## Editorials.

## The Management of Patients After Operation.

The period following operations on patients is of much importance. There are two main dangers, viz., shock and exhaustion from vomiting. These may not be present to any extent, or they may be both or either very severe. These conditions may occur when least expected. Comparatively slight operations may be followed by them, while after the most severe operations patients may pass on to an easy recovery. The strong and vigorous may succumb, whereas the weak may escape. These being facts, no detail should be neglected.

There are many states of poor health and debility that predispose to shock; but shock may occur as a surprise. No operation should therefore be undertaken without the most careful study of the condition of the patient and the surroundings. The general state of a patient about to be submitted to an operation should never be overlooked.

In all operations the utmost effort ought to be made not to unduly prolong it. Shock is much more likely to follow protracted operations, and to be severe, than in most cases where the patients were not so long under the anæsthetic. When the anæsthesia has been prolonged there is danger of exhausting vomiting. For this reason, detail and conservative efforts must often be sacrificed, rather than keep the patient too long upon the table. Taking fully into account all the conditions, known and unknown, that predispose to shock, prolonged anæsthesia is the most usual provocative. The subsequent vomiting and exhaustion is generally in proportion to the duration of anæsthesia.

Shock and vomiting are so much due to the same causes that a somewhat similar treatment applies to both. The three main agents for the relief of shock are in order of value—heat, alcohol and opium. The application of warmth to the surface of the body is of first consideration. If the surface of the body can be maintained at usual temperature, usually there is no fear of danger from shock. Hotwater bottles, india-rubber bags, and mustard to the extremities, over solar plexus or heart, form a valuable armamentarium for the restoration of the patient. If these measures fail, or are acting too slowly,