

Advice to a wife on the management of her own health : and on the treatment of some of the complaints incidental to pregnancy, labour, and suckling; with an introductory chapter especially addressed to a young wife.

Contributors

Chavasse, Pye Henry, 1810-1879.
Harvey Cushing/John Hay Whitney Medical Library

Publication/Creation

London, 1864.

Persistent URL

<https://wellcomecollection.org/works/naxgxeq5>

License and attribution

This material has been provided by This material has been provided by the Harvey Cushing/John Hay Whitney Medical Library at Yale University, through the Medical Heritage Library. The original may be consulted at the Harvey Cushing/John Hay Whitney Medical Library at Yale University. where the originals may be consulted.

This work has been identified as being free of known restrictions under copyright law, including all related and neighbouring rights and is being made available under the Creative Commons, Public Domain Mark.

You can copy, modify, distribute and perform the work, even for commercial purposes, without asking permission.

**wellcome
collection**

Wellcome Collection
183 Euston Road
London NW1 2BE UK
T +44 (0)20 7611 8722
E library@wellcomecollection.org
<https://wellcomecollection.org>

ADVICE TO A WIFE

ON THE

MANAGEMENT OF HER OWN HEALTH;

AND ON THE

TREATMENT OF SOME OF THE COMPLAINTS

INCIDENTAL TO

PREGNANCY, LABOUR, AND SUCKLING,

BY

PYE HENRY CHAVASSE, F.R.C.S.

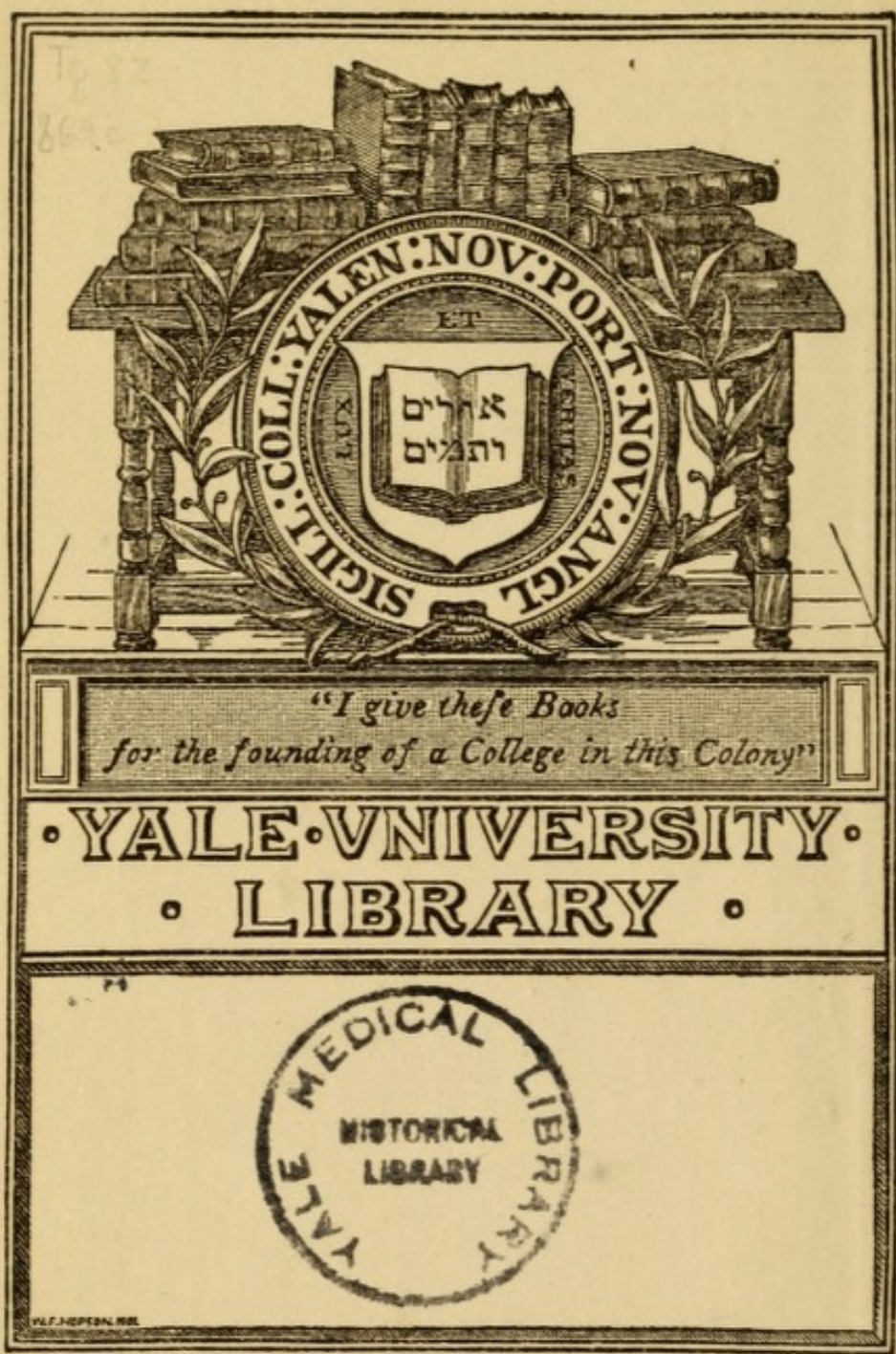
SIXTH EDITION.

LONDON:

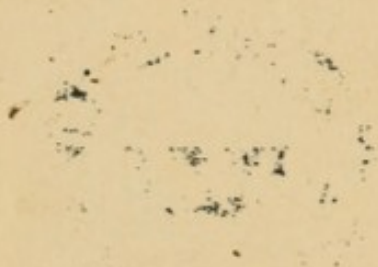
JOHN CHURCHILL AND SONS,
NEW BURLINGTON STREET.


MDCCCLXIV.

Price Half-a-Crown.

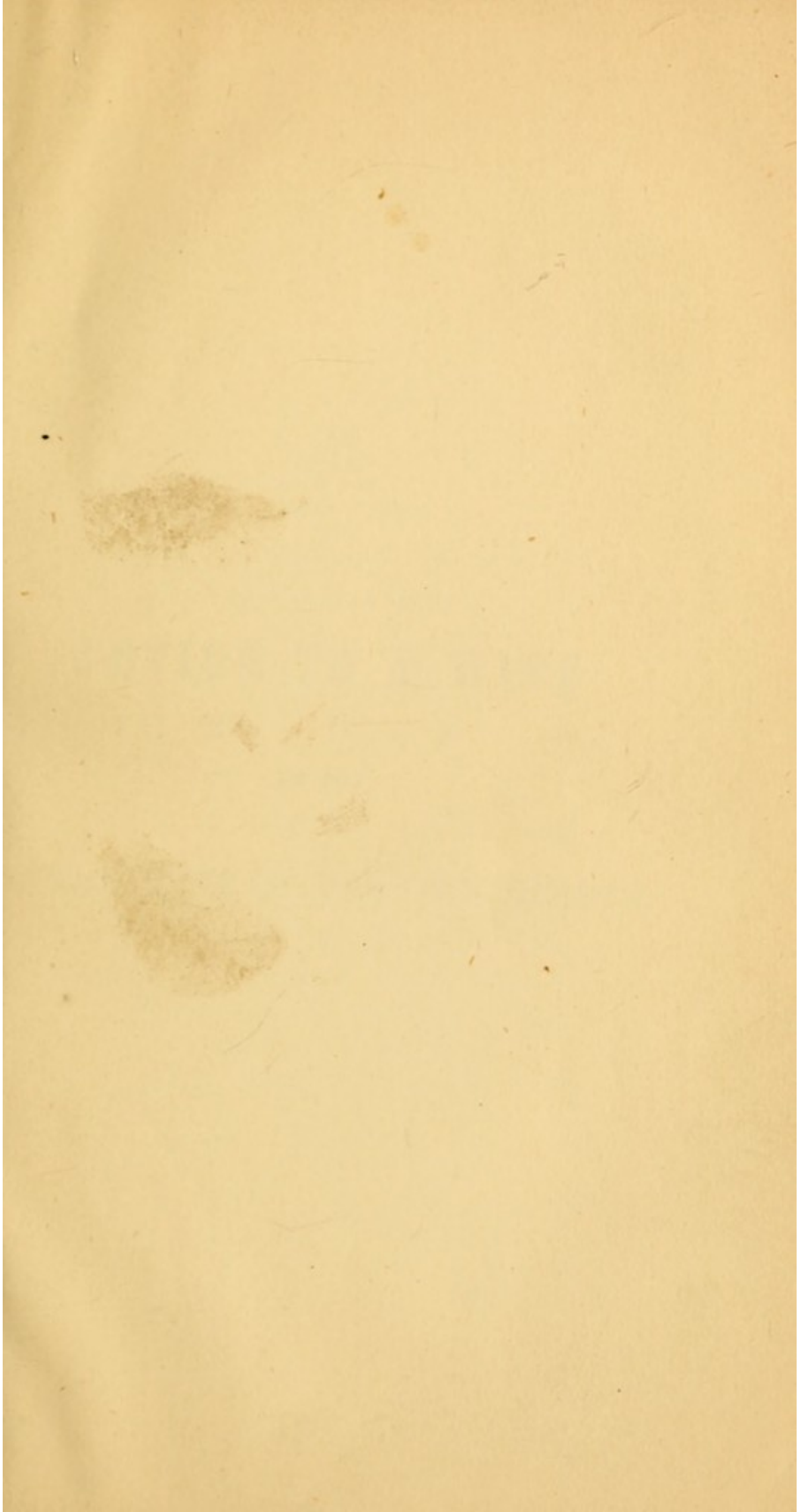


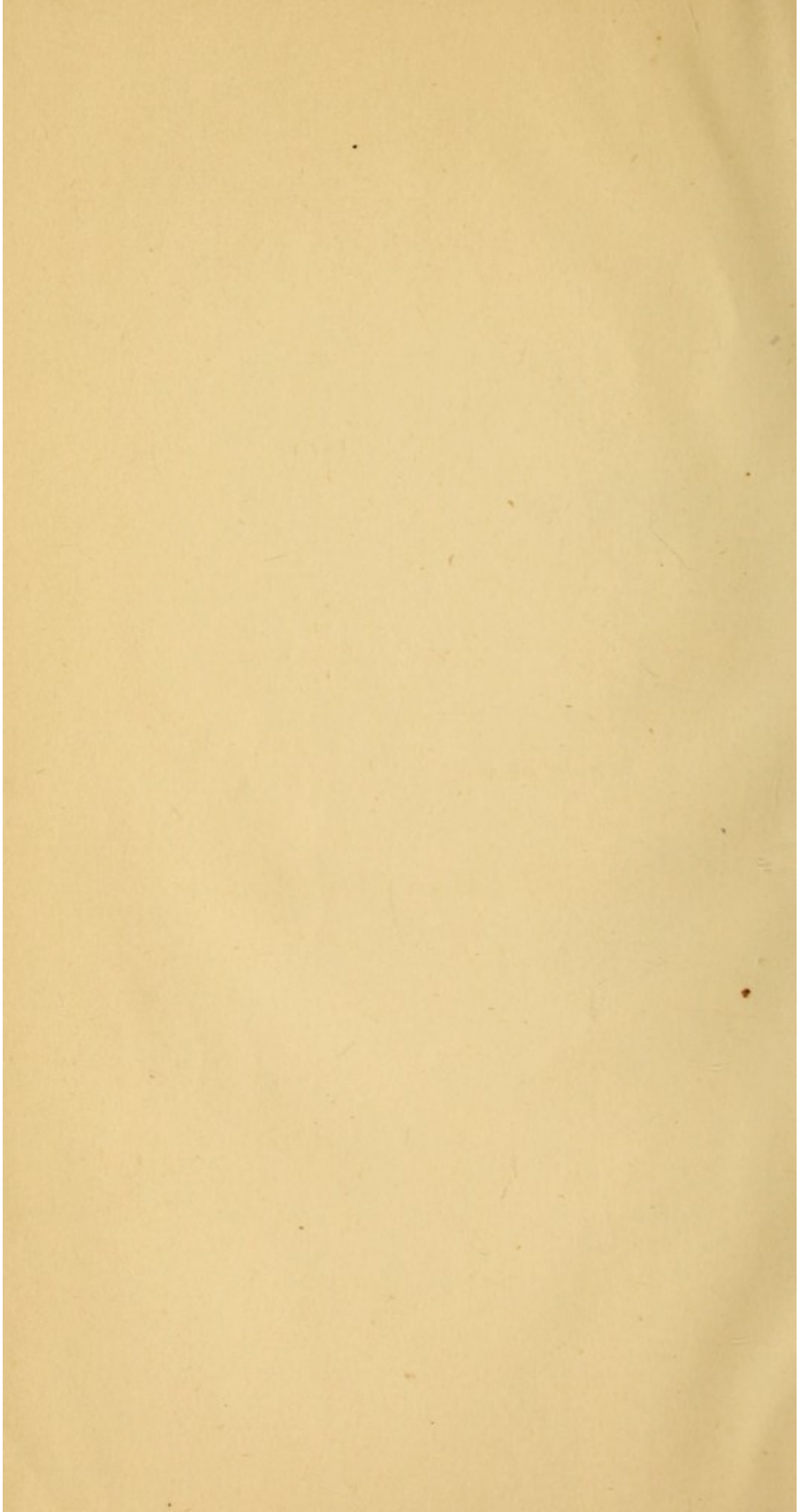
TRANSFERRED TO
YALE MEDICAL LIBRARY





Digitized by the Internet Archive
in 2012 with funding from
Open Knowledge Commons and Yale University, Cushing/Whitney Medical Library





ADVICE TO A WIFE

OF THE

MANAGEMENT OF HER OWN HEALTH.

BY THE SAME AUTHOR,

Price Half-a-Crown,

THE SEVENTH EDITION, MUCH ENLARGED, OF

ADVICE TO A MOTHER

ON THE

MANAGEMENT OF HER OFFSPRING,

AND ON THE

TREATMENT ON THE MOMENT OF SOME OF THEIR MOST
PRESSING ILLNESSES AND ACCIDENTS.

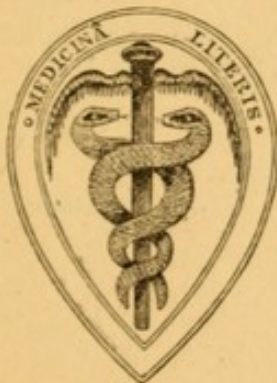
ADVICE TO A WIFE
ON THE
MANAGEMENT OF HER OWN HEALTH,
AND ON THE
TREATMENT OF SOME OF THE COMPLAINTS
INCIDENTAL TO
PREGNANCY, LABOUR, AND SUCKLING;
WITH AN
INTRODUCTORY CHAPTER ESPECIALLY ADDRESSED
TO A YOUNG WIFE.

BY
PYE HENRY CHAVASSE,

FELLOW OF THE ROYAL COLLEGE OF SURGEONS OF ENGLAND; FELLOW OF THE
OBSTETRICAL SOCIETY OF LONDON; FORMERLY PRESIDENT OF QUEEN'S COLLEGE
MEDICO-CHIRURGICAL SOCIETY, BIRMINGHAM; AUTHOR OF 'ADVICE TO A
MOTHER ON THE MANAGEMENT OF HER OFFSPRING.'

"Thy wife shall be as the fruitful vine upon the walls of thine house."

SIXTH EDITION.



LONDON:
JOHN CHURCHILL AND SONS,
NEW BURLINGTON STREET.

MDCCCLXIV.

VIEW A OF FIGURE

FIGURE 1

FIGURE 2

FIGURE 3

FIGURE 4

FIGURE 5

FIGURE 6

FIGURE 7

FIGURE 8

FIGURE 9

FIGURE 10

1202

1203

1204

1205

1206

J. E. ADLARD, PRINTER, BARTHOLOMEW CLOSE.

TO MY

BIRMINGHAM PATIENTS,

FROM whom I have received so much confidence, courtesy, and kindness; and many of whom I have attended for a period of thirty years; this little Volume is Dedicated, as a token of respect and esteem,

By their sincere Friend,

PYE HENRY CHAVASSE.

THE PRIORY HOUSE, OLD SQUARE,
BIRMINGHAM.

1857

STIMMINGHAM PATENT

Now when I have received a great number
of letters and inquiries and many of whom
are desirous of a patent of this kind, the
value is, therefore, as a labor of respect

of their names I send

JOSEPH CHAVARRA

The Patent Office
Washington

P R E F A C E.

THE sale of this work has, in Medical literature, been almost unprecedented—fifteen hundred copies of it have been sold in the last twelve months.—This is the best argument to adduce,—how much such ‘advice’ was required, and how thoroughly my humble efforts have been appreciated.

The present volume has been enlarged, revised, and improved, and, thus, I hope, will be still more worthy of the great success it has already obtained.

Among the additions, I may notice—*A Chapter on the Value of Chloroform in Hard and Lingered Labour.* The subject is most important and deeply interesting,—as the *moderate* use of Chloroform, in *proper* cases, robs labour of its dread, its pain, and its anxiety, and is a real blessing to the patient, the doctor, and to all concerned!

This work may be considered as a Companion Book to my other volume—*Advice to a Mother on the Management of her Offspring*; the one being *exclusively* on the Management of the Wife's own Health—the other on the Management of her Children's Health. The sale of the two works have far, very far, exceeded my most sanguine expectations, and have urged me on to renewed exertions to make them still more worthy of the immense patronage they have already received.

PYE HENRY CHAVASSE.

THE PRIORY HOUSE, OLD SQUARE,
BIRMINGHAM; *May*, 1864.

PREFACE TO FOURTH EDITION.

THIS work was not written to satisfy idle curiosity, but to give useful—nay, indispensable information,—not otherwise readily obtainable.

The *ignorance* of a Young Wife—in everything appertaining to her own health during the periods of pregnancy, labour, and suckling—loudly calls for a remedy.—If she alone had to suffer, it would be distressing; but, in addition to this, her innocent and helpless child is made the victim of her ignorance, which makes it lamentable indeed!

The diffidence of a Young Wife very much adds to the difficulty of applying a remedy.—She is usually too bashful and too sensitive to ask questions of a delicate nature; and, therefore, is compelled either to remain in ignorance, or to apply to a female friend for information, who, in the majority of cases, is as ignorant as herself in the matter.

What then is to be done? I reply,—that the only available resource is,—to give her *written directions*,—directions that she may read in private,—ponder over,—and readily understand.—These *written directions* I have attempted in the following pages.

The large sale of the book has more than answered my expectations, and has proved how much such a work is needed.

I have endeavoured in the Introductory Chapter—especially addressed to a Young Wife—to depict the folly and the danger of the present mode of spending the first year of married life, and have urged the importance of adopting a more rational system.—This, I have considered, not as a matter of choice, but of duty to herself, to her husband, and to her future offspring.

The subject of Menstruation is of immense importance; as, unless that function be properly performed, it is impossible, as a rule, that a woman can conceive.—I have, therefore, given a Young Wife such knowledge of the subject as she will find needful.

The present edition is much enlarged, greatly improved, and carefully revised.—I have put forth my best energies and endeavours to make it still more useful, and, thus, more deserving of public approbation.

PYE HENRY CHAVASSE.

THE PRIORY HOUSE, OLD SQUARE,
BIRMINGHAM; *April*, 1861.

CONTENTS.

	PAGE
INTRODUCTORY CHAPTER	1
PART I.	
MENSTRUATION	31
PART II.	
PREGNANCY	40
PART III.	
LABOUR	109
PART IV.	
SUCKLING	158

GOVERNMENT

PART I

PART II

PART III

PART IV

ADVICE TO A WIFE.

INTRODUCTORY CHAPTER.

1. It may be well—before I enter on the subjects of menstruation, pregnancy, labour, and suckling—to offer a few preliminary observations,—especially addressed to a Young Wife.

2. The present fashionable system of spending the first few months of married life in a round of visiting, of late hours, and in close and heated rooms, calls loudly for a change.—How many valuable lives have been sacrificed to such a custom! How many miscarriages, premature births, and stillborn children, have resulted therefrom! and how many homes have been made childless—desolate—by it! Time it is that common sense should take the place of such folly!

3. The first year of a married woman's life generally determines whether she shall be healthy and strong, or be delicate and weak for the remainder of her existence;—whether she shall be the mother of fine,

healthy children—or—if, indeed, she be a mother at all—of sickly, undersized offspring :—

“ Born but to weep, and destin’d to sustain
A youth of wretchedness, an age of pain.” *

If she be not a parent, she will be robbed of the greatest happiness this world can afford.—The delight of a mother, on first calling her child her own, is exquisite, and is beautifully expressed in the following lines :—

“ He was my ain, an’ dear to me
As the heather-bell to the honey-bee,
Or the braird to the mountain-hare.” †

4. I should recommend a young wife to consider the important mission she has to perform ; to ponder well on the importance of bringing healthy children into the world ;—to bear in mind the high duties that she owes herself, her husband, her children, and society !

5. A young married lady should, at once, commence to take regular and systematic exercise, which may be done without interfering with her household duties.—There are few things more conducive to health than walking exercise ; and one advantage of our climate, is, that there are but few days in the year in which, at some period of the day, it may not be taken.

* *The Nurse* ; a Poem. Translated from the Italian of Luigi Tausillo. By William Roscoe.

† *Good Words*, July, 1862.

6. Walking is even more necessary in the winter, than in the summer-time.—If the day be cold, and the roads dirty, provided it be dry above, I should advise my fair reader to put on thick boots and a warm shawl, and to brave the weather.

7. Even if there be a little rain and much wind,—if she be well wrapped up—neither the rain nor the wind will harm her. A little sprinkling of rain—provided the rules of health be followed—will not give her cold.—Much wind will not blow her away.—She must fight against it—if she wishes to be strong—the conflict will bring the colour to her cheek and beauty to her eye.

8. A breath of wind is not allowed to blow on many a fair face.—The consequence is, that the cheek becomes sallow and bloodless, or, if it has a colour, it is the hectic flush, which tells of speedy decay!

9. Sitting over the fire will spoil her complexion—causing it to be muddy, speckled, and sallow—and will make her chilly, nervous, and dispirited.—It will cause her to be more chilly, and, thus, will make her more susceptible of catching cold; and it will frequently produce chilblains.—If she be cold, the sitting over the fire will only warm her for the time, and will make her feel more starved when she leaves it.

cold

10. There is nothing like a long walk, to warm the body, and to make the blood course merrily through

the blood-vessels.—I consider it to be a great misfortune that my fair countrywomen do not use their legs more, and their carriages less.—“As to exercise, few women care to take it for mere health’s sake. The rich are too apt to think that riding in a close varnish-smelling carriage ought to be a very good substitute for muscular struggles in the open air.”* Unfortunately, this is an age of luxury. Everything is artificial, and disease and weakness follow as a matter of course.

11. If a lady has to travel half a mile, she must have her carriage! Strange infatuation! Is she not aware that she has hundreds of muscles that want exercising? that she has lungs that require expanding?—that she has nerves that demand bracing?—And how does she think that the muscles can be exercised, that the lungs can be expanded, and that the nerves can be braced,—unless these are all made to perform their proper functions by an abundance of walking exercise?

12. Does she desire to be strong? Then let her take exercise! Does she hope to retain her bloom, and her youthful appearance, and, still to look charming in the eyes of her husband? Then let her take exercise! Does she wish to banish nervousness and low spirits? Then let her take exercise!

* From a notice of *this Work* in *The Reader* of 14th February, 1863.

—There is nothing standing still in nature: if it were,—creation would languish and die! There is a perpetual motion! And so must we be constantly employed (when not asleep) if we are to be healthy and strong! Nature will not be trifled with; these are her laws, and we dare not infringe them with impunity!

13. If a newly-married woman be delicate—as unfortunately too many are—she may be made to bear exercise well, provided she will begin to take a short walk at first—be it ever so short—and gradually increase it, until she is able to take a tolerably long one.—She may find it irksome at first, and she may be inclined to give it up in despair; but, if she value her health and happiness, let me urge her to persevere, and she may depend upon it that she will be amply rewarded for her trouble.

14. Frequently a delicate lady complains of cold feet:—walking is the best remedy she can apply to warm them. If they be cold before retiring to rest—a frequent cause of keeping her awake—let her walk briskly about the hall, or the landing, or a large room, for half an hour, before undressing for the night.

15. The reason why my fair countrywomen take so much opening medicine, is,—the want of exercise.—How truly it has been said that,—“Physic, in most cases, is a substitute for either exercise or temperance.”

16. A newly-married woman should be cautious in the taking of horse-exercise.—As long as she is *not* pregnant, horse-exercise is very beneficial to health, and is a great enjoyment ; but the moment symptoms of pregnancy develop themselves, she must instantly give it up.

17. Let her breathe the pure air of heaven, rather than the close, contaminated air of an assembly, or a concert-room.—The air of an assembly, or a concert-room, is contaminated with carbonic-acid gas.—The gas-lights and the respiration of numbers of persons give off carbonic-acid gas,—which gas is highly poisonous.

18. The truth of this assertion is patent to every one, who will observe the effects that a large assembly—more especially in the evening—has on the system: the headache, the oppression, the confusion of ideas, the loss of appetite, the tired feeling—all tell a tale, and loudly proclaim that an assembly, or a concert-room, is not a fit place for a young married woman, who is desirous of having a family.

19. Let a young married lady attend well to the *ventilation* of her house.—She may depend upon it that ventilation—THOROUGH VENTILATION—will prove one of the best friends that she has in the world.—Let her give directions to her servant, to have every window in the house opened, early every morning: as the *morning* air is fresher and sweeter than it is later

in the day.—“For ventilation open your windows both at top and bottom. The fresh air rushes in one way, while the foul makes its exit the other. This is letting in your friend and expelling your enemy.”*

20. Let her give orders that every chimney in the house is unstopped; and mind that she sees, for herself, that her orders have been obeyed: for servants will stop up chimneys if they have the chance, as they are fully aware that dirt will come down chimneys, and that it will give them a little extra work to do.—But the mistress has to see to the health of herself and of her household, which is of far more consequence than a little extra trouble for her servants.

21. She may rest assured that IT IS UTTERLY IMPOSSIBLE FOR HERSELF AND FOR HER FAMILY TO HAVE PERFECT HEALTH IF THE CHIMNEYS ARE ALLOWED TO BE STOPPED.—I assert this fearlessly, for I have paid great attention to the subject.—If the chimney be stopped, the apartment MUST, necessarily, become contaminated with carbonic-acid gas—the refuse of respiration—which is, as I have before stated, a deadly poison

22. I unhesitatingly declare, that ninety-nine bedrooms out of every hundred are badly ventilated—that in the morning, after they have been slept in,

* *The Family Friend*, vol. i. London: Houlston and Stoneman.

they are full of impure and poisoned air.—I say, impure and poisoned air, for the air becomes foul and deadly, if not perpetually changed—if not constantly mixed with fresh, pure, external air, both day and night.—Many persons “are poisoned by their own breaths”—by breathing the same air over and over again! This is not an exaggerated statement, alas, it is too true!—“Now, this is the greatest difficulty that, in my humble character of ventilating missionary, I have to contend with; people did not actually recognise when the air *was* foul. They had been so long accustomed to live in an ill atmosphere that their physical (like, alas! many a moral) standard of purity had become degraded. Many a room that to me was stifling, was to them quite innocuous, or at least unnoticed. True, they felt its effect; they complained of headache, weariness, loss of appetite and spirits, and, above all, of the drowsiness which is the first sign of a vitiated atmosphere; but they attributed all these things to ill health or extraneous causes. It never entered their minds that the present evil was a want of fresh air. It never occurred to them that the reason why, enjoying lie enough in the day-time, they yet complained of ‘such bad nights,’ and found such difficulty in rousing themselves of a morning, was because the air that circulates round a sleeper at night should be *exactly as pure* as that which he breathes during the day. He may defend his body with as many blankets as he likes, just as he would with overcoats by daylight. He may shelter his eyes from light, and his head from draughty currents; but

he *must* have in the room a free circulation of absolutely pure air for his lungs to breathe; otherwise, during one-half of his existence—the nocturnal half—he might as well be in a baker's oven, a coal-mine, or a church vault. And that is the reason why so many of one's excellent friends, when they come down stairs in the morning, look exactly as if they *had* spent the night in either of these three rather undesirable apartments, instead of in an ordinary bedroom."*

23. Let her live in the country, if she can.—In a town,—coal fires, manufactories—many of them unhealthy—confined space, the exhalations from the lungs and from the skin of the inhabitants—numbers of them diseased,—all tend to load the air with impurities.—I consider the following remark of Dr. Grosvenor, in his excellent *Essay on Health*, very pertinent; he observes:—"Hence it is that one seldom sees in cities, courts, and rich houses, where people eat and drink, and indulge in the pleasure of appetite, that perfect health and athletic soundness and vigour which is commonly seen in the country, in the poor houses and cottages, where nature is their cook, and necessity is their caterer, where they have no other doctor but the sun and fresh air, and no other physic but exercise and temperance."

24. Cold air is frequently looked upon as an enemy,

* *Good Words—Give us Air!* By the author of 'John Halifax, Gentleman.' January, 1861.

instead of being contemplated, as, what it really is, to a healthy person—a friend.—The effect of cold upon the stomach is well exemplified in a walk, in frosty weather, producing an appetite.—“Cold air,” says Dr. Cullen, “applied with exercise, is a most powerful tonic with respect to the stomach; and this explains why, for that purpose, no exercise within doors, or in close carriages, is so useful as that in the open air.”

25. Hot and close rooms, soft cushions, and luxurious couches, should be eschewed.—I have somewhere read, that if a fine, healthy whelp, of the bull-dog species, were fed upon chicken, rice, and delicacies, and made to lie upon soft cushions, and if he were shut up in a close room for some months, that when he grew up, he would become unhealthy, weak, and spiritless.—So it is with a young married woman; the more she indulges, the more unhealthy, weak, and inanimate she becomes—unfit to perform the duties of a wife, and the offices of a mother.

26. Rich and luxurious ladies are less likely to be blessed with a family than poor and hard-worked women.—“Hippocrates,” says Dr. Tanner, in his recent, valuable work, “did not leave unnoticed the fact, however, that the labour and privation of the lowest sphere of life was as favourable to fertility as the indolence and affluence of the highest was adverse to it: and it still remains true, that the poorest and most industrious part of mankind are the most fruit-

ful.”*—Riches, in such a case, is an evil and a curse, rather than a good and a blessing.—“There is a sore evil which I have seen under the sun, namely, riches kept for the owners thereof to their hurt.”†

27. I consider morning *thorough* ablution of the body one of the most important means of health to a young wife; “while the poor, in the matter of washing, are apt to think that they can put off till Saturday what ought to be performed every day, and that they can wind up the week by a good wash with impunity.”‡—There is nothing more tonic and invigorating and refreshing than cold ablution.—Moreover it makes one feel clean and sweet and wholesome, and you may depend upon it, that it not only improves our physical constitution, but likewise our moral character, and makes our minds more pure and holy.—A dirty man has generally a dirty mind!

28. She must strip to the waist, and should then proceed to wash her face after the manner so well described by Erasmus Wilson, in his work on *Healthy Skin*. He says—“Fill your basin about two thirds full with fresh water; dip your face in the water, and then your hands. Soap the hands well, and pass the soaped hands with gentle friction over the

* *On the Signs and Diseases of Pregnancy*. By Thomas Hawkes Tanner, M.D., F.L.S.

† *Ecclesiastes* v, 13.

‡ From a notice of *this Work* in *The Reader* of 14th February, 1863.

whole face. Having performed this part of the operation thoroughly, dip the face in the water a second time, and rinse it completely; you may add very much to the luxury of the latter part of the process by having a second basin ready with fresh water to perform a final rinsing.....In washing the face you have three objects to fulfil; to remove 'the dirt, to give freshness, and to give tone and vigour to the skin."

29. Now for the remaining process of ablution:—having well rubbed the neck with the soaped hands, she must thoroughly bathe the neck, the chest, and the arms, by means of a large sponge dipped in cold water—the colder the better.—The wetted parts should be expeditiously dried.—Then, having thrown off her remaining clothes, and merely having her slippers on, she should sit, *for two minutes only*, in a sitz-bath,* containing water to the depth of three or four inches: while sitting in the bath, she should have a small blanket or a woollen shawl thrown over her shoulders.

