

**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.**

### **Contributors**

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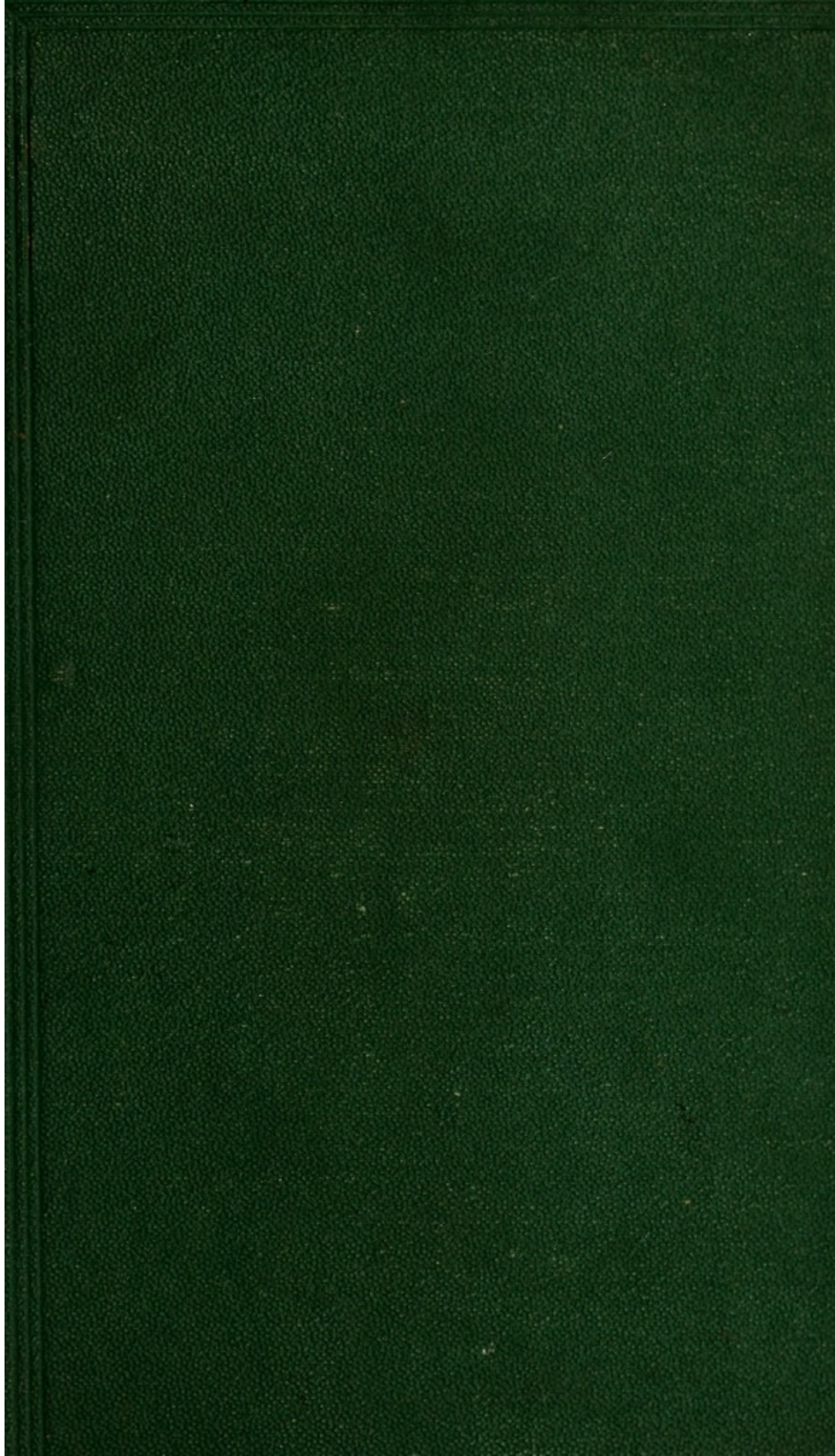
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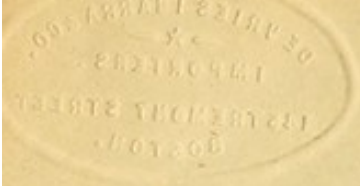
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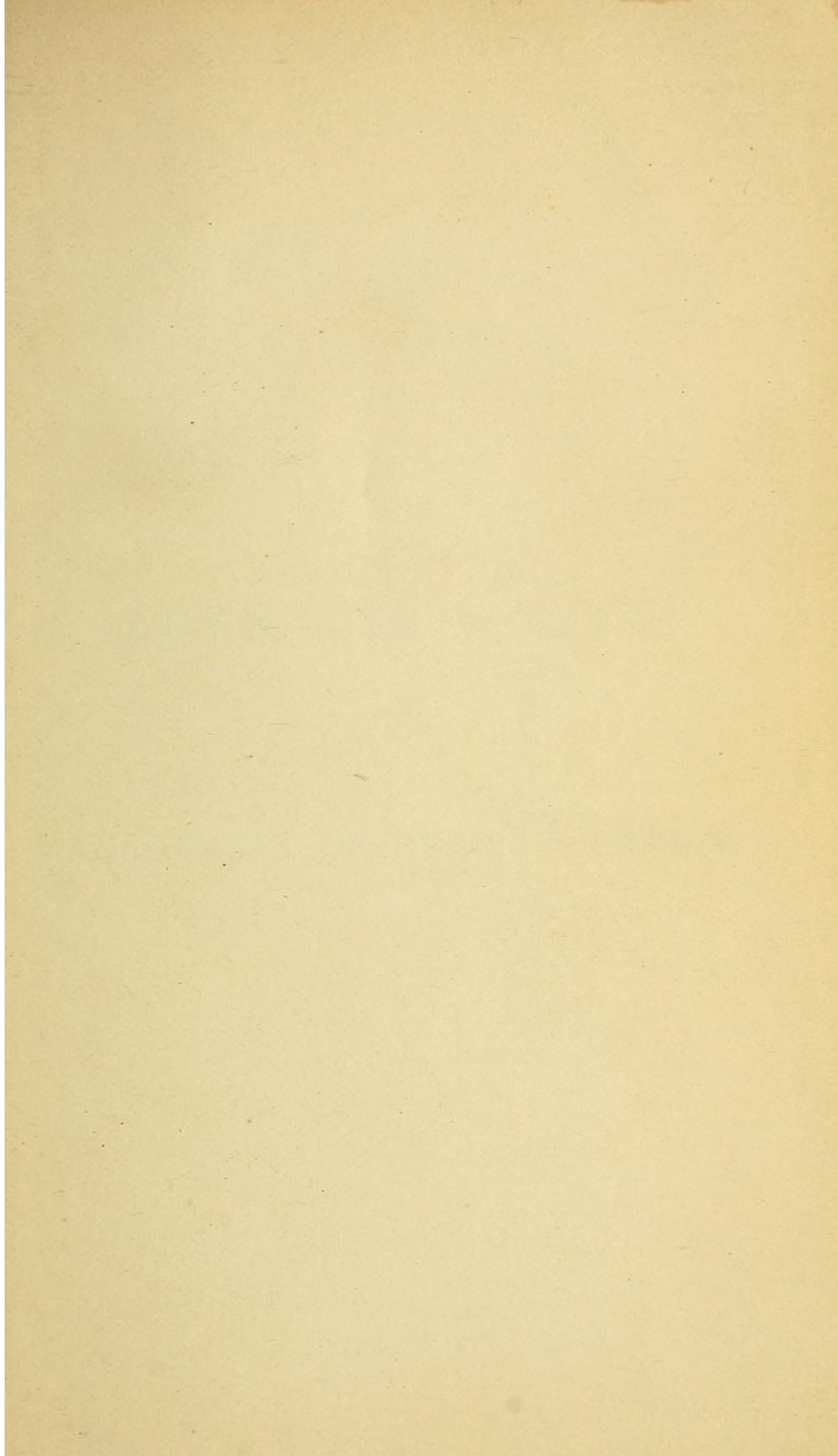
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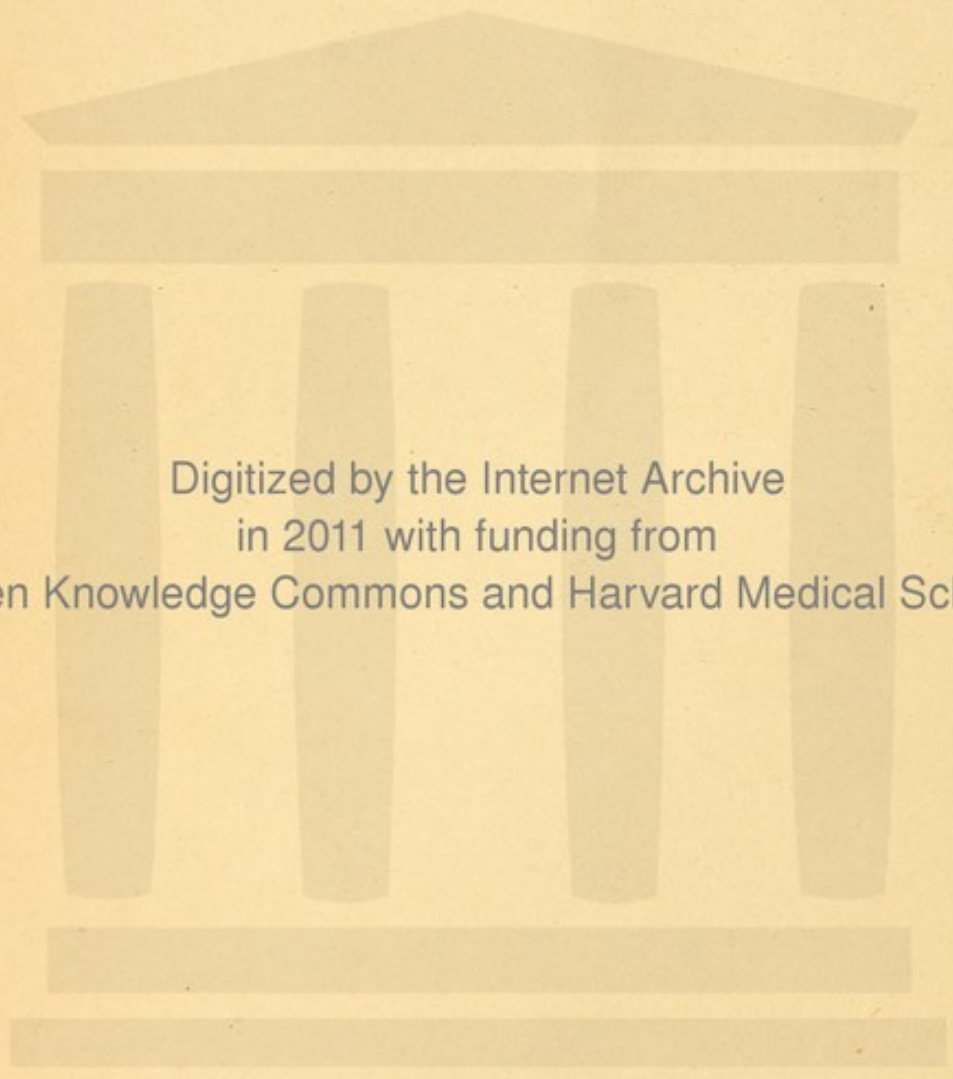












