well lit, and the room may be heated to a temperature of 80° F. and over in a few minutes by means of steam. All cases are admitted into the shock-room, where they remain until they have fully recovered from primary shock.

In all cases of burning and scalding we carry out a general routine treatment, which may be divided into primary treatment and later treatment. The dangers in the very early stages are threefold, namely, shock, extensive loss of body fluids and infection of the injured area; and it is the endeavour of all concerned to combat those dangers successfully.

We have obtained good results in this hospital by using a solution of tannic acid five per cent., and Dettol twenty per cent., and injecting anti-streptococcal (scarlatinal) serum intramuscularly.

On Admission

On admission the patient is taken into the shock-room, which has been heated to a temperature of 80° F. The clothing is gently and quickly removed and he is wrapped in warmed blankets. Strychnine gr. 1/60 and brandy ʒss is administered to adults, while children have strychnine gr. 1/120 and brandy ʒi.

The patient is then lowered into a warm bath, temperature 100° F. to 105° F., by means of a sheet. This bath is not painful; all adult patients describe it as comforting, while the babies appear to rest in the warm water. In several cases, where there are unburnt areas on the back, as for example the 'knicker-band' area in females and the 'braces' area in males, we use a type of sling similar to the head rests of the baths. The patients rest in bed on these slings, which are attached to overhead extensions. (By tightening them up, the patients are raised fairly easily for the insertion of bed-pans, etc.) The bed is drawn alongside the bath, and the patient lowered in the sheet, or by these slings where they are used. In the bath the blisters and dead skin are removed as far as possible, and the burn and surrounding areas gently cleaned with the warm, soapy water. The patient does not