30. At first until she becomes accustomed to the cold (which she will do in a few days), she should use the water *tepid*, but the sooner she can use *cold* water, and that plentifully, the better—as it will greatly contribute to her health and strength.—But, as I said before,—the process must be quickly performed, as it

* Which may be procured of any respectable ironmonger.

is the shock that does so much good, in bracing and strengthening the system.

31. When a lady is very delicate, it may be necessary, *during the winter*, to put a dash of *warm* water into the bath, in order to take off the *extreme* chill.—But as she becomes stronger, she will be able to dispense with the *warm* water,—as the colder the water is, provided she can bear it, the more good it will do her.

32. If her loins, or her back, are at all weak, the addition of a large handful of table-salt, to the water in the sitz-bath, will be of great service to her.

33. The moment she is out of the bath, she must quickly dry herself.—I should recommend her to use as a towel, the Turkish rubber: it will cause a beautiful glow of the whole body.

34. When practicable, it would be well for her, after she has finished dressing, to have a quarter of an hour's walk in the garden, in order to ensure a reaction and thus to cause a delightful glow of the whole circulation.

35. Oh if my fair reader did but know the value of thorough cold-water ablutions, she would not lose a day before giving the plan, I have above recommended, a trial.—It would banish all, or nearly all, her little ailments and nervousness; it would make her dis-

pense with many of her wrappings; it would keep her, in the winter-time, from coddling and cruddling over the fire; it would cause her to resist cold and disease; it would regulate her bowels if she were inclined to constipation; it would strengthen her back and loins; it would make her blooming, healthy, and strong; and it would fit her, in due time, to become the mother of fine, hearty, children! My reader must not fancy that I have overdrawn the picture—I have painted it from the life.—“I only tell what I do know, and declare what I do believe.”—Let me urge but a trial, and then my fair inquirer will have cause to be thankful that she has been induced to carry out my views, and I shall rejoice that I have been the means of her doing so.

36. A young married woman's diet should be simple, plain, and nourishing.—She must frequently vary the kind of food—of meat especially—as also the manner of cooking it.—Nature delights in variety of food, of air, and of exercise.—If a person were fed on one kind of meat for some considerable period, she could scarcely digest any other; and, in time, a disordered or a diseased stomach would be likely to ensue.

37. Three meals a day will be sufficient.—It is a mistaken notion to imagine that “little and often” is best.—The stomach requires rest as much as, or more than, any other part of the body, and how can it have rest if food be constantly put into it? There is

no part of the body more imposed upon than the stomach.

38. With regard to beverage, as a rule, there is nothing better than toast-and-water, or plain spring water if it be preferred, for dinner—

“Nought like the simple element dilutes,”*

and one or two glasses of sherry, or of claret, after dinner.—Sometimes, a lady cannot eat her dinner, until she has had a glass of wine; when such is the case, by all means let a glass of wine be taken—that is to say—let her have it just *before* or *during* dinner, instead of *after* dinner.

39. If wine does not agree, and if the patient requires a stimulant,—a tumbler of home-brewed ale, or, of the Burton bitter-ale, may be taken at dinner, instead of water.—But remember, if she drinks beer, or porter, she must take a great deal of out-door exercise; otherwise, the malt-liquor will make her bilious.

40. She must not, if she feels low, fly, on every occasion to wine to raise her spirits; but should try the effects of a walk in the country, and

“Draw physic from the fields in *draughts* of vital air.”*

41. A young wife should rise betimes in the

* Armstrong.

morning ; and must never doze after she is once awake.—Dozing is weakening to the body, and enervating to the mind.—It is a species of dram-drinking ; therefore, let my fair reader shun it with all her might.—Let her commence early rising as soon as she is married, let her establish the habit, and it will cling to her for life.—It is wonderful how much may be done betimes in the morning.—There is nothing like a good start,—it makes the occupation, for the remainder of the day, easy and pleasant :—

“ Happy, thrice happy, every one
 Who sees his labour well begun,
 And not perplexed and multiplied
 By idly waiting for time and tide !” *

42. How glorious, and balmy, and health-giving, is the first breath of morning—more especially to those living in the country. It is more exhilarating, invigorating and refreshing than it is all the rest of the day.—“ Young persons sometimes get into a very bad habit of lying in bed for some hours after the sun is up. They are asleep when creation is showing its wonderful beauties. They lose many pleasures which they might enjoy for nothing, and they are forming a habit which is likely to remain with them as long as they live. Make one fair trial of early rising, and you will be persuaded that I am right.....Early rising is good for the health. Most old people will tell you that they have been early risers. If you wish to have an appetite for your breakfast, go out in

* Longfellow.

season and brush away the early dew. A little exercise in these morning hours is better than a great deal at a later hour in the day.....Begin at once; everything must have a beginning. It will be a little hard at first, but it will be less and less so every day. Spring out of bed the moment you open your eyes. Never lie an instant after you awake and find it day. This will soon make it necessary for you to retire early, and you will not wake too early more than once or twice.”*

43. There is a perfect charm in nature which early risers alone can appreciate.—“There is a period in the summer’s morning, known only to early risers, which combines all the tenderness of the dawn with nearly all the splendour of the day.”†

44. Let a young wife—if she is anxious to have a family and healthy progeny—retire early to rest.—It is impossible that she can rise early in the morning, unless she retire early at night.—It must be borne in mind,—that a couple of hours’ sleep before midnight does more good than four hours afterwards.

45. She must pay particular attention to the ventilation of her sleeping apartment, and she herself must never omit to open the windows before leaving the room in the morning; and, in the summer, she should

* *Daily Duty*. London: Nelson and Sons.

† *Good Words*, October, 1861.

leave the upper window-sash open, for about three inches, during the night.—“If there be a dressing-room next to the bed-room, it will be well to have the dressing-room window, instead of the bed-room window, open at night.—The dressing-room door will regulate the quantity of air to be admitted into the bed-room,—opening it little or much, as the weather may be cold or otherwise.”* The idea that it will give cold, is erroneous; it will be more likely to prevent cold,—by strengthening the system and by carrying off the impurities from the lungs and skin.

46. It is madness to sleep in a room without ventilation,—IT IS INHALING POISON; for the carbonic acid gas—the refuse of respiration, which the lungs are constantly throwing off,—is a poison—a deadly poison—and, of course, if there be not ventilation, an individual must breathe this carbonic-acid gas mixed with the atmospheric air.—Hence the importance—the vital importance—of either an open chimney or of an open window, or of both.—The chimney, then, must NEVER be stopped, even if the window be closed; and the window, either of the bedroom or of the dressing room, should not be closed, even in the night, unless the weather be very wet or bitterly cold.

47. I should strongly recommend my fair reader, and indeed every one else, to peruse the good and the talented Florence Nightingale's *Notes on Nursing*.—

* Pye Chavasse's *Advice to a Mother*, Seventh Edition.

They should be written in letters of gold, and should be indelibly impressed on the memory of every one who has the interest of human life and happiness at heart.—Florence Nightingale declares,—**THAT NO ONE EVER TAKES COLD FROM PROPER VENTILATION WHILE IN BED.**—I believe her ; and I need not say, that no one has had more experience and better opportunities of judging about what she writes than this accomplished authoress.

48. I fearlessly assert, that no one can sleep sweetly and refreshingly, unless there be **THOROUGH** ventilation of the apartment.—A lady may have heavy, drowsy, death-like sleep, in an *unventilated* apartment ; and well she may !—She is under the stupefying effects of poison :—the carbonic-acid gas—which is constantly being evolved from the lungs, and which wants a vent, but cannot obtain it—is, as I have before remarked, a **DEADLY POISON !**

49. I, moreover, declare, that she cannot have sweet, refreshing sleep at night, unless she takes plenty of exercise, and unless she has an abundance of active useful occupation, during the day.

50. Occupation—active, useful occupation—is the best composing medicine in the world ; — and the misfortune of it is,—that rich ladies have little or no occupation to cause them to sleep ! Pleasure they have in abundance, but little or no real occupation. —“ The sleep of a labouring man is sweet, whether he

eat little or much : but the abundance of the rich will not suffer them to sleep.”*

51. Let me strongly caution the newly-made wife against the evil effects of tight-lacing.—The size of the waist ought to be, as a rule, from twenty-seven to twenty-nine inches in circumference ; therefore, if a lady binds and girds herself in, until she be only twenty-three inches, and, in some cases, until she be only twenty-one inches, it must be done at the expense of comfort, of health, and happiness.—If stays be worn tightly, they press down the contents of the lower part of the stomach, and may either prevent a lady from having a family, or may produce a miscarriage.†

52. Let her clothing be loose and be adapted to the season.—She must not adopt the fashion of wearing warm clothes with long sleeves in the morning, and thin dresses with short sleeves in the evening.

53. She must not coddle, nor should she muffle up her throat with furs.—Boas are the most frequent cause of sore throats, and, therefore, the sooner they are discarded the better.

54. If my gentle reader will use COLD water ablutions freely, she will find that she will not require nearly so much clothing.

* *Ecclesiastes* v, 12.

† I have entered so fully into the evil effects of tight-lacing in my other work—*Advice to a Mother*—that I consider it quite unnecessary to say more, in this place, on the subject.

55. Let the amusements of a newly-married wife be dictated by reason, and not by fashion.—She must avoid all recreations of an exciting kind, as depression always follows excitement.—I would have her prefer the amusements of the country to those of the town—such as, a flower-garden, botany, archery, bowls; everything, in fact, that will take her into the open air, and cause her to appreciate the pure, the simple, and the exquisite beauties of nature.

56. Oh! that my countrywomen should prefer the contaminated air of ball and of concert-halls and of close rooms, to the fresh and sweet and health-giving air of the country!—Hear what a talented writer says on the ill effects of breathing the air of public assemblies:—“The demon of all human assemblies is carbonic acid gas. All audiences, from a prayer-meeting down to a penny gaff, are doomed to be poisoned by their own breaths, at least in these northern countries, for the Athenians and Romans had their open-air theatres, and the Spaniards have their open-air bull-fights, and nowhere is the atmosphere so agreeable as in St. Peter’s, at Rome.”*

57. Let me, in this place, enter my strong protest against a young wife dancing.—It is one of the most dangerous amusements if she be anxious to have a family,—as IT IS A FRUITFUL SOURCE OF MISCARRIAGES.—And the misfortune is, that if she once mis-

* *Blackwood*, Nov., 1861.

carry, she may go on again and again, until her constitution is severely injured; and all hopes of her becoming a mother will be at an end.

58. The quiet retirement of her own home should then be her greatest pleasure, and her most precious privilege.—“Woman’s usefulness, and woman’s happiness, are especially connected with wedded life. There is something very beautiful in the Scriptural expression concerning a married woman. She finds *rest in the house of her husband.*”*

59. Home is, OR SHOULD BE, the kingdom of woman, and she should be the reigning potentate:—“That old order—God forbid it should ever change!—which ordained that women should be ‘keepers at home;’ happy rulers of that happy little world.”†

60. Cheerfulness, occupation, and healthy activity of mind cannot be too strongly recommended.—A cheerful happy temper is one of the greatest blessings a wife can have. The possession of such a virtue, not only makes herself, but every one around her happy. It gilds, with sunshine, the humblest dwelling; and often converts an indifferent husband into a good one.—“Oh! if such women did but know what comfort there is in a cheerful spirit! How the heart leaps up

* *The Protoplast.* London: Wertheim and Macintosh.

† *Mistress and Maid.* By the delightful author of *John Halifax, Gentleman*, in *Good Words*, June, 1862.

to meet a sunshiny face, a merry tongue, an even temper, and a heart which either naturally or, what is better, from conscientious principle, has learned to take all things on their bright side, believing that the Giver of life being all-perfect Love, the best offering we can make to Him is to enjoy to the full what He sends of good, and bear what he allows of evil!—like a child who, when once it thoroughly believes in its father, believes in all his dealings with it, whether it understands them or not. . . . Among the many secondary influences which can be employed either by or upon a naturally anxious or morbid temperament, there is none so ready at hand, or so wholesome, as that one incessantly referred to in the course of these pages,—constant employment. A very large number of women, particularly young women, are by nature constituted so exceedingly restless of mind, or with such a strong physical tendency to nervous depression, that they can by no possibility keep themselves in a state of even tolerable cheerfulness, except by being continually occupied. At what, matters little; even apparently useless work is far better for them than no work at all.”*

61. One of the greatest requisites, then, for a happy home—is a cheerful wife;—her face is a perpetual sunshine, her presence is that of an angel, she is happy in herself, and imparts happiness to all around her.

* *A Woman's Thoughts about Women.*

62. A gentle, loving, confiding, placid, hopeful and trusting disposition has a great charm for a husband, and should be assiduously cultivated by a young wife:—

“For gentleness and love and trust
Prevail o’er angry wave and gust.”*

63. Every young wife, let her station be ever so exalted, should attend to her household duties.†—Her health, and, consequently, her happiness, demand the exertion.

64. The want of occupation is a fruitful source of discontent, of sin,‡ and of disease.—If a young married woman did but know the importance of occupation,—how much misery may be averted and how much happiness may be ensured by attending to her household duties—she would appreciate the importance of the advice.—Occupation improves the health, drives away *ennui*, cheers the hearth and the home, and, what is most important—if household duties are well looked after—her house becomes a paradise, and she the ministering angel to her husband!

65. A husband soon becomes tired of grand per-

* Longfellow.

† A virtuous woman “looketh well to the ways of her household, and eateth not the bread of idleness.”—*Proverbs xxxi, 27.*

‡ “Hold idleness to be the mother of sin; it both robs thee of the good thou hast, and hinders thee of what thou hast not.”—“On some Guesses of Truth,” in *Good Words*, June, 1862.

formances on the piano, of crochet and worsted work, and of other fiddle-faddle employments ; but, he can always appreciate a comfortable, clean, well-ordered, bright, cheerful, happy home, and a good dinner!—It may be said, that a wife is not the proper person to cook her husband's dinner?—True!—But a wife should see and know that the cook does her duty ; and, if the wife did, perchance, understand *how* the dinner should be cooked, I have yet to learn, that the husband would think any the worse of her for such knowledge.—“And whenever the mistresses of small families will learn that good and careful cookery is quite as cheap as bad, and much more wholesome, and will condescend to go back not only to their great-grandmothers' hoops, but to their household receipt-books, they may venture to invite their personal friends without compunction to a pleasant family-dinner, to the great furtherance of real sociability, and get rid for ever of those annual or biennial festivals which are a burden to the weary souls of guests and entertainers.”*

66. As soon as a lady marries, the romantic nonsense of school-girls will rapidly vanish, and the realities of life will take their place, and she will then know, AND SOMETIMES TO HER COST, that a *useful* wife will be thought much more of than an *ornamental* one.

67. It is better for a young wife, and for every one

* *Blackwood*, March, 1863.

else, to have too much occupation than to have too little.—The misfortune of the present day, is—that servants are made to do *all* the work, while the mistress of the house remains idle!—Idleness is a curse, and brings misery in its train! How slow the hours crawl on when a person has nothing to do.—“Time flies rapidly with those who have more to do in the day than they can accomplish; and drags along as heavily with all who have no employment for their hours. Occupation is the great secret of cheerful days and tranquil nights; for she that is well employed while the sun is in the skies will not only enjoy much, but will most likely sleep soundly when the stars are shining above her. Occupation will often blunt the edge of the sharpest grief, keep the body in health, and preserve the mind in comparative peace.”*

68. Longfellow, in his *Song of the Blacksmith*, beautifully and graphically describes the importance and the value of occupation; and as occupation is as necessary to a woman as to a man, I cannot resist transcribing it:—

“Toiling,—rejoicing,—sorrowing,
 Onward through life he goes;
 Each morning sees some task begin,
 Each evening sees its close;
 Something attempted, something done,
 Has earned a night’s repose.”

* *Old Humphrey’s Addresses.*

69. Truly may it be said that “occupation earns a night’s repose.”—It is the finest composing medicine in the world, and, unlike an opiate, it never gives a headache, and never, by repetition, loses its effect.—Sloth and restlessness, even on down, are generally bed-fellows :—

“————— Weariness

Can snore upon the flint, when rusty sloth
Finds the down pillow hard.”

70. The mind, it is well known, exerts great influence over the body in promoting health, and in causing and in curing disease.

71. A delicate woman is apt to make mountains of mole-hills ; she is usually too prone to fancy herself worse than she really is.—I should recommend my gentle reader not to fall into this error, and not to magnify every slight ache or pain.—The following excellent observations are equally applicable to the fair sex :—“ Man doubles all the evils of his fate by pondering over them ; a scratch becomes a wound, a slight an injury, a jest an insult, a small peril a great danger, and a slight sickness often ends in death by brooding apprehensions.*

72. There is nothing like occupation—active occupation—to cure slight pains,—“ constant occupation physics pain,” to drive away little ailments, and the

* *The Family Friend*, vol. i. London: Houlston and Stoneman.

dread of sickness.—“The dread of sickness,” says Dr. Grosvenor, “is a distemper of itself, and the next disposition to a many more. What a bondage does this keep some [people in! ’Tis an easy transition from the fear and fancy of being sick to sickness indeed. In many cases, there is but little difference between those two. There is one so afraid of being ill that he would not stir out of doors, and for want of air and exercise he contracts a distemper that kills him.”

73. If a young married lady be delicate and nervous without having any actual disease upon her, there is no remedy equal in value to change of air; more especially to the sea-coast.—The sea-breezes, and sea-bathing if she be not pregnant, frequently act like magic upon her in restoring her to perfect health.—I say, if she be not pregnant; if she be, it would be highly improper for her to bathe without the express permission of a Medical man.

74. Should it not be practicable for her to visit the sea-coast, let her be in the fresh air—in the country air.—Let her mornings be spent out of doors; and if she cannot inhale the *sea* breezes, let her inhale the *morning*

“The skies, the air, the morning’s breezy call,
Alike are free, and full of health to all.”*

75. Cheerfulness and evenness of temper should

* Sir Egerton Brydges.

be especially cultivated by a young wife.—There is nothing that promotes digestion, and thus good health, more than a cheerful placid temper.—We know that the converse is very detrimental to that process :—that violent passion takes away the appetite, deranges the stomach, and frequently disorders the bowels.—Hence it is, that those who attain great ages are usually of an even, cheerful temper.—“ Our passions are compared to the winds in the air, which, when gentle and moderate, let them fill the sail, and they will carry the ship on smoothly to the desired port ; but when violent, unmanageable, and boisterous, it grows to a storm and threatens the ruin and destruction of all.”*

76. By adopting the dictates of reason and of common sense, many of the nervous, useless, lackadaisical, fine ladies will be unknown ; and we shall have blooming wives, who will, in due time, become the mothers of hardy, healthy, happy children.

77. As menstruation plays such an important part in the female economy, I purpose devoting the following chapter to its consideration.

* Dr. Grosvenor.

1870
The following is a list of the names of the persons who have been admitted to the office of Justice of the Peace for the year 1870. The names are given in alphabetical order, and the date of admission is given in parentheses. The names are given in full, and the date of admission is given in parentheses. The names are given in full, and the date of admission is given in parentheses.

The following is a list of the names of the persons who have been admitted to the office of Justice of the Peace for the year 1870. The names are given in alphabetical order, and the date of admission is given in parentheses. The names are given in full, and the date of admission is given in parentheses.

The following is a list of the names of the persons who have been admitted to the office of Justice of the Peace for the year 1870. The names are given in alphabetical order, and the date of admission is given in parentheses. The names are given in full, and the date of admission is given in parentheses.

The following is a list of the names of the persons who have been admitted to the office of Justice of the Peace for the year 1870. The names are given in alphabetical order, and the date of admission is given in parentheses. The names are given in full, and the date of admission is given in parentheses.

PART I.

MENSTRUATION.

78. MENSTRUATION—the appearance of the catamenia or the menses—is *the most important epoch* in a girl's life.—Her body now becomes developed and expanded, and her mental capacity is enlarged and improved.—She then ceases to be a child and she becomes a woman.—She is now for the first time, as a rule, able to conceive.

79. Although puberty has at this time commenced, it cannot be said that she is at her full perfection: it takes eight or ten years more to complete her organization,—which will bring her to the age of twenty-three or twenty-five years; which, perhaps, are the best ages for a woman, if she has the chance and the inclination, to marry.

80. If she marries very young, marriage weakens her system, and prevents a full development of the body: if she marries late in life, she has, for the first

time, usually, a hard and tedious labour, and, frequently, does not live to see her children grow up to be men and women.

81. Menstruation generally comes on once a month, that is to say—every twenty-eight days; usually to the day, and frequently to the hour.—Some ladies, instead of being “regular” every month, are “regular” every three weeks.

82. Each menstruation continues from three to five days; in some, for a week; and in others, for a longer period.—It is estimated that, during each menstruation, from four to six ounces is the quantity discharged.

83. A lady seldom conceives unless she is “regular.”—Although, there are cases on record where women have conceived who have never been “unwell:”—but these cases are extremely rare.

84. Menstruation usually commences, in this country, at the age of thirteen or of fifteen; sometimes, earlier; occasionally, as early as eleven or twelve; at other times, later, and not until a girl is seventeen or eighteen years of age.—In large towns, menstruation is supposed to commence at an earlier period than in the country; and earlier in luxurious than in simple life.*

* “In the human female, the period of puberty, or of com-

85. Menstruation continues for thirty, and sometimes even for thirty-five years ; and, while it lasts, is a sign that a lady is liable to become pregnant ; unless menstruation should be protracted much beyond the usual period of time.

86. As a rule, then, when a woman “ ceases to be unwell,” she ceases to have a family ; therefore, as menstruation usually leaves her at forty-five, it is seldom that she has a child after that age.

87. I have known ladies become mothers when they have been upwards of fifty years of age.—I myself delivered a woman, in her fifty-first year, of a fine healthy child.—She had a kind and easy labour ; and was the mother of a large family, the youngest being, at the time, twelve years old.* “ Dr. Carpenter, of

mencing aptitude for procreation, is usually between the thirteenth and sixteenth years ; it is generally thought to be somewhat earlier in warm climates than in cold, and in densely populated manufacturing towns than in thinly peopled agricultural districts. The mental and bodily habits of the individual have also considerable influence upon the time of its occurrence ; girls brought up in the midst of luxury or sensual indulgence undergoing this change earlier than those reared in hardihood and self-denial.”—*Dr. Carpenter's Human Physiology.*

* “ Some curious facts come to light in the Scotch Registrar-General's report in reference to prolific mothers. One mother, who was only eighteen, had four children ; one, who was twenty-two, had seven children ; and of two, who were only thirty-four, one had thirteen and the other fourteen children ; and, on the other hand, two women became mothers as late in life as at fifty-

Durham, tells us that he has attended in their confinements several women whose ages were fifty. 'I well recollect a case occurring in my father's practice in 1839, where a woman became a widow at forty-nine years of age. Shortly afterwards she married her second husband, and within twelve months of this time gave birth to her *first* child. These cases belong to the working classes. But I know of two others, where gentlewomen became mothers at fifty; one with her first child, the other with her eighth. I can say nothing of how they menstruated; but I know of a virgin in whom the catamenia appeared *regularly*, and undiminished up to and at the end of sixty.' Dr. Powell says, that he last year attended a woman in her fifty-second year; and Mr. Heckford, that he attended a woman who stated her age to be at least fifty; Mr. Clarke, of Mold, states that he has attended several women whose ages were upwards of forty-four, and that he lately delivered a woman of her first child at forty-eight. Mr. Bloxam, of Portsmouth, delivered at fifty-two in her first confinement, a woman who had been married thirty-five years."*

88. In very warm climates—near the tropics—girls menstruate when very young,—at ten or eleven years old; indeed, they are sometimes mothers at those ages. But, when it commences early, it leaves

one, and four at fifty-two; and one mother was registered as having given birth to a child in the fifty-seventh year of her age."

* *British Medical Journal*, Nov. 21st, 1863.

early; so that they are old women at forty.—“Physically, we know that there is a very large latitude of difference in the periods of human maturity, not merely between individual and individual, but also between nation and nation; differences so great, that, in some southern regions of Asia, we hear of matrons at the age of twelve.”*

89. Dr. Montgomery† brings forward some interesting cases of early maturity. He says,—

“Bruce mentions that in Abyssinia he has frequently seen mothers of eleven years of age; and Dunlop witnessed the same in Bengal. Dr. Goodeve, Professor of Midwifery at Calcutta, in reply to a query on the subject, said, ‘The earliest age at which I have *known* a Hindu woman bear a child is ten years, but I have *heard* of one at nine.’”

90. In cold climates—such as Russia—women begin to menstruate late in life, frequently not until they are between twenty and thirty years old; and, as it lasts on them thirty, or thirty-five years, it is not an unusual occurrence for them to bear children at a very advanced age,—even so late as sixty.—They are frequently not “regular” oftener than three or four times a year.

91. The menstrual fluid is not exactly blood, al-

* De Quincey.

† *Exposition of the Signs and Symptoms of Pregnancy.*

though it much resembles it both in appearance and in properties; yet, in the healthy state, it never clots, as blood does.—It is a secretion from the womb, and, when healthy, ought to be of a bright-red colour, in appearance very much like blood from a recently cut finger.*

92. The menstrual fluid ought not, as before observed, to clot.—If it does, a lady suffers great pain during menstruation.—Moreover, she seldom conceives until the clotting has ceased.—Therefore, in such a case, application must be made to a Medical man, who will soon relieve the above painful symptoms.

93. Menstruation ceases *entirely* in pregnancy; during suckling; and usually in diseased and in disordered states of the womb.—It also ceases in cases of extreme debility, and in severe illness, especially in consumption; indeed, in the latter disease—consumption—it is one of the most unfavourable of the symptoms.

94. It has been asserted, and by men of great ex-

* “The catamenial discharge, as it issues from the uterus [womb], appears to be nearly or quite identical with ordinary blood; but in its passage through the vagina, it becomes mixed with the acid mucus exuded from its walls, which usually deprives it of the power of coagulating. If the discharge should be profuse, however, a portion of its fibrin remains unaffected, and clots are formed.”—*Dr. Carpenter's Human Physiology.*

perience,—that sometimes a woman menstruates during pregnancy.—In this assertion I cannot agree ; it appears utterly impossible that she should do so.—The moment she conceives, the neck of the womb becomes plugged up by means of mucus ; it is, in fact, hermetically sealed.—My old respected and talented teacher—the late Dr. David D. Davis*—declared it to be quite impossible for menstruation to occur during pregnancy.—He considered that the discharge—which was mistaken for menstruation—arose from the rupture of some small vessels about the neck of the womb.

95. Some ladies—though comparatively few—menstruate during suckling ; when they do, it may be considered the exception, and not the rule.—In such instances, it is said that they are more likely to conceive.—Some persons have an idea, that the milk is sweeter and purer when a woman menstruates during lactation.—Such is an error.—Menstruation during suckling is more likely to weaken the mother, and, consequently, to deteriorate the milk.—It therefore behoves a parent never to take a wet nurse who menstruates during the period of lactation (suckling).

96. Sometimes a lady suffers severe pains just before and during her “poorly” times.—When such is the case, she seldom conceives until the pain be re-

* Dr. David D. Davis was Physician-Accoucheur in attendance at the birth of her present Majesty.

moved.—She must, therefore, apply to a Medical man, as relief may soon be obtained.

97. At other times, menstruation is too profuse,—which is unfavourable to her becoming a mother, and which is also weakening to her constitution, and thus tends to bring her into a bad state of health.—In such a case,—ABSENCE FROM HOME for five or six weeks, change of air to the coast, lying on a horse-hair mattress, scant clothing on the bed, thorough ventilation of the chamber, nourishing but not stimulating diet, freedom from excitement, shower-baths, sitz-baths, and sea-bathing, are desirable.

98. When a lady is not “regular,” and provided that she be not pregnant, she must immediately apply to a Medical man; as, she may depend upon it, that there is something wrong about her, and that she is not likely to become *enceinte** until menstruation is properly established.

99. When a woman is said to be “regular,” it is

* With regard to the origin of the word *enceinte*, Dr. Montgomery, in his valuable *Exposition of the Signs and Symptoms of Pregnancy*, observes:—“Many a one who confesses, with a smile or a blush, that she is *enceinte*, would do well to remember the origin of the word she uses. It was the habit of the Roman ladies to wear a tight girdle or cincture round their waist; but when pregnancy occurred, they were required by law, at least that of opinion, to remove this restraint; and hence a woman so situated was said to be *incincta*, or unbound, and hence also the adoption of the term *enceinte* to signify a state of pregnancy.”

understood,—that she is regular as to *quality*, and *quantity*, and *time*. If she is only “regular” as to the *time*, and the *quantity* is deficient or in excess, or if she is regular as to the *time*, and the *quality* is bad—either too pale or too dark—she cannot be well; and the sooner means are adopted to rectify the evil, the better will it be for her health and happiness.

100. As soon as a lady ceases to menstruate, it is said, that she has “a change of life,” and, if she does not take care, she will have “a change of health” which, probably, will be for the worse.—It is important, in such a case, that she should consult a Medical man on the subject, as he may, with judicious treatment, be able to ward off many serious diseases, to which she would otherwise be liable.

PART II.

PREGNANCY.

SIGNS OF PREGNANCY.

101. THE first sign that leads a lady to suspect that she is pregnant, is—her *ceasing to be unwell*.—This, provided she has been just before in good health, is a strong symptom of pregnancy; but, still, there must be others to corroborate it.

102. The next symptom is—*morning-sickness*.—This is one of the earliest symptoms of pregnancy; as it sometimes occurs a few days after conception, and, indeed, generally, not later than a fortnight or three weeks.—Morning-sickness is frequently distressing, oftentimes amounting to vomiting, and causing a loathing of breakfast.—After the first three or four months, this sign usually disappears.—Morning-sickness is not always present in pregnancy; but, nevertheless, it is a frequent accompaniment; and many who have had families, place more reliance on this symptom than on any other.

103. A third symptom is—*shooting, throbbing, and lancinating pains, and enlargement of the breasts, with soreness of the nipples*, occurring about the second month; and, in some instances, after the first few months, a small quantity of watery fluid, or a little milk, may be squeezed out of them.—This latter symptom, in a *first* pregnancy, is valuable, and [can generally be relied on as conclusive—that the female is pregnant.—In an *after* pregnancy, it is not so valuable, as a *little* milk may remain in the breast for some time after she has weaned the child even should she not be pregnant.

104. The veins of the breast look more blue, and are, consequently, more conspicuous than usual.—The breasts are firm, and are more knotty to the touch.—The nipples, in the majority of cases, look more *healthy* than customary, and are somewhat elevated and enlarged: there is generally a slight moisture upon their surface, sufficient, in some instances, to mark the linen.

105. A dark-brown areola, or disk, may usually be noticed around the nipple;* the change of colour commencing about the second month; at first, the colour is light-brown, which gradually deepens in intensity, until, towards the end of pregnancy, the

* “William Hunter had such faith in this sign that he always asserted he could judge by it alone whether or not a woman was pregnant.”—*Signs and Diseases of Pregnancy*.—Dr. Tanner.

colour may be very dark.—Dr. Montgomery, who has paid great attention to this subject, observes:—“During the progress of the next two or three months, the changes in the areola are in general perfected, or nearly so, and then it presents the following characters:—A circle around the nipple, whose colour varies in intensity, according to the particular complexion of the individual, being usually much darker in persons with black hair, dark eyes, and sallow skin, than in those of fair hair, light-coloured eyes, and delicate complexion. The area of this circle varies in diameter, from an inch to an inch and a half, and increases in most persons as pregnancy advances, as does also the depth of colour.”—The dark areola is somewhat swollen.—“There is,” says Dr. Montgomery, “a puffy turgescence, not alone of the nipple, but of the whole surrounding disk.”

106. A fourth symptom is—*quickenings*.—This usually occurs about the completion of the *fourth* calendar month; sometimes a week or two before the end of that period; at other times, a week or two afterwards.—Sometimes, a lady quickens as early as the *third* month, while others, although rarely, quicken as late as the *fifth*, and, *in very rare cases*, the *sixth* month.