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ADVICE TO A WIFE

ON THE

MANAGEMENT OF HER OWN HEALTH.



# ADVICE TO A WIFE

ON THE

## MANAGEMENT OF HER OWN HEALTH.

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"A little book so well known and appreciated by the public as not to stand in need of any further assistance on our part than the announcement of a new and sixth edition."—*The Lancet*.

"We have here the fourth edition of Mr. Pye Chavasse's popular work. It is needless to recommend it, as its success declares its place in current literature."—*The Medical Circular*.

"Short practical handy-books of this kind, if written by an experienced and intelligent man, may be of very great service to the general public, provided that they do not pretend to teach too much. Mr. Pye Chavasse has happily avoided this error, which is a very common one in books on Domestic Medicine. His observations are short and pithy, his suggestions are practicable and judicious, and the few drugs he recommends are such as are not likely to endanger life by ignorance or carelessness. For their own sakes, and especially for their offsprings' sakes, women ought to study the means of preserving health; and Mr. Chavasse, in his introductory chapter, gives some excellent advice, which might be studied with advantage by all. . . . The book is to be highly commended, as embodying much valuable matter in a small space."—*The Reader*.

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BY THE SAME AUTHOR,

*Price Half-a-Crown,*

THE EIGHTH EDITION OF

# ADVICE TO A MOTHER

ON THE

## MANAGEMENT OF HER CHILDREN,

AND ON THE

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PRESSING ILLNESSES AND ACCIDENTS.

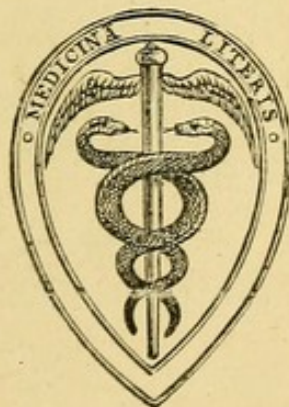
ADVICE TO A WIFE  
ON THE  
MANAGEMENT OF HER OWN HEALTH,  
AND ON THE  
TREATMENT OF SOME OF THE COMPLAINTS  
INCIDENTAL TO  
PREGNANCY, LABOUR, AND SUCKLING;  
WITH AN  
INTRODUCTORY CHAPTER ESPECIALLY ADDRESSED  
TO A YOUNG WIFE.

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 CHILDREN.'

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

SEVENTH EDITION.



