

COMMON SYMPTOMS
DESCRIBED FOR NURSES
护士用常见症状详述

(英 汉 对 照)

焦秀娟 李汉芾 译
王琇璞 李致一 审校

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引 言

本书希望对护士能有帮助。在门诊或在病房，患者首先要得到护士的接待。一个患者会有一种或几种症状，参阅本书的有关章节，护士可以判断出引起患者疾病的可能原因，再借助于内科或外科教科书就可进一步证实自己的判断。

1978年第二版 绪言

本书第二版经全部修订后，增加了两项新的内容：一是卡他性鼻炎，二是乳腺疼痛和肿块。

Introduction

This book is to help a nurse when she first meets a patient in an out-patient clinic or in a ward. He will come with a symptom or with several symptoms. By referring to the appropriate sections in the book the nurse may quickly inform herself of the likely cause of the patient's complaints and can then turn to her textbook of medicine or surgery to inform herself further.

Preface to Second Edition

For the second edition this book has been revised throughout. Two new sections have been added, one on Nasal Catarrh, the other on Pain and Lumps in the Breast.

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1. 发 热

体温是由脑的下视丘内之中枢所调节，通过血流由中枢来反应，由口腔或直肠测量所得到的温度，即代表着身体的中心部如胸腔脏器、腹腔脏器和脑的温度。口腔正常的温度是在 $36^{\circ}\sim 37.5^{\circ}\text{C}$ ($97^{\circ}\sim 99.5^{\circ}\text{F}$)，直肠的温度稍高。腋下和腹股沟测得的温度略低。正常体温在一日内有所变化，下午最高，夜间一两点最低。这一规律对夜间工作的人员也不改变。妇女月经前的体温比月经后的体温略高。

发热是指体温升高超过正常范围，大多数是由细菌的作用和病变组织所分解出的致热原、化学物质进入血液引起体温中枢对机体的反应。

“不明原因的发热”，这个名词一直可用至发热原因被发现。

体温在一日内的变化，夜间体温高于上午。上午体温高于夜间体温的疾病有：肠伤寒、结核、脑膜炎球菌感染。

寒战：寒战是全身感觉发冷而震颤，有些发热的疾病当体表感到发冷时，机体温度骤然升高。寒战是因肌肉痉挛性收缩所致，常见于：疟疾、败血症、脓毒血症、由肺炎双球菌引起的肺炎、大肠杆菌引起的泌尿系感染、胆道炎症。