107. Therefore it will be seen that there is an uncertainty as to the period of quickening; although, as I before remarked,—the *usual* period occurs on the completion of the *fourth* month of pregnancy.

108. A lady, at this time, frequently either feels faint, or actually faints away; she is often giddy, sick, or nervous, and, in some instances, even hysterical.—Although, in rare cases, some women do not even know the precise time when they quicken.

109. The sensation of “quickenings” is said, by many ladies, to resemble the fluttering of a bird.—“Quickening” arises from the ascent of the womb higher into the abdomen; as, from the increased size, there is not room for it below. The old-fashioned idea was, that the child was not alive until a woman had quickened.—This is a mistaken notion, as the child is alive, or “quick,” from the very commencement of its formation.

110. Hence the heinous and damnable sin of a single woman using means to promote abortion in the EARLY months of pregnancy: IT IS AS MUCH MURDER AS THOUGH THE CHILD WAS AT HIS FULL TIME, OR AS THOUGH HE WERE BUTCHERED WHEN HE WAS ACTUALLY BORN!

111. An attempt, then, to procure abortion is a crime of the deepest dye; viz., a heinous murder! Moreover, it is attended with fearful consequences to the mother's own health; it may either cause her *immediate* death, or it may so grievously injure her constitution, that she may never recover from the shock. She ought not to be pitied if these fearful consequences ensue, she richly deserves them all!

Our profession is a noble one, and every qualified member of it would scorn and detest the very idea of promoting or procuring abortion ;—but there are unqualified villains who practice the damnable art :—transportation for life—if not hanging—should be their doom.—The seducers, who often assist and abet them in their nefarious practices, should share their punishment.

112. Flatulence has sometimes misled a young wife to fancy that she has quickened ; but, in determining whether she be pregnant, she must never be satisfied with one symptom alone ; if she is, she will be frequently misled.

113. The fifth symptom is—*increased size and hardness of the abdomen* immediately after quickening.

114. The sixth symptom is—*pouting or protrusion of the navel*.—This symptom does not occur until some time after a lady has quickened.—Indeed, for the first two months of pregnancy, the navel is drawn in and depressed.—As the pregnancy advances, the navel gradually comes more forward.—“The navel, according to the progress of the pregnancy, is constantly emerging, till it comes to an even surface with the integuments of the abdomen ; and to this circumstance much regard is to be paid in cases of doubtful pregnancy.”*

* Dr. Denman.

115. *Sleepiness, heartburn, increased flow of saliva, toothache, loss of appetite, longings, excitability of mind, a pinched appearance of countenance, liver or sulphur coloured patches on the skin, and likes and dislikes in eating*—frequently accompany pregnancy; but, as they may arise from other causes, they are not to be relied upon, further than this—that if they attend the more certain signs of pregnancy—such as,—cessation of being “regular,” morning sickness, pains and enlargement of and milk in the breasts, the gradually darkening, brown areola around the nipple, &c.—they will then make assurance doubly sure, and a lady may know, for certain, that she is pregnant.*

CLOTHING.

116. A lady who is pregnant should on no account wear tight dresses—as the child must have plenty of room.—She should be as *enceinte* signifies—*incincta*, or unbound.—Let the clothes be adapted to the gradual development of the abdomen and the breasts.—She must wear her stays loose, whatever she may usually do.—If there be bones in the stays, let them be removed.—Tight-lacing is injurious both to the mother and to the child, and frequently causes the

* As this work is exclusively intended for the perusal of Wives, I have not pointed out one of the signs of pregnancy, which, to a Medical man, is very conclusive; I mean, the sounds of the foetal heart, indicated by the stethoscope.

former to miscarry ; at another time it has produced a cross-birth ; and, sometimes it has so pressed in the nipples, that where a lady has gone her time, she has been unable to suckle her infant—the attempt often causing gathered breasts.

117. The garters must be worn slack during pregnancy.—“Another article of dress too commonly worn, is not without its evils—tight garters, which add seriously to the annoyances caused by œdema [swelling] of the lower extremities, and by varicose veins.”*

ABLUTION.

118. A *warm* bath in pregnancy is too relaxing.—A *tepid* bath, once a week, is beneficial.—Sponging the body, with tepid water, every morning, may be adopted with safety and advantage ; gradually reducing the temperature of the water until it be used quite cold.—The skin should be quickly but thoroughly dried with a moderately coarse towel.

119. The *bidet*, or a *sitz-bath*,† should be used *every morning*.—The patient should not remain more than two minutes in the water ; and until she becomes accustomed to the cold, she may have a dash of warm

* Dr. Montgomery.

† The *bidet* may be procured of a cabinet-maker ; the *sitz-bath* of a furnishing ironmonger.

water added ; but the sooner she can use quite cold water the better.—While sitting in the bath she should throw a woollen shawl, or a small blanket, over her shoulders.—*She will find the greatest comfort and benefit from adopting the above recommendation.*—Instead of giving, it will prevent cold, and will be one of the means of warding off a miscarriage.

120. A shower-bath gives too great a shock in pregnancy, and may induce a miscarriage.—I should *not* recommend sea-bathing for a lady who is pregnant ; nevertheless, if she be delicate, and if she be prone to miscarry,—change of air to the coast, and inhaling the sea-breezes, may brace her, and ward off the tendency.—But although sea-bathing is not desirable, sponging the body with sea-water may be of great service.

AIR AND EXERCISE.

121. In her *first* pregnancy, a Young Wife usually takes *too long walks*.—This is a common cause of *flooding*, of *miscarriage*, and of *bearing down* of the *womb*.—Therefore, as soon as a lady has the *slightest suspicion* that she is *enceinte*, she must be careful in the taking of exercise.

122. Though long walks are injurious, she must not run into an opposite extreme :—short, gentle walks cannot be too strongly recommended during the whole period of pregnancy.—They prevent many of the unpleasant symptoms attendant on

that state ;—they keep her in health ;—they open the bowels ;—and they relieve that sensation of faintness and depression, so common and so distressing in early pregnancy.

123. Stooping, lifting of heavy weights, and overreaching, must be carefully avoided.—Running, horse-exercise, and dancing, are likewise dangerous,—they frequently induce a miscarriage.

124. Indolence is most injurious in pregnancy.—A lady who lolls on a sofa and on an easy chair during the greater part of the day, and who seldom walks out, has generally a more lingering and severe labour than she who attends to her household duties, and who takes moderate and regular exercise in the open air.

125. An active life is one, and the principal reason, why the wives of the poor have such quick and easy labours, and such good recoveries.

126. Bear in mind, then, that a lively,* active

* “And the king of Egypt called for the midwives, and said unto them, Why have ye done this thing, and have saved the men children alive ?

“And the midwives said unto Pharaoh, Because the Hebrew women are not as the Egyptian women ; for they are lively, and are delivered ere the midwives come in unto them.”—*Exodus*, i, 18, 19.

woman has an easier and quicker labour than one who is lethargic and indolent.

127. Sometimes a lady looks upon pregnancy more as a disease, than as a natural process—hence she treats herself as though she were a regular invalid, and, unfortunately, she too often makes herself really one by improper and foolish indulgences.

VENTILATION.

128. Let a lady look well to the ventilation of her house ; let her take care, that every chimney be unstopped, and that every window, in every unoccupied room, be thrown open during the day-time.

129. It is well, where there is a sky-light at the top of the house, to have it made to open and shut, so that in the day-time, it may, winter and summer, be always open ; and, in the summer time, that it may be open in the night, as well as in the day. **NOTHING SO THOROUGHLY VENTILATES A HOUSE AS AN OPEN SKY-LIGHT.**

130. If a lady did but know the importance—the vital importance—of ventilation,—she would see that the above directions were carried out to the very letter.—My firm belief is,—that if more attention were paid to ventilation—to thorough ventilation—

child-bed fever would be an almost unknown disease.

131. The cooping-up system is abominable: it engenders all manner of infectious and loathsome diseases, and not only engenders them, but feeds them, and, thus, keeps them alive.—There is nothing wonderful in all this, if we consider, but for one moment, that the exhalations from the lungs are poisonous! That is to say—that the lungs give off carbonic-acid-gas (a deadly poison), which, if it be not allowed to escape out of the room, must be breathed over and over again.—That, if the perspirations of the body (which in twenty-four hours amounts to several pints!) be not permitted to escape out of the apartment, must become fetid—repugnant to the nose, and injurious to the health.—Oh! how often the nose is a sentinel, and warns its owner of approaching danger!

132. Truly the nose is a sentinel!—The Almighty has sent bad smells for our benefit—to warn us of danger! If it were not for an unpleasant smell, we should be constantly running into destruction! How often we hear of an ignorant person using disinfectants to deprive drains and other horrid places, of their odours.—As though, if the place could be robbed of its smell, it could be robbed of its danger! Strange infatuation! No, cleanliness, a good scrubbing of soap and water and the air of heaven, are the best disinfectants in the world!

133. If a lady, while on an errand of mercy, should go into a poor person's bedroom, in the morning, after he, she, or they (for oftentimes the room is crowded), have been sleeping during the night, and, where a breath of air is not allowed to enter—the chimney and every crevice having been stopped up—and where too much attention has not been paid to personal cleanliness,—she will experience—a faintness, an oppression, a sickness, a headache, a terrible fetid smell; indeed, SHE IS IN A POISONED CHAMBER!—It is an odour *sui generis*, which must be smelt to be remembered, and never to be forgotten!—Pity the poor who live in such styes, not fit for pigs! For pigs?—Styes are ventilated! But, take warning, ye well-to-do in the world! and look well to your ventilation, or beware of the consequences!

NECESSITY OF OCCASIONAL REST.

134. A lady who is pregnant should lie on the sofa one or two hours a day, for half an hour each time.—This will be particularly necessary, if there be a bearing-down of the womb, or if there be a predisposition to miscarriage.—I should recommend this plan to be adopted throughout the whole period of pregnancy;—in the early months, to prevent a miscarriage; and,—in the latter months, on account of the increased weight and size of the womb.

135. Occasionally, there is a difficulty in lying

down during the latter months; the patient feeling as though she should be suffocated every time she makes the attempt.—When such is the case, she must rest herself upon the sofa, and be propped up with cushions; as I consider rest, at different periods of the day, necessary and beneficial.—If there be any difficulty in lying down at night, a bed-rest, well covered with pillows, will be found a great comfort.

DIET.

136. An abstemious diet, during the early period of pregnancy, is essential; as the habit of body, at that time, is usually feverish and inflammatory.—I should therefore recommend abstinence from malt-liquor, wine, and spirits. Let me in this place urge a pregnant female not to touch spirits—such as brandy or gin—during her pregnancy; they will only inflame her blood, and will poison and make puny her unborn babe, they will only give her false spirits, and will depress in an increased ratio as soon as the effects of the brandy or the gin have passed—which they will do rapidly—away.—She should only eat meat but once a-day.—Rich soups and highly seasoned stews are injurious.

137. A lady who is *enceinte* may therefore depend upon it,—that the less stimulants she takes at these times, the better it will be both for herself and for her infant, the more kind will be her labour and

her "getting about," and the more vigorous and healthy will be her child.

138. It is a mistaken notion, that she requires more nourishment during early pregnancy than at any other time; she, if anything, requires less.—It has been often asserted, that a woman who is pregnant should eat very heartily, as she has two to provide for! When it is taken into account, that during pregnancy she "ceases to be unwell" and therefore that there is no drain on that score, and when it is also considered how small the ovum containing the embryo is—not being larger for the first two or three months than a hen's egg,—it will be seen how futile is the assertion.—A mother, therefore, in early pregnancy, does not require more than at another time—if anything, she requires less. Again, during pregnancy, especially in early pregnancy, the patient is more or less feverish and irritable, and a superabundance of food would only add fuel to the fire, and increase her fever and her irritability. Moreover, she frequently suffers from heartburn and indigestion. Can anything be more absurd, when such is the case, to overload a stomach already oppressed with food which it is not able to digest?—No, let nature in this, as in every thing else, be her guide, and she will not then go far wrong! When a lady is further advanced in her pregnancy—that is to say—when she has quickened, her appetite generally improves, and she is much better in health than she was before; indeed, after she has quickened, she is frequently in better health

than she has ever been. The appetite is now increased; nature points out that she requires more nourishment than at first: for this reason,—the fœtus is now rapidly growing in size and consequently requires more support from the mother.—Let the food, therefore, of a pregnant woman be now increased in quantity, but let it be light and nourishing. Occasionally, at this time, she has taken a dislike to meat; if she has, she must not be forced to eat it, but may be let to have instead, poultry, game, fish, chicken-broth, beef-tea, new milk, farinaceous food—such as rice, sago, batter puddings—and, above all, if she has a craving for it,—good sound ripe fruit.

139. Roasted apples, ripe pears, raspberries, strawberries, grapes, tamarinds, figs, stewed prunes, the inside of ripe gooseberries, and the juice of oranges, are particularly beneficial during pregnancy: they quench the thirst and tend to open the bowels.

140. The food of a pregnant lady cannot be too plain;—high-seasoned dishes must, therefore, be avoided.—Although the food be plain, it must be frequently varied.—She should ring the changes upon butcher's meat, poultry, game, and fish.—It is a mistaken notion—that people should eat the same food over and over again—one day as another.—The stomach requires variety, or disease, as a matter of course, ensues.

141. Light puddings—such as rice and batter—or

fruit puddings—provided the paste be plain—may be taken with advantage.—Rich pastry is highly improper.

142. If she be plethoric, abstinence is still more necessary, or she may have a tedious labour and may suffer severely.—The old-fashioned treatment was—to bleed a pregnant patient if she were *plethoric*.—A more absurd plan could not be adopted! Bleeding would only increase the mischief, by causing more blood to be made; but, certainly, it would be blood of an inferior quality—watery and poor.—The best way to lessen the quantity of blood, is,—to moderate the supply of food.

SLEEP.

143. The bed-room of a pregnant lady should, if practicable, be large and airy.—Particular attention must be paid to the ventilation.—The chimney should on no account be stopped.—In the day-time, the door and the windows should be thrown wide open; and the bedclothes must be thrown back, that the air may well ventilate them before the night comes on.

144. It is a mistaken practice for a pregnant woman, or for any one else, to sleep with closely drawn curtains.—Pure air, and a frequent change of the air, is quite as necessary—if not more so—during the night as during the day: and how can it be pure and

how can it be changed if curtains are closely drawn around the bed? Impossible!

145. The bed must not be loaded with clothes—more especially with a thick coverlid.—If the weather be cold, let an *extra* blanket be put on the bed, as the perspiration can permeate through a blanket, when it cannot through a thick coverlid.

146. A lady who is pregnant is sometimes restless at night;—she feels oppressed and hot.—This might, in some measure, be remedied,—if the bed were not overloaded with clothes;—if the top-sash of the window were left open, to the extent of two or three inches;—or if the door of the bed-chamber were left ajar (the sky-light window at the top of the house being left open all night);—if more attention were paid to a gentle action of the bowels—by castor-oil, and to an abstemious diet;—to gentle walking exercise;—and to sponging the body with cold water;—and if she partook more of cooling fruits (see paragraph 139).

147. Sometimes a pregnant lady experiences an inability to lie down, the attempt producing, occasionally, a feeling of suffocation and of faintness.—Under such circumstances, she must lie on a bed-rest, which may be made comfortable by means of pillows; and she should take every night, at bed-time, a teaspoonful of sal-volatile in a wineglassful of water.

148. Pains at night, during the latter end of the time, are usually frequent; so as to make an inexperienced person fancy that her labour was commencing.—Little need be done; for unless the pains be violent, nature must not be interfered with.—If they be severe, application should be made to a Medical man.

149. A pregnant lady must retire early to rest;—she ought to be in bed, every night, by ten o'clock; and should make a point of being up in good time in the morning, that she may have an early breakfast; and that she may then take a short walk in the country, while the air is pure and invigorating.—But how often is an opposite plan adopted, more especially when a lady is first married!—The importance of bringing a healthy child into the world, if not for her own sake, should induce a wife to attend to the above remarks.

150. Although, some ladies, during pregnancy, are very restless, others are very sleepy, so that they can scarcely, even in the day, keep their eyes open!

MEDICINE.

151. A Young Wife is usually averse to consult a Medical man concerning several *trifling* ailments, which are, nevertheless, in many cases, distressing.—I have, therefore, deemed it well to give a brief

account of such *slight* ailments, and to prescribe a few *simple* remedies for them.—I say *simple*, for *active* medicines require skilful handling, and, therefore, should not—except in certain emergencies—be used except by a Doctor himself.

152. I wish it then to be distinctly understood, that in all *serious* attacks, and in slight ailments if not quickly relieved, a Medical man should *immediately* be sent for.

153. A costive state of the bowels is common in pregnancy; a *mild* aperient is, therefore, occasionally necessary.—The mildest should be selected: as a strong purgative is improper, and even dangerous.—Calomel, and all other preparations of mercury are to be especially avoided:—as a mercurial medicine is apt to produce a miscarriage.

154. An abstemious diet, where the bowels are costive, is more than usually desirable; for, if the bowels be torpid, a quantity of food will only clog them and make them more sluggish.—Besides, when labour comes on, a loaded state of the bowels will add much to a lady's sufferings and annoyance.

155. The best aperients are,—castor-oil,—salad-oil,—compound rhubarb pills,—honey,—stewed prunes,—figs,—grapes,—and roasted apples.

156. Castor-oil is a valuable aperient for a preg-

nant female.—Frequent and small—are preferable to occasional and large doses.—If the bowels be at all constipated,—castor-oil must be taken, regularly twice or three times a week.—Early in the morning is the best time for administering it.—The dose is,—from a teaspoonful to a dessert-spoonful.

157. The best ways of taking it, are the following :—Let a wine-glass be well rinsed out with water, so that the sides may be well wetted ; then, let the wine-glass be half filled with cold water,—fresh from the pump.—Let the quantity of oil, necessary, be now carefully [poured into the centre of the wine-glass, taking care that it does not touch the sides ; and, if the patient will drink it off at one draught, thus prepared, she will scarcely taste it.—Another way of taking it is,—swimming on warm new milk.—A third AND A GOOD METHOD is,—floating on *warm* coffee : the coffee should be previously sweetened and should be mixed with cream, in the usual way.—A fourth way of administering it is,—swimming on half a wine-glassful of orange juice.

158. Some ladies are in the habit of taking it in brandy and water ; but, the spirit is apt to dissolve a portion of the oil, and afterwards to rise in the throat.

159. If *salad-oil* be preferred, the dose must be, as much again as of castor-oil ; and, the patient should eat a fig or two, or a dozen or fifteen stewed prunes,

during the day she takes it: as salad-oil is much milder in its effects than castor-oil.

160. Where a lady cannot take oil,—one or two compound-rhubarb pills may be taken at bed-time; or,—a Seidlitz-powder, may be prescribed, early in the morning, occasionally.

161. A teaspoonful of honey, either eaten at breakfast, or dissolved in a cup of tea, will frequently open the bowels, comfortably and effectually, and will supersede the necessity of the patient taking a purgative medicine.

162. Let me again urge the importance of a lady being particular as to the state of her bowels, during the whole period of pregnancy,—as costiveness is a fruitful cause of difficult, of tedious, and hard labours.—It is my firm conviction,—that if patients, who suffer from constipation, were to attend more to the regularity of their bowels, that difficult cases of labour would rarely occur; more especially, if the simple rules of health were adopted, such as—the taking of exercise in the open air, attending to their household duties, avoiding excitement, late hours, and all fashionable amusements.

163. Where a lady cannot take medicine, or, where it does not agree, a good remedy for constipation in pregnancy, is—the *external* application of castor-oil to the bowels:—Let a cambric handkerchief, folded

in four thicknesses, be soaked in castor-oil, and be applied over the region of the bowels; it should be kept in its place by means of a long towel, or of a broad calico-bandage, or of a bolster-case.—It must be put on at bed-time, and should be allowed to remain on until the morning; and must be repeated every night until the bowels are relieved.—This remedy seldom fails, and is an agreeable way of opening the bowels.

164. Another excellent remedy for the costiveness of pregnancy, is—a lavement, or clyster, of warm water, which the patient may administer to herself, by means of a self-injecting enema-apparatus.—The quantity of warm water to be used is a pint; the proper heat, is, the temperature of new milk; the time for administering the lavement, is, early in the morning, twice or three times a week.

165. The advantages of lavements, are,—they never disorder the stomach,—they do not interfere with the digestion,—they do not irritate the bowels,—they are given with the greatest facility,—and they do not cause the slightest pain.—If lavements be used to open the bowels, it may be well—to occasionally give one of the aperients recommended above, in order to ensure a thorough clearance of the *whole* of the bowels.

166. *Diarrhœa*.—Although the bowels are generally costive in pregnancy; sometimes they are in an oppo-

site state, and are relaxed.—Now, this relaxation is frequently owing to their having been too much constipated, and nature is trying to relieve itself by purging.—Such being the case, a patient should be careful how she interferes with the relaxation,—by the taking of chalk and of astringents to check the purging.

167. The fact is, that in all probability, there is something in the bowels that wants coming away, and nature is trying all she can to relieve herself.—Sometimes she succeeds, if she is not unnecessarily interfered with.—At others, it is advisable to give an aperient to assist nature.

168. When such is the case,—a mild gentle aperient—such as castor-oil, or rhubarb-and-magnesia, should be chosen.—If castor-oil,—a tablespoonful, swimming on a little new milk, will generally answer the purpose.—If rhubarb-and-magnesia be the medicine selected, then a few doses of the following mixture will usually set all to rights :—

Take of—Powdered Turkey Rhubarb, one drachm ;
 Carbonate of Magnesia, two drachms ;
 Powdered Ginger, half a drachm ;
 Compound Tincture of Cardamoms, one ounce ;
 Peppermint water, seven ounces :

Three tablespoonfuls of the mixture to be taken three times a day, first shaking the bottle.

169. The diet must be simple, plain, and nourishing,

and should consist—of beef-tea, chicken-broth, arrow-root, and oatmeal gruel.—Meat, for a few days, should not be eaten; and stimulants, of all kinds, must be avoided.

170. If the diarrhœa be attended with pain in the bowels, a flannel bag filled with hot salt and then applied to the part affected, will afford great relief.—A Hot-water Bag, too, in a case of this kind, is a great comfort.* As soon as the diarrhœa has disappeared, the patient should gradually return to her usual diet.

171. *Heartburn* is a frequent and often a distressing symptom of pregnancy.—The acid, producing the heartburn, is frequently much increased by an overloaded stomach.—The patient labours under the mistaken notion,—that she requires more food during this than at any other time, as she has two to sustain;—she, consequently, is induced to take more than her appetite demands, and more than her stomach can digest—hence, heartburn, indigestion, &c., are caused; and her unborn babe, as well as herself, is weakened.

172. An abstemious diet must be strictly observed.—Great attention should be paid to the *quality* of the food;—greens, pastry, hot-buttered toast, melted

* The Hot-water Bag is composed of vulcanized India-rubber, and is made purposely to hold very hot water. Hooper's Elastic Bag for applying *dry* heat is also a useful invention.

butter, and everything that is rich and gross, must be carefully avoided.

173. A tea-spoonful of Henry's magnesia, or half a tea-spoonful of carbonate of soda—the former to be preferred if there be constipation—may be occasionally taken in a wine-glassful of warm water.—If these do not relieve—the above directions as to diet having been strictly attended to—the following mixture may be tried:—

Take of—Sesquicarbonate of Ammonia, half a drachm ;
Bicarbonate of Soda, a drachm and a half ;
Distilled Water, eight ounces :

To make a mixture.—Three tablespoonfuls to be taken twice or three times a day, until relief be obtained.*

Chalk is sometimes given in heartburn, but, as it produces costiveness, it must not be used.

174. *Piles* are a common attendant upon pregnancy.—They are small, soft, spongy, dark-red tumours, about the size of a bean or of a cherry, sometimes they are as large as a walnut,—and are either within or around the fundament,—they are, then—according to their situation—called either *internal* or *external* piles ; they may be either blind or bleeding.—If the latter, blood may be seen to exude from them, and blood will come away every time the patient has a stool.

* This mixture should be made by a chemist.

175. When the pile or piles are very large, they sometimes drag down a portion of the bowel, more especially every time she has a motion—which adds much to her sufferings.

176. If the bowel should protrude, it must be immediately and carefully returned, by means of the patient's index-finger, taking care that the nail is cut close, in order that it may not scratch the bowel.

177. Piles are very painful and are exceedingly sore, and cause great annoyance, and frequently continue, notwithstanding proper and judicious treatment, during the whole period of pregnancy.

178. A patient is predisposed to piles, from the womb pressing upon the blood-vessels of the fundament.—They are excited into action—by her neglecting to keep her bowels open; or—by diarrhœa; or—from her taking too strong purgatives—especially pills containing aloes.

179. If the piles be inflamed and painful, they must be well fomented, by means of a sponge, with hot camomile and poppy-head tea,* three times a day, for half an hour each time; and, at bed-time, a hot white bread poultice should be applied.

* Take four poppy-heads and four ounces of camomile-blows, and boil them in four pints of water, for half an hour—to make the fomentation—which should then be strained; and made quite hot, in a saucepan, when required.

180. Every time after and before the patient has a motion, she had better well anoint the piles and the fundament with the following ointment :

Take of—Camphor (powdered by means of a few drops of spirits of wine), half a drachm ;
 Prepared Lard, fifteen drachms and a half ;
 Mix, to make an ointment.

181. If there be great irritation and intense pain, —let some very hot water be put in a close-stool, and let the patient sit over it.—“In piles attended with great irritation and pain, much relief is often obtained by sitting over the steam of hot water, for fifteen or twenty minutes, and immediately applying a warm bread-and-milk poultice. These measures should be repeated five or six times a day (Greves).”*

182. If the heat be not great, and the pain be not intense,—the following ointment will be found efficacious.

Take of—Powdered Opium, one scruple ;
 Camphor (powdered by means of a few drops of spirits of wine), half a drachm ;
 Powdered Galls, one drachm ;
 Spermaceti Ointment, three drachms :
 Mix.—The ointment to be applied to the piles, three times a day.†

* Waring's *Manual of Therapeutics*.

† Let the ointments be made by a druggist.

183. If the heat and the pain be great, the following liniment will be found useful :

Take of—French Brandy ;

Glycerine, of each, half an ounce :

Mix.—The liniment to be applied, by means of camel's hair pencil, to the piles, frequently, first shaking the bottle.

184. The bowels must be kept gently and regularly opened—by one or two teaspoonfuls of Compound Confection of Senna, taken every morning, or—by the following electuary :—

Take of—Sublimed Sulphur, half an ounce ;

Powdered Ginger, half a drachm ;

Cream of Tartar, half an ounce ;

Confection of Senna, one ounce ;

Simple Syrup, a sufficient quantity :

To make an electuary.—One or two teaspoonfuls to be taken early every morning.

185. Magnesia and milk-of-sulphur taken early every morning, is an excellent remedy for piles :—

Take of—Carbonate of Magnesia ;

Milk of Sulphur, of each, three drachms ;

Mix.—To make nine powders. One to be taken early every, or every other, morning, mixed in half a teacupful of new milk.

186. Remember, in these cases, it is necessary to keep the stools in a *softened* state,—as *hard* lumps of stool would, in passing, give intense pain.

187. If the confection of senna, and the other remedies, do not act sufficiently, it may be well to give, once or twice a week, a table-spoonful of castor-oil.

188. In piles, if they are not much inflamed, and provided there be constipation, a pint of *cold* water, administered as an enema, early every morning—will be found very serviceable, as it will prevent costiveness, and will tend to brace and strengthen the lower bowel, and will thus cure the piles.—Of course, care and gentleness must be observed in introducing the enema-pipe (but which only requires ordinary care), in order not to press unduly on the surrounding piles.

189. The patient ought to lie down frequently in the day.—She will derive great comfort from sitting on a water-cushion—about half filled with water—placed on the chair; for sometimes she is unable to sit on an ordinary seat.

190. In piles, the patient should live on a plain, nourishing, simple, diet; but must avoid all stimulants;—any food or beverage that will inflame the blood will inflame the piles likewise.

191. Piles in pregnancy are frequently troublesome, and, sometimes, resist all treatment until the patient is confined, when they generally get well of themselves; but still, the remedies, recommended

above, will oftentimes afford great relief, even if they do not effect a cure.

192. *Swollen legs from enlarged veins.*—The veins are frequently much enlarged, causing the legs to be greatly swollen and painful; preventing the patient from taking proper walking exercise.—Swollen legs are owing to the pressure of the womb upon the blood-vessels above.—Women who have had large families are more liable to enlarged veins than others.—If a lady marries late in life, or if she is very heavy in her pregnancy, carrying the child low down,—she is more likely to have the veins to swell.

193. The best plan will be,—for her to wear an elastic-silk-socking,* which should be made on purpose for her, in order that it may properly fit the leg and the foot.—It will draw on like a common stocking.—She should wear a *gauze* stocking next the skin, and the *elastic* stocking over it.

194. If the varicose veins should be severe, she had better apply to a Medical man; as it may be necessary, in such a case, to have them enveloped in mild plaisters, and then rolled.

195. If the feet be cold as well as swollen,—a *flannel* bandage, two inches and a half wide and eight

* Which may be had of any respectable surgical instrument maker.

yards long, nicely applied from the toes to the knees, will be found a great comfort.—One great advantage that flannel has over calico, is, that it will keep in its place for days, while calico will be loose in an hour or two.

196. *Stretching of the skin of the abdomen* is frequently, especially in a first pregnancy, distressing, from the soreness it causes.—The best remedy is,—to rub the bowels, every night and morning, with warm olive-oil, and to apply a broad flannel belt, which should be put on moderately but comfortably tight.—The belt may be secured in its situation by means of properly adjusted tapes.

197. *If the skin of the abdomen be cracked* from the violent stretching,—the patient had better dress the part affected, every night and morning, with simple cerate, spread on lint; which must be kept in its place by means of a broad bandage, similar to the one used in confinements, and which is described in a subsequent paragraph (Bandage after Confinements).

198. *Pendulous bowels*.—Sometimes a lady suffers severely, from being unusually large at these times; so much so, that she cannot move about, without experiencing great inconvenience.—This is more likely to occur, where a patient is stout, and where she has had a large family of children; and, especially, if she has neglected proper bandaging of the bowels after her confinements.

199. In such a case,—she should procure from a surgical instrument maker, an elastic bandage, made purposely for pendulous bowels; which will be a support, without unduly pressing on the parts.—It is a good plan, to have the bandage made to lace behind, in order to accommodate the bowels to their gradually increasing size.

200. If the patient be delicate and has a languid circulation, she may apply, instead of the elastic bandage, a broad flannel bandage, which must go twice round the bowels, and should be put on moderately and comfortably tight.

201. *Before the approach of labour*, the patient must take particular care to have the bowels *gently* opened; as a costive state of them, during that time, greatly increases her sufferings, and lengthens the period of her labour,—I say, a *gentle* action is all that is necessary; a *violent* one would do more harm than good.

202. *Toothache* is a frequent complaint of pregnancy: and I wish to caution my gentle reader not to have a tooth extracted during the time she is *enceinte*: miscarriage, or premature labour, has frequently followed the extraction of a tooth.

203. If the tooth be decayed,—the hollow may be filled with cotton-wool, soaked in oil of cloves; or, in equal parts of oil of cloves and chloroform, and

which should be frequently renewed; or with what I have found an excellent remedy—a little alum dissolved in chloroform.*—If the above remedies do not relieve,—soak a small ball of cotton-wool in chloroform, and insert it inside the ear, and let it remain there until the pain be relieved: let it be renewed from time to time.—I have frequently found the above plan most efficacious in toothache, and to afford relief where other means have failed.

204. Creasote—spirits of tar—is sometimes applied; but of all remedies, it is the worst for the purpose.—I have known it, when thus used, severely injure and decay the whole of the remaining teeth.

205. If the tooth be not decayed—let an aperient be taken.—The state of the bowels must always be attended to; as, toothache is frequently relieved, and, where the tooth is not decayed, cured, by a dose of opening medicine.—Let the sides of the face be well fomented with hot camomile and poppy-head tea; and let a piece of crum of bread, soaked for five minutes in boiling milk, be placed inside the mouth; and let a large hot bread-poultice be applied to the side of the face at bed-time.