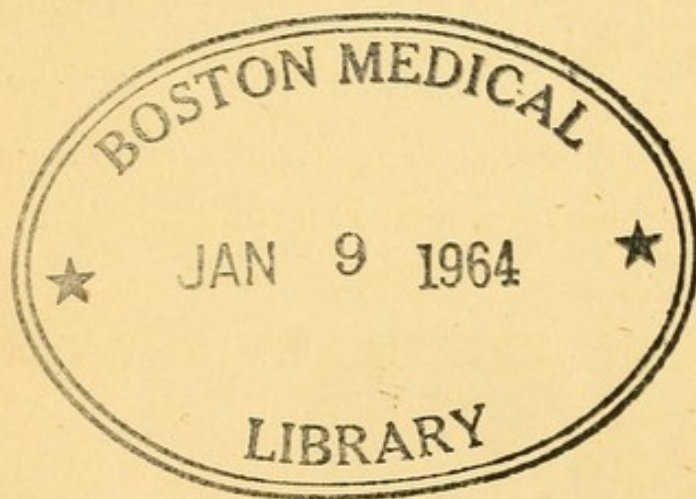
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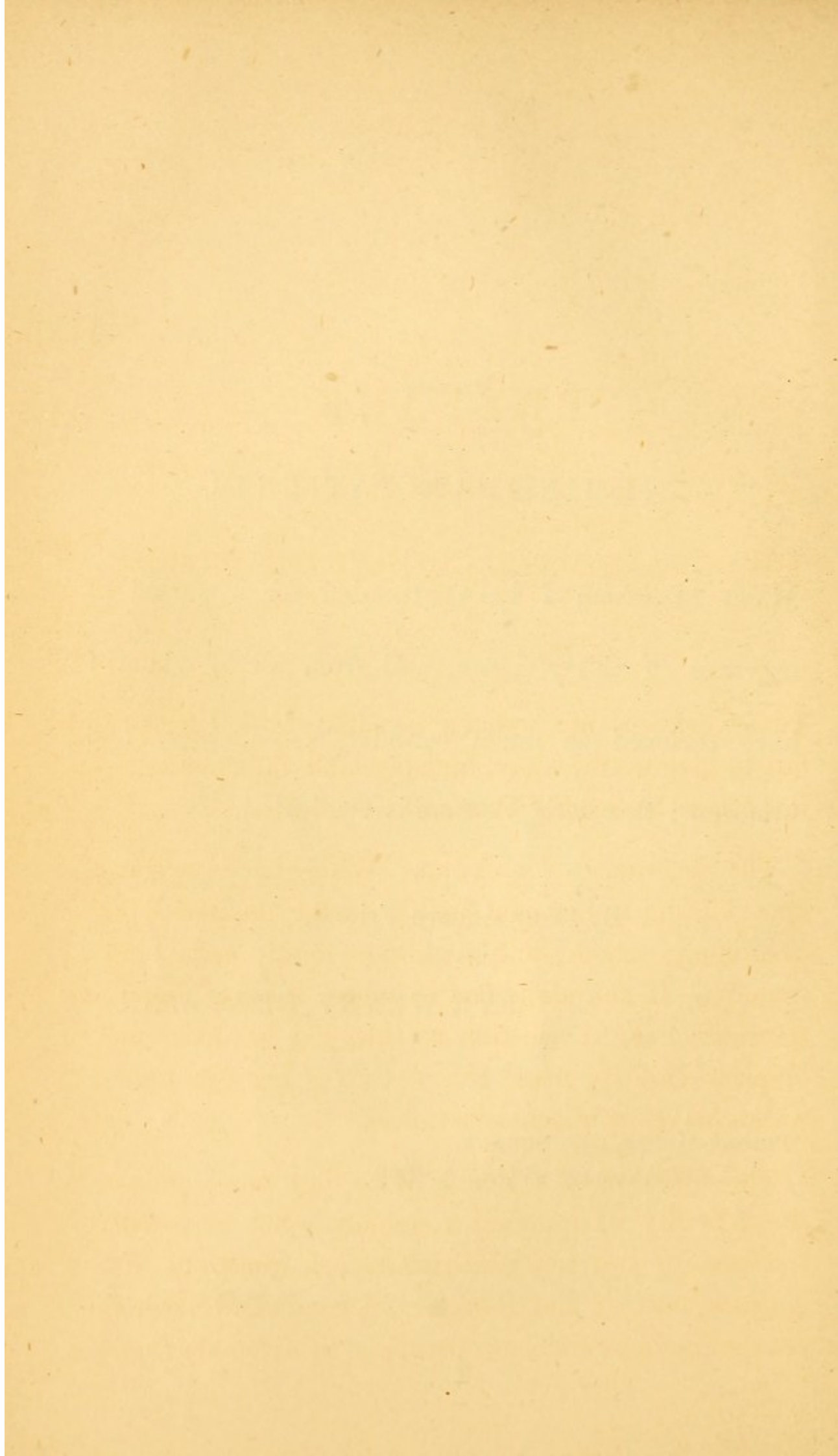
TO MY  
BIRMINGHAM PATIENTS,

MANY of whom I have attended for a period of  
upwards of thirty years, and from all of whom I  
have received so much confidence, courtesy, and  
kindness; this little Volume is Dedicated,

By their sincere Friend,

PYE HENRY CHAVASSE.

PRIORY HOUSE, OLD SQUARE,  
BIRMINGHAM, *February*, 1866.





# P R E F A C E

TO THE

FOURTH AND SIXTH AND SEVENTH EDITIONS.

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 was needed.

I have endeavoured in the Introductory Chapter—especially addressed to a Young Wife—to depict the folly and 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.

P. H. C.

April, 1861.

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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 edition—the sixth—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 might 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 Children*; the one being exclu-

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\* Since this was written, the sale of the work has more than doubled, and is daily increasing.



*sively* 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 has far, very far, exceeded my most sanguine expectations, and has urged me on to renewed exertions to make them still more worthy of the immense patronage they have already received.

P. H. C.

May, 1864.

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THE circulation of this work daily and rapidly increases:—it is but little more than eighteen months since the last—a large edition—was published, and not a copy remains unsold.—A Seventh Edition is now urgently required; and, to meet the enormous demand, five thousand copies of *this* edition are *now* published: which is more than equivalent to the average of three *ordinary* editions.

The Author has had but small leisure to enlarge and to revise the present one; he has, however, found time to make, what he trusts will prove to be, several useful additions and corrections; indeed, he would fain hope, that this edition is very much improved, and that it will be still more worthy of its great and extending success.