发热的原因：

感染、赘瘤、过敏性反应、体温调节机能障碍、循环障碍、其他原因。

感染：

是由于细菌、病毒、寄生虫和复细胞动物等感染引起的发热。

发热可能是：

(1) 持续热：在24小时内体温升高持续在正常范围 1°C 以上。

(2) 间歇热：24小时内体温有一次下降至正常以下。

(3) 弛张热：24小时体温变化在 1°C 上下，但不低于正常。

(4) 周期性发热：发热反复回归，高热几天后又降至正常，反复出现，常见于：疟疾、回归热、布氏杆菌病、鼠咬热、何杰金氏病、红斑性狼疮。

赘瘤：

发热能出现在任何发展较快的恶性疾病，是由于从肿瘤细胞分解出致热原，或是由于继发感染，是以下疾患的常见征象：

肾上腺瘤：肾脏的恶性肿瘤，常见于两岁以下的儿童。

肝癌：继发于任何转移癌，例如：胃、大肠、乳腺。

淋巴肉瘤：淋巴组织的恶性肿瘤。

发热也常见于以下疾病：

何杰金氏病（淋巴腺瘤）：可能是无热型，体温不高。

急性白血病：发热伴有淋巴结肿大、脾肿大、贫血、紫癜和牙龈出血、肠出血等。

骨髓肿瘤（多发性髓细胞瘤）：浆细胞恶性增殖症，全身抵抗力降低是普通感染的原因。

子宫肌瘤：发热是由于红色变性，即妊娠时子宫平滑肌瘤的红色软化。

过敏反应：

发热可能由于药物过敏反应或异性蛋白过敏，伴有荨麻疹、瘙痒、呕吐、四肢疼痛和蛋白尿，发热可持续24小时至14天。

(1) 药物：药物引起发热特别容易发生于易产生过敏的人，如以下药品：青霉素、头孢菌素、氯霉素、磺胺类药物。

(2) 异性蛋白反应：发热反应常常是由于注射引起，如血清、疫苗、血液等。

胶原性疾病：

发热可能有以下症状：

(1) 系统性红斑狼疮，周期性发热，面部伴有蝶状疹，关节肿痛和体重下降。

(2) 结节性多发性动脉炎，发热期伴有肢体疼痛、腹痛、脉率加快。炎症在中等及小动脉中发生变化所致。

体温调节机能障碍：

体温调节机能发生障碍，是因多种情况干扰而发生过高热的结果，如：

(1) 中暑：长时间在炎热的沙漠上曝晒或是高温车间。

(2) 视丘下部损伤：体温调节中枢紊乱或损害。

(3) 鱼鳞癣：这种皮肤的病变使体热散发不足。

循环障碍（心肌梗塞）：

(1) 冠状动脉血栓形成：患病的头一两天有中等度的发热或持续发热几天。

(2) 肺梗塞：可能发热或不发热。

(3) 血栓性静脉炎：这种病人常有发热，在腿部静脉有明显可摸着的血栓形成，且有压痛。

(4) 蜘蛛膜下腔出血：可能在发病后24小时体温稍升高并持续一周。

其他原因：

(1) 克罗恩氏病（节段性回肠炎）：发热较常见，发热可由于疾病本身引起，或由于继发感染化脓引起，另一特征是腹痛、腹泻和体重减轻。

(2) 甲状腺危象：由于甲状腺机能减退，在血循环中甲状腺分泌突然减少所致的发热，心慌意乱、腹泻、脉率快，可能发生于毒性甲状腺肿，或是未做充分准备而做了甲状腺切除术后。

(3) 牙槽脓毒症：长时间的发热、不适、欠爽，有时关节痛，由于牙槽脓毒症未经牙科适当的治疗。

1. Pyrexia

The temperature is regulated by a centre in the hypothalamus of the brain. The centre reacts to the blood passing through it. Taken in the mouth and rectum, the temperature recorded indicates the 'core temperature' of the body, i. e. that of thoracic and abdominal organs and of the brain. The mouth temperature is normally in the range $36.0^{\circ} - 37.5^{\circ}\text{C}$ ($97.0^{\circ} - 99.5^{\circ}\text{F}$), the rectal temperature is slightly higher. Temperature recorded in the axilla and groin is slightly lower. There is a normal daily variation, with the temperature being highest in the afternoon and lowest in the small hours; the pattern is not altered in a night worker. The temperature is higher in the premenstrual period in women than in the post-menstrual period.

Pyrexia is a rise of temperature above the normal range. It is most commonly due to the action on the temperature-regulating centre of pyrogens, chemical substances discharged in tiny amounts into the blood

by the action of micro-organisms and from diseased tissues.

PUO means Pyrexia of Unknown Origin, and is a term commonly used until the cause of a pyrexia is discovered.

Daily variation. In most fevers the temperature is higher at night than in the morning. It can be higher in the morning than at night in some cases of,

typhoid fever, tuberculosis, meningococcal infection,

Rigors. Rigors are shivering attacks with a feeling of cold which occur in some fevers when the superficial surface of the body is cold while the core temperature is rising sharply. The shivering is due to involuntary muscular contractions. Rigors can be a feature of,

malaria, septicaemia, pyaemia, the onset of a pneumococcal pneumonia, E. coli infections of the urinary tract, cholangitis.

Causes of pyrexia

Infections

Neoplasms

Hypersensitivity reactions

Disturbance of temperature-regulating mech-

anisms

Circulatory disturbances

Other causes

Infections

Pyrexia can be caused by bacterial, viral, protozoal, and metazoal infections.

Pyrexia can be,

(a) continuous; the temperature is raised continuously above the normal and does not vary more than 1°C in 24 hours,

(b) intermittent; the temperature falls to normal at least once in 24 hours,

(c) remittent; the temperature varies more than 1°C in 24 hours but does not fall to normal,

(d) periodic; bouts of fever are separated by afebrile periods of several days. This occurs in,

malaria, relapsing fever, brucellosis,

rat-bite fever,

some cases of Hodgkin's disease (Pel-Ebstein fever),

systemic lupus erythematosus.

Neoplasms

Pyrexia can occur in any rapidly advancing malignant disease, as a result of a discharge of pyrogens from damaged cells or from a secondary infection. It is commonly a feature of,