206. If the above does not have the desired effect,—a piece of brown paper—the size of the palm of the

* Half a drachm of powdered alum to three drachms of chloroform.

hand—soaked in brandy, and then well peppered with black-pepper, should be applied outside the cheek, over the part affected, and kept on for several hours.—It may be renewed from time to time.—This simple and old-fashioned remedy will sometimes afford great relief.—It is preferable to a mustard-poultice; as it is less painful, and it never blisters nor injures the skin.

207. In pregnancy, the teeth are very apt to decay—I have known patients, in several instances, to lose a tooth with every child!

208. Morning-sickness.—It is said to be ‘morning,’ as, in these cases, unless the stomach be disordered, it seldom occurs during any other part of the day.—Morning-sickness may be distinguished from the sickness of a disordered stomach,—by the former occurring only early in the morning—on the first sitting up in bed,—the patient during the remainder of the day feeling quite free from sickness, and, generally, being able to eat as though nothing ailed her.

209. Morning-sickness begins *early* in the morning with a sensation of nausea; and, as soon as the patient rises from bed, she feels sick and retches; and, sometimes, but not always, vomits a little, sour, watery, glairy fluid; and, occasionally, if she had eaten heartily before retiring to rest, the contents of the stomach is ejected. She then feels all right again, and is usually ready for her breakfast, which she eats with

her usual relish.—Many ladies have better appetites during pregnancy than at any other period of their lives.

210. The sickness of a disordered stomach unaccompanied with pregnancy may be distinguished from morning-sickness,—by the former continuing during the whole day,—by the appetite remaining bad after the morning has passed,—and by the tongue being generally furred.—Moreover, in such a case, there is, usually, much flatulence.—The patient not only feels, but looks, bilious!

211. Of course, if the stomach be disordered during pregnancy, there will be a complication of symptoms, and the morning sickness may become a day-and-night sickness.—Proper means must then be employed to rectify the disordered stomach, and the patient will soon have only the morning sickness to contend against; which, after she has quickened, will generally leave of its own accord.

212. Morning-sickness is frequently a distressing, although not a dangerous, complaint.—It is only distressing while it lasts, for after the stomach is unloaded, the appetite generally returns, and the patient usually feels quite well again, until the next morning, when she has to go through the same process as before.

213. It occurs both in the early and in the latter

months of pregnancy; more especially during the former, up to the period of quickening, *at which time it usually ceases*.—Morning-sickness is frequently the first harbinger of pregnancy, and is looked upon by many ladies who have had children, as a sure and certain sign.—Morning-sickness does not always occur in pregnancy; some women are neither sick nor sorry at such times!

214. A good way to relieve it, is,—by taking a cup of strong coffee, *before rising in the morning*.—If this should not have the desired effect, the patient may try an effervescing draught:—

Take of—Bicarbonate of Potash, one drachm and a half;

Water, eight ounces:

Two table-spoonfuls of this mixture to be taken with one of lemon-juice, every hour, whilst effervescing, until relief be obtained.

215. Sometimes, she does not obtain relief from her sickness until the whole contents of the stomach is brought up.—When such is the case,—she had better drink PLENTIFULLY of *warm* water, in order to encourage free vomiting.—Of course, such a plan is only advisable when the morning-sickness is *obstinate*, and when the treatment, recommended above, has failed to afford relief.

216. The morning-sickness is caused, during the early months,—by sympathy between the stomach and the womb; and during the latter months,—by

pressure of the upper part of the womb against the stomach ; as we cannot remove the sympathy and the pressure, we cannot always relieve the sickness ; therefore, the patient is sometimes obliged to bear with the annoyance.

217. The bowels should be kept gently opened, either—by a Seidlitz-powder taken in the morning, or—by two or three compound-rhubarb pills at bedtime, or—by the following mixture :

Take of—Carbonate of Magnesia, two drachms ;
Sulphate of Magnesia, one ounce ;
Peppermint-water, seven ounces :

A wineglassful of this mixture to be taken early in the morning occasionally, first shaking the bottle.

218. In such a case—great attention must be paid to the diet,—it should be moderate in quantity, and simple in quality.—Rich dishes, highly seasoned soups, and melted butter, should be avoided.—Hearty meat suppers must not, on any account, be allowed.—If anything be taken at night, there is nothing better than a teacupful of nicely made and well boiled oatmeal gruel, or of arrow-root, or of Arabica Revalenta.

219. It is an old saying, and, I believe, as a rule, a true one,—“ that sick pregnancies are safe ;” more especially if the sickness leaves, which it generally does, after she has quickened.—Of course, the above remarks do not include obstinate, inveterate vomiting ;

occurring, occasionally, in the latter period of pregnancy; and which, not only takes place in the morning, but during the whole of the day and of the night, and for weeks together; sometimes, bringing patients to the brink of the grave.—Luckily, these cases are extremely rare.—Another old and generally true saying is,—“that females who have sick pregnancies seldom miscarry.”

220. *Means to harden the nipples.*—A mother, especially with her first child, sometimes suffers severely from sore nipples.—Such suffering may frequently be prevented, if she were to bathe the nipples for six weeks, or for two months, before she is confined, every night and morning, for five minutes each time, either—with *Eau de Cologne*, or,—with brandy and water—equal parts of each; or,—with alum and water—half a drachm of alum to half a pint of spring-water,—which should be kept in a bottle.—A small portion only will be required each time.—The nipples must be covered with soft linen rag.—All pressure must be taken from the nipples; therefore, if the stays unduly press them—let the stays be enlarged or let them be entirely removed.—The nipples should be covered with soft linen rag; as the friction of a flannel vest would be apt to irritate them.

221. At times, during pregnancy, the *breasts are much swollen and very painful*; and, now and then, they cause the patient great uneasiness, as she fancies that she is going to have either some dreadful tumour,

or a gathering of the breast.—In such a case there need be no apprehension.—The swelling and the pain are the consequences of the pregnancy, and will, in due time, subside, without any unpleasant result.—The fact is, great changes are taking place in the bosom—the breasts are developing themselves and are preparing for the important functions they have to perform the moment the labour is completed.

222. *Treatment.*—The patient cannot do better than to well rub them, night and morning, with equal parts of *Eau de Cologne* and of olive-oil; and to wear a piece of new flannel over them; taking care to cover the nipples with soft linen; as, the friction of the flannel may irritate them.—The liniment encourages a little milky fluid to ooze out of the nipple, which will afford great relief.

223. If stays be worn, the patient must wear them slack; in order to allow the bosoms plenty of room to develop themselves.—The bones of the stays must all be removed, or serious consequences may ensue.

224. *Bowel-complaints* are not unfrequent during pregnancy.—A dose of rhubarb-and-magnesia, or—a dose of castor-oil, are the best remedies, and are, generally, in the way of medicine, all that is necessary.

225. The diet, at such times, must be simple, small

in quantity, and nourishing.—Farinaceous food, such as rice, tapioca, sago, Du Barry's Arabica Revalenta, and arrowroot, are particularly beneficial.—Green vegetables and fruits—especially stone-fruits—must be avoided.

226. The surface of the body—the bowels and feet particularly—should be kept warm.—If a lady suffer habitually from relaxation of the bowels, let her, by all means, wear a flannel vest next to the skin.

227. *The bladder.*—The patient is liable to various affections of the bladder during pregnancy.—Sometimes, there is a *sluggishness* of that organ, and the patient has little, or no inclination, to make water.—At another time, there is a *great irritability* of the bladder, and she is constantly wanting to pass urine.—While in a third case,—more especially towards the latter period of the pregnancy,—she can scarcely *hold her water* at all.—The slightest bodily exertion—such as, walking, stooping, coughing, sneezing, &c., causing it to come away involuntarily.

228. *A sluggish state of the bladder* is best remedied—by gentle exercise, and by the patient making the attempt to make water, whether she wants or not, at least every four hours.

229. *Irritability of the Bladder.*—The patient should drink freely of the following beverage :

Take of—Best Gum Arabic, one ounce ;

Pearl Barley, one ounce ;

Water, one pint and a half :

Boil for a quarter of an hour, then strain, and sweeten with lump sugar.

230. The bowels should be gently opened with small doses of castor-oil.—The patient must abstain from beer, wine, and spirits ; and should live on a mild, bland, nourishing diet.

231. *Where the patient cannot hold her water.*—There is not much to be done in such a case, as the pregnant womb by pressing on the bladder prevents much present relief.—The comfort is, as soon as the labour is over, it will cure itself.—The patient must lie down on a horse-hair mattress, or on a couch, frequently in the day.—She should drink but a moderate quantity of liquid, and if she has a cough (for a cough much increases this inability to hold her water) she may take the following mixture :

Take of—Compound Tincture of Camphor, half an ounce ;

Compound Spirits of Lavender, half a drachm ;

Oxymel of Squills, six drachms ;

Distilled Water, six ounces :

Three table-spoonfuls of this mixture to be taken three times a day.

232. *Fainting.*—A delicate female is apt to feel faint, or to actually faint away, when she is pregnant.—When it is considered,—the great changes that take place during pregnancy, and the pressure upon the

nerves and the blood-vessels,—it is not at all surprising that she should do so.—There is one consolation, that although fainting, at such times, is disagreeable, it is not dangerous.

233. *Treatment.*—If the patient feels faint,—she must *immediately* lie down, flat upon her back, without any pillow under the head—that is to say—the head should be on a level with the body.—The stays, and any tight articles of dress—if she has been foolish enough to wear tight clothes—must be loosened; the windows should be thrown wide open; water must be sprinkled on her face; and sal-volatile—a teaspoonful in a wineglassful of water—or a glass of wine, should be administered. Smelling-salts must be applied to the nostrils—The attendants—there should only be one or two present—must not crowd around her—as she should have plenty of room to breathe.

234. In the intervals, she must live on a good, light, generous diet.—She should keep early hours and must sleep in a well-ventilated apartment.—The following strengthening medicine will be found serviceable :

Take of—Sulphate of Quinine, ten grains;
 Diluted Sulphuric Acid, half a drachm;
 Syrup of Orange-peel, half an ounce;
 Distilled Water, seven ounces and a half:

Three table-spoonfuls of the mixture to be taken three times a day.

—If she be very delicate, a change to the country, or to the coast will be desirable.

235. A nervous patient is subject, during this period, to *palpitation of the heart*.—This palpitation, provided it occurs only during pregnancy, is not dangerous; therefore, it need not cause alarm.—It is occasioned by the pressure of the pregnant womb upon the large blood-vessels, which induces a temporary disarrangement of the heart's action.—This palpitation is generally worse at night—when the patient is lying down.—The reason is,—at these times, from the position, there is greater pressure on the blood-vessels.—Moreover, when she is lying down, the diaphragm—midriff—is pressed upwards, in consequence of the increased size of the abdomen, and hence the heart has not its accustomed room to work in, and palpitation is the result.

236. The best remedies will be, —either half a teaspoonful of compound spirits of lavender; or,—a teaspoonful of sal-volatile in a wineglassful of camphor julep.* Or a combination of lavender and sal-volatile :

Take of—Compound Spirits of Lavender, one drachm;
Sal Volatile, eleven drachms :

Mix.—A teaspoonful of the drops to be taken occasionally in a wineglassful of water.

* Camphor Julep may be made—by putting a few lumps of camphor in a bottle of cold water; cork it up, and let it stand for a few days; then strain it, sweeten it with lump sugar, and it will be fit for use.

237. These medicines should lie on a table by the bedside of the patient, in order that they may be administered at once, if necessary. Brandy is sometimes given in these cases, but it is a dangerous remedy to give *every* time there is palpitation; while the lavender and the sal-volatile are safe medicines and can never do the slightest harm.

238. Mental emotion, fatigue, late hours, and close rooms must be guarded against.—Gentle, out-door exercise, and cheerful, but not boisterous, company are desirable.

239. *Cramps* of the legs and of the thighs, especially at night, and during the latter period, are apt to attend pregnancy, and are caused—by the womb pressing upon the nerves which extend to the lower extremities.—*Treatment*.—Tightly tie a handkerchief—folded like a neckerchief—round the limb, a little above the part affected, and let it remain on for a few minutes.—Friction, by means of the hand, with opodeldoc, or with laudanum, (*taking care not to drink it by mistake,*) will also give relief.—Sometimes cramp attacks the bowels, or the back, of a pregnant woman; when such is the case, let a bag of hot salt, or a Hot-water Bag,* or a tin stomach-warmer; or a stone-

* A Hot-water Bag is composed of vulcanized India-rubber, and is made purposely to hold very hot water—boiling water. It must only be *half* filled with water, in order that it may adapt itself to the surface of the stomach and the bowels. It

bottle, filled with hot water, wrapped in flannel, be applied over the part affected, and let a stone-bottle of hot water, encased in flannel, be placed to the soles of the feet.—If the cramp of the bowels, or of the back, or of the thighs, be very severe, the following mixture will be serviceable :

Take of—Compound Tincture of Camphor, one ounce ;
Dill water, five ounces :

A wineglassful of this mixture to be taken at bedtime occasionally, and to be repeated in four hours, if necessary.

240. "*The whites*" are frequently troublesome during pregnancy, particularly if the lady has had many children, and especially during the latter months; and are, in a measure, owing to the pressure of the womb, on the parts below, causing irritation; therefore, the best way to obviate such pressure, is, for the patient to lie down on a bed, or on a sofa, a great part of each day.

241. She must retire early to rest, she should sleep on a horse-hair mattress, and in a well-ventilated apartment, and she must not overload her bed with clothes.—A thick, heavy quilt, is particularly objectionable, at these times, and indeed at all times,—

is a most delightful stomach warmer and comforter, and should be in every house where there is a family. One great advantage of it, is, that it is ready for use in a few minutes. It may be procured at William Hooper's, 7, Pall mall East, London, or at any respectable India-rubber Warehouse.

the perspiration cannot pass readily through it as it can through blankets, and, thus, the patient is weakened.—She ought to live on plain, wholesome, nourishing food; but she must abstain from beer and wine and spirits.—The bowels should be gently opened by means of a Seidlitz powder, which may be taken early in the morning, occasionally.

242. The best application will be,—to bathe the parts with warm Fuller's earth and water; in the proportion of a handful of *powdered* Fuller's earth to half a wash-hand-basinful of warm water; and the internal parts must be bathed with it, night and morning.—If the Fuller's earth should not have the desired effect,—an alum injection* should be syringed up the parts, by means of an India-rubber vaginal syringe,† every night and morning. Or,—fifteen drops of solution of diacetate-of-lead should be added to a quarter of a pint of lukewarm water, and should be used in a similar manner as the alum injection.

243. Cleanliness cannot be too strongly urged in these cases.—INDEED, EVERY FEMALE, EITHER MARRIED OR SINGLE, SHOULD USE THE BIDET OR A SITZ-BATH, EVERY MORNING OF HER LIFE.—If she has

* Dissolve half a teaspoonful of powdered alum in a quarter of a pint of tepid water—to make the injection.

† Which may be procured either of a surgical instrument maker or of an India-rubber manufacturer.

not the "whites," or if she has them only slightly, *cold*—quite cold—water is preferable to tepid.—I should advise, then, EVERY lady—married and single—whether she has "the whites" or not—a regular sitz-bath* *every morning* (except during her "poorly times")—that is to say—I should recommend her to sit in the water—in cold water—for a couple of minutes every morning; throwing a small blanket or a shawl over her shoulders the while.—For the first few mornings, she should make the water lukewarm; but the sooner she can use it cold—quite cold—the more good will it do her.

244. IF THE ABOVE PLANS WERE MORE GENERALLY FOLLOWED, WOMEN, OF ALL CLASSES AND AGES WOULD DERIVE IMMENSE BENEFIT FROM THEIR ADOPTION, AND MANY SERIOUS DISEASES WOULD BE WARDED OFF.

245. Where a lady suffers severely from the "whites," she should visit the coast.—There is nothing, generally, that affords so much relief, in such cases, as the bracing effects of sea-air.—Of course, if she is pregnant, she must not bathe in the sea; but she should bathe the external parts, every night and morning with sea-water.

246. When the patient has been much weakened by the "whites," she will derive benefit from a quinine

* See pages 12, 46, and 87.

mixture*—a dose of which must be taken twice or three times a day.

247. *Irritation and itching of the external parts.*—This is a most troublesome affection, and may occur at any time of the pregnancy, but more especially during the latter period; and, as it is a subject that a lady is too delicate and too sensitive to consult a Medical man about, I think it well to lay down a few rules for her relief.—If not relieved, the misery it entails is almost past endurance.

248. Well, then, in the first place, let her diet be simple and nourishing; let her avoid stimulants of all kinds.—In the next place—and this is a most important item of treatment—LET HER USE A TEPID, SALT AND WATER SITZ-BATH.†

249. The way to prepare the bath, is, to put a large handful of table-salt into the sitz-bath, then to add cold water, to the depth of three or four inches, and sufficient hot water to make the water tepid or lukewarm.—The patient must sit in the bath; her slippered feet being, of course, out of the water, and on the ground, and a woollen shawl, or a small blanket, being thrown over her shoulders.—She should remain in the bath only TWO minutes.—PATIENTS GENERALLY

* See page 81.

† Which sitz-bath may be procured of any respectable tinman or furnishing ironmonger.

DERIVE GREAT COMFORT FROM THESE SALT AND WATER SITZ-BATHS.

250. During the day-time, if the itching continues, the following lotion should be used :

Take of—Solution of Diacetate of Lead, one drachm ;
 Rectified Spirits of Wine, one drachm ;
 Distilled water, one pint :

To make a lotion.—The parts affected to be bathed with the lotion, three or four times a day.—Or, the parts may be bathed, two or three times a day, with vinegar and water—equal parts of each.

MISCARRIAGE.

251. If a premature expulsion of the child occurs before the end of the seventh month, it is called—a *miscarriage*—or an *abortion* ; if between the seventh month and before the *full* period of nine months—a *premature labour*.

252. There is a proneness for a young wife to miscarry, and woe betide her, if she once establishes the *habit* ! for it, unfortunately, often becomes a habit.—A miscarriage is a serious calamity, and it should be considered in that light ;—not only to the mother herself, whose constitution frequent miscarriages might seriously injure, and eventually ruin ;—but it might rob the *wife* of one of her greatest earthly privileges, blessings, and joys—the inestimable pleasure and delight of being a *mother* !

253. Now, as miscarriages might GENERALLY be prevented, it behoves a wife to look well into the matter, and to study the subject THOROUGHLY for herself, in order to guard against her FIRST miscarriage; for the FIRST miscarriage is the one that frequently leads to a SERIES.—How necessary it is that the above important fact should be borne in mind! How much misery might be averted; as, then, means would be taken to ward off such an awful calamity—by avoiding the usual causes.—I AM QUITE CONVINCED THAT IN THE MAJORITY OF CASES, MISCARRIAGES MIGHT BE PREVENTED.

254. Hence the importance of *popular* works of this kind,—to point out dangers,—to give judicious advice,—that a wife may read, ponder over, and “inwardly digest,”—and that she may see the folly of the present practices that wives—young wives, especially—usually indulge in,—and, thus, that she may avoid the rocks they split on, which makes a shipwreck of their most cherished hopes and treasures!

255. Let it, then, BE THOROUGHLY UNDERSTOOD,—first, that miscarriages are very weakening—more debilitating than labours;—and, secondly, that if a lady has once miscarried, she is more likely to miscarry again and again; until, at length, her constitution is broken; and the chances of her having a child become small indeed!

256. *Causes.* A slight cause will frequently affect

the separation of the child from the mother; and the consequent death and expulsion of the child; hence the readiness with which a woman sometimes miscarries.—The following are the most common causes of a young married lady miscarrying:—Taking *long* walks; riding on horseback; or in carriages over rough roads; *long* railway journeys; over-exerting herself, and sitting up late at night.—Her mind, just after marriage, is frequently too much excited—by large parties, balls, and concerts.

257. Moreover, the following are frequent causes of miscarriage:—Falls; all violent emotions of the mind, passion, fright, &c.; fatigue; over-reaching; sudden shocks; taking a wrong step in ascending, or in descending stairs; falling down stairs; lifting heavy weights; violent drastic purgatives; calomel; obstinate constipation; debility of constitution; consumptive habit of body; fashionable amusements; dancing; late hours; tight-lacing; indeed everything that injuriously affects either the mind or the body.

258. The old maxim, that “prevention is better than cure,” is well exemplified in the case of a miscarriage.—Let me, then, appeal strongly to my fair reader, to do all she can to prevent such a catastrophe—by avoiding the usual causes of a miscarriage, which I have above enumerated.—A miscarriage is no trifling matter,—it is one of the most grievous accidents that can occur to a woman, and is truly a catastrophe!

259. *Threatening or warning symptoms of a miscarriage.*—A lady, about to miscarry, usually experiences, for one or two days, a feeling of lassitude, of debility, and of depression of spirits; she feels as though she were going to be taken “poorly;” she complains of weakness and of uneasiness about the loins, the hips, the thighs, and the lower part of the bowels.—This is an important stage of the case, in which a judicious Medical man may, almost to a certainty, be able to stave off a miscarriage.

260. *More serious, but still only threatening symptoms of a miscarriage.*—If the above symptoms are allowed to proceed—unchecked and untended—after a day or two, she will have a slight show of blood; this show may soon increase to a flooding, which will shortly become clotted.—Then, perhaps, for the first time, she begins to dread a miscarriage! Even now, there may be but little pain, and, even now, the miscarriage *might*, with judicious treatment, be warded off.—At all events, if the miscarriage cannot be prevented, the ill effects to her constitution may, with care, be palliated, and means may be used to prevent a future miscarriage.

261. *Decided symptoms of a miscarriage.*—If the miscarriage is still proceeding, a new train of symptoms develop themselves,—pains begin to come on—at first, slight, irregular, and of a “grinding” nature, but which soon become more severe, regular, and “bearing down.”—Indeed, the case is, now, a labour

in miniature ; it becomes *le commencement de la fin* ; the patient is sure to miscarry, as the child is now dead and is separated from its connexion with the mother.

262. The most usual time for a lady to miscarry, is—from the eighth to the twelfth week.—Of course, it is not confined to this period ; as, during the whole time of pregnancy, there is a chance of a premature expulsion of the contents of the womb.—A miscarriage *before* the fourth month, is attended with little danger *at the time* ; although, if neglected, it may injure the constitution for *ever*.

263. There is, in every miscarriage, more or less of flooding, which is *the* most important symptom.—*After* the fourth month it is accompanied with more risk ; as the further a lady is advanced in her pregnancy,—the greater is the danger of *increased* flooding ; notwithstanding, under judicious treatment, there is every chance of her doing well.

264. A Medical man must always be sent for in such a case.—There is as much, or more, care required in a miscarriage, as in a labour.

265. *If bearing down, expulsive pains*—similar to labour pains—should accompany the flooding ;—if the flooding increases and large clots come away ;—if the breasts become smaller and softer ;—if there be coldness and heaviness and diminution in the size of the

bowels;—if the motion of the child (the patient having quickened) cannot be felt;—if there be “the impression of a heavy mass rolling about the uterus [womb], or the falling of the uterine tumour from side to side in the abdomen, as the patient changes her position;”*—and if there be an unpleasant discharge,—she may rest assured that the child is dead, and that it is separated from all connexion with her, and that the miscarriage **MUST** proceed, it being only a question of time.—Of course, in such a case,—if she has not already done so,—she should *immediately* send for a Medical man.—Sometimes, a miscarriage begins and ends in a few days—five or six;—at other times, it continues a fortnight, and, even, in some cases, three weeks.

266. *Treatment.*—If a patient has the slightest “show,” she must immediately confine herself either to a sofa, or she must keep in bed.—A soft feather bed should be avoided; it enervates the body, and predisposes to miscarriage.—There is nothing better for her to sleep on than a horse-hair mattress.—She must lie flat upon her back; as it is quite absurd for her merely to rest her legs and feet.

267. Let her put herself on a low diet,—taking nothing but arrowroot, tapioca, sago, gruel, tea, toast-and-water, or lemonade; and, whatever she does drink

* Tanner, *on Signs and Diseases of Pregnancy.*

must be cold.—Grapes, at these times, are very cooling and refreshing.

268. The temperature of the apartment should be kept cool ; and, if it be summer, the window ought to be thrown open ; aperient medicines **MUST** be avoided ; and, if the flooding be violent,—cold water should be applied, externally, to the parts.

269. Let me strongly urge upon the patient, the importance of preserving *any* substance that may come away ; in order that it may be carefully examined by the Medical man.—If such be not done, she may fancy that she has miscarried, when only clots have come away, and ill consequences may follow.

270. The same care is required *after a miscarriage*, as after a labour ; indeed, a patient requires to be treated much in the same manner—that is to say—she must keep her bed for a few days ; and should live upon an abstemious diet, such as—gruel, tea, and light puddings ; avoiding stimulants of all kinds.—Many women date their ill state of health to a *neglected* miscarriage ; therefore, it behoves a lady to guard against such a catastrophe.

271. A patient who is subject to miscarry, should, *before* she become pregnant again, use every means to brace and strengthen her system.—The best plan that she can adopt, will be,—to leave her husband for **SEVERAL MONTHS**, and to go to some healthy spot ;

not to a fashionable watering-place, nor to a friend's house where much company is kept, but to some quiet country place,—if to a healthy farm-house, so much the better.

272. Early hours are quite indispensable.—She must lie on a horse-hair mattress, and she should have but scant clothing on the bed.—She must sleep in a well ventilated apartment.—Her diet should be light and nourishing.—GENTLE exercise ought to be taken, which must alternate with frequent rest.

273. Cold ablutions must be used every morning, and the body should be afterwards dried with a coarse cloth ;—if it be winter, let the water be made tepid, and let its temperature be gradually lowered until it be used quite cold.—A shower-bath is serviceable in these cases ; it braces and invigorates the system, and is one of the best tonics that she can use.

274. *If she be already pregnant,*—it would not be admissible, as the shock of a shower-bath would be too great, and may bring on a miscarriage ; but still, *she should continue the cold ablutions.*

275. A lady who is prone to miscarry,—should, *as soon as she is pregnant,* lie down a great part of every day ;—must keep her mind calm and unruffled ;—should live on a plain diet ;—must avoid wine and spirits and malt-liquor ; should retire early to rest ;—

AND MUST HAVE A SEPARATE SLEEPING APARTMENT;—should abstain as much as possible, from taking opening medicines;—and, if she be actually obliged to take aperients—for the bowels must not be allowed to be constipated—should select the mildest (such as castor-oil or lenitive electuary),—and even of these she must not take a larger dose than is absolutely necessary; as a *free* action of the bowels is a frequent cause of a miscarriage.

276. The *external* application of castor-oil, as recommended at page 60, is an excellent and a safe remedy for a patient prone to miscarry; and, in the majority of cases, is even preferable to the mildest aperients.—Another great advantage of the *external* application of castor-oil, is—it does not produce constipation afterwards, as the *internal* administration of castor-oil is apt to do.—If the *external* application of castor-oil should not have the desired effect, then,—a lavement—a clyster—of warm water—a pint—may be administered in the morning, two or three times a week.

277. Gentle, walking exercise, daily, is desirable: *long* walks and horse-exercise, must be sedulously avoided.—A trip to the coast, provided the railway journey be not very long, would be likely to prevent a miscarriage; though, I would not, on any account, recommend such a patient either to bathe, or to sail on the water; as, the shock of the former would be too great, and the motion of the vessel and the sea

sickness would be likely to bring on what we are anxious to avoid.

278. As the *usual* period for miscarrying takes place (for it frequently comes on at one particular time), let the patient be more than usually careful; let her lie down the greatest part of the day; let her mind be kept calm and unruffled; let all fashionable society and exciting amusements be eschewed; let both the sitting and the sleeping apartments be kept cool, and well ventilated; let the bowels (if they be costive) be opened by lavements (if the *external* application of castor-oil—as before recommended—be not sufficient); let the diet be simple, and yet be nourishing; let all stimulants—such as beer, wine, and spirits—be, at this time, avoided; and, if there be the slightest symptoms of an approaching miscarriage—such as pains in the loins, in the hips, or in the lower bowels, or if there be the slightest show of blood—let a Medical man be INSTANTLY sent for,—as he may, at an early period, be able to ward off the threatened catastrophe.

FALSE-LABOUR-PAINS.

279. A lady, especially in her first pregnancy, is sometimes troubled with *spurious labour pains*; these pains usually come on at night, and are, frequently, owing to a disordered stomach.—They affect the bowels, the back, and the loins, and, occasionally, they extend down the hips and the thighs.—They attack

first one place and then another; they come on at irregular intervals; at one time, they are violent; at another they are feeble.—The pains, instead of being *grinding* or *bearing down*, are more of a colicky nature.

280. Now, as these false-pains more frequently occur in a first pregnancy, and as they are often more violent two or three weeks towards the completion of the full time, and as they usually come on at night, or in the night,—it behoves the patient, and the monthly nurse, to be cognizant of the fact; in order that they may not make a false alarm, and summon the Doctor, before he is wanted, and when he cannot be of the slightest benefit to the patient.

281. Sometimes, it is stated, that a woman has been in labour two or three weeks before the child was born!—Such is not the fact.—The case in question is one of *false* pains ending in *true* pains.

282. *How, then, is a patient to know that the pains are false and are not true pains?*—False labour-pains come on two or three weeks *before* the full time; true labour-pains *at* the completion of the full time; false pains are unattended with “show;” true pains generally commence the labour with “show;” false pains are generally migratory,—first attacking the loins, then the hips, then the lower portions, and even other portions, of the bowels, first one part, then another; true pains generally begin in the back; false

pains commence as spasmodic pains; true pains as “grinding” pains; false pains come on at uncertain periods, at one time a quarter of an hour elapsing, at others an hour or two hours, between each pain, at one time sharp, at another trifling; true pains come on with tolerable regularity, and gradually increase in severity.

283. But, remember,—the most valuable diagnostic sign, is—the absence of “show” in false-labour-pains, and the presence of “show” in true-labour-pains.—It may be said, that “show” does not always usher in the commencement of labour?—Granted! but such cases are exceedingly few, and may be considered as the exception and not the rule.

284. *Treatment.*—A dose of castor-oil, is, generally, all that is necessary; but, if the pains still continue, the patient must be abstemious; abstaining for a day or two, from beer and wine; and rubbing the bowels every night, at bedtime, with camphorated-oil, previously warmed.—Hot salt, in a flannel bag, or a Hot-water Bag, applied to the bowels, every night at bedtime, frequently affords great relief.

285. If the pains be not readily relieved, the patient must send for a Medical man.—A little appropriate medicine will soon have the desired effect.

286. These *false* labour-pains may go on for days, or even for weeks, and, at length, may terminate in *real* labour-pains.

PERIOD OF GESTATION.

287. The period of gestation is usually*two hundred and eighty days—forty weeks—ten lunar—or nine calendar months.

288. In making her “count,” it will be well for a lady to commence her reckoning about three days after the last day of her “being unwell.”—The reason we fix on a woman conceiving a few days after she has “ceased to be unwell,” is, that she is more apt to do so, soon after menstruation, than at any other time.†

* I say *usually*, for the duration of gestation is very uncertain. Dr. Reid gives (in the *Lancet* of July 20th, 1850) an interesting table of the duration of pregnancy. The table comprises 500 cases; out of which numbers, nearly the half terminated in labour in the fortieth and forty-first weeks. The following is the order in which they occurred :

23 cases in the	37th week.
48 „ „	38th „
81 „ „	39th „
131 „ „	40th „
112 „ „	41st „
63 „ „	42nd „
28 „ „	43rd „
8 „ „	44th „
6 „ „	45th „

The above is merely a summary of Dr. Reid’s valuable table.

† “We are informed by Jourdan, and other French writers,

289. A good plan to make the “reckoning,” is, as follows:—Let forty weeks and a few days be marked, on an almanac, from the time specified above, and a lady will seldom be far from her calculation.—For instance,—suppose the last day of her “ceasing to be unwell” was on January 15th, she may expect to be confined very near October 23rd.