P. H. C.

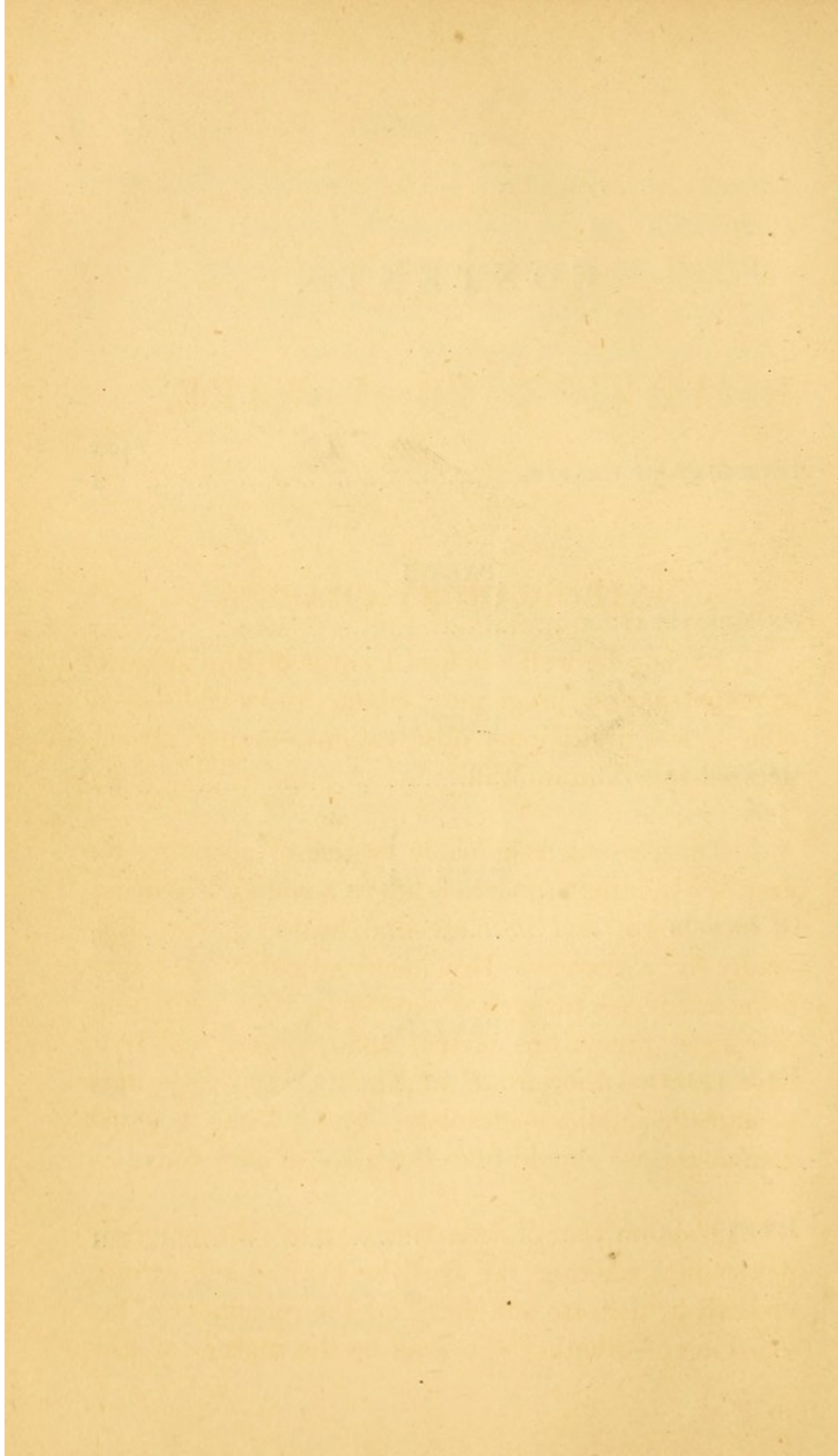
PRIORY HOUSE, OLD SQUARE,  
BIRMINGHAM, *February*, 1866.

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# ADVICE TO A WIFE.

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## 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 shall 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 a 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.

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\* *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 be 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, dyspeptic, 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.

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

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



low spirits? Then let her take exercise!—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\*—immutable and unchangeable—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 will gradually increase it, until she be able to take a tolerably long one.—She may find it irksome at first, and 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. A delicate lady frequently 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

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\* “The whole world around us, and the whole world within us, are ruled by law.”—The Duke of Argyll, *Good Words*, January, 1865.



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 of a concert-room.—The air of an assembly, or of 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, 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 she has in the world.—Let her give directions to her servant, to have, early every morning, every window in the house opened: 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.”\* Of course, this opening of the window, top and bottom, applies only to the rooms that are unoccupied: in an occupied room, in hot weather, one sash only—the lower, as a rule, is best—should be opened.

20. Let her give orders that every chimney in the house is unstopped; and let her see, 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 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

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



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, they are full of impure and of 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 by day and by night.—Many persons—by breathing the same air over and over again—“are poisoned by their own breaths!” 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 effects; 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 life 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, if she can, live in the country.—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

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



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, 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, must 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 favorable 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 fruitful.”\*—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 *thorough* ablution of the body, in the morning, 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.

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\* *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.



—A dirty man has generally a dirty mind!—"A girl who is outwardly fine, but dirty in her person, is an abomination: happily, the true art of cleanliness in one's skin and body is being every day better understood. Women are not so fond of thorough ablution as they should be; and it was questioned the other day whether ten women in a hundred wash themselves thoroughly all over a dozen times in the year. Yet nothing can be more necessary; and the great law-givers Moses and Mahomet made ablution a part of their religious system. From the 'body's cleanliness the mind receives' a certain cleansing and support; hence our proverb that 'cleanliness is next to godliness;' a proverb which, when rightly understood, will be seen to have its due share of wisdom."\*

28. A young wife ought to strip to the waist, and 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 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

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\* *The Gentle Life*. London: Sampson Low, Son, and Marston.



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 a few seconds, in a sitz-bath,\* or in a very large wash-hand basin—called a nursery-basin,† (sold for the purpose of giving an infant his morning bath,) containing water to the depth of three or four inches: while sitting in the bath, or in the basin, 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 con-

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\* Which may be procured of any respectable ironmonger.

† A nursery-basin (Wedgwood's make is considered the best) holding six or eight quarts of water, according to the size of the patient—whether she be a little or a large woman.—It will only be necessary to fill it about one-third full with water; of course this is only for the sitz-bath—the sitting-bath;—for the *previous* washing, the same basin should have been three parts full of water.



tribute to her health and strength.—But, as I said before,—the process must be quickly performed, as it is the shock that does so much good, in bracing and in strengthening the system.

31. When a lady is very delicate, it may, *during the winter*, be necessary 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, or of bay-salt, or a lump of rock-salt,\* dissolved in 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 delightful 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 induce a healthy glow of the circulation.

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\* Rock-salt makes the strongest bath, but is much more difficult to dissolve in the water than either table-salt or bay-salt—the two latter being so readily dissolved.



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 dispense with many of her wrappings; it would, in the winter-time, keep her from codling and cruddling over the fire; it would cause her to resist cold and disease; it would, if she were inclined to constipation, regulate her bowels; 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 exercise.—If she 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. I have sometimes heard a patient advised to live on mutton-chops, and to have no other meat than mutton!



Now, this is folly in the extreme.—In the course of time, such an unfortunate patient's stomach would not be able to digest any other meat, and would, after a while, have even a difficulty of digesting mutton-chops!

