

This Recd
Gifford

1918 INFLUENZA EPIDEMIC AT UNIVERSITY OF MINNESOTA HOSPITAL

For several months during the fall of 1918 the University of Minnesota Hospital was open only to patients with influenza. The hospital was full to overflowing. Nurses and medical personnel were limited because of the war demands. The major source of medical and nursing care was student nurses and medical interns. The University of Minnesota School of Nursing was one of the few nursing schools of that day which required only eight hours of student practice per day. However, during the flu epidemic all personnel worked at least ten hours and often longer each day.

Night duty was particularly strenuous. My night experiences during that period were extremely arduous and those days were vividly stamped on my memory.

For about six weeks I was the only 9:00 p.m. to 7:00 a.m. nurse in pediatrics. In a ward on the top floor of the hospital, which normally housed fifteen or twenty patients, there were about 30 children varying in age from 2 to 10 years. All were desperately sick, many had been picked up by policemen from homes where the parents were found dead or in a dying condition from influenza. Often the sick and frightened children were bundled up and taken to the University Hospital in "paddy wagons." Rules of the hospital required all personnel (doctors, nurses and maids) to wear masks, close fitting caps and white gowns supposedly to prevent the staff from contracting influenza. (It didn't work!)

Imagine the terror of those children to find themselves in a strange environment among a bunch of ghosts! When I reported for duty the first night at 9:00 p.m., the exhausted ^{day} staff was still on duty. All thirty children were standing in their cribs screaming their hearts out! The day staff felt they could not leave me (a junior student) alone with the ward in such bedlam! However, I had an idea (which I didn't dare to express) so I begged them all to go off duty and leave me alone. As soon as the last nurse had left, I pulled off my mask and cap so I would

look more like a human being. Then one by one I wrapped each child in his own blanket and rocked him in the old white rocking chair which was always in the pediatric ward. (What it was there for, I can't tell you because "picking up" any child was strictly against pediatric regulations.) The exhausted children responded so well to seeing a person who looked like an ordinary person and who gave them a little cuddling, that each fell into a relaxed sleep within a few minutes. By midnight the children were all asleep. Then as they awakened, I again picked each child up and "forced fluids" which was the most important item in the treatment regimen. Four nights later as I was in the midst of the "rocking episode" the pediatric intern walked in! He looked horrified and said: "What on earth are you doing?" I was sure that my days as a student intern were limited at that point, so I replied indignantly: "These children are scared stiff and I'm merely trying to make them feel comfortable and at home." With that he replied: "Have you a second rocking chair?" Needless to say, he came up about ten o'clock every night for the following weeks. There was only one complication! We had to record the fluid intake for every child and the children took so much more liquid at night than they did during the day that some eyebrows were raised as to whether I was "padding" the record. But neither the intern nor I ever told a soul about our night routine in pediatrics. Thirty years later I met a pediatrician who looked strangely familiar. He was the former intern who had helped "rock the babies." His remark was: "The only trouble was that you and I were twenty years ahead of the times!"

PMcLaine
July 3, 1968