290. Another plan to make the “count,” and recommended by Dr. Tanner, is the following:—“To effect this readily we cannot do better than follow the plan of most German obstetricians, who learn the probable day of delivery thus:—The date of the last menstruation being given, they calculate three months backwards, and add seven days. For example, suppose the 20th January to be the last day of the last menstrual period, labour will be due about the 27th October,—*i.e.*, on the 280th day.”*

291. Sometimes, a lady is put out of her reckoning by becoming pregnant while she is suckling; consequently, not “being unwell” at such a time, she does

that Fernel acted on the knowledge of this fact, when consulted by Henry II, of France, as to the best means of rendering his Queen, Catherine de Medicis, fruitful; he advised the King to visit her only immediately after the cessation of the menstrual discharge; the adoption of which advice was attended with success, and the Queen, after years of disappointment, gave birth to a son.”—*Dr. Montgomery.*

* *On the Signs and Diseases of Pregnancy.*

not know how to "count." In a case of this kind she must reckon from the time that she quickens.—That is to say—she must then consider herself nearly half gone in her pregnancy, and to be within a fortnight of half her time; or, to speak more accurately,—as soon as she has quickened, we have reason to believe that she is gone about one hundred and twenty-four days; she has, therefore, about one hundred and fifty-six more days to complete the period of her pregnancy.—Suppose, for instance,—that she first quickened on May the 17th, she may expect to be confined somewhere near October the 23rd.

292. A lady is occasionally thrown out of her reckoning, by the appearance of a little "show" the first month after she is *enceinte*.—This discharge does not come from the womb, as that organ is hermetically sealed: but from the upper part of the vagina—the passage to the womb—and from the neck of the womb; and may be known from the regular menstrual fluid,—by it being much smaller in quantity, by it clotting, and by it lasting, generally, but a few hours.—Therefore, this discharge must not be reckoned in "the count;" but the one before should be the guide; and the plan should be adopted as recommended in page 100, paragraph 288.

MONTHLY NURSE.

293. It is an important—a most important—con-

sideration to choose a monthly nurse rightly and well.

294. She should be middle-aged. If she is young, she is apt to be thoughtless and giggling; if she is old, she may be deaf and stupid, and may think too much of her trouble. She must be gentle, kind, good-tempered, and obliging, but firm withal, and she should have a cheerful countenance.

295. She must be neither a tattler, a tale-bearer, nor a "croaker." A tattling nurse is an abomination: a clacking tongue is most wearisome and injurious to the patient. A tale-bearer is to be especially avoided; if she tell tales of her former ladies, my fair reader may depend upon it that her turn will come. But of all nurses to be shunned as the plague is the "croaking" nurse, one that discourses of the dismal and the dreadful cases that have occurred in her experience. She is a very upas tree in a house! Some monthly nurses have a knack of setting the servants at loggerheads, they are regular mischief-makers and frequently cause old and faithful domestics to leave. Therefore, it will be seen that it is a most momentous question to choose a monthly nurse rightly and well.

Fortunately for ladies, the race of nurses is wonderfully improved.

296. She should be a married woman or a widow.—A single woman cannot so well enter into the feelings of a lying-in patient, and has not had the necessary

experience. Moreover, a *single* woman, as a rule, is not so handy with an infant (more especially in putting him to the breasts for the first time) as a *married* woman.

297. She must be sober temperate, and healthy, and free from deafness, and from any defect of vision. —She should have a gentle voice and manner, but yet not be melancholy, nor hippish. She must be fond of children, and she must not mind her trouble, or at being disturbed at night. She should be a light sleeper. “Scrupulous attention to cleanliness, freshness, and neatness” in her own person, and towards the lady and the infant, are most important requisites.

298. A fine lady nurse that requires to be constantly waited upon, by a servant, is not the nurse that I should recommend. She should be willing to wait upon herself, upon the lady, and upon the baby, with alacrity, with cheerfulness, and without assistance, or she is not suitable for a nurse.

299. As the nurse, if she does her duty, devotes her time, her talent, and her best energies to the patient and to the infant, a lady should be most liberal in the payment of a monthly nurse. A good one is cheap at almost any price, while a bad one is dear indeed, even if she comes for nothing. A cheap nurse is frequently the ruin of the patient's and of the infant's health and of the peace of a household.

300. The monthly nurse must be engaged EARLY in the pregnancy, as a good nurse is caught up soon, and is full of engagements.—This is most important advice. Frequently a lady has to put up with an indifferent nurse from neglecting to engage her betimes. At the eleventh hour the Medical man is frequently besought to perform an impossibility—to select a *good* nurse; and which he could have done a few months before, with the greatest ease.

301. Whenever it be possible, it is always desirable, that the Doctor in attendance should select the monthly nurse, as she will then be used to his ways, and he will know her antecedents,—whether she is sober, temperate and kind, and whether she understands her business, and whether she is in the habit of attending and following out his directions,—for frequently a nurse is self-opinionated and fancies that she knows better than the Medical man himself.—Such a nurse is to be scrupulously avoided.—There cannot be two masters in a lying-in room; if there be, the unfortunate patient will inevitably be the sufferer;—A Doctor's directions MUST be carried out to the very letter.—It rests with the patient to select a judicious Medical man, who, although he will be obeyed, will be kind and considerate to the nurse.

302. A monthly nurse should be in the house a week or ten days before the commencement of the labour, in order that there may be no bustle and no excitement, and no hurrying to and fro to find her at

the last moment; and that she may have everything prepared, and the linen well aired, for the coming event.

303. She must never be allowed to give the patient, or the baby, a particle of medicine, unless ordered by the Medical man.—A quacking monthly nurse is a great evil and must be shunned.

304. A monthly nurse should understand the manner of putting on, and of tightening the bandage after a confinement.—This she must do every night and morning.—The Doctor himself generally does it the first time—namely, immediately after the labour.—It requires a little knack, and if the nurse is at all awkward in the matter, the Medical man will only be too happy to show her the way: for he is quite aware what support, comfort, and advantage it will be to his patient, and he will be glad to know that the nurse will be able to continue putting it on properly for some weeks—for at least three weeks after the lying-in.

305. If nurses better understood the proper method of bandaging their patients after their confinements—there would not be so many ladies with pendulous bowels and ungainly figures as there are at the present time. It is a common remark that a lady's figure is spoiled in consequence of her having had so many children. This ought not to be, provided efficient bandaging after *every* confinement had been properly resorted to.

306. A monthly nurse who understands her business will always have the lying-in room tidy, cheerful, and well-ventilated.—She will not allow dirty linen to accumulate in the drawers, in corners, and under the bed; nor will she allow any chamber-utensil to remain in the room for one moment after it has been used.—She will take care, if it be winter, that the fire in the grate never goes out, and that it is never very large, and that the room is kept, as much as possible, at one temperature—namely, at 60° Fahrenheit. She will use her authority as a nurse, and keep the other children from frequently running into the room and from exciting and disturbing the mother; and she will make a point of taking charge of the baby, and keeping him quiet while the mother, during the day, is having her necessary sleep.

307. A good monthly nurse fully comprehends and thoroughly appreciates the importance of bathing the external parts concerned in parturition, every night and morning, and sometimes even oftener, for at least two or three weeks after a confinement.—And if the Medical man deems it necessary, she ought to understand the proper manner of using a vaginal-syringe.—If the nurse is self-opinionated, and tries to persuade the patient not to have proper ablution—that such ablution will give cold,—she is ignorant and prejudiced, and quite unfit for a monthly nurse, and my advice is,—that a lady must on no account engage such a person.

308. In another part of this work I have entered fully on the vital importance of ablution after a confinement and I need not say more than again to urge my fair reader to see that the monthly nurse properly carries it out, and that if there be any objections made to it by the nurse, that the Medical man be appealed to in the matter, and that his judgment be final,—assured I am that every Doctor who understands his profession will agree with me, that the regular ablution of the parts after a labour is absolutely indispensable. Of course the nurse will take care not to expose the patient unnecessarily during the process, that she be quick over it, and that she will have soft, warm, dry towels, in readiness, to speedily dry the parts that have been wetted.—The above is most important advice, and I hope that my fair inquirer will engage a monthly nurse that will do her duty in the matter.

309. There is one more piece of advice I wish to give before concluding a list of some of the duties of a monthly nurse, which is this, — NEVER TO ALLOW HER TO GIVE BRANDY, WINE, OR MALT-LIQUOR TO THE PATIENT, UNTIL SHE BE ORDERED TO DO SO BY THE DOCTOR.

PART III.

LABOUR.

THE PRECURSORY SYMPTOMS OF LABOUR.

310. A day or two before the labour commences,—the patient usually feels better than she has done for a long time; she is light and comfortable; she is smaller, and the child is lower down; she is more cheerful; breathes more freely; and is more inclined to take exercise.

311. A few days, sometimes a few hours, before labour commences, the child “falls,” as it is called—that is to say—there is a *subsidence of the womb* lower down the abdomen.—This is the reason the patient feels lighter, and more comfortable, and that she can breathe more freely.

312. The only inconvenience of *the subsidence of the womb*, is, that the womb presses on the bladder,

and sometimes causes an irritability of that organ, inducing a frequent desire to make water.

313. The *subsidence of the womb* may, then, be considered, *one* of the earliest of the *precursory symptoms* of *the labour*, and as *the* herald of the coming event.

314. At length, she has slight pains, and then she has a "show" as it is called; which is the coming away of a mucous plug, which, during pregnancy, had hermetically sealed the mouth of the womb.—The "show" is generally tinged with a little blood.—When a "show" takes place, a lady may rest assured—that labour has actually commenced.—One of the *early* symptoms of labour, is a frequent desire to relieve the bladder and the bowels.

315. The patient has "*grinding pains*," coming [on at uncertain periods; sometimes, once during two hours; at other times, every hour or half-hour.—These "grinding-pains" must not be interfered with; therefore, at this stage, it is useless to send for the Doctor; yet, the monthly nurse should be in the house, to make preparations for the coming event.—Although, it is *not* necessary to send for the Medical man at this early period; nevertheless, it is well to let him know, that his services may shortly be required; in order that he may be in the way, or that he may leave word where he may be found.

316. These “grinding-pains” gradually assume more regularity in their character, return at shorter intervals, and become more severe.—About this time, in the majority of cases, shivering is apt to occur, so as to make the teeth chatter again.—Shivering *during labour* is not an unfavourable symptom; indeed, it proves that the patient is in real earnest, and that the labour is making progress.

317. The patient must not, on any account, take brandy, as a remedy for the shivering, unless it be ordered by the Medical man.—A cup of hot tea, or of hot gruel, will be the best remedy for the shivering; and an extra blanket or two should be thrown over her, which must be well tucked around her, in order to thoroughly exclude the air from the body.—As soon as she is warm and perspiring, the *extra* clothing should be gradually removed: as she must not be kept very hot, or it will weaken her, and may retard the labour.

318. *Sickness* frequently comes on in the beginning of the labour, and may continue during the whole process.—The patient is not only sick, but she actually vomits, and she can keep little, or nothing, on her stomach.

319. Now, sickness in labour is rather a favourable symptom, and is usually indicative of a kind and an easy confinement.—There is an old saying, that “sick labours are safe.”—Although they are safe, they are decidedly disagreeable.

320. In such a case, there is little, or nothing to be done; as the less an irritable stomach is meddled with, the better.—The sickness will probably leave as soon as the labour is over.—Brandy, unless prescribed by the Medical man, must not be given.

321. She must not, on any account, force down—as her female friends may advise—to “grinding-pains:” if she do, it will rather retard, than forward, the labour.

322. During this stage, she had better either walk about, or sit down, and not confine herself to bed; indeed, there is no necessity for her to remain in her chamber, unless she particularly desire it.

323. If the “waters should break” at the commencement of the labour, even if there be no pain, the Medical man **MUST** be immediately sent for; as, in such a case, it is necessary that he should know the exact presentation of the child.

324. After an uncertain length of time, the character of the pains alter.—From being “grinding,” they become “bearing-down,” and are now more regular and frequent; and the skin becomes hot and perspiring.—These may be considered the *true* labour pains.—The patient must bear in mind then that “the true labour-pains are situated in the back and loins; they come on at regular intervals, rise gradually up to a certain pitch of intensity, and abate as gradually; it

is a dull, heavy, deep sort of pain, producing occasionally a low moan from the patient; not sharp, or twinging, which would elicit a very different expression of suffering from her.”*

325. As soon as the pains assume a “bearing-down” character,—the Medical man must be in attendance; if he be sent for during the *early* stage, when the pains are of a “grinding” character, and when they come on “few and far between,” and at uncertain intervals (unless, as before stated, “the waters should break” early), he can do no good; for, if he attempt in the *early* stage to force on the labour, he might do irreparable mischief.

326. *Cramps* of the legs and of the thighs are a frequent, although not a constant, attendant on labour.—These cramps come on, more especially, if the patient is kept in one position for a lengthened period:—hence the importance of allowing her, during the first and the second stages of labour, to move about the room.

327. Cramps are generally worse during the third or the last stage of labour, and then they usually accompany each pain.—In such a case, the poor patient has not only to bear the labour-pains but the cramp-pains!—Now, there is no danger in these cramps: it

* *A System of Midwifery.* By E. Rigby, M.D.

is rather a sign that the child is making progress, as he is pressing upon the nerves which supply the thighs.

328. The nurse must well rub the cramped parts, with her warm hand; and, if the labour is not too far advanced,—it would be well for the patient to change her position, and to sit on a chair, or, if she feel inclined, to walk about the room; of course, there being an attendant, on each side, to support her the while.—If a pain, or a cramp, should come on while she is thus moving about,—let her instantly take hold of the bed-post for support.

329. In a subsequent paragraph I observe, that in a case of labour, a four-post mahogany bedstead is preferable to either a brass or to an iron bedstead.—It will now be seen, that this was one of my reasons for advising the old-fashioned bedstead; as the support of a bed-post, is oftentimes, a relief and a comfort.

330. Labour—and truly may it be called “labour” *
—IS A NATURAL PROCESS, AND THEREFORE, MUST NOT
UNNECESSARILY BE INTERFERED WITH, OR WOE BE-
TIDE THE UNFORTUNATE PATIENT!

331. I FIRMLY BELIEVE,—THAT A WOMAN WOULD

* “Adam’s children must work, Eve’s children must suffer.”
—“On some Guesses at Truth,” in *Good Words*, June, 1862.

STAND A BETTER CHANCE OF GETTING OVER HER CONFINEMENT WITHOUT ASSISTANCE, THAN WITH ASSISTANCE IF SHE HAD BEEN HURRIED.

332. IN A NATURAL LABOUR, VERY LITTLE ASSISTANCE IS NEEDED, AND THE DOCTOR IS ONLY REQUIRED IN THE ROOM OCCASIONALLY, to ascertain that things are going on rightly.—THOSE LADIES DO BEST, BOTH AT THE TIME, AND AFTERWARDS, WHOSE LABOURS ARE THE LEAST INTERFERED WITH. BEAR THIS IN MIND, AND LET IT BE WRITTEN LEGIBLY ON YOUR MEMORY.—Of course, this advice only holds good in natural confinements.

333. MEDDLESOME MIDWIFERY CANNOT BE TOO STRONGLY REPROBATED.—The duty of a Doctor, is, to watch the progress of a labour, in order that if there be anything wrong, he may rectify it; but, if the labour be going on well, he has no business needlessly to interfere; and HE NEED NOT BE MUCH IN THE LYING-IN-ROOM, although he should be in an adjoining apartment.

334. These remarks are made to set a lady right with regard to the proper offices of an Obstetrician; as sometimes she has an idea that a Medical man is able to greatly expedite a natural labour,—by constantly “taking a pain.”—Now, this is a mistaken and mischievous, although a popular, notion.

335. The *frequent* “taking of a pain” is very in-

jurious and most unnatural.—It irritates and inflames the passages, and frequently retards the labour.

336. No! the *occasional*, but only the OCCASIONAL “taking of a pain” is *absolutely* necessary to enable the Medical man to note the state of the parts, and the progress of the labour; but the *frequent* “taking of a pain” is very objectionable and most reprehensible.

337. As a rule then it is NOT necessary, or desirable, for a Medical man to be much in a lying-in-room. Really, in a natural labour, it is surprising how very little his presence is required.—After he has once ascertained the nature of the case, — WHICH IT IS ABSOLUTELY NECESSARY THAT HE SHOULD DO — and has found all going on “right and straight,” it is better — much better — that he retire in the day-time to the drawing-room, in the night-season to a bed-room (that the poor hard-worked Doctor may get rest) and thus to allow nature time and full scope to take her own course, without hurry and without interference, without let and without hindrance. Nature hates hurry and resents interference!

338. The above advice is particularly useful — for many reasons. In the first place, — nature is not unnecessarily interfered with. Secondly, — it allows a patient, from time to time, to empty her bladder and bowels, — which by giving more room to the adjacent parts greatly assist and expedite the progress of the labour. Thirdly, — If the Doctor is not present,

he is not called upon to be frequently “taking a pain,” which the patient may request him to do, as she fancies it does her good and relieves her sufferings; BUT WHICH FREQUENT TAKING OF A PAIN IN REALITY DOES HER HARM AND RETARDS THE PROGRESS OF THE LABOUR.—NO! A DOCTOR OUGHT *NOT* TO BE MUCH IN A LYING-IN-ROOM. Although it may be necessary that he be near at hand—within call—to render assistance towards the last.—I emphatically declare, that in an ordinary confinement—that is to say,—in what is called a natural labour, the only time, as a rule, that the presence of the Doctor can be useful, is, JUST before the child is born; although he must be in readiness, and should therefore be in the house for some little time before the event takes place.—Let the above most important advice be strongly impressed upon your memory.—O, if a patient did but know what a blessed thing is patience!

339. Bear in mind, then, that in every well formed woman, and in an ordinary confinement, nature is perfectly competent to bring a child into the world WITHOUT THE ASSISTANCE OF MAN,* and that it is only an ignorant person who would, in a natural case of labour, for one moment, interfere to assist nature! Assist nature! Can anything be more absurd! As though God in his wisdom, required the assistance of man, in performing one of his

* “Through thee have I been holden up ever since I was born: thou art he that took me out of my mother’s womb; my praise shall be always of thee.”—*The Psalms of David*, lxxi, 5.

greatest wonders and processes. It may with as much truth be said, that in every case of the process of *healthy* digestion it is necessary for a Doctor to assist the stomach in the process of digesting the food! No, it is high time that such fallacies were exploded, and that common sense took the place of such folly.—A natural labour, then, must NEVER be hurried nor be interfered with; or frightful consequences may, and, in all probability, will, ensue.—Let every lying-in-woman bear in mind that the more patient she is, the more kind and the more speedy will be her labour and her “getting about.” Let her, moreover, remember, then, that labour is a natural process, that all the “grinding” pains she has are doing her good service, are dilating, softening, and relaxing the parts, and preparing for the final or “bearing-down” pains; let her further bear in mind THAT THESE PAINS MUST NOT, ON ANY ACCOUNT WHATSOEVER BE INTERFERED WITH by the Doctor, by the nurse, or by herself.—God has sent these pains for a wise purpose and they must be borne with patience and resignation, and she will, in due time, be rewarded and be blest for all her sufferings by having a living child. Oh, how often I have heard a silly nurse desire a patient to bear down to a “grinding” pain: as though it could do the slightest good.—No, it only robs her of her strength and interferes with the process and progress of the labour.—Away with such folly and let nature assert her rights and her glorious prerogative! It may be thought that I am tedious and prolix in insisting on non-interference in a natural labour, but

the subject is of paramount importance, and cannot be too strongly insisted upon, and cannot be too often brought, and that energetically, before the notice of a lying-in-woman.

340. Fortunately for ladies, there is great talent in the midwifery department, which would prevent—however anxious a patient may be to get out of her trouble—any improper interference.*

341. I say *improper* interference.—A case sometimes, ALTHOUGH RARELY, occurs, in which it may be necessary for the Medical man to properly interfere and to help the labour; then, the patient must leave herself ENTIRELY in the hands of her Doctor,—to act as he thinks best, and who may find it necessary to use promptness and decision, and thus to save her an amount of unnecessary lingering pain and anxiety.—But these cases, fortunately, are exceptions—RARE EXCEPTIONS—and not the rule.

342. *Should the husband be present during the labour?*—Certainly not; but as soon as the labour is over, and all the soiled clothes have been put out of the way, let him instantly see his wife, for a few

* Dr. David D. Davis used, in his valuable Lectures, strongly to reprobate meddlesome midwifery: he justly observed, that —“Accoucheurs were only life-guardsmen to women.”—A life-guardsmen, while on duty at the palace, does not interfere with every passer-by, but only removes those who obstruct the way.

minutes, to whisper in her ear words of affection, of gratitude, and consolation.

343. The *first* confinement, is, generally, twice the length of time of an *after* one, and, usually, the more children a lady has had, the quicker is the labour; but this is, by no means, always the case, as *some* of the *after* labours may be the *tedious*, while the *early* confinements, may be the *quick* ones.

344. It must be borne in mind, too, that *tedious labours* are oftentimes *natural labours*, and that they only require time and patience to bring them to a successful issue.

345. As a rule, it may be said,—that a *first* labour lasts six hours, while an *after* labour, probably, lasts but three.—Of course, this space of time does not usually include the *commencement* of labour-pains; but the time that a lady may be *actually* said to be in *real* labour.—If we are to reckon—from the commencement of the labour, we must double the above numbers—that is to say—we must make the average duration of a first labour, twelve; of an after labour, six hours.

346. When a lady marries late in life—for instance, after she has passed the age of thirty—her *first* labour is usually much more lingering, painful and tedious; demanding a great stock of patience from the patient, the Doctor, and the friends; not-

withstanding which, if she be not hurried and be not much interfered with, she and the baby generally do remarkably well.—Supposing a lady marries late in life, it is only the *first* confinement that is usually hard and lingering; the *after* labours are as easy as though she had married earlier.

347. Slow labours are not, necessarily, dangerous ones: on the contrary, a patient frequently has a better and a more rapid recovery, provided there has been no interference, after a tedious than after a quick confinement: proving, beyond doubt, that nature hates hurry and interference. It is an old saying, and, I believe, a true one, that a lying-in woman *must* have pain either *before* or *after* a labour; and it certainly is far preferable that she should have the pain and suffering *before*, than *after* the labour is over.

348. It is well for a patient to know that, as a rule, she never has after-pains after a *first* confinement.—This is some little consolation, and is a kind of compensation to her usually suffering more with her *first* child.

349. The after-pains generally increase in intensity with every additional child.—This only bears out, in some measure, what I before advanced, namely,—that the pain is less severe and of shorter duration *before* each succeeding labour, and that the pain is greater and of longer duration *after* each succeeding one.—

Fortunately for the patient, a Doctor possesses valuable remedies to alleviate the after-pains.

350. Nature,—beneficent nature—ofttimes works in secret, and is doing good service for the patient, by preparing for the coming event, unknown to all around!—In the *very earliest stages of labour*, pain is not a necessary attendant!*

351. Although pain and suffering are the usual concomitants of child-birth, there are, nevertheless, well authenticated cases on record of PAINLESS PARTURITION!†

352. A natural labour may be divided into three stages.—*The first*—the premonitory stage—comprising the “falling” or *subsidence of the womb*, and the “show.”—*The second*—the dilating stage—which is known by the pains being of a “grinding” nature, and in which the mouth of the womb gradually opens or dilates, until it is sufficiently large to admit the exit of the head of the child, when it becomes,—*The third*—the completing stage—which is now indicated by the pains being of a “bearing down,” expulsive character.

* “It is undoubted that painless contractions are then slowly going on.”—*Dr. Tanner*.

† Dr. George Smith, of Madras, communicated an interesting case of the kind, to the *Edinburgh Medical Journal* (November, 1862).

353. Now, in the first or premonitory stage—which is much the longest of the three stages—it is not at all necessary, or desirable, that the patient should be confined to her room: on the contrary, she is better moving about the house, and attending to her household duties.

354. In the second or dilating stage, it will be necessary that she should be confined to her room, but not to her bed.—If the drawing-room be near at hand, she may, occasionally, walk to it, and lie on the sofa, if a pain should come on the while.—In this stage, it is not at all desirable that she should keep her bed, or even lie much on it.—She is better up and about and walking about the room.

355. In the first and second stages, the patient must not, on any account whatever, strain, or bear down to the pains,—as many silly nurses advise their ladies to do: as it would only retard the labour, by robbing her of her strength.—Besides, while the mouth of the womb is dilating, bearing-down cannot be of the slightest earthly use—the womb is not in a fit state to expel its contents.—If the patient by bearing-down could (but which fortunately she cannot) cause the expulsion of the child, it would, at this stage, be attended with frightful consequences—no less than with rupture of the womb!—Therefore, for the future, let not a lady be persuaded by any nurse, or by any female friend, to bear down until the last or completing stage, when a gentle

bearing-down will assist the pains to expel the child.

356. In the third or completing stage, of course, it is necessary that she should lie on the bed, and that she should bear gently down to the pains, as above advised.—The *bearing-down* pains will indicate to her when to *bear* down.

357. Even in the last stage, a patient must never bear down unless the pain be actually upon her;—IT will do her great harm if she does.—In bearing-down,—the plan is to hold the breath, and to strain down as though straining to have a stool.

358. By a lady adopting the rules above indicated,—much weariness may be avoided; cramp—from the patient not being kept long in one position—may be warded off;—the labour—from her being amused by change of room and scene—may be expedited;—and, thus, the confinement may be deprived of much of its monotony and misery.

359. Nurses, sometimes, divide a labour into two kinds,—a “back-labour” and a “belly-labour.”—The latter is not a very elegant, although, it may be, an expressive term.—Now, in a “back-labour,” the patient will derive comfort from having her back held by the nurse.—This must not be done by the *bare* hand, but let the following plan be adopted,—let a pillow be placed next the back, and then the nurse

may apply firm pressure—the pillow intervening between the back and the nurse's hand or hands.—If the above method be followed, the back will not be injured—which it otherwise would be—by the pressure of the hard hand of the nurse.—Where the *bare* hand alone has been applied, I have known the back to continue sore and stiff for days in consequence.

360. During the latter stage of labour, the patient must always keep her eyelids closed; or, the straining may cause an attack of inflammation of the eyes, or, at all events, may make them blood-shot.

361. Let a large room be selected for the labour, and let it be airy and well ventilated; and, if it be summer, take care that the chimney is not stopped.—If the weather be intensely hot, there is no objection to having the upper sash of the window lowered a little.

362. The old-fashioned four-post mahogany bedstead, is the most convenient for a confinement, and is far preferable to either brass or iron.—The reasons are obvious,—in the first place, the patient may, in the *last* stage of labour, be able to press her feet against the bed-post.—And secondly, while she is walking about the room, and “a pain” suddenly coming on, she can support herself by holding the bed-post.

363. If there be more than one mattress, besides

the bed, let it be taken off; as a high bed is inconvenient, not only to the patient, but to the Doctor.

PREPARATIONS FOR LABOUR.

364. I should strongly urge a patient NOT to put everything off to the last.—She must take care to have a *good* pair of scissors and whity-brown thread in readiness.—And she must be sure to have in the house some fresh liquor—that is to say, *unsalted* lard,—that it may be at hand in case it is wanted.—Let everything necessary for herself and for the baby be well aired and be ready for *immediate* use, and be placed in such order, that all things may be found at a moment's notice.

365. Another preparation for labour—and a most important one—is, attending to the state of the bowels.—*If they are at all costive*,—the moment there is the slightest *premonitory* symptoms of labour, the patient must take a teaspoonful, or a dessert-spoonful (according to the nature of her bowels—whether she is easily moved or otherwise) of castor-oil.—If she objects to taking the oil,—then let her have a lavenent—an enema—of warm water—a pint—administered.—By adopting either of the above plans, she will derive the greatest comfort and advantage.—It will prevent her delicacy from being shocked by having her bowels opened—without her being able

to prevent them—during the last stage of the labour ; and it will much expedite the confinement, and lessen her sufferings,—by giving the parts more room.

366. The next thing to be attended to, is, the way in which she should be *dressed for the occasion*.—I would recommend her to put on a short bed-gown reaching to the hips ; to have on a flannel-petticoat to meet it ; and, then, to put on a dressing-gown over all.—If it be winter, the dressing-gown had better either be composed of flannel or be lined with that material.—*The stays must not be worn* : as they would interfere with the progress of the labour.

367. The valances of the bed and the carpet had better be removed.

368. “*The guarding of the bed*.”—This is done in the following way :—Cover the *right* side of the bed (as the patient will have to lie on her *left* side) with a large piece of water-proof—Mackintosh—sheeting, which is sold for the purpose ; over this, folded blankets and sheets must be placed.—If a Mackintosh cannot be procured, an oil-cloth table-cover will answer every purpose.—The above plans will effectually protect the bed from injury.

369. The lying-in room should be kept comfortably warm, but not hot ; if the temperature of the room be high, the patient will become irritable, feverish, and restless.

370. Every now and then, let the door of the room be left a-jar, in order to change the air; and if, in the early periods of the labour, she should retire for a while to the drawing-room,—let the lying-in-room window be thrown wide open; so as to thoroughly ventilate the apartment, and to make it fresh and sweet on her return.—If the weather be very warm, the upper-sash of the window may be opened.—It is wonderful how refreshing to the spirits and how strengthening to the frame, a well-ventilated room is to a lying-in patient and to all around her.

371. Many attendants are not only unnecessary, but injurious:—they excite and flurry the patient, and cause noise and confusion.—One female friend, besides the Doctor and the monthly nurse, is all that is needed.

372. In making the selection of a friend, care should be taken, that she is the mother of a family, that she is a kind-hearted, strong-minded woman, of a cheerful turn of mind.—At these times, all “croakers” must be carefully avoided.—No conversation of a depressing character should for one moment be allowed.—Nurses, and female friends, who are in the habit of telling of bad cases that have occurred in their experience, must be shunned as the plague!

373. During the progress of the labour, boisterous and noisy conversation must never be permitted; it only irritates and excites the patient.—Although,

boisterous merriment is bad ; yet, at such times, quiet, cheerful, and agreeable conversation is desirable.

374. A mother is often present on these occasions ; but, of all persons, she is the most unsuitable, as she tends, from her maternal anxiety, rather to depress than to cheer the spirits of her daughter.—Though the mother must not be in the *room*, it is desirable—if practicable—that she should be in the *house*.—The patient, in the generality of cases, derives comfort from the knowledge of her mother being so near at hand.

375. Another preparation for labour is, to soothe her mind, by telling her of the USUAL safety of confinements ; and by assuring her THAT, IN THE GENERALITY OF INSTANCES, IT IS A NATURAL PROCESS ; and that all she has to do,—is to keep up her spirits,—to adhere strictly to the rules of her Doctor,—and she will do well.

376. Tell her, too, of the exquisite happiness and joy she will feel as soon as the labour is over,—as, perhaps, the greatest thrill of delight a woman ever experiences in this world is when her child is *first* born,—she, as if by magic, forgets all her sorrow and pain.—“ A woman when she is in travail hath sorrow, because her hour is come : but as soon as she is delivered of the child, she remembereth no more the anguish, for joy that a man is born into the world.”*

* *St. John* xvi, 21.

377. The Doctor, too, will be able to administer comfort to her when he has "tried a pain," or has "taken a pain" as it is called, and when he can assure her, that it "is all right and straight,"—that is to say,—that the child is presenting in the most favourable position, and that everything is progressing satisfactorily.—Moreover, he will be able to inform her of the *probable* duration of the labour.

378. Let me, in this place, urge upon the patient,—the importance of her allowing the Medical man to inquire fully into her state;—she may depend upon it, that his inquiry will be conducted in the most delicate manner.—If there be anything wrong in the labour, it is, in the *early* stage and *before* the "waters have broken," that most good can be done.—If a proper examination be not allowed to the Medical man whenever he deems it right and proper—(and a judicious Doctor will not often do it)—the patient's life, and, perhaps, that of her child, may be the penalty of such false delicacy.

379. French brandy must always be in the house in case it is wanted; but, let me impress upon the minds of the attendants, the importance of withholding it from a lying-in woman, unless it be ordered by the Doctor.—Numbers have fallen victims to brandy being indiscriminately given.—I am of opinion, that the great caution which is now adopted in giving spirits to women in labour, is one reason, among others, of the great safety of the confinements of

the present day, compared with those of former times.