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, for dinner, than toast-and-water, or plain spring water if it be preferred—

“Nought like the simple element dilutes,” \*

and one or two glasses of sherry, after dinner.—Sometimes, a lady until she has had a glass of wine cannot eat her dinner; 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; or, let her have one glass of sherry *before* or *during* dinner, and one glass *after* dinner.

39. If wine does not agree, and if she requires a stimulant,—a tumbler of home-brewed ale, or, of the

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\* Armstrong.



Burton bitter-ale, should 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, it 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 morning; and after she is once awake must never doze.—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 the morning—more especially to those living in the country. It is more exhilarating,

\* Armstrong.

† Longfellow.



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 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.”†

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

† *Good Words*, October, 1861.



44. There is a wonderful and glorious object in Creation which few—very few—ladies, passing strange though it be, have ever seen—the rising of the sun!—“which cometh forth as a bridegroom out of his chamber, and rejoiceth as a giant to run his course.”\*

45. 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.—“One hour’s sleep before midnight is worth three after.”—Sleep before midnight is most essential to health, and if to health to beauty; hence, sleep before midnight is called *beauty-sleep*!

46. She must pay particular attention to the *ventilation* of her sleeping apartment, and she herself, before leaving the room in the morning, must never omit to open the windows; and, in the summer, she should, during the night, leave the window-sash open, for about six or eight inches.—“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

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\* *The Psalms of David*, xix. 5.

† Pye Chavasse’s *Advice to a Mother*, Eighth Edition.



prevent cold,—by strengthening the system and by carrying off the impurities from the lungs and skin. \*

47. 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, a person 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, even if the window be closed, must *never* be stopped; 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. I should strongly recommend my fair reader, and indeed every one else, to peruse the good and talented Florence Nightingale's *Notes on Nursing*.—They ought to 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, while in bed, ever takes cold from proper ventilation*.—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.—She may have heavy,



drowsy, death-like sleep, in an *unventilated* apartment; and well she might!—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, during the day, an abundance of active useful occupation.

50. Occupation—active, useful occupation—is the best composing medicine in the world;—and the misfortune of it is,—that the wealthy 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. Sleep is of more consequence to the human economy than food. Nothing, therefore, should be allowed, by a young wife, to interfere with sleep. And, as the attendance on large assemblies, balls, and concerts sadly, in every way, interfere with sleep, they must, one and all, be sedulously avoided.

52. As exercise is very conducive and provocative

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\* *Ecclesiastes* v, 12.



of sleep—sound, sweet, child-like sleep,—exercise must be practised, and that, not by fits and starts, but regularly and systematically.—Hear what our noblest poet—Shakspeare—says of sleep :—

“ Sleep that knits up the ravelled sleeve of care.  
The death of each day’s life, sore labour’s bath,  
Balm of hurt minds, great nature’s second course,  
Chief nourisher in life’s feast.”

53. Let me strongly caution the newly-made wife against the evil effects of *tight-lacing*.—The size of the waist, ought, as a rule, to be from twenty-seven to twenty-nine inches in circumference ; therefore, if she 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 bowels, and may either prevent a lady from having a family, or may produce a miscarriage.\*

54. Let her clothing be loose and 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.—“ It is hopeless to battle with fashion in matters of dress ; women will never believe that their bonnets, neck-

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\* 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.



wrappers, or huge petticoats (until they go out of fashion), can have anything to do with headaches, sore-throats, or rheumatism; but they ought to know that the more they swathe themselves, the more tender and delicate they are likely to be. If they wish to withstand cold, they should accustom themselves to bear it.”\*

55. She must not coddle, nor should she muffle up her throat with furs.—Boas are the most frequent cause of sore throats, of relaxed throats, and of quinsies, and, therefore, the sooner they are discarded the better.—“And this is perfectly true, though few seem to be aware of the fact. Relaxed throats would be rare, if cold water was more plentifully used, both externally and internally, and mufflers were laid aside.”†

56. If my gentle reader will freely use *cold* water ablutions, she will find that she will not require nearly so much clothing, and muffling up.

57. 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, croquet,

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

† Ibid.



bowls; everything, in fact, that will take her into the open air, and will cause her to appreciate the pure, simple, and exquisite beauties of Nature.

58. Oh! that my countrywomen should prefer the contaminated air of ball and concert-halls and close and heated 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."\*

59. Let me, in this place, enter my strong protest against a young wife *dancing*.—If she is anxious to have a family, it is a most dangerous amusement—as it is a fruitful source of miscarriage.—And the misfortune is—that if she once have an abortion, she may go on again and again, until her constitution is severely injured; and until all hopes of her ever becoming a mother are at an end.

60. The quiet retirement of her own home should then be her greatest pleasure, and her most precious

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\* *Blackwood*, Nov., 1861.



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.*”\*

61. Home is, or ought to 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.”†

62. Cheerfulness, occupation, and healthy activity of mind cannot be too strongly recommended.—A cheerful, happy temper is one of the most valuable attributes 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 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

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

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



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.”\*

63. One of the greatest requisites, then, for a happy home—is a cheerful, bright, and merry wife;—her face is a perpetual sunshine, her presence is that of an angel, she is happy in herself, and she imparts happiness to all around her.—“A merry heart doeth good like a medicine: but a broken spirit drieth the bones.”†

64. A gentle, loving, confiding, placid, hopeful and

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\* *A Woman's Thoughts about Women.*

† *Proverbs xvii, 22.*



trusting disposition has a great charm for a husband, and ought to be assiduously cultivated by a young wife:—

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

65. 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.

66. The want of occupation—healthy, useful occupation—is a fruitful source of discontent, of sin,‡ and disease.—If a young married woman did but know the importance of occupation,—how much misery might be averted and how much happiness might 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 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!

67. A husband soon becomes tired of grand per-

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\* 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 might 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 she did, perchance, understand *how* the dinner ought to be cooked, I have yet to learn, that the husband would for such knowledge think any the worse of her.—“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.”\*

68. A grazing farmer is three or four years in bringing a beast to perfection—fit for human food.—Is it not a sin, after so much time and pains, for an idiot of a cook, in the course of one short hour or two, to ruin, by vile cookery, a joint of such meat? Is it not time, then, that a wife herself should know how

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\* *Blackwood*, March, 1863.



a joint of meat ought to be cooked, and thus to be able to give instructions accordingly?

