THE PROBLEMS OF A NURSE

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A Pioneer Plunket Nurse of New Zealand.

THE wife of the manager of one of the Islands in the Pacific engaged me to nurse her. She went to New Zealand for the occasion. She had a little girl of about seven but this little baby was a son and seemed to complete their desires. The mother was healthy and strong except for minor ailments from the climate and the baby was well nourished.

The mother had an abundance of milk, which seemed almost unfortunate as the mother had the idea the baby should empty the breast, and seeing she had been a trained nurse before her marriage she would not be advised. Of course trouble resulted and the stools seemed as if they were trying to rival the rainbow in colours at times. Sometimes I could induce her to reduce the feed but as soon as the stools improved she insisted in giving large feeds which resulted in a relapse. The doctor was constantly consulted and advised various foods judging the milk did not suit the baby. The mother, about by now, would still give large feeds or there would have been a chance of getting the baby better. There was some improvement by the time my month’s engagement was up, so I went away. It was not long before the baby had a bad attack and I was recalled, the doctor still being in attendance. After the baby had somewhat recovered she decided to take the baby to the doctor under whom she used to work before her marriage and in whom she had every confidence. But alas her baby finally died and her grief was almost despair.

How wretched this case made me! I felt then and I am more sure now that it died through our ignorance. If we had known the A. B. C. of the thing as I know it now it would have developed into a healthy, strong child (that is if the mother would have acted different). How I longed for more knowledge! I felt it was monstrous that we should be so ignorant.

Shortly after this time the lady who owned the Nurses’ Institute where I lived told me a special lecture and demonstration was to be given in the Ball Room of Government House on the feeding of babies and making of humanised milk, and asked me if I would go with her. I jumped at the chance and went. Her Excellency Lady Plunket spoke and a matron gave the demonstration. I was thrilled as I caught glimpses of the principles which underlie the well feeding of babies. The subject that day was artificial feeding, because the injury from wrong feeding in that way was particularly prominent, but as the work progressed every effort was made to show the right way to feed with mother’s milk. I thought I would give anything in my power if I could get that knowledge which I felt this system contained.

I went into the country to a case and one day received a letter from the lady mentioned above, in which she said she had enclosed the advertisement where this Society were asking nurses to apply for the post, to be sent to Dunedin for training, and then return and take
up the work in that City. She said, Apply for this, you are the one for the post, and I have interviewed the Honorary Secretary and told her so. I wrote and thanked her, told her I had applied but felt sure I had no chance whatever.

To my joy and surprise, after an interview, I was the one selected and was sent to the newly started training school for nurses who were afterwards called “Plunket” Nurses after Her Excellency, who was largely the cause of the success of the system which had been developed by Dr. Gruby King. In those days he was the Medical Superintendent of a Government Mental Hospital in the South Island of New Zealand. His work had led him to the conclusion that the defective nourishment of infants had some effect upon the tendency to brain derangement in later life. The fact that the brain grows more during the first two years of life than during the whole of the after life put together, shows that, however good the nourishment may be later, the brain having little more growth to make cannot reap the benefit to the same extent as the rest of the body which has a number of years to put in physical development on a larger scale than already accomplished. The place where the Hospital was located was in the country where no doctor resided for private practice. Therefore, mothers in their extremity turned over their babies to Dr. Gruby King. In this way some acute cases of summer diarrhoea were taken to him which made him study deeply the contributing causes as well as treatment. Attached to the hospital was 999 acres of land on which much of the food for the hospital and staff was produced, so he had to be an expert farmer as well to direct the work on this place, which the patients did. He found that the calves suffered from the same disease in summer as infants do. He examined the utensils in which their milk was served and found they were often sour. He brought in a new plan, and had kerosene tins cut down with the edges bent over so they would not cut; each calf had a tin. These had to be thoroughly cleaned and polished after each meal. He took me to show them to me, and they were as bright and clean as a lady could wish her kitchen utensils to be. He saw that the milk supplied to the calves was sweet and given in these clean tins with the result that scouring amongst calves was practically wiped out at a stroke. The fact was germs thrive in milk. The curd of milk makes splendid culture for the germs which cause diarrhoea. The germs in milk multiplied by millions in the warm days of summer and the poisons they throw off into the milk poison the child or calf, whichever it may be. If one germ were placed in sterile milk and milk kept at blood heat for twelve hours there would be 3,000 germs developed in that time from the one germ. No wonder diarrhoea amongst infants nursed by their mother is so much less.

When spectacles first came into use in Italy, women were forbidden to wear them.

Utmost wisdom is not in self-denial, but in learning to find extreme pleasure in very little things.