380. The best beverage for a patient during labour, is—a cup of warm tea, or, of gruel, or, of arrow-root.—It is folly, in the extreme, to force a patient to eat during the progress of labour: her stomach recoils at it; as, at these times, there is generally a loathing of food, and, if we will take the appetite as our guide—
AS WE ALWAYS SHOULD DO—we shall never go far wrong.

381. A lady, during labour, should frequently make water; by doing so, she will materially add to her comfort, as it will give the adjacent parts more room, and will thus expedite the labour.—I wish to call attention to this point, as many women—especially with their first children—have, from false delicacy, suffered severely from not attending to it: one of the ill effects of which is,—an inability to make water after the labour is over, without the assistance of the Doctor; who may deem it necessary, in an extreme case, to introduce a catheter into the bladder, and thus to draw off the water.

382. In a previous paragraph, I recommended, that the Doctor should have the drawing-room, or a bedroom to retire to; in order that the patient may, during the progress of the labour, BE LEFT VERY MUCH TO HERSELF, and that thus she may have full opportunities of thoroughly emptying her bladder

whenever she feels the slightest inclination to do so. NOW THIS ADVICE IS OF VERY GREAT IMPORTANCE, and if it were more attended to, than it is, it would cause a great diminution of misery, annoyance, and suffering.—I have given the subject great attention, and I have had large experience in midwifery practice, —I therefore speak “like one having authority,” and if my advice, in this particular, is followed, this book will not have been written in vain.

383. If the patient *cannot* make water, the Medical man should *immediately* be made acquainted with it, or serious consequences may ensue.

CHLOROFORM IN HARD AND LINGERING LABOUR.

384. Mothers and Doctors are indebted to Dr. Simpson, of Edinburgh, for the introduction of chloroform—one of the greatest and most valuable discoveries ever conferred on suffering humanity.

385. Sulphuric ether was formerly used to cause insensibility to pain; but it is far inferior to chloroform, and is now, in this country, very seldom employed; while the inhalation of chloroform, in cases of hard and lingering labour especially, is every day becoming more general, and will still more extensively as its value is better understood, and when ITS COMPARATIVE FREEDOM FROM DANGER, IN WELL SELECTED CASES, IS SUFFICIENTLY APPRECIATED.

386. CHLOROFORM, then, IS A GREAT BOON IN MIDWIFERY PRACTICE. IT MAY BE ADMINISTERED BY A MEDICAL MAN WITH PERFECT SAFETY. I have given it in numerous instances, and have always been satisfied with the result.

387. The inhalation of chloroform causes unconsciousness—partial or complete—and freedom from pain, for a longer or shorter time, according to the will of the operator.—In other words,—the effects may be continued for a few minutes, or, from time to time, for several hours—with perfect safety; indeed, with immense benefit if given in proper cases, and by a judicious Medical man.

388. Chloroform is more applicable and useful in a labour where it is lingering, where the pains are very severe, and where, notwithstanding the pain, the labour is making but little progress,—then chloroform is a priceless boon.

389. Chloroform, too, is very beneficial where the patient is of a nervous temperament, and where she looks forward to each labour-pain with dread and apprehension.

390. It may be asked,—Would you give chloroform in *every* case of labour—be it ever so easy and quick?—CERTAINLY NOT: IN AN ORDINARY, EASY, QUICK LABOUR, IT IS NOT ADVISABLE TO ADMINISTER IT.

391. The cases, in which it is advisable to give chloroform, are ALL lingering, hard and severe *ordinary* labours.—In such I would gladly use it.—But I would always wait for at least six hours, from the commencement of labour, before administering it.

392. Oh the delightful and magical effects of it in the cases above described,—the lying-in room, from being in a state of gloom, despondency and misery, is instantly transformed, by its means, into one of cheerfulness, hope and happiness!

393. When once a lying-in patient has experienced the good effects of chloroform in assuaging her “pain,” she importunately urges her Medical man, at every recurrence of “the pain,” to give her more!—In all her subsequent confinements—having once tasted the good effects of chloroform—she does not dread them.—I have frequently heard a patient declare that now (if her labour be hard and lingering) she can have chloroform—she looks forward to the period of child-birth with confidence and hope.

394. It may be asked,—Does the inhalation of chloroform retard the patient’s “getting about?”—I emphatically declare,—THAT IT DOES NOT DO SO.—The patients who have had chloroform have always had as good and as speedy recoveries as those who have not inhaled it.

395. One important consideration in the giving of

chloroform in labour, is, THAT A PATIENT HAS SELDOM, IF EVER, BEEN KNOWN TO DIE WHILE UNDER THE EFFECTS OF IT:—which is more than can be said when it has been administered in surgical operations, in the extraction of teeth, &c.

396. One reason why it may be so safe to give chloroform in labour is that, in the practice of midwifery, a Medical man does not deem it necessary to put his patient under the *extreme* influence of it. He administers just enough to ease her pain, but not sufficient to rob her of total consciousness; while in a surgical operation, the Surgeon may consider it needful to put his patient under the *full* influence of chloroform,—hence the safety in the one case, and the danger in the other.—“It is quite possible to afford immense relief, to ‘render the pains quite bearable,’ as a patient of mine observed, by a dose which does not procure sleep or impair the mental condition of the patient, and which all our experience would show is absolutely free from danger.”*

397. There is another advantage in chloroform,—the child, when he is born, is usually lively and strong, and is not at all affected by the mother having had chloroform administered to her.—This is a most important consideration.

* *Theory and Practice of Midwifery.* By Fleetwood Churchill, M.D.

398. The Doctor, too, as I before remarked, is deeply indebted to Dr. Simpson for this great boon: *formerly* he dreaded a tedious and hard labour; *now* he does not do so,—as he is fully aware that chloroform will rob such a lying-in of much of its terror, and most of its pain and suffering, and will, in all probability, materially shorten the duration of the confinement.

399. CHLOROFORM MUST NEVER BE ADMINISTERED TO A LABOUR-PATIENT, OR TO ANY ONE ELSE, EXCEPT BY A MEDICAL MAN.—THIS ADVICE ADMITS OF NO EXCEPTION.—AND CHLOROFORM MUST NEVER BE GIVEN UNLESS IT BE IN A LINGERING AND IN A HARD LABOUR.—As I have before advised,—in a natural, easy, every-day labour—nature must NOT be interfered with, but be allowed to run its own course.—PATIENCE, GENTLENESS, AND NON-INTERFERENCE, ARE THE BEST AND CHIEF REQUISITES REQUIRED IN THE MAJORITY OF LABOUR CASES.

HINTS TO ATTENDANTS, IN CASE THE DOCTOR IS
ABSENT.

400. After the *first* confinement, it frequently happens that the labour is so rapid, that the child is born before the Doctor has time to reach the patient.

401. It is therefore desirable to give directions to the attendants,—*what to do, and what NOT to do.*

402. In the first place,—let the attendants be calm and self-possessed, and let there be no noise, no scuffling, no excitement, no WHISPERING, and no talking, and let her be made to understand that there is no danger: as the principal danger will be in exciting her with UNNECESSARY fears as to danger either to herself or to her child.—Thousands are annually confined in England, and everywhere else, without the *slightest* assistance from a Doctor*—he not being at hand or not being in time;—and, yet, both mother and child almost invariably do well.—Let her be informed of this fact—for it is a fact—and it will be a comfort to her, and will assuage her fears.—The Medical man, as soon as he arrives, will soon make all right and straight.

403. In the mean time let the following directions be followed:—*Supposing a child to be born before the Medical man arrives*,—the nurse should then ascer-

* “Dr. Vose (of Liverpool) said that once, when in the remote valleys of Westmoreland and Cumberland, he used to ask the people how they got on without medical aid, particularly in regard to midwifery cases; people wondered that he should ask. He found they had no midwives even; when a woman begins her troubles, they told him, they give her warm beer; if she is worse, more warm beer; but if that fails, then she ‘maun dee.’ So they gave stimulants from the first. One word in the paper read seemed to contain the gist of the matter; we must treat the patients according to ‘common sense.’”—*Diet suitable after Childbirth. British Medical Journal*, Dec. 12, 1863.

tain—whether a coil of navel-string be around the neck of the infant: if it be, it must be instantly liberated, or he might be strangled.—Care must be taken—that the child has sufficient room to breathe, that there be not a “membrane” over his mouth;* and, that his face be not buried in the clothes.—Any mucus about the mouth of the child must be wiped away with a soft napkin, or it may impede the breathing.

404. If the Doctor has not arrived,—cheerfulness, quietness, and presence of mind, must be observed by the attendants; otherwise, the patient may become excited and alarmed, and dangerous consequences might ensue.

405. If the infant should be *born apparently dead*:—a few smart blows must be given on the buttocks and on the back; a smelling bottle should be applied to the nostrils, or rag should be singed under the nose, taking care that the burning tinder does not touch the skin; and cold water must be freely sprinkled on the

* As a rule, the “waters break” just before the head is born:—then there is no fear of a membrane covering the mouth, as the head passes *through* the ruptured membrane.—“In other instances, the membrane does not burst before the expulsion of the head of the fœtus externally, which it covers, and in such cases the infant is said, by nurses, to be born with a *caul*, and this is advertised in the London newspapers in our day, and sold at a high price by midwives, as it is superstitiously supposed to prevent shipwreck.”—*Ryan’s Manual of Midwifery*.

face.—The navel-string must not be tied as long as there is pulsation in it.

406. The limbs, the back, and the chest of the child, must be well rubbed with the warm hand.—The face should not be smothered up in the clothes.—If pulsation has ceased in the navel-string (the above rules having been strictly followed, and having failed),—let the navel-string be tied and divided,* and then, let the child be plunged into warm water—98° Fahr.—If the *sudden* plunge does not rouse respiration into action,—let him be taken out of the warm bath; as the keeping him in the water, for any length of time, will be of no avail.

407. If these simple means should not QUICKLY succeed—although they generally will,—Dr. Marshall Hall's *Ready Method* must be tried, in the following manner:—"Place the infant on his face; turn the body gently, but completely *on the side and a little beyond*, and then on the face, alternately; repeating these measures deliberately, efficiently, and perseveringly, fifteen times in the minute only."*

408. Another plan of restoring suspended animation, is,—by artificial respiration,—which may be employed in the following manner:—Let an attendant

* See page 140, paragraph 411.

† For more full particulars of Dr. Marshall Hall's *Ready Method in Asphyxia*, see *Advice to a Mother*, seventh edition.

squeeze the child's nose, with her left hand, to prevent any passage of air through the nostrils; then, let her apply her mouth to the child's mouth, and breathe into it, in order to inflate the lungs; as soon as they are inflated, the air must be pressed out again—so as to imitate natural breathing—by the attendant's right hand.—Again and again should the above process be repeated; and the operator will frequently be rewarded by hearing a convulsive sob, which will be the harbinger of renewed life.

409. The navel-string—provided there is pulsation in it—must not be tied until animation is restored.—If it be tied before animation shows itself, and before the child has cried, he will have but a *slight* chance of recovery!—While the navel-string is left entire, provided there is still pulsation in it, the infant has the advantage of the mother's circulation and support.

410. If Dr. Marshall Hall's *Ready Method* and if artificial respiration should not succeed, the child must be immersed, up to his neck, in a warm bath of 98 degrees Fahrenheit.—Warm water should always be in readiness, more especially if the labour be hard or lingering.

411. Should the child have been born for some time before the Doctor has arrived, it may be necessary to tie and divide the navel-string.—The manner of performing it is as follows:—A ligature—composed of

four or five whity-brown threads, about a foot long—should be *tightly* tied round the navel-string—about two inches from the body of the child—by a double knot.—A second ligature must be applied, in a similar manner, about three inches from the first, and the navel-string must be carefully divided midway between the two ligatures.—Of course, if the Medical man should be shortly expected, any interference would not be advisable, as such matters should be left entirely to him.

412. THE AFTER-BIRTH MUST NEVER BE BROUGHT AWAY BY THE NURSE: if the Doctor has not yet arrived, it must be allowed to come away of its own accord.—The ONLY proper treatment that the nurse MUST adopt in such a case—and WHICH IT IS IMPORTANT THAT SHE SHOULD ADOPT—is—that FIRM pressure should be applied, by means of her hand, over the region of the womb: this will have the effect of encouraging the contraction of the womb, of throwing off the after-birth, and of preventing violent flooding.

413. If it does not soon come away—say in an hour—or—IF THERE BE FLOODING,—another Medical man must be sent for; but, on no account, should the nurse be allowed to interfere with it, further than I have before recommended; as I have known dangerous, and, in some cases, even fatal consequences to ensue from such meddling.

REST AFTER DELIVERY.

414. A lady must never be disturbed for, at least, an hour after the delivery ; if she is, violent flooding may be produced ; of course, the Doctor will make her comfortable, by removing the soiled napkins and by applying clean ones in their place.

415. Her head ought to be made easy ; she must still lie on her side ; indeed, for the first hour, let her remain nearly in the same position as that in which she was confined ; with this only difference, that if her feet have been pressing against the bed-post, they should be removed from that position.

CLOTHING AFTER LABOUR.

416. After the lapse of an hour, or two, she may be moved from one side of the bed to the other.—It must be done in the most tender and cautious manner.—SHE MUST NOT, ON ANY ACCOUNT WHATSOEVER, BE ALLOWED TO SIT ERECT IN THE BED.—She herself must be passive while being moved, that is to say—*she must use no exertion—no effort* ; but should be removed from side to side by two attendants, one must take hold of her shoulders, the other, of her hips.

417. A patient, *after* delivery, usually feels shivering and starved ; it will, therefore, be necessary to throw additional clothing—such as a blanket or two—over

her,—which must envelope the body and should be well tucked around her ; but the nurse must be careful not to overload her with clothes, or it may produce flooding, fainting, &c. ; therefore, as soon as she is warmer, let the *extra* clothing be gradually removed.—If the feet be cold—let them be wrapped in a warm flannel petticoat, over which a pillow should be placed.

418. A frequent change of linen after confinement is desirable.—Nothing is more conducive to health than cleanliness.—Great care must be taken to have the sheets and her linen well aired.

REFRESHMENT.

419. Directly after a patient is confined, a cup of cool, black-tea, should be given.—I say cool, not cold, as cold tea may chill her.—Hot tea would be improper, as it might induce flooding.

420. As soon as she is settled in bed, there is nothing better than a *small* basin of warm gruel.

421. Brandy must never be given after a confinement, unless ordered by the Medical man.—Warm beer is, also, objectionable ; indeed, stimulants of all kinds must be carefully avoided ; as they would only produce fever, and, probably, inflammation.—Caudle is now seldom given ; but still, some old-fashioned people are fond of advising it after

a labour.—Caudle should be banished the lying-in room: in former times, it caused the death of thousands!

BANDAGE AFTER A CONFINEMENT.

422. This consists of thick linen, similar to sheeting, sufficiently broad to support the bowels comfortably, and about a yard and a half long.—It must be put on moderately tight; and should be retightened every night and morning.

423. If there be not a proper bandage at hand,—a yard and a half of *unbleached* calico, folded double, will answer the purpose quite as well.—The best pins to fasten the bandage, are, the patent safety-pins.

424. A support to the bowels, after labour, is important,—in the first place, it is a great comfort;—in the second, it induces the abdomen to return to its original size;—and lastly, it prevents flooding.—Those ladies—more especially if they have had large families—who have neglected proper bandaging after their confinements, frequently suffer from enlarged and pendulous bowels; which gives them a most unwieldy appearance!

POSITION.

425. *The way of placing the patient in bed.*—She

must NOT—immediately after a labour—under any pretext or pretence whatever, be allowed to raise herself in bed. If she is dressed, as recommended at paragraph 366,—her soiled linen may be readily removed; and she may be drawn up by two assistants—one being at the shoulders and the other at the legs—to the proper place; without she herself raising her body at all, *she not being allowed to use the slightest exertion.*

426. Inattention to the above recommendation has caused violent flooding, fainting, bearing-down of the womb, &c., and, in some cases, even fatal consequences.

THE LYING-IN ROOM.

427. *The room to be kept cool and well ventilated.*—A nurse is too apt to keep a large fire after the confinement is over.—Nothing is more injurious than to have the temperature of a lying-in room high.—A little fire, provided the weather be cold, is desirable, to dress the baby by, and to encourage a circulation of the air.—The room-door must, occasionally, be left ajar, in order to change the air of the apartment: a lying-in woman requires PURE air as much as any other person; but, how frequently does the nurse fancy that it is dangerous for her to have it!

428. After the affair is over—the blinds must be put down and the window-curtains should be drawn,

in order to induce the patient to have a sleep, and thus to rest herself after her hard work.—PERFECT STILLNESS MUST REIGN IN THE ROOM AND IN THE HOUSE.

429. It is really surprising, in the present enlightened age! how much misconception and prejudice there still is among the attendants of a lying-in room; they fancy labour to be a disease, instead of its being what it really is—A NATURAL PROCESS; and that old-fashioned notions, and not common sense, should guide them in such matters!

430. After labour, the patient must be strictly prohibited from talking; and noisy conversation of the attendants ought not to be allowed; indeed, she cannot be kept too quiet, as she may then be induced to fall into a sweet sleep, which would refresh and recruit her strength.—As soon as the child is washed and dressed and the mother is made comfortable in bed, the nurse alone should remain,—LET EVERY ONE ELSE BE BANISHED THE LYING-IN ROOM.—Visitors must, ON NO ACCOUNT, be allowed to see the patient until the Medical man gives permission.

THE BLADDER.

431. *Should a patient go to sleep before she has made water?*—There is not the least danger in her doing so (although some old-fashioned persons may tell her that

there is); nevertheless, if she feel any inclination, before she goes to sleep, she may respond to it.

432. Let me urge the importance of the patient—*immediately* after childbirth—making water while she is in a lying position.—I have known violent flooding to arise from a lying-in woman being allowed, soon after delivery, to sit up while passing her water.

433. The *pot de chambre* must be warmed, and the rim should be covered with flannel.

434. If there be any difficulty in her making water, the Medical man must be *immediately* made acquainted with it by the nurse.—False delicacy must never stand in the way of this advice.

435. It should be borne in mind,—that after a *very* lingering, tedious labour, there is frequently *retention of urine*—that is to say—that, although the bladder may be full of water, the patient is unable to make it without assistance.

436. After the patient trying several times to pass her water, while she is lying down, and after allowing twelve hours to elapse and not being able to succeed, it will be well for her to try the following method:—Let the *pot de chambre* be well warmed, let the rim be covered with flannel (*which it always must be at a confinement,*) let her kneel *on* the bed, supported the while by the nurse, her shoulders being covered with

a warm shawl—then let her, with the *pot de chambre* properly placed on the bed, try to make water—and the chances are that she will *now* succeed.

437. If she does not,—the Doctor *must*, without loss of time, be informed of the fact, and it will then be necessary—absolutely necessary—for him to draw off the water by means of a catheter.—It may be well to state,—that the passing of a catheter is unattended *with the slightest danger or pain*; and that it is done without exposing the patient, and thus, without shocking her modesty.

THE BOWELS.

438. The bowels are usually costive after a confinement.—Doubtless this confined state of the bowels, after labour, is a wise provision of nature, in order to give repose to the surrounding parts—especially to the womb; it is well, therefore, NOT to interfere with them, but to let them have perfect rest until the third day.—Then, if they be not opened—a dose of castor-oil should be given in the manner recommended at paragraph 157.—A tea-spoonful, a dessert-spoonful, or a table-spoonful—according to the constitution of the patient—will be the proper dose.—If, in the course of twelve hours, it should not have the desired effect, it must be repeated.—The old-fashioned custom was—to give castor-oil on the morning after the confinement; this was a mistaken plan, as I have above proved.

439. Castor-oil is the *best* medicine after a lying-in, as it does not irritate the patient's bowels, or—through the mother's milk—gripe the infant.—Aperient pills, as they most of them contain either colocynth or aloes, or both, frequently give great pain to the infant, and purge him much more than they do the mother; therefore, **APERIENT PILLS, AFTER A CONFINEMENT, MUST BE AVOIDED.**

440. If the patient objects to the taking of castor-oil, let the nurse administer a Clyster—by means of an India-rubber enema-apparatus. This is an excellent method of opening the bowels,—as it does not interfere with the appetite nor with the digestion, does away with the nauseousness of castor-oil, and does not give the slightest pain in the administration. If the first clyster should not have the desired effect, let one be given every quarter of an hour until it does so. One of the best clysters for the purpose, is the following:—

Take of—Olive-oil, two table-spoonfuls;
 Table-salt, two table-spoonfuls;
 Warm oatmeal-gruel, one pint:
 To make a clyster.

“CLEANSINGS.”—ABLUTIONS.

441. *The “Cleansings.”*—This watery discharge occurs directly after a lying-in: and lasts a week, or a fortnight, and, sometimes, even longer.—It is, at first, of a reddish-colour; this changes to a brownish-hue; and, afterwards, to a greenish-shade—hence the name

of "green-waters."—In some cases, it has a disagreeable odour.—A moderate discharge is necessary ; but when it is profuse it weakens the patient.

442. Some nurses object to have the parts bathed after delivery ; they have the impression, that such a proceeding would give cold!—Now, warm fomentations, twice a day, and even oftener, if the discharge, or if the state of the parts require it, is ABSOLUTELY INDISPENSABLE TO HEALTH, CLEANLINESS, AND COMFORT.—Indeed, ablutions, at this time, are more necessary than at any other period.

443. There is nothing better for the purpose, than a soft sponge and warm water ; unless the parts be very sore : if they are,—a fomentation of marshmallows-and-camomile,* two or three times a day, will afford great relief ; or—the parts may be bathed with warm oatmeal-gruel, of course without salt.—The parts must be well, but quickly, dried with warm, dry, soft napkins, after each fomentation.

444. If the *internal* parts be very sore, it may be necessary to syringe them out, two or three times a day, with either of the above remedies, by means of a vaginal-syringe.† Hence the importance of having a

* Boil two handfals of marshmallows and two handfals of camomile-blows, in two quarts of water, for a quarter of an hour, and strain.

† Which may be obtained either at a surgical instrument, or at an India-rubber warehouse.

good monthly nurse, of one who thoroughly understands her business.

445. Let the above rules be strictly followed.—Let no prejudices of the nurse, nor of any female friend, stand in the way of the above advice.—**ABLUTION OF THE PARTS, THEN, AFTER A CONFINEMENT, AND THAT FREQUENTLY, IS ABSOLUTELY REQUIRED, OR EVIL RESULTS WILL, AS A MATTER OF COURSE, ENSUE.**

REST AND QUIETUDE.

446. A horizontal position, for ten days or a fortnight after a labour, is important.—Frequently a lady fancies, that if she supports her legs, it is all that is necessary : now, this is absurd ;—it is the womb, and not the legs, that require rest ; and the only way to obtain it, is, by lying flat on a bed, or on a sofa : for the first five or six days, on a bed, day and night ; and, then, for the next five or six days, she may be **REMOVED** for a short period of the day, either to another bed, or to a sofa.—Which other bed, or sofa, must be wheeled to the side of the bed, and the patient placed on it by two assistants,—one taking hold of the shoulders, and the other of the hips,—she herself being perfectly passive, and not being allowed to sit erect the while.—During the time she is on the sofa, she must maintain the *level* position.

447. After the first nine days—she may sit up for half an hour ; gradually she may prolong the time of

the sitting up; but still, for the first fortnight she must lie down a great part of every day.—After the first week, she may lie on a sofa or on a horse-hair mattress.

448. The above plan may appear irksome, but my experience tells me that it is necessary—**THAT IT IS ABSOLUTELY NECESSARY.**—The benefit, that the patient will ultimately reap from it, will amply repay the temporary annoyance of so much rest.—I have known, where the above rules have not been adopted—that flooding, bearing-down of the womb, and even “falling” of the womb, frequent miscarriages, and, ultimately, ruin of the constitution, have resulted.

449. “Falling of the womb” is one of the most wretched complaints that a lady can labour under: and the misfortune of it is, that every additional child increases the infirmity. Now, all this may have been prevented if the recumbent posture had been strictly adopted for a fortnight after delivery.

450. If a patient unfortunately labours under a “falling of the womb,” she must apply to a Medical man, who will provide her with a proper support—called a pessary—which will keep the womb in its proper place, and will thus prevent it from falling down.

DIET.

451. *For the first day*—the diet should consist of

nicely made and well-boiled gruel, arrowroot, tea, dry-toast-and-butter, or bread-and-butter.—Taking care not to overload the stomach with too much fluid; therefore, a breakfast-cupful of gruel or of arrowroot, or two tea-cupfuls of tea, at a time, must not be exceeded; otherwise, the patient will feel oppressed; she will be liable to violent perspiration, and there will be a too abundant secretion of milk.

452. *For the next—the second—day—Breakfast,*—dry-toast-and-butter, or bread-and-butter, and black tea. *Luncheon,*—a breakfast-cupful of strong beef-tea,* or of arrowroot, made with good fresh milk. *Dinner,*—chicken or game, mashed potatoes and bread. *Tea,*—the same as for breakfast. *Supper,*—a breakfast-cupful of well-boiled and well-made gruel.

453. If beef-tea, and arrowroot, and milk, be distasteful to the patient, or if they do not agree, then

* There are few persons who know how to make beef-tea; let me tell you of a good way:—Let the cook mince VERY FINE—as fine as sausage meat—one pound of hip-steak—taking care that every particle of fat (there is not much on the hip) is removed;—then let her put the meat into a saucepan with three pepper-corns and a pint and a half of *cold* water; let the saucepan be put on the fire to boil; let it boil for half an hour—only for half an hour—and then let it be strained; and you will have most delicious beef-tea—light and nourishing—grateful to the stomach and to the palate. It may be served up with a finger or two of dry toast and with salt to suit the palate.

let her have for luncheon, a light egg-pudding or a little rice-pudding, instead of the beef-tea or the arrow-root.

454. *On the third and fourth days.*—Similar diet to the *second day*, with this difference, that the patient may have mutton instead of chicken or game, for her dinner.—Gradually the diet may be improved, so that at the end of four days, a mother may return to her usual diet; provided it be plain, wholesome and nourishing.

455. The above is the scale of dietary *for the generality of cases*; but, of course, every lying-in woman must not be treated alike. If the patient be weak and delicate, she may require good nourishment from the beginning, and instead of giving her gruel, it may be necessary to prescribe from the *very commencement*,—good strong beef-tea, chicken-broth, mutton chops, grilled chicken, game, &c. Common sense must guide us in the treatment of a lying-in woman as of every other patient. We cannot treat patients by rule and compass—we must be guided by circumstances—we can only lay down general rules.

BEVERAGE.

456. *For the first week*—toast-and-water—with the chill taken off—is the best beverage.—Wine, spirits, and beer, during this time, should not be given, unless the patient be weak and debilitated, or unless ordered by the Medical man.

457. When the patient is weak, and faint, and low, it may be necessary, as early as the first or second day, to give a stimulant—such as, a tumblerful of home-brewed ale, or a glass or two of wine, daily; but as I before remarked, in the generality of cases, for the first week after a confinement, toast-and-water is the best beverage.

458. *After a week*—a tumbler of mild home-brewed ale, or of London or of Dublin porter—where they agree—should be taken at dinner; but, if ale or porter be given, wine must not be allowed.—It would be well, to keep either to ale, or to porter, as may best agree with the patient, and not to mix them; nor to take porter at one meal, and ale at another.

459. Barrelled porter in this case, is superior to bottled porter; as it contains less fixed air.—On the whole, however, I should prefer *home-brewed* ale to porter.—Old, or very new, or very strong ale must not be given.

460. In the summer, great care is required; as the warm weather is apt to turn the beer acid.—Such beer would not only disagree with the mother, but would disorder the milk, and thus the infant.—Sometimes, a nursing mother endeavours to correct *sour* porter, or *sour* beer, by putting soda in it.—This plan is objectionable—as the constant taking of soda is weakening to the stomach, and impoverishing to the blood. Moreover, it is impossible to make *sour* porter

sound and wholesome, and fit for a nursing mother or for any one else, by any artificial expedient.—If beer, or porter, is sour, it is not fit to drink, and must be thrown away, or should be given to the pigs!

461. Sometimes, neither wine, nor malt-liquor, agree; then, new-milk-and-water will generally be found the best beverage.—If milk should disagree,—barley-water, or toast-and-water, must be substituted.

CHANGE OF ROOM.

462. The period at which a lying-in-woman should leave her room, will, of course, depend upon the season, and upon the state of her health.—After the first fourteen days, she may, usually, change the chamber for the drawing-room, provided it be close at hand; if it be not, she may, during the day, remove—be wheeled in a chair—from one bedroom to another; as, change of apartment will then be desirable.—During her absence from the room, the windows **MUST** be thrown wide open; and the bed-clothes should be thrown back, in order that they may be well ventilated.—At the end of three weeks, she may take her meals with the family; but, even then, she must lie on the sofa, occasionally, during the day, to rest her back.

EXERCISE IN THE OPEN AIR.

463. The period at which a lady, after her confine-

ment, should take exercise in the *open* air, will, of course, depend upon the season, and upon the state of the wind and the weather.—In the *winter*, not until the expiration of a month, and not even then, unless the weather be fine for the season.—Carriage exercise will be the most suitable at first.—In the *summer*, she may, at the end of three weeks, take an airing in a carriage; provided the weather be fine, and the wind be not in an easterly or in a north-easterly direction.—At the expiration of the month, she may go out of doors regularly, provided the season and the weather will allow, and she may, gradually, resume her household duties and employments.

PART IV.

SUCKLING.

THE DUTIES OF A NURSING MOTHER.

464. A mother should not undertake to suckle her child, UNLESS SHE INTENDS TO DEVOTE HERSELF TO HIM.—She must make up her mind to forego the so-called pleasures of fashionable life.—In a case of this kind, there must be no half-and-half measures,—she must either give up her helpless child to the tender mercies of a wet-nurse, or she must devote her whole time and energy to his welfare—to the greatest treasure that God can give her!

465. Oh! if a mother did but know the joy that suckling her infant imparts, she would never contemplate, for one moment, having a wet-nurse to rob her of that joy:—

“The starting beverage meets the thirsty lip,
’Tis joy to yield it, and ’tis joy to sip.”*

* *The Nurse: a Poem.*

466. Lamentable, indeed, must it be, if any unavoidable obstacle should prevent a mother from suckling her own child!

THE BREAST.

467. As soon as the patient has recovered from the fatigue of the labour—that is to say, in about four or six hours—attention must be paid to the breasts—more especially in a *first* confinement.

468. If there be milk in the breast—which may be readily ascertained by squeezing the nipple—the infant should be applied, *at first*, not *frequently*—as some do—but at considerable intervals—say, every four hours—until the milk be properly secreted;—when such is the case, the child must be applied more frequently, but still at stated times.

469. Before applying the baby to the breast,—let the breasts and the nipples be first sponged with a little warm water, to wash away any viscid mucus from the nipple, or stale perspiration from the breast that may be there, and then let the wetted parts be dried with a warm, dry napkin :—for some infants are so particular that they will not suck unless the breasts and nipples be perfectly free from mucus and perspiration.—If, after doing so, there be any difficulty in making him take the breast, smear a little cream on the nipple, and then immediately apply him to it.

470. If the breast be full, hard, knotty, and painful—which they generally are two or three days after a *first* confinement—let them be tenderly rubbed, every four hours, with equal parts of olive-oil and of *Eau de Cologne*—which should be well shaken up, in a bottle, every time before it is used.

471. If the breasts are more than usually large and painful, in addition to assiduously using the above liniment—apply, in the intervals, young cabbage-leaves to the breasts, which must be renewed after each rubbing.—The “veins” of the leaves must be cut smooth—level with the leaf—with a sharp knife—before they are applied to the breast.—It will require several leaves, as the whole of the breast must be covered.—The cabbage-leaves will be found very serviceable and comfortable.—The breasts should then be supported with a large, soft, folded, silk-handkerchief—going under the bosoms and suspending them, the handkerchief to be tied at the back of the neck,—thus acting as a kind of sling to the bosoms.