69. A boy is brought up to his profession, and is expected to know it thoroughly: how is it that a girl is not brought up to her profession—of a wife; and why is it that she is not taught to understand thoroughly all household duties? In olden times, the daughters of a gentleman's family spent an hour or two every morning in the kitchen and in the laundry, and were initiated into the mysteries of pastry and pudding making, of preserving fruit, of ironing, &c. Their mother's and their grandmother's receipt-books were at their finger-ends. But now look at the picture,—the daughters of a gentleman's family of the present day consider it very low and horridly vulgar to understand any such matters! “Alas! many a home is rendered poor, uncomfortable, miserable, and broken, because the wife does not know how to set about her part of the business properly. How can a man become attached to his fireside if he always finds it disorderly, his children ragged and untidy, his wife slatternly? How can a woman hope to win a man, day after day, from pleasant companions or gay entertainments, unless she can present counter attractions? A clever wife and a good manager will make any man's fortune; an untidy, thriftless one will spend, dissipate, and disperse the largest. Now, unfortunately, young English women are not so well taught in domesticity as they should be. . . . The highest lady should not be above giving a full attention to her house-



hold: she will never get hirelings or servants to do it so well. Indeed, amongst the nobility and true aristocracy, an attention to the smallest details is becoming more and more common.”\*

70. Do not think that I am overstating the importance of the subject:—A good dinner—I mean, a well cooked dinner (which, be it ever so plain, is really a good dinner)—is absolutely essential to the health—to the very existence of yourself and of your husband—and how, if it be left to the tender mercies of the present race of cooks, can you have it? High time it is that every wife, let her station be high or low, should look into the matter herself, and remedy the crying evil of the day.—“The kitchen is the heart of the kingdom, the true seat of government in domestic economies; who rules there, rules supreme. A visit of ceremony for a few moments at a stated hour in the morning can confer no authority whatever. Neither, on the other hand, is it necessary to be meddling and muddling there perpetually, or to do anything contrary to the instincts of a lady in the way of espionage. It is simply this, that by being actually busied in the kitchen a short time daily, by taking into her own hands the management and execution of those arrangements which require the skill and in-

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\* *The Gentle Life*. London: Sampson Low, Son, and Marston.



volve the entire control of the housekeeping expenditure, a mistress effectually breaks the rod of power in her cook's hands, and can sweep away at once the 'perquisite' system, the waste, and the dishonest understandings with the tradesmen; because she is in a position to know within a little what is really and honestly needed and consumed, and to give her own orders. Economy, however, is not the sole benefit to follow. There is an old, but not yet superannuated maxim—if you want a thing well done, do it yourself. The tangible result upon the dinner-table would be no less satisfactory than the reduced cost of their production. Nor is this a matter of slight importance. The best nourished body is, other things being equal, the most capable of sustaining mental work and resisting disease. Bad cookery is slow poison to those who work hard. To set before a man who returns exhausted in mind and body from his day's work, a messy unapetising dinner is, if it occur exceptionally, to spoil his temper, or, if that be unspoilable, his comfort for the evening. But, if it occur habitually, it is to knock ten or a dozen years off his lease of life. Then, too, it is no small satisfaction to be able, if hospitably inclined, to ensure your friends a dinner which, if modest in its pretensions, is thoroughly excellent—not a specious display, such as a second or third rate 'professed' cook, or the neighbouring confectioner, would set before them, everything looking like what it isn't, and tasting of nothing in particular; not to mention that there is a double zest in witnessing the comfort and enjoyment of your guests, with the con-



sciousness that some time and pains on your part have contributed to the result.”\*

71. They manage these things better in Sweden; there, the young ladies of wealthy families cook—actually cook—the dinners themselves; and, instead of their considering it a disgrace and to be horridly low and vulgar,—they look upon it as one of their greatest privileges! And what is the consequence?—A badly cooked dinner is the exception, and not, as it frequently is in this country, the rule; and “peace and happiness” reign triumphant!—“Cooking, however, is not here a servant’s accomplishment. All the excellent and well-cooked dishes which are brought to our table are the work of Theresa and Selina, who take turns in housekeeping and cooking week by week. Yet these young ladies are accomplished; they are very musical, play, sing, read and walk, when not busy about the house, the duties of which are done so cleverly and so expeditiously that they are never untidy in their dress and never in a hurry.”†

72. A ‘Blue-socking,’ as a rule, makes a wretched wife: it would be far better for the health of her husband, herself, and her family, if instead of cultivating Latin and Greek, she would cultivate her household duties—more especially a thorough know-

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\* From an admirable article in *Macmillan’s Magazine* (October, 1865), which every wife should read and ponder over!

† Country Life in Sweden, in *Good Words*, November, 1864.



ledge of the culinary department:—"A man is, in general, better pleased when he has a good dinner upon his table than when his wife speaks Greek."\*

73. As soon as a lady marries, the romantic nonsense of school-girls will rapidly vanish, and the stern 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* or a *learned* one.

74. It is better for a young wife, and for every one else, to have too much than too little occupation.—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."†

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\* Dr. Samuel Johnson.

† *Old Humphrey's Addresses.*



75. 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.”

76. 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.”

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



sult, a small peril a great danger, and a slight sickness often ends in death by brooding apprehensions.”\*

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

79. 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 the 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 obtaining the express permission of a judicious Medical man.

80. If it be not 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

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



cannot inhale the *sea* breezes, let her inhale the *morning* breezes—

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

81. Cheerfulness and evenness of temper ought to 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.”†

82. 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, instead, blooming wives, who will, in due time, become the mothers of hardy, healthy, happy children.

83. As Menstruation plays such a very important part in the female economy, I purpose devoting the following Chapter to its consideration.

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\* Sir Egerton Brydges.

† Dr. Grosvenor.



## PART I.

### MENSTRUATION.

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84. MENSTRUATION—the appearance of the catamenia or the menses—is *the most important epoch* in a girl's life.—It is the boundary line—the landmark—between childhood and womanhood.—Her body now develops and expands, and her mental capacity, enlarges and improves.—She then ceases to be a child and becomes a woman.—She is now for the first time, as a rule, able to conceive.

85. 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.

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



the first time, a hard and tedious labour, and, frequently, does not live to see her children grow up to be men and women.—Moreover, as a rule—“the offspring of those that are very young, or very old, lasts not.”

87. 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.

88. 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.

89. 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.

90. Menstruation, in this country, usually commences at the ages of from thirteen to sixteen; 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.\*

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



91. 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, indeed, menstruation should be protracted much beyond the usual period of time. 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.

92. 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

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menacing 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-one, and four at fifty-two; and one mother was registered as



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."\*

93. 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

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having given birth to a child in the fifty-seventh year of her age."

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

† It is very unusual, in this climate, for a girl to become a



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.”\* 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.’”

94. 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

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mother until she is seventeen or eighteen years of age. A case has just occurred, however, (1864) where a girl became a mother—before she reached her fourteenth year.—In his last report to the Registrar-General, the registrar for Park district, Sheffield, says:—“I have registered the birth of a child in my district this quarter, the age of the mother being only thirteen years and ten months. She was employed in a cotton mill in the neighbourhood of Manchester.”

\* De Quincey.

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



very advanced age,—even so late as sixty.—They are frequently not “regular” oftener than three or four times a year. .

95. The menstrual fluid is not exactly blood, although it much resembles it both in appearance and in properties; yet it never clots in the healthy state, as blood clots.—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.\*

96. The menstrual fluid ought not, as before observed, to clot.—If it does, a lady, during menstruation, suffers great pain.—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; and, by doing so, will, probably, pave the way to her becoming pregnant.