472. While the breasts are full and uncomfortable, the patient must not drink *much* fluid; as it would only encourage a larger secretion of milk.

473. When the milk is at “its height” as it is called, she must take a little cooling medicine—a seidlitz powder, every morning—and the following effervescing mixture, every four hours:

Take of—Bicarbonate of Potash, one drachm and a half;
 Distilled Water, eight ounces :

To make a mixture. Two table-spoonfuls to be taken, with one table-spoonful of lemon juice, every four hours, whilst effervescing.

474. In two or three days, under the above management, the size of the breasts will decrease, all pain will cease, and the infant will take the breast with ease and comfort.

475. If, unfortunately, proper precautions have not been taken, and the breast should gather, and become what is popularly called a “bad breast,” other treatment will be necessary, and which I shall comment on in subsequent paragraphs, under the head of “Gathered Breasts.”

STATED TIMES FOR SUCKLING.

476. A mother should suckle her infant at stated times.—It is a bad habit to give a child the breast every time he cries, regardless of the cause; for, be it what it may—overfeeding, “wind,” or acidity—a mother is apt to consider the breast a panacea for all his sufferings.—“A mother generally suckles her infant too often, having him almost constantly at the breast.—This practice is injurious both to parent and to child.—For the first month,—he should be suckled about every hour and a half; for the second month,—every two hours; gradually increasing the distance

of time between, as he becomes older; until, at length, he has the breast about every four hours.—If a child were suckled at stated periods, he would only look for it, at those times, and be satisfied.”*

477. Frequently a mother allows her infant to be at the breast a great part of every night.—Now, this plan is hurtful both to parent and to child; it weakens the mother, and thus enfeebles the infant; it robs them both of their sleep; and generates bad habits, which it will be difficult to break through; it often gives the mother a sore nipple, and the child a sore mouth.

478. It is surprising how soon an infant, at a very early age, might be brought into good habits by judicious management; it only requires a little determination and perseverance at first; therefore, a nursing mother must at once commence by giving the child the breast at stated periods, and should rigidly adhere to the times above recommended.

479. A mother must never give her infant the breast *immediately* after taking a long walk, and while her skin is in a state of *violent* perspiration; or, it will inflame the milk, and will thus disorder the child's bowels, or it may originate some skin disease, which might be difficult to cure.—She must, therefore,

* *Advice to a Mother on the Management of her Offspring*; the seventh edition. By Pye Henry Chavasse, F.R.C.S.

wait until the surface of her body is *moderately* cool before she gives him the breast. Let her be careful not to sit in draughts the while.

CLOTHING.

480. A nursing mother must have her dress—more especially her stays—made loose.

481. Gathered breasts sometimes arise from the bones of the stays pressing upon them: I should, therefore, recommend her to have the bones removed.

482. If a lady be not in the habit of wearing flannel waistcoats, she must, at least, have her breasts covered with flannel; taking care, that there be a piece of linen over the nipples.

483. I should advise a nursing mother to provide herself with a water-proof nursing apron, which may be procured at any baby-linen establishment.

DIET.

484. A mother who is suckling, should live plainly:—her diet should be light and nourishing.—It is a mistaken notion that, at these times, she requires *extra* good living.—A mother must never be forced to eat more than her appetite demands; if she is,—indigestion, heart-burn, sickness, costiveness, or bowel-

complaints will ensue.—IT IS A FOLLY, AT ANY TIME, TO FORCE THE APPETITE.—If a patient be not hungry, compelling her to eat will do her more harm than good.—In such a case, a Medical man must be consulted.

485. The best meats are—mutton and beef: veal and pork may be eaten, occasionally, for a change.—Salted meats are hard of digestion; therefore, if boiled beef be eaten, it must be very slightly salted.—In winter, it is better to have the boiled beef *unsalted*; it is then, especially if it be the rump, deliciously tender.—Of course, salt must be eaten with the *unsalted* meat.—High-seasoned dishes are injurious; they inflame the blood, and thus they disorder the milk.

486. Some persons consider—that there is no care requisite in the selection of the food, and that a nursing mother may eat anything: but, if we appeal to reason and to facts, we shall be borne out in saying, that great care is required.—It is well known, that cow's milk very much partakes of the properties of the food on which the animal lives.—Thus,—if a cow feeds on Swedes, the milk and the butter have a turnipy flavour.—This decides, beyond a doubt, that the milk does partake of the qualities of the food on which she feeds.—The same reasoning holds good in the human species, and proves the absurdity of a nursing mother being allowed to eat anything, be it ever so gross, indigestible, or unwholesome!—Again, a dose of purgative medicine given to the mother, or greens taken by her at dinner, will sometimes purge

the child as violently, or, even more so, than it will the parent herself.

487. Even a wet-nurse's milk—be it ever so healthy—acts differently, and less beneficially, upon the child, than the mother's *own* milk.

488. An infant, who is suckled by a mother who lives grossly, is more prone to disease—particularly to skin and to inflammatory complaints—and to disease which is more obstinate to subdue.

489. Do not let me be misunderstood,—I am not advocating that a mother should be fussily particular—by no means.—Let a nursing mother take a variety of food—both animal and vegetable;—let her vary her diet from day to day;—let her ring the changes on boiled and stewed, on grilled and roast meats;—on mutton and lamb and beef, on chicken and game and fish;—on vegetables—potatoes and turnips, on broccoli and cauliflower, on asparagus and French-beans.

490. But what I object to a nursing mother taking are,—gross meats—such as goose or duck,—highly salted beef,—shell-fish—such as lobster or crab,—rich dishes,—highly-seasoned soup,—pastry—unless it be plain,—and cabbages and greens and pickles—if found to disagree with the infant,—and with any other article of food which is rich, gross, and indigestible, and which she has found, by experience, to

disagree with herself, or with her child.—It will be seen, therefore, from the above catalogue, that my restrictions, as to diet, are limited, and are, I hope, founded on reason and common sense.

491. A moderate quantity—say a tumbler—of fresh *mild* ale, or of porter, will generally be found the best beverage for dinner and for supper.—Wine, if taken at all, should only be used sparingly.—In the higher ranks of life, where a lady is in the habit of taking wine, it is necessary to continue it; although, the quantity must not be increased.

492. A nursing mother is subject to thirst: when such is the case—she must not fly to beer, or wine, to quench it; this will only add fuel to the fire.—The best beverages will be—toast-and-water, milk-and-water, barley-water, or weak black-tea.

493. A lady who is nursing, is liable to fits of depression.—Let me strongly urge the importance of her abstaining from wine, and from other stimulants, as a remedy: they would only raise her spirits for a time, and then would depress them in an increased ratio.—A drive in the country, or a short walk, or a cup of tea, would be the best medicine.

494. Spirits are injurious during suckling: I may even say,—that they are insidious poison to the parent and, indirectly, to the child.

495. It is undesirable for a mother to take stimu-

lants—such as ale or wine—when the infant, that she is nursing, is labouring under an inflammatory complaint: in such a case,—toast-and-water will be the best beverage for her dinner; gruel for her supper; and black-tea—not coffee, as it would be too stimulating—for her breakfast and tea.

FRESH AIR AND EXERCISE.

496. Exercise, during suckling, cannot be too strongly insisted upon.—Whenever the weather will admit, it must be taken.

497. Whatever improves the health of the mother, of course benefits the child; THERE IS NOTHING MORE CONDUCTIVE TO HEALTH, THAN FRESH AIR AND EXERCISE.

498. A mother must not nurse her infant *immediately* after taking exercise—but wait for half an hour.—Nor should she take *violent* exercise; as it would be likely to disorder the milk.

499. If the weather be hot and sultry,—carriage exercise is preferable to walking; if that be not practicable,—she should have the windows thrown open, and should walk about the hall and the rooms, as she would, by such means, avoid the intense heat of the sun.

THE POSITION OF A MOTHER DURING SUCKLING.

500. Good habits are as easily formed as bad ones.—A mother, while in bed, must always suckle her child while lying down.—The sitting-up in bed, during such times, is a fruitful source of inflammation, and of gatherings, of the breasts.—Of course, during the day, the sitting-up position is the best.—Let me caution a lady, not to nurse her infant in a half-sitting and in a half-lying posture ; it will spoil her figure, disturb her repose, and weaken her back.

THE TEMPER.

501. Passion is injurious to the milk, and, consequently, to the child.—Sudden joy and grief of the parent frequently disorder the infant's bowels, producing griping, looseness, &c. ;—hence, a mother who has a mild placid temper generally makes an excellent nurse ; on which account, it is a fortunate circumstance, that a lady is frequently better tempered during suckling, than at any other period ; indeed, at such times, she usually experiences great joy and gladness !

502. As a rule—the happiest period of a woman's existence, is, when she first becomes a mother.—“The pleasure of the young mother in her babe is said to be more exquisite than any other earthly bliss.” *

* *Good Words*, October, 1861.

503. It is an old saying, and I believe, a true one—that the child inherits the temper of his mother or of his wet nurse.—This may be owing to the following reasons:—If the mother or the wet-nurse be good-tempered—the milk will be more likely to be wholesome, which will, of course, make the child more healthy, and, consequently, better tempered.

504. While, on the other hand, if the mother or the nurse be of an irritable, cross temper, the milk will suffer, and will thus cause disarrangement to the child's system; and hence, ill-health and ill-temper will be likely to ensue.—We all know the influence that good or bad health has on the temper.

505. One and an important reason, then, why a nursing mother is often better tempered than she is at other times, is, that she is in better health,—her stomach is in a healthier state.—There is an old and a true saying,—“that it is the stomach that makes the man,” and if the man, the woman!

OCCUPATION.

506. I strongly recommend a mother to attend to her household duties.—A lady, who is nursing, is never so happy, nor so well, as when her mind is moderately occupied.

507. I do not mean by occupation—the frequenting

of balls, or routs, or parties: a nursing-mother HAS NO BUSINESS TO BE AT SUCH PLACES;—she should devote herself to her infant and to her household, and she will then experience the greatest happiness this world can afford!

508. One reason, why the poor make so much better nursing mothers than the rich, is, the former having so much occupation; while the latter, having no real work to do,—the health becomes injured, and the functions of the breasts suffer in consequence.

509. What would not some rich mother give for the splendid supply of milk—healthy, nourishing, life-giving milk—of the poor woman, who has to labour for her daily bread!

510. What is the reason that rich ladies so frequently require wet-nurses? The want of occupation!—And from whom do the rich obtain the supply of wet-nurses? From the poor women, who have no lack of occupation, as they have to labour for their daily bread,—and have, in consequence, the riches of health, though poor in this world's goods:—

“For health is riches to the poor.”*

Bear this in mind, ye rich, and indolent, and pampered ladies! and alter your plans of life, or take the

* Fenton.

consequences, and still let the poor women have the healthy, the chubby, the rosy, the laughing children; and you, ye rich ones! have the unhealthy, the skinny, the sallow, the dismal little old men and women, who are constantly under the Doctor's care, and who have to struggle for their very existence!

511. Occupation, then, bustling occupation—real down-right-work—either in the form of out-door exercise, or of attending to her household duties, a lady **MUST** take, if she wishes to have a good breast of milk;—if, in point of fact, she is desirous to have healthy offspring! For the **ALMIGHTY** is no respecter of persons! And **HE** has ordained that work shall be the lot of man and of woman too!—**IT IS A BLESSED THING TO BE OBLIGED TO WORK.**—If we do not work, we have all to pay a heavy penalty, in the form of loss of health and happiness!

512. A mother who is listless and idle, lolling on an easy chair, or reclining on a sofa, the greater part of every day, in a room where a breath of air is not allowed to enter, usually makes a miserable and wretched nurse.—She is nervous, dyspeptic, and emaciated; having little milk, and that little, of a bad quality: her infant is puny, pallid, and unhealthy, and, generally, drops into an untimely grave.—**OCCUPATION, THEN, WITH FRESH AIR AND EXERCISE, IS INDISPENSABLE TO A MOTHER WHO IS SUCKLING.**

AILMENTS, ETC.

513. *The Nipple.*—A *good* nipple is important to the comfort of the parent, and to the well-doing of the child.

514. One, among many, of the ill-effects of stays and of corsets, is, the *pushing-in of the nipples*;—sore-nipples, and consequent suffering, are the result.—Moreover, a mother thus circumstanced, may be quite unable to suckle her infant; and, then, she will be severely punished for her ignorance and folly; she will be compelled to forego the pleasure of nursing her own children, and she will be obliged to delegate to hirelings her greatest privilege!

515. *Treatment of small and drawn-in nipples.*—The child must suck through the intervention of an India-rubber teat, fastened on a glass or a box-wood shield,* made for the purpose.—The India-rubber teat must be softened, by dipping it in warm—but not in hot—water, before it is used.—I have known many mothers able to suckle their children with this contrivance, who otherwise would have been obliged, either, to have weaned them, or, to have procured the assistance of a wet-nurse.—The above aid will enable the infant, in the generality of instances, to suck with ease.—After this has been used for a time, the nipples

* Which may be procured of any respectable surgical instrument maker.

may be so improved as to render the continuance of it unnecessary.—Of course, I do not advise an India-rubber teat to be used,—until a fair trial has been given to suckle the child, by applying him *at once* to the nipple;—but if he cannot draw out the nipple, then, rather than wean him, or than employ a wet-nurse,—the India-rubber teat should be tried.

516. Remember, as soon as the nipple is sufficiently drawn out, which, in all probability, it will be in a few days—the India-rubber teat **MUST** be dispensed with.—In such a case, when the child is not at the breast—a nipple-shield, *without* the India-rubber teat, should be worn.—Small and bad nipples have frequently been drawn out, and made good ones—by wearing nipple-shields: the dress will suffice to keep them in their places.

517. *Sore-nipples*.—If a lady, during the latter period of her pregnancy, were to adopt the plan recommended at page 77, paragraph, 220, sore-nipples would not be so prevalent during the period of suckling, as they now are.

518. A sore-nipple is frequently produced—by the injudicious plan of a mother allowing her child to have the nipple almost constantly in his mouth.—Stated periods for suckling must therefore be strictly adopted, as recommended at paragraph 476.—Another frequent cause of a sore-nipple, is, from the child having the thrush.—It is a folly to attempt to cure the nipple,

without, at the same time, curing the mouth of the infant.

519. *Treatment.*—One of the best remedies for a sore-nipple, is the following powder :

Take of—Biborate of soda, one drachm ;

Powdered starch, seven drachms :

Mix.—A pinch of the powder to be frequently applied to the nipple.

As there is nothing in the powder injurious to the infant, the powder must NOT be wiped off before applying him to the nipple ; indeed, the powder is likely to be of service to the child, in preventing, or in curing, a sore-mouth.

520. If this powder should not have the desired effect,—“ a liniment composed of equal parts of glycerine and of brandy ” may be tried, which should be shaken up just before using.—The liniment must be painted on the nipple, by means of a camel’s-hair brush, every time before, and directly after, the infant has been suckled.—The liniment should not be wiped off before applying the child.

521. A mother must be careful to *dry the nipple*,—not by rubbing it, but by dabbing it—with a piece of linen rag, every time after the infant has taken the breast, and before applying the powder, or the liniment.

522. When the nipple is very sore, a mother suffers intense pain, whenever the child is put to the breast.—This being the case, she had better suckle the child through the intervention of an India-rubber teat, properly fastened on a shield, as before recommended, see page 172, paragraph 515.

523. Sometimes a nursing mother is annoyed by the milk *flowing away constantly*, making her wet and uncomfortable.—Under such circumstances, all that can be done is,—to wear nipple-glasses; and to apply a piece of flannel to the breast, which will prevent the milk from chilling her, and will thus do away with the danger of her catching cold, &c.

524. *The Breast.*—Before applying the infant to the breast, the mother should carefully ascertain if there be milk.—This may be readily done by squeezing the nipple between the finger and the thumb.—If there be no milk,—she must not apply the child to the breast, but must wait until the milk be secreted,—or serious consequences both to the mother and to the child may ensue:—to the former—inflammation and gathering of the breast, and sore nipples;—to the latter—thrush, diarrhœa, and eruptions on the skin.*

525. If there be a supply of milk in the breast, and

* For much valuable information on this subject, see *A New and Rational Explanation of the Diseases peculiar to Infants and Mothers.* By Thomas Ballard, M.D.

still the child will not suck, the Medical man's attention must be drawn to the fact ; in order, that he may ascertain whether the child be tongue-tied ; if he be—the mystery is explained, and a simple painless operation will soon make all right.

526. If the *breasts be full and uneasy*, they must be well, although tenderly, rubbed with the right hand, three or four times a day,—with olive-oil and *eau de Cologne* (of each equal parts, mixed in a vial bottle), taking care to support the bosom, with the left hand, during such friction.—Some nurses rub with their fingers only : now such rubbing does harm.—The proper way to apply friction, is, to pour a small quantity of the oil-and-*eau-de-Cologne*—first shaking the bottle—into the palm of the hand, and, then, to well rub the breasts with it—taking care to use the whole of the inside of the hand, and that the hand be warm.

527. After the breasts have been well rubbed, they must be nicely supported with a large, soft, folded silk handkerchief, which must pass *under* the breasts, and *over* the shoulders, and should be tied at the back of the neck—thus, acting as a sling.

528. If the breasts be very uncomfortable, I have found,—young cabbage leaves (with the “veins” of each leaf cut level to the leaf) applied to the breasts, after each application of the oil-and-*eau-de-Cologne* liniment, afford great relief.—Or,—a large, warm, white-bread-

and-milk-and-olive-oil poultice should be applied, which must be renewed three or four times a day.—The way to make the poultice, is, as follows:—A thick round of bread should be cut from a white loaf; the crust must be removed; the crum should be cut into pieces, about an inch square; upon which, boiling-hot new-milk must be poured; it should be covered over for ten minutes; then, the milk must be drained off; and the olive-oil—previously warmed, by placing a little on the hob, in a tea-cup—should be beaten up with the moistened bread, by means of a fork, until it be of the consistence of a soft poultice.—It must be applied to the bosom as hot as it can be comfortably borne.

529. *Gathered Breast.*—A gathered breast, or “bad breast”—as it is sometimes called—is more likely to occur after a *first* confinement, and during the *first* month; therefore, great pains must be taken to avoid such a misfortune.—A gathered breast is frequently owing to the carelessness of a mother, in not covering her bosoms during the time she is suckling. Too much attention cannot be paid to keeping the breasts *comfortably* warm. This, in the daytime must be done, during the act of nursing, by throwing a shawl, or a square piece of flannel, over the neck, the shoulders, and the breasts.

530. Another cause of gathered breast arises from a mother sitting up in bed to suckle her child.—An infant must be accustomed to take the breast while

the parent is lying down ; if this habit is not instituted at first, it will be difficult to adopt it afterwards. — Good habits may be taught an infant from the earliest period of his existence.

531. Another fruitful cause of a gathered breast, is, a sore-nipple. — A mother dreads putting the child to it, in consequence of the suffering it produces ; she, therefore, keeps him almost entirely to the other bosom. — The result is, — the breast with the sore nipple becomes distended with milk, which being unrelieved, ends in inflammation and gathering.

532. Another, and a very frequent cause of a gathered breast, is, the *fruitless* attempt of an infant to procure milk, when there is very little or none secreted. — Dr. Ballard, in his valuable little work before quoted, considers this to be the *principal* cause of gathered breasts ; and, as the subject is of immense importance, I cannot do better than give it in his own words, more especially, as he has the merit of originating, and of bringing the subject prominently before his Professional Brethren. — He says : — “ This (mammary abscess or gathered breast) is another form of disease entirely referable to the cause under consideration [fruitless sucking]. In the case last related, the formation of mammary abscess [gathered breast] was only just prevented by arresting any further irritation of the breast by suckling ; and since I have kept careful notes of my cases, I have observed that in all instances of abscess, there has been abundant

evidence of a demand being made upon the gland for a supply of milk beyond that which it had the power of secreting. If the child *only* has been kept to the breast, then *it* has suffered with disordered bowels; but, in the majority of cases, an additional irritation has been applied; the commonly received doctrine, that a turgid breast is necessarily overloaded with milk, leads mothers and nurses to the use of breast pumps, exhausted bottles, or even the application of the powerful sucking powers of the nurse herself, to relieve the breasts of their supposed excess; and it is this extraordinary irritation, which in the majority of cases, determines the formation of an abscess [gathering]. Sometimes these measures are adopted to remove the milk when a woman is not going to suckle, and then an abscess not unfrequently is established. I have previously alluded to the mistake into which mothers and nurses are led by the appearance of a swollen breast; it is not evidence that the gland can secrete freely, and it is in this turgid state that the excessive irritation tells most severely. This hyperæmic [plethoric] condition seems to be a step towards inflammation, and the irritation supplies that which is wanting to complete the process. If a woman will only remove the child from the breast directly the act of sucking produces pain, she may be pretty sure to avoid abscess. So long as the milk can be obtained there is no pain." THE ABOVE MOST VALUABLE ADVICE SHOULD BE STRICTLY FOLLOWED.

533. *How is a patient to know that she is about to*

have a gathered breast? There are two forms of gathered breast; one being of vast, and the other, of trifling importance.—The first—the serious one—consists of gathering of the *structure of the gland* of the breast itself; the latter, merely of the *superficial part* of the bosom, and must be treated with warm poultices, in the same manner as any other *external* gathering.

534. In the mild, or superficial kind, of gathered breast, the mother may still continue to suckle her child, as the secreting portion of the breast is not implicated in the gathering; BUT IN THE SEVERE FORM, SHE MUST NOT ON ANY ACCOUNT WHATSOEVER, BE ALLOWED TO DO SO, BUT MUST INSTANTLY WEAN HER CHILD FROM THE AFFECTED SIDE.—The *healthy* breast, she may still continue to nurse from.

535. The *important* form of gathered breast I will now describe:—A severe gathered breast is ALWAYS USHERED IN WITH A SHIVERING FIT.—Let this fact be impressed deeply upon my reader's mind.—This shivering is either accompanied, or followed, by sharp, lancinating pains of the bosom.—The breast now greatly enlarges, becomes hot, and *is very painful*.—The milk, in the affected bosom, either lessens, or entirely disappears.—If the child is applied to the breast (WHICH HE OUGHT NOT TO BE), it gives the mother *intense* pain.—The patient is now feverish and ill; she loses her strength and appetite; and is very thirsty.

536. A Medical man must be sent for at the very ONSET of the shivering-fit ; and he will, in the generality of instances, be able to prevent such a painful and distressing occurrence. If twelve hours be allowed to elapse after the shivering has taken place, before he is sent for, the chances are, that the gathering cannot altogether be prevented ; although, even then, it may be materially lessened.

537. We sometimes hear of a poor woman suffering dreadfully for months, and of her having a dozen or twenty holes in her breast!—This is generally owing to the Doctor not having been sent for *immediately* after the shivering ; therefore, I cannot too strongly insist upon a mother obtaining *prompt* attendance under such circumstances ; not only to obviate present suffering ; but, at the same time, to prevent the function of the breast from being injured ; which it inevitably will be—more or less—if the important form of gathering be allowed to take place.

538. When a mother *feels faint* during suckling, she must *immediately* lie down and should take a little nourishment ;—a crust of bread and a draught of ale or of porter, or a glass of wine, or a cup of tea with the yolk of an egg beaten up in it,—either of which will answer the purpose extremely well.—Brandy, or any other spirit, I would not recommend, as it will only cause a greater depression to ensue as soon as the *immediate* effects of the brandy are gone off ; not only so, but the *frequent* taking of brandy may become

a habit—a necessity—which would be a calamity deeply to be deplored!

539. Sometimes a mother is faint from suckling her child too often,—she having him almost constantly at the breast.—Of course, as long as she continues this foolish practice, she must expect to suffer from faintness.

540. *Aperients, &c., during suckling.*—Strong purgatives are improper during this period, as they are apt to give pain to the infant, as well as to injure the parent.—If it is absolutely necessary to give a mother an aperient,—the mildest must be chosen,—such as a dose of castor-oil.

541. If she cannot take oil, then she may apply it EXTERNALLY to the bowels, as recommended at page 60.

542. A lavement—a clyster—of warm water, or,—of gruel-oil-and-table-salt,*—applied by means of a good self-injecting enema-apparatus, is an excellent method of opening the bowels; as, it neither interferes with the digestion of the mother nor of the child.

543. When a lady, who is nursing, is habitually

* Two table-spoonfuls of olive-oil, two table-spoonfuls of table-salt, and a pint of warm oatmeal gruel.

costive,—she should eat bran-bread, instead of white-bread.—This will, in the majority of cases, enable her to do without aperients.—The bran-bread may be made—by mixing one part of bran and three parts of fine wheaten-flour together, and then making it into bread in the usual way.

544. Stewed prunes is an excellent remedy to prevent constipation.—The patient must eat a dozen or fifteen of them every morning.—The best way to stew prunes is the following:—Put a pound of prunes and two table-spoonfuls of *raw* sugar into a brown jar; cover them with water; put them into a slow oven; and stew them for three or four hours.

545. A teaspoonful or two of honey, either spread on a slice of bread, or dissolved in a cup of tea, and taken at breakfast, frequently operates nicely on the bowels.

546. A basinful of gruel—made with Robinson's Patent Groats—taken, every night, for supper, will often supersede the necessity of giving an aperient.—A tumblerful of cold, spring water—cold from the pump—taken early every morning, sometimes effectually opens the bowels.—I should strongly recommend a patient, in such a case, to eat a great variety of food, and to let the *vegetable* element predominate.

547. Another excellent method of opening the bowels, is, by means of the “wet compress.”—The

way of applying it, is as follows:—Fold a napkin several thicknesses, until it is about half a foot square, then dip it in *cold* water, and place it over the bowels, over which apply either oil-skin, or gutta-percha-skin;—it should be kept in its place by means of a bolster-case or a broad bandage; and must be applied at bed-time, and should remain on for three or four hours, or until the bowels are opened.

548. Let me again — FOR IT CANNOT BE TOO URGENTLY INSISTED UPON—strongly advise a nursing mother, to use every means—in the way of diet, &c.—to supersede the necessity of the taking of opening medicine; as the repetition of aperients injures—and that severely—both mother and child.

549. Moreover,—the more opening medicine a patient swallows, the more she requires; so that if she once gets into the habit of taking aperients regularly, the bowels will not act without them.—What a miserable existence to be always swallowing physic!

550. If a lady, then, during the period of suckling,—were to take systematic exercise in the open air; if she were to bustle about the house, and attend to her household duties; if she were to vary her food, both vegetable and animal—and partake of sound ripe fruit; if she were to use an abundance of *cold* water to her skin; if she were to take a tumbler of *cold* water, early every morning; if she were to apply a

“wet compress” to her bowels at bedtime, occasionally; if she were to visit the water-closet, regularly, at one hour; if she were to avoid quacking herself with physic; in short, if she would adopt the above simple remedies—which are in the reach of all—she would not suffer so much from costiveness, which is oftentimes the bane and the misery of her existence!

WEANING.

551. There is an old saying,—“that a woman should carry a child nine-months, and should suckle him nine-months.”—It is well known, that the first part of the old saw is correct, and experience has proved the latter to be equally so.—If a child is weaned *before* he is nine-months, he loses that muscular strength, which the breast-milk alone can give; if he is suckled *after* he is nine-months, he becomes flabby, weak, and delicate.

552. *The time, then, when an infant should be weaned.*—“This, of course, must depend upon the strength of the child, and upon the health of the parent: on an average,—nine months is the proper time.—If the mother is delicate, it may be found necessary to wean the infant at six months; or, if he is weak, or if he is labouring under any disease, it may be well to continue suckling him for twelve months; but, after that time, the breast will do him more harm than

good, and will, moreover, injure the mother's health."*

553. If he be suckled after he is twelve months old,—he is generally pale, flabby, unhealthy, and rickety;—and the mother is usually nervous, emaciated, and hysterical.—A child who is suckled beyond the proper time—more especially if there be any predisposition—frequently dies of water-on-the-brain, or, of consumption.

554. *The manner in which a mother should act, when she weans her child.*—“She must do it gradually, as the word signifies—that is to say—she should, by degrees, give him less and less of the breast, and more and more of artificial food; at length, she must only suckle him at night; and, lastly, it would be well, for the mother, either to send him away, or to leave him at home, and to go away herself for a few days.”*

555. “A good plan is,—for the nursemaid to have a half-pint bottle of new-milk—which has been previously boiled to prevent it from turning sour—in the bed, so as to give a little to the child, in lieu of the breast.—The warmth of the body will keep the milk of a proper temperature; and will supersede the use

* *Advice to a Mother on the Management of her Offspring*; the seventh edition. By Pye Henry Chavasse, F.R.C.S.

of lamps, of candle-frames, and other troublesome contrivances.”*

556. If the mother is not able to leave home herself, or to send her child *from* home ;—then, she must let the child sleep, with some *responsible* person, in another room.

557.—During the day-time,—if the mother cannot resist having the child in the room with her, then, I should advise her to make a paste of aloes—that is to say—let her mix a little powdered aloes with a few drops of water, until it is of the consistence of paste—and let her smear it on the nipple every time just before putting him to the breast: this will be *quite* enough for him ; and one or two aloe-applications to the nipple will make him take a disgust to the breast ; and, thus, the weaning will be accomplished.—A mother need not be afraid, that the aloes will injure her child: the *minute* quantity he will swallow will do no harm ; for the moment he tastes it—the aloes being extremely bitter—he will splutter it out of his mouth.

558. The best way of “*drying up the milk,*” is,—to apply to each breast—soap-plaister (*emplastrum saponis*), spread on soft pieces of wash-leather, with a round hole, the size of a shilling, in the middle of each to admit the nipple, and with a slit from the

* *Advice to a Mother.*

centre to the circumference of each plaister to make a better fit.—These plaisters may be procured of any respectable chemist.

559. When the child is once weaned,—THE BREASTS MUST NOT BE DRAWN : as the drawing of them, would cause them to secrete larger quantities of milk ; THEREFORE, IF THE BREASTS BE EVER SO FULL, OR UNCOMFORTABLE, A MOTHER SHOULD LEAVE THEM ALONE ; she must wait patiently, and the milk will gradually diminish, and will, at length, disappear.

560. The drawing of the breasts, by means of breast-pumps and other like contrivances, in a case of this description, has frequently caused gathered breasts.—IF NOT DRAWN, THEY SCARCELY, IF EVER, GATHER.

561. The above plan will generally assuage the milk away in five or six days ; but if, at the end of three days, the bosoms still continue full and uncomfortable, —the plaisters must be removed, and the breasts should be well, but tenderly rubbed, every four hours, with equal parts of olive-oil and of *eau de Cologne* ; —the nurse supporting the bosom, during such friction, with her other hand.

562.—LET ME IMPRESS THE ABOVE IMPORTANT ADVICE ON A NURSING-MOTHER'S MIND,—IT MAY SAVE A GREAT DEAL OF AFTER SUFFERING AND MISERY.

563. It may be well to state,—that the milk does *not* always *entirely* leave the breast, not even for weeks, and, in some cases, not even for months, after the child has been weaned; it is not of the slightest consequence, and requires no treatment to get rid of it.

564. During the period of weaning,—the mother must live abstemiously, and should drink as little as possible.—In many cases,—it is necessary to give a few doses of mild aperient medicine,—such as—a Seidlitz-powder, or—a teaspoonful of Henry's magnesia and a teaspoonful of Epsom-salts in half a tumbler of warm water,—every morning, for two or three mornings.

565. *Symptoms denoting the necessity of weaning.*—Sometimes a mother cannot suckle her infant; the attempt bringing on a train of symptoms, similar to the following—singing in the ears; dimness of sight; aching of the eye-balls; throbbing in the head; nervousness; hysterics; tremblings; faintness; loss of appetite and flesh; fluttering and palpitation of the heart; feelings of great exhaustion; indigestion; costiveness; sinking sensations of the stomach; pains in the *left* side; great weakness and dragging pains of the loins—which are usually increased whenever the infant is put to the breast; pallor of the countenance; shortness of breath; swelling of the ankles.