97. Menstruation *entirely* ceases in pregnancy; during suckling; and usually in diseased and in disordered states of the womb.—It also ceases in cases

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\* “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.*



of extreme debility, and in severe illness, especially in consumption; indeed, in the latter disease—consumption—it is one of the most unfavorable of the symptoms.

98. It has been asserted, and by men of great experience,—that sometimes a woman menstruates during pregnancy.—In this assertion I cannot agree; it appears utterly impossible that she should be able to 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 would be quite impossible during pregnancy for menstruation to occur.—He considered that the discharge—which was mistaken for menstruation—arose from the rupture of some small vessels about the neck of the womb.

99. 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.—Many persons have an idea, when a woman menstruates during lactation, that the milk is sweeter and purer.—Such is an error.—Menstruation during suckling is more likely to weaken the mother, and, consequently, to deteriorate the milk.—It there-

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



fore behoves a parent never to take a wet nurse who menstruates during the period of lactation (suckling).

100. A lady sometimes suffers severe pains just before and during her "poorly" times.—When such is the case, until the pain be removed, she seldom conceives.—She must, therefore, apply to a Medical man, as relief may soon be obtained. When she is freed from pain, she will, in all probability, in due time, become *enceinte*.

101. The menstrual discharge, as before remarked, should, if healthy, be of the colour of blood—of fresh, unclotted blood.—If it be either too pale (and it sometimes is almost colourless), or, on the other hand, if it be too dark and thick (it is, occasionally, as dark, and, sometimes, nearly as thick as treacle),—there will be but scant hopes of a lady conceiving.—A Medical man, must, therefore, at once be consulted, who will, in the generality of cases, be able to remedy the defect.—As soon as the defect is remedied, the chances are she will become pregnant.

102. At another time, menstruation is too sparing: this is a frequent cause of a want of family.—Luckily a Medical man is, in the majority of cases, able to remedy the defect; and, by doing so, will probably be the means of bringing the womb into a healthy state and thus predispose her to become a mother.

103. "The whites" are a frequent cause of deficient



menstruation, and the consequent failure of a family ; and as “the whites” are usually curable, a Medical man should, in all such cases, be consulted.

104. At other times, menstruation is either too profuse or too long continued. Either the one or the other is a frequent source of barrenness, and is also weakening to the constitution, and thus tends to bring her into a bad state of health.—This, like the former cases, by judicious management, may generally be rectified ; and being rectified, will, in all probability, result in the wife becoming a mother.

105. When a lady is neither pregnant nor “regular,” she must immediately apply to a Medical man ; as, she may depend upon it, there is something wrong about her, and that she is not likely to become *enceinte*\* until menstruation is properly established. As soon as menstruation is properly and healthily established, pregnancy will, most likely, in due time, ensue.

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\* 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.”



106. When a woman is said to be “regular,” it is 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 it will be for her health and happiness.

107. 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 soon have “a change of health,” which, in all probability, will be for the worse.

108. “Change of life” is one of the most important periods of a lady’s existence, and generally determines, whether, for the rest of her days, she shall be healthy or otherwise ; it, therefore, imperatively behoves her to pay attention to the subject, and, in all cases, when it is about taking place, to consult a judicious Medical man ; who will, in the majority of cases, be of immense benefit to her—as he will be able to ward off many important and serious diseases, to which she would otherwise be liable.—When “change of life” ends favorably—which, if properly managed, it most likely will do,—she may improve in constitution, and may really enjoy better health and spirits, and more comfort, than she has done for many previous years.



## PART II

### PREGNANCY.

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#### SIGNS OF PREGNANCY.

109. 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.

110. 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.



111. 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.—It is not so valuable in an *after* pregnancy, as a *little* milk may remain in the breast for some time after she has weaned the child even should she not be pregnant.

112. The veins of the breast look more blue, and are, consequently, more conspicuous than usual—giving the bosom a mottled appearance.—“The enlargement of the veins is a very important sign, especially when the enlargement is considerable, and above all when the veins traverse the areola [the dark-brown mark around the nipple]; as far as I have at present noticed venous branches traversing the areola are characteristic of pregnancy.”\*—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.

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\* From an excellent little work on *The Mammary Signs of Pregnancy*. By Dr. Earle, of Birmingham.



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

114. 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

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\* “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.



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.

115. It will therefore be seen that there is an uncertainty as to the period of quickening; although, as I before remarked,—the *usual* period occurs on or near the completion of the *fourth* month of pregnancy.

116. 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.

117. The sensation of “quickening” 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.

118. Hence the heinous and damnable sin of a single woman using means, in the *early* months of pregnancy, to promote abortion: it is as much murder as though the child were at his full time, or as though he were butchered, when he was actually born!



119. An attempt, then, to procure abortion is a crime of the deepest dye; viz., a heinous murder! It is attended, moreover, 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 might 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.

120. 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. The following are a few of the symptoms that will distinguish the one from the other:—In flatulence, the patient is small one hour and large the next; while in pregnancy the enlargement is persistent and daily and gradually increases. In flatulence, on pressing the bowels firmly, a rumbling of wind may be heard, which will move about at will; while the enlargement of the womb in pregnancy is solid and resistent and stationary. In flatulence, on tapping—percussing—the bowels, there will be a



hollow sound elicited—as from a drum; while in pregnancy it will be a dull heavy sound—as from thrumming on a table. In flatulence, if the points of the fingers be firmly pressed into the abdomen, the wind will wobble about; in pregnancy, they will be resisted as by a wall of flesh!

121. The fifth symptom is—*increased size and hardness of the abdomen* (belly) immediately after the quickening. An accumulation of fat covering the abdomen has sometimes led a lady to suspect that she is pregnant; but the soft and doughy-feeling of the fat is very different to the hardness, solidity and resistance of pressure of pregnancy.

122. 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.”\*

123. *Sleepiness, heartburn, increased flow of saliva, toothache, loss of appetite, longings, excitability of*

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\* Dr. Denman.



*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 on, 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 or mark around the nipple, &c.—they will then make assurance doubly sure, and a lady may know, for certain, that she is pregnant.\**

## CLOTHING.

124. 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 of the breasts.—She must, whatever she may usually do, wear her stays loose.—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 former to miscarry; at another time, it has produced a cross-birth; and, sometimes, it has so pressed in the nipples,

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\* 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.



that where a lady has gone her time, she has been unable to suckle her infant—the attempt often causing a gathered bosom. These are great misfortunes, and entail great misery both on the mother and on the child (if it has not already killed him), and should be a caution and a warning to every lady for the future.

125. The garters, during pregnancy, must be worn slack.—“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 [dilated] veins.”\*

#### ABLUTION.

126. A *warm* bath in pregnancy is too relaxing.—A *tepid* bath, once a week, is beneficial.—Sponging the body, every morning, with tepid water, 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 moderately coarse towels.