566. Of course, every mother, who is suffering

from suckling *not* agreeing with her, does not have the *whole* of the above long catalogue of symptoms!—But, if she has three or four of the more serious of them,—she should not disobey the warnings, but must wean her infant as far as she herself is concerned; although, it may be necessary, if the child himself be not old enough to wean, to obtain a wet-nurse to take her place.

567. Remember, then, that if the above warning symptoms be disregarded, dangerous consequences might be the result, both to parent and to child.—It may throw the mother into a consumption, or bring on a heart-disease; and it may cause the infant to dwindle and pine away, in consequence of his not being able to obtain sufficient or proper nourishment.

568. Soon after nine months' nursing, "the monthly courses" generally return:—this is another warning that the child must IMMEDIATELY be weaned; as the milk will lessen in quantity, and in nourishment, and the child will become delicate and puny in consequence, and, every day he is suckled, will lose, instead of gain, ground.

569. At another time, although the above train of symptoms does not occur, a mother may not be able to suckle her child; notwithstanding she may be in perfect health.—Such a one usually has very small breasts, and but little milk in them; and, if she endeavours to nurse her infant, it produces a *violent*

aching of the bosom.—Should she disregard these warnings, and should she still persevere, it might produce inflammation-of-the-breast, which may, probably, end in gathering.

570. If a mother be predisposed to consumption ;—if she has had spitting of blood ;—if she be subject to violent palpitation of the heart ;—if she be labouring under great debility and extreme delicacy of constitution,—if she has any of the above complaints or symptoms,—she must not, on any account, suckle her child ; BUT SHOULD, BY ALL MEANS, PROCURE A HEALTHY WET-NURSE.

571. Occasionally a mother suckles her infant when she is pregnant.—This is highly improper ; as it not only injures her, and may bring on a miscarriage ; but is also prejudicial to the infant, and may produce a delicacy of constitution, from which he might never recover.

In conclusion,—I sincerely hope, that through God's blessing, this little work may be of benefit to my fair reader ; and trust that it may give her as much pleasure in the reading as it has given me in the writing of it.

of the ... and ... it is ...

... the ... of the ...

... the ... of the ...

... the ... of the ...

... the ... of the ...

I N D E X.

- ABLUTION after labour, 136
 " among the poor, 10
 " manner of young wife performing, 11
 " morning, 11
 " in pregnancy, 46
 Abortion, 88
 " the procuring of, 43
 Accoucheur, the duties of, 119
 After-birth should never be brought away by nurse, 141
 After-pains, 121
 Age at which menstruation commences, 32
 Ailments of pregnancy, 57
 " during suckling, 172
 Air, cold, the value of, 9
 Air and exercise in pregnancy, 47
 " during suckling, 167
 " and occupation, 48
 Ale and porter, sour, 155
 Amusements of a young wife, 21
 Aperient pills after confinement, 149
 Aperients in pregnancy, 58
 " before labour, 71
 " *immediately* after, improper, 148
 " during suckling, 182
 Articles wanted at labour, 126
 Artificial respiration, 139
 Assisting nature, on, 117
 BAD-BREAST, 177
 Bandage after confinement, 144
 Bearing-down pains, 112
 Bed, "the guarding of," 127
 Bed-room for pregnant female, 55
 Bedstead, a four-post, in labour, 125
 Beverage after labour, 154
 " the best for young wife, 15
 " for mother whose child is ill, 166
 Bidet should be regularly used, 46
 Bladder, irritability of, 79 & 110
 " importance of attending to, 131
 " in pregnancy, 79
 " sluggishness of, 79
 " state of, after confinement, 146
 Bowels to be opened before labour, 71
 Bowel-complaints of pregnancy, 61
 Bowels, state of, after labour, 148
 Brandy to be in the lying-in room, 130
 " on the use of, during labour, 130 & 143
 Bran-bread as an aperient, 182
 Breast during suckling, 159 & 175
 " full and uneasy, 176
 " painful during pregnancy, 77
 " gathered, 177

- Breast, gathered, causes of, 177
 " " importance of
 early treatment, 181
 " " shivering-fit in, 180
 " " symptoms of, 180
 " " two forms of, 180
 Breast-pump, ill effects of, 188
- CALOMEL dangerous in pregnancy, 58
 Carbonic acid gas in crowded rooms, 6 & 21
 Carriage exercise, on the abuse of, 3
 Castor-oil, the dose and manner of administering, 58
 " external use of, 60
 Caudle should be banished lying-in room, 143
 "Caul," a child's (*note*), 138
 "Ceasing to be unwell," 40
 Change of air for delicate wife, 28
 "Change of life," 39
 Change of room after labour, 156
 Cheerful wife, 23
 Cheerfulness during labour, 128
 " and occupation, 22 & 28
- Child born before arrival of Medical man, 136
 " should be gradually weaned, 173
- Chloroform in hard and lingering labour, 132
 "Cleansings," 149
 Clothing in pregnancy, 45
 " after labour, 142
 " during suckling, 163
 Clysters, 149 & 182
 Cookery, good and careful, 25
 Costiveness during pregnancy, 58
- Costiveness, a cause of *hard* labour, 62
 "Count," 100
 " the German method of making, 101
 " a good plan to make the, 101
- Country, on living in the, 9
 Cramp of the bowels, 83
 Cramps of the legs and thighs in pregnancy, 83 & 113
 "Croakers," during labour, 128
- DANCING, danger of young wife, 21
 Depression of spirits during suckling, 166
 Diarrhœa in pregnancy, 61 & 62
 Diet of a young wife, 14
 " " pregnant female, 52
 " after labour, 152
 Diet during suckling, 163
 Difficulty of lying down in pregnancy, 56
 " of making water, 132
 Dozing, ill effects of, 16
 Dress for labour, 127
 "Drying up the milk," 187
 Duration of menstruation, 33
 Duties of a nursing mother, 158
- EARLY RISING and early to bed, 15, 16, & 17
 Enemata of cold water, 68
 Exercise for a young wife, 2, 3, & 4
 " before breakfast, 13
 " immense importance of, 2 & 3
 " in close carriages, 4
 " in pregnancy, 47
 " during suckling, 167

- Exercise, fresh air and occupation during pregnancy, 47 & 48
 „ in open air after labour, 156
- FALSE labour-pains, 97
 Fainting in pregnancy, 80 & 81
 Faintness during suckling, 181
 "Falling of the womb," 152
 Fashionable system of spending married life, 1
 Feet, cold, exercise the remedy for, 5
 Females who have sick pregnancies, 76
 Fire, ill effects of sitting near, 3
 Flannel, 127
 Fœtal circulation (*note*), 45
 Food, variety of, necessary, 165 & 166
 Friend, the choice of, during labour, 128
 Fruit useful in pregnancy, 54
 Fruitless suckling, 178
- GARTERS, ill effects of, in pregnancy, 46
 Gathered breasts, 177
 „ „ causes of, 177
 „ „ importance of early treatment, 181
 Gestation, period of, 100
 "Guarding of the bed," 127
- HEART, palpitation of, during pregnancy, 82
 Heart-burn in pregnancy, 63
 Hints to attendants, 136
 „ to mother when infant is ill, 166
 Hot-water bag, 83
 Household duties, 24 & 25
 Husband in lying-in room, 119
- INDIA-RUBBER teat and shield for drawn-in nipple, 172
 „ for sore-nipple, 174
 Indolence, the ill-effects of, in pregnancy, 48
 Infant born apparently dead, 138
 Infant, the period of suckling an, 185
 Introductory Chapter, 1
 Irritation and itching, 87 & 88
- LABOUR, 109
 „ rapid, directions concerning, 136 & 137
 „ symptoms of, 109
 Lavements in pregnancy, 61
 Legs, the swollen, of pregnancy, 69
 Length of time of first labour, 120
 „ „ of an after labour, 120
 Lively women and easy labours, 48
 Luxury, ill effects of, 10
 Lying-in room, 145
 „ „ temperature of, 145
- MARSHMALLOW and camomile fomentation (*note*), 150
 Meddlesome midwifery reprobated, 115, 116, 117, 118, & 119
 Medicines in pregnancy, 57—88
 Menstrual fluid, 35
 Menstruation, 31
 „ painful, 37
 „ profuse, 38
 „ when not properly performed, 38

- Milk at "its height," 160
 „ the best way of "drying up" the, 187
 „ flowing away constantly, 175
- Miscarriage, 88
 „ care required after, 94
 „ causes of, 89 & 90
 „ consequences of a neglected, 94
 „ flooding in, 91, 92, & 93
 „ prevention of, 94
 „ symptoms of a threatened, 91 & 92
 „ treatment of, 93
 „ usual time of taking place, 92
- Misconception and prejudice, 146
- Monthly nurse, 102—108
- Morning-sickness, 40 & 73
- Mothers predisposed to consumption, 191
 „ who cannot suckle, 191
- NAVEL, pouting of, as a sign of pregnancy, 44
- Navel-string, the manner of tying, 140
 „ not to be tied until the child breathes, 139
- Nipple during suckling, 172
 „ means to harden, 77
 „ retraction of, 172 & 173
 „ shields, 172
 „ sore, 173
- Nose, a sentinel, 50
- Nursing-apron, 163
- OATMEAL gruel, as a fomentation, 150
- Occupation, 22, 23, 24, & 169
 „ fresh air, and exercise, 169
- Olive-oil as an aperient, 59
- PAINS, "bearing down," 112
 „ "grinding," 110 & 111
 „ at night in pregnancy, 57
- Painless parturition, 122
- Palpitation of the heart in pregnancy, 82
- Passion, the ill effects of, during suckling, 168
- Pendulous bowels of pregnancy, 70
- Period of gestation, 100
 „ of taking exercise, 156
- Physic a substitute for exercise, 5
- Piles in pregnancy, 64—68
- Plethoric pregnant females, 55
- Poisoned by one's own breath, 8
- Porter and ale for a nursing mother, 166
- Position after delivery, 142
 „ of a mother during suckling, 168
 „ of patient after labour, 144
- Poultice, a bread and milk and sweet-oil, 176
- Precursory symptoms of labour, 109
- Pregnancy, 40
 „ duration of, 100
 „ a natural process, 49
 „ period of, 100
 „ signs of, 40
- Preliminary observations, 1
- Preparations for labour, 126
- Prolific mothers (*note*), 33 & 34
- Proper time for a patient to sit up after labour, 151

- Proper time to send for Medical man, 110 & 113
 „ to send for the nurse, 110
- Protrusion of the bowels, 65
- Prunes, stewed, 183
- Puberty, period of (*note*), 32
- “QUICKENING,” 42 & 43
 „ flatulence mistaken for, 44
- Quiet after confinement, 151
- RAIN and wind, exercise in, 3
- “Reckoning,” to make the, 100
- Refreshment after labour, 143
- Remedies to prevent costiveness, 184
- Respiration, artificial, 139
- Rest after delivery, 142
 „ in pregnancy, 51
 „ and quietude after labour, 151
- Restlessness at night, 56
- Rich ladies, 10
- Rules for a female prone to miscarry, 94
- Rules of health, 29
- SEA-BATHING in pregnancy, 47
- Shivering during labour, 111
- “Show” a sure sign of labour, 110
- Shower-bath in pregnancy, 47
- Sick pregnancies, 76
- Sickness during labour, 111
- Signs of the foetal circulation (*note*), 45
 „ of pregnancy, 40
- Sitz-bath, the value of, 12, 46, & 87
- Skin of the abdomen cracked, 70
- Skylight, the best ventilator, 49
- Sleep in pregnancy, 55
 „ the value of, immediately after labour, 146
- Sleepiness of pregnant females, 57
- Sleeplessness of pregnant females, 57
- Sore-nipples, 173
- Spirits during suckling, 166
- Spurious labour-pains, 97
- Stages of labour, 122
- Stays should not be worn during labour, 127
- Subsidence of the womb before labour, 109
- Suckling, 158
 „ when female is pregnant, 191
- Support to bowels after confinement, 144
- Swollen legs in pregnancy, 69
- Symptoms of labour, 109
 „ denoting necessity of weaning, 189
- TABLE of duration of pregnancy, 100
- Teat, india-rubber, and shield, 172
- Teeth frequently decay in pregnancy, 73
- Temperature of a lying-in room, 145
- Things which will be wanted at a labour, 126
- Tight-lacing injurious to a young wife, 20
 „ ill effects of, in pregnancy, 45
- Time when a child should be weaned, 185
- Tooth-ache in pregnancy, 71
- Tooth-extraction, the danger of, in pregnancy, 71
- True labour-pains, 112
- “Trying of a pain,” 130

- URINE, retention of, 147
- VEINS, enlarged, of the leg, 69
- Ventilation, importance of, 6 & 49
„ manner of performing, 6
- Ventilation of lying-in room, 156
- Visitors in a lying-in room, 146
- WARM ablutions after labour, 150
- Warm baths for infants apparently still-born, 139
- Waters, "the breaking of the," 112
- Weaning, 185
„ an infant, the method of, 186
- Westmoreland and Cumberland poor women, 137
- Wet-nurses and mother's milk, 165
- "Whites" during pregnancy, 84
- Wife's mission, 2
- Wine during suckling, 166
- Womb, bearing-down of, 152

BY THE SAME AUTHOR,

Price Half-a-Crown, much Enlarged, the Seventh Edition of

ADVICE TO A MOTHER

ON THE

MANAGEMENT OF HER OFFSPRING,

AND ON THE

TREATMENT ON THE MOMENT OF THEIR MOST
PRESSING ILLNESSES AND ACCIDENTS.

EXTRACTS FROM REVIEWS OF THIS WORK.

DUBLIN QUARTERLY MEDICAL JOURNAL.

“We should be glad to see this work largely circulated among all classes; the advice is just such as might be expected from a sensible man, well acquainted with hygienic and sanitary laws and their application.”

EDINBURGH MEDICAL JOURNAL.

“This book contains much information to be got nowhere else in the popular or the collected form here presented.”

DUBLIN MEDICAL PRESS.

“Written in a clear, intelligible manner.”

MEDICO-CHIRURGICAL REVIEW.

“It is one of the most useful and honest little works which can be put into a female's hands.”

PROVINCIAL MEDICAL AND SURGICAL JOURNAL.

“This work, it will be at once perceived from its title, is intended for general circulation, and is well fitted for the purpose of affording useful information on many points on which young mothers require advice.”

 THE LONDON MEDICAL REVIEW.

(*First Notice.*)

“Mr. Pye Chavasse is one of our oldest and most earnest living writers in his department of popular medical literature, the first edition of his work upon the management of children having been published in 1839.

“It is seldom that we have had so much pleasure in perusing a medical book intended for circulation, principally, amongst the non-medical portion of the community; in no part of it does he fall into the common fault of most writers of similar publications, a large majority of whom would appear to have written solely for the purpose of magnifying their own abilities by a wholesale disparagement of their professional brethren; on the contrary, Mr. Chavasse gives plain, simple advice of great value to mothers and nurses, which is, at the same time, so evidently founded upon experience, as to render it a very useful and interesting work in a medical point of view.”

 THE LONDON MEDICAL REVIEW.

(*Second Notice.*)

“Conscious how very much the ‘advice’ which is given in these two volumes is needed by all classes of females, we heartily congratulate both the author on the success which has attended his efforts, of which the issue of a fourth and sixth edition is a sufficient guarantee; and also the public, for appreciating his well-meant and well-executed labours. The ignorance which everywhere prevails on subjects of vital importance to the health of the community, is as astonishing as it is lamentable, and

while we deprecate any officious interference with subtle questions of medical practice, we strongly recommend the study of these works by all those for whom they are written. The directions are given in a simple but intelligible manner, and they are such as we feel sure will be sanctioned and approved by every medical practitioner. Though not written for professional readers, there is yet a good deal here which students and young practitioners may read with advantage. One of the great advantages which an old practitioner has over a young one is the knowledge which he has gained from long personal experience of 'little things' not usually found in books, not taught in the schools, but which, nevertheless, are of great moment in practice, and will often contribute very greatly to the success of a 'young doctor.' These are the subjects which Mr. Chavasse has studied, which he here shows a happy mode of inculcating, and with which those who wish to make their way with mothers and wives should make themselves acquainted.

"The 'Advice to a Mother' *deserves* a special commendation, but having reached its sixth edition, it certainly does not *require* it. Moreover, it has on a previous occasion received a lengthened notice at our hands (*vide* vol. i. p. 12)."

REGISTRAR-GENERAL'S FIFTH ANNUAL REPORT.

"The popular works of Dr. Southwood Smith, Dr. Andrew Combe, Mr. Pye Chavasse, Dr. Hodgkin, and others, place within the reach of the public important doctrines which were unknown to Sydenham. Such popular medical literature has an extensive sale."

THE AMERICAN JOURNAL OF THE MEDICAL SCIENCES.

"To impart the important instruction above referred to is the intention of the volume before us, an intention in the carrying out of which the author has been, we think, eminently successful."

THE LITERARY GAZETTE.

“Mr. Pye Chavasse shows how, in this, his fifth edition of a very popular and useful manual, and without being friends to the domestic quackery so popular at the present day, we think that most mothers would be benefited by a careful study of his work.

“Anything that substitutes common sense for calomel, and hygiene for drugs, is an immense boon ; Mr. Chavasse, we are happy to say, has bestowed this boon on all who care to accept it.”

DUBLIN EVENING PACKET.

“This is the most valuable treatise on the treatment of children that we remember to have seen ; and we have read with intense anxiety, with that care which fathers blest with numerous progenies take, almost everything that has been written on the important subject during the last century. Mr. Pye Chavasse’s prescriptions, from the first ablution of a new-born babe up to puberty, including diet, clothing, vaccination, dentition, exercise, education, and sleep, are perfectly in harmony with common sense, which should be the common guide of mothers and nurses. For the benefit of mankind, we wish that a copy of his little book were in the hands of every matron in the empire. He is equally happy on prevention and cure ; and, in truth, he seems quite at home in the nursery.”

ARIS’S BIRMINGHAM GAZETTE.

“It is scarcely necessary for us to say more, than that this excellent little book has reached a fifth edition, and has thus attained the position of a standard manual of domestic management. The present edition is much improved ; it is fuller in detail than the previous editions, and many additions suggested by the author’s matured experience, have been made. One of the chief merits of the work is its plain, simple, downright common sense. Fresh air, exercise, and plain food are constantly insisted upon, and the numberless indulgences allowed

by foolish parents to their children are as steadily condemned, and their evil consequences pointed out. The book has another good quality—it does not aim at superseding the medical man, by making every woman her children's doctor; but is designed rather to supply that amount of knowledge which, when children are in health, will enable a mother, under God's blessing, to keep them so; and when they are ill, will indicate to her the nature and danger of the disorder. A more useful book could not be placed in any house where there are young children."

BRITISH MEDICAL JOURNAL.

"This useful work has enjoyed a high and deserved degree of popularity, and has now reached a seventh edition. The value of this edition is increased by the circumstance that it has received corrections and additions suggested by Sir Charles Locock, who has also added to it various practical annotations. Mr. Pye Chavasse's book has our best wishes for a continued career of utility and success."

THE LANCET.

"This popular and useful little work has reached a seventh edition, and is rendered still more valuable by the addition of notes and annotations by Sir Charles Locock."

THE MEDICAL MIRROR.

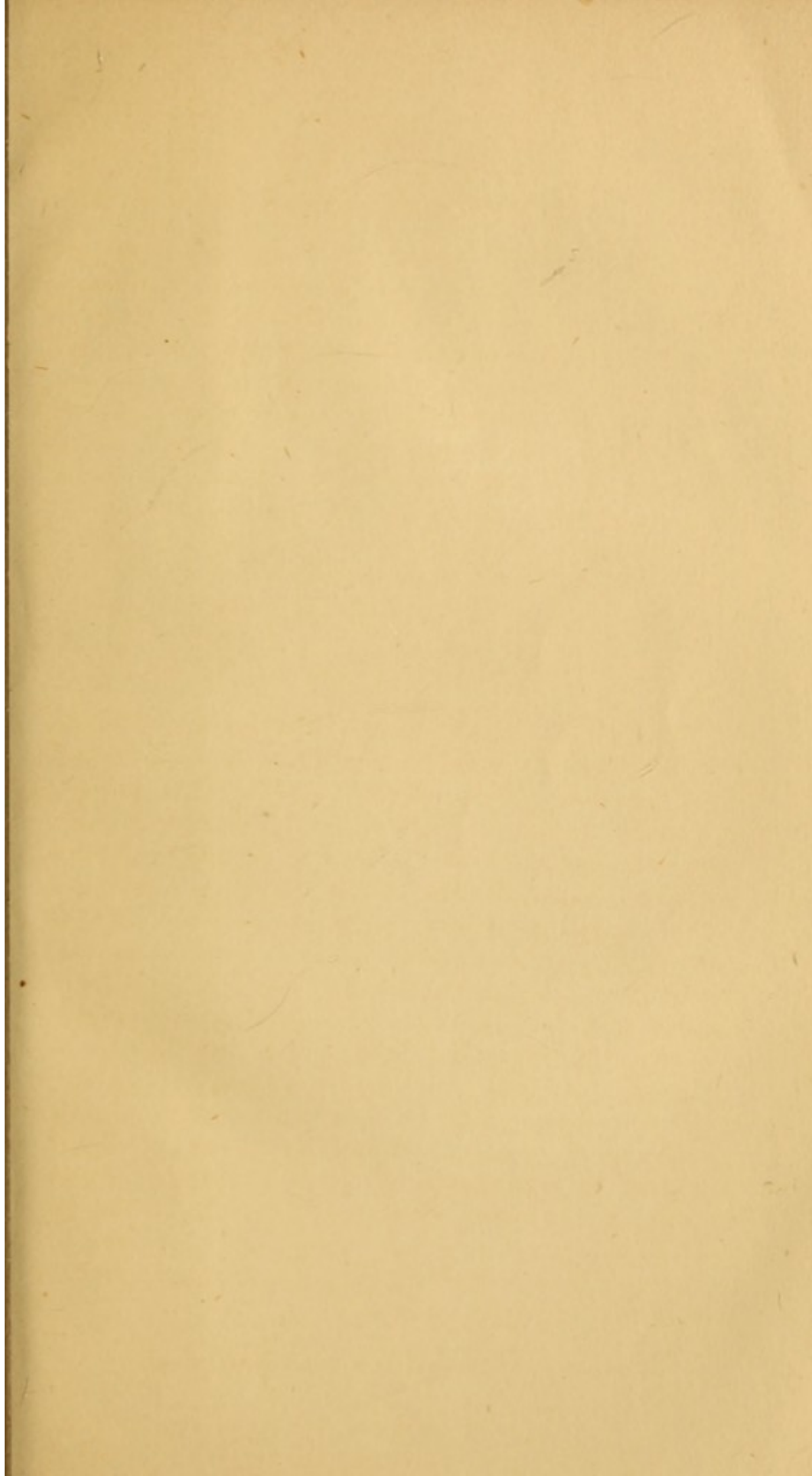
"Mr. Pye Chavasse's book has been so long before the profession and the public that a lengthened notice of it is unnecessary. The circulation which it has gained is one of the best proofs of its usefulness, which, from careful additions and alterations in each edition, has become increased instead of diminished by the lapse of a quarter of a century since its first appearance in 1839. The present edition, which possesses the advantage over its predecessors of numerous notes and annotations by Sir Charles Locock, affords frequent proofs that Mr. Chavasse has ably striven to keep up with modern views."

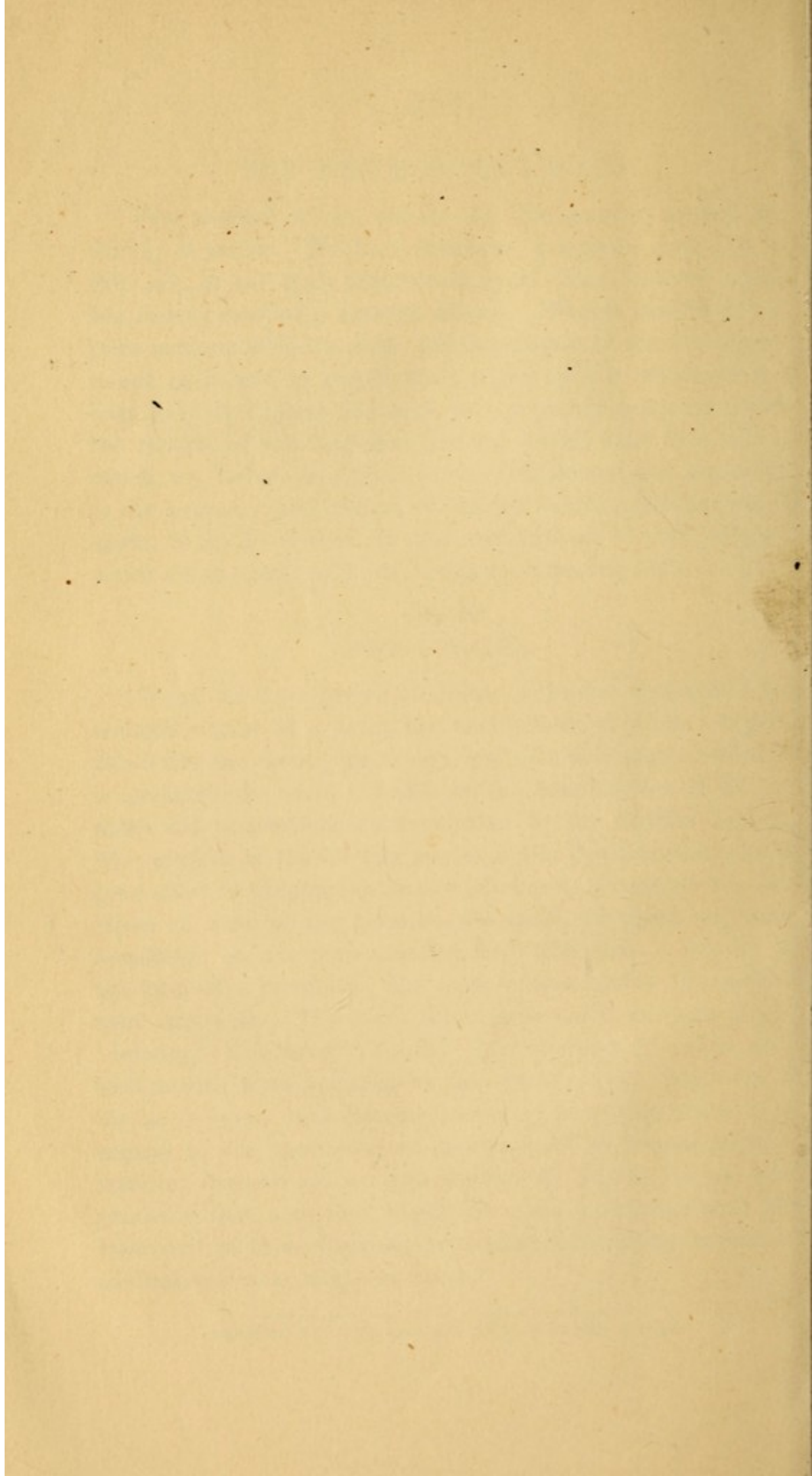
THE WESTMINSTER REVIEW.

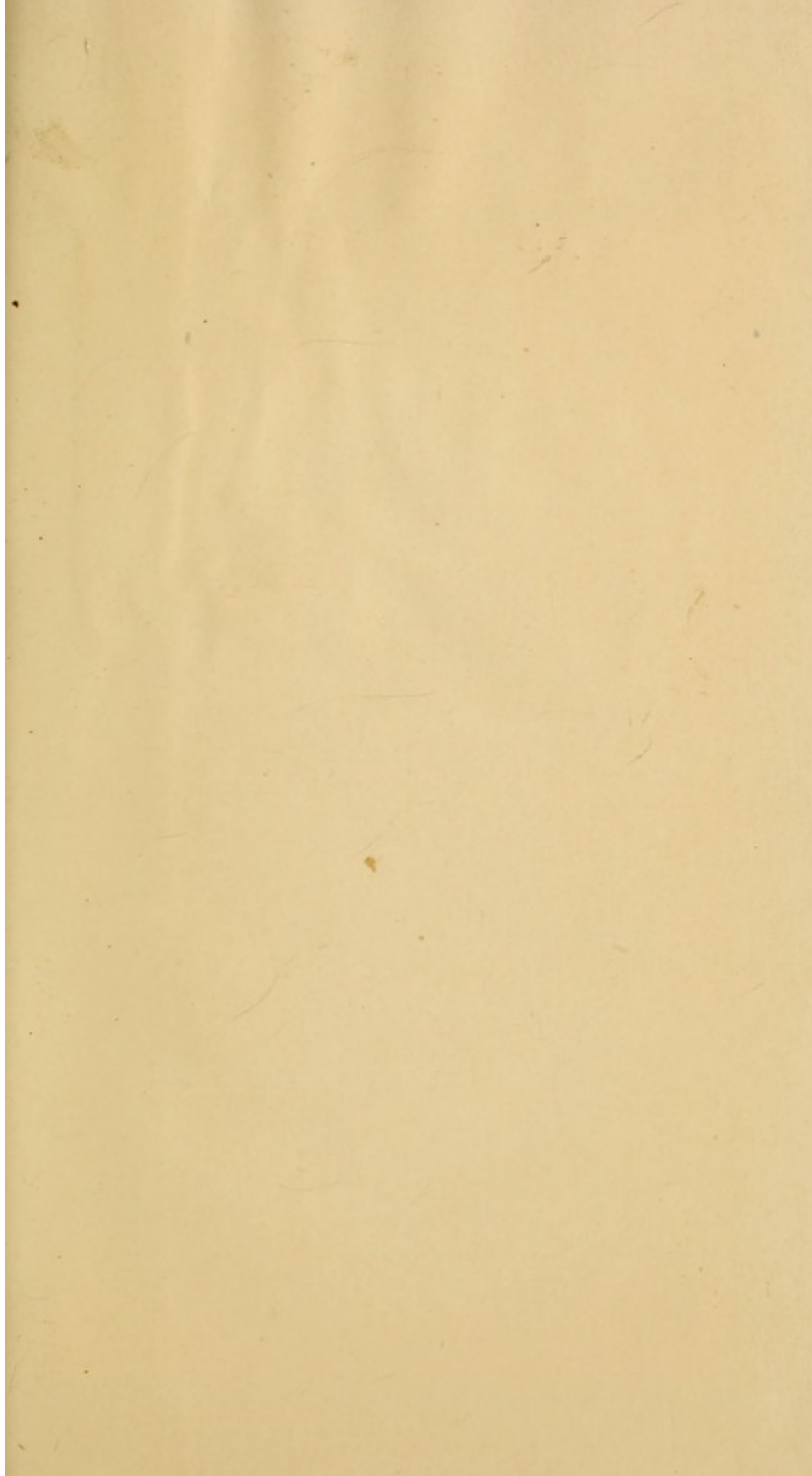
“Few medical works written for the general reader are worthy of notice. We have, however, a notable exception to this rule, in the truly useful work by Mr. Pye Chavasse, which has already reached a seventh edition. Were it possible to impress mothers with the value and importance of the advice contained in it, and to ensure their acting upon it, we should not long have to deplore the high rate of infant mortality which the reports of the Registrar-General record, more than half of which, we believe, is due to preventible causes, and especially to the ignorance and neglect of the few simple principles which ought to guide mothers in the management of their infants, which are so clearly set forth in this unpretending little volume.”

 THE READER.

“When we have drawn attention to the fact that this is the seventh edition of a work, the first edition of which was published five-and-twenty years ago, and that the volume before us is rendered the more valuable by the interpolation of several notes and annotations communicated by Sir Charles Locock, who, sensible of the sterling merits of Mr. Pye Chavasse’s book, gave effect to his appreciation by offering to the author his own views on some of the questions discussed, we think any commendation on our part uncalled for. The book is written in the form of a catechism; the mother interrogates, the medical man expounds. There are three parts entitled respectively: ‘Infancy,’ ‘Childhood,’ ‘Youth.’ Mr. Chavasse concludes each section with some remarks on the symptoms and treatment of the more severe maladies incidental to the young, which is, in respect to the treatment, an improvement on former editions, resulting from an opinion expressed by Sir Charles Locock, who considers that a mother should be made acquainted with the treatment of those diseases where delay in obtaining immediate medical assistance might be death.”







19th
cent
AG 525
C 33
1864