127. The *bidet*, or sitz-bath,† should be used *every morning*.—The patient should first sponge herself, and then finish up by sitting for a few seconds in the

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\* Dr. Montgomery.

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



water. It is better not to be long in it; it is a slight shock that is required, which, where the sitz-bath agrees, is immediately followed by an agreeable glow of the whole body. If she sits in the water for a long time, she becomes chilled and tired, and is very likely to catch cold. Until she becomes accustomed to the cold, she should have a dash of warm 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, and of keeping her in good health.

128. A shower-bath in pregnancy gives too great a shock, 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, (provided it be not too far away from her home) 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.

129. A Young Wife, in her *first* pregnancy, usually takes *too long walks*.—This is a common cause of *flooding*, of *miscarriage*, and of *beariny 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.

130. Although long walks are injurious, she must not run into an opposite extreme:—short, gentle walks during the whole period of pregnancy cannot be too strongly recommended.—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 distressing in early pregnancy.

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

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

133. An active life is the principal reason, why the wives of the poor have such quick and easy labours, and such good recoveries; why their babies are so rosy, healthy and strong; notwithstanding the privations and hardships and poverty of the parents.



134. Bear in mind, then, that a lively,\* active woman has an easier and a quicker labour and a finer race of children than one who is lethargic and indolent.

135. A lady sometimes 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 by foolish indulgences.

#### VENTILATION, DRAINAGE.

136. 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, during the day-time, be thrown open.

137. It is well, where there is a sky-light at the top of the house, to have it made to open and to 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

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\* “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.



so thoroughly ventilates a house as an open skylight.

138. 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.

139. The cooping-up system is abominable: it engenders all manner of infectious and of 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, sickening to the stomach, and injurious to the health.—Oh! how often the nose is a sentinel, and warns its owner of approaching danger!

140. 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 and fumigations 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, the removal of nuisances, cleanliness, a good scrubbing of soap and water and the air of heaven, are the best disinfectants in the world! A celebrated and eccentric Lecturer, on Surgery,\* in addressing his class, made the following quaint and sensible remark:—"Fumigations, gentlemen, are of essential importance; they make so abominable a stink, that they compel you to open the windows and admit fresh air."

141. If a lady, while on an errand of mercy, should, in the morning, go into a poor person's bedroom, after he, she, or they (for oftentimes the room is crowded), have, during the night, been sleeping, 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 will then never be forgotten!—Pity the poor who live in such styres, not fit for pigs! For pigs?—Styres are ventilated! But, take warning, ye

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\* Abernethy.



well-to-do in the world! and look well to your ventilation, or beware of the consequences!—"If," says an able writer on fever in the last century, "any person will take the trouble to stand in the sun, and look at his own shadow on a white plastered wall, he will easily perceive that his whole body is a smoking dunghill, with a vapour exhaling from every part of it. This vapour is subtle, acrid, and offensive to the smell; if retained in the body it becomes morbid; but if re-absorbed, highly deleterious. If a number of persons, therefore, are long confined in any close place not properly ventilated, so as to inspire and swallow with their spittle the vapours of each other, they must soon feel its bad effects."\*

142. Not only should a lady look well to the Ventilation of her house, but she, or her husband, ought to ascertain that the drains are in good order, and that the privies are frequently emptied.—Bad drainage and overflowing privies are fruitful sources of child-bed fever, of scarlatina, of diphtheria, of cholera, and of a host of other infectious, and contagious and dangerous diseases.—It is an abominable practice to allow dirt to fester near human habitations; more especially as dirt, when mixed with earth, is really so valuable in fertilising the soil.—Lord Palmerston wisely says, that "dirt is only matter in the wrong place."

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\* *Popular Science Review.*



## NECESSITY OF OCCASIONAL REST.

143. A lady who is pregnant should, for half an hour each time, lie on the sofa, one or two hours every day.—This, if there be a bearing-down of the womb, or if there be a predisposition to a miscarriage, will be particularly necessary.—I should recommend this plan to be adopted throughout the whole period of the 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.

144. There is, occasionally, during the latter months, a difficulty in lying down; the patient feeling as though, every time she makes the attempt, she should be suffocated. 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.

## DIETARY.

145. 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 beer, porter, wine, and spirits. Let me, in this place, urge



a lady, during her pregnancy, not to touch spirits—such as brandy or gin; 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 her in an increased ratio as soon as the effects of the brandy or of the gin have passed away.—She ought to eat meat only but once a day.—Rich soups and highly seasoned stews and dishes are injurious.

146. A lady who is *enceinte* may 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.

147. 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 often been 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, she



is more or less feverish and irritable, and a superabundance of food would only add fuel to the fire, and would increase her fever and irritability. Moreover, she frequently suffers from heartburn and from indigestion. Can anything be more absurd, when such is the case, to overload a stomach already loaded 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 she 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 ever has been. The appetite is now increased; Nature points out that she requires more nourishment than she did 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 ought not to be forced to eat it, but should 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.

148. Roasted apples, ripe pears, raspberries, strawberries, grapes, tamarinds, figs, stewed prunes, the insides of ripe gooseberries, and the juice of oranges,



are, during pregnancy, particularly beneficial: they quench the thirst and tend to open the bowels.

149. The food of a pregnant lady cannot be too plain;—high-seasoned dishes should, 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 ought to eat the same food over and over again—one day as another.—The stomach requires variety, or disease, as a matter of course, will ensue.

150. Light puddings—such as rice, or batter, or suet pudding, or fruit puddings—provided the paste be plain—may be taken with advantage.—Rich pastry is highly improper.

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



## SLEEP.

152. The bed-room of a pregnant lady ought, if practicable, to 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 must be thrown wide open; and the bedclothes should be thrown back, that the air may well ventilate them before the approach of night.

153. 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 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!

154. 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.

155. A lady, who is pregnant, is sometimes restless at night—she feels oppressed and hot.—The best remedies are:—(1) scant clothing on the bed. (2) The lower-sash of the window, during the summer months, to be left open to the extent of six or eight



inches; and, during the winter months, to the extent of two or three inches—provided the room be large, the bed be neither near nor under the window, and that the weather be not intensely cold; if any, or all, of these latter circumstances occur, then (3) the window to be closed and the door to be left ajar (the landing or the sky-light window at the top of the house being left open all night, and the door being secured from intrusion by means of a chain). (4) Attention to be paid to a *gentle* action of the bowels—by castor-oil. (5) An abstemious diet—avoiding stimulants of all kinds. (6) Gentle walking exercise. (7) Sponging the body every morning with tepid water in the winter, and with cold water in the summer. (8) Cooling fruits in the summer-time, are, in such a case, very grateful and refreshing (see paragraph 148).

156. A pregnant lady sometimes experiences an inability to lie down, the attempt producing, occasionally, a feeling of suffocation and of faintness.—Under such circumstances, she ought to lie on a bed-rest, which must 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.

157. Pains at night, during the latter end of the time, are usually frequent; so as to make an inexperienced lady 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



violent, application should be made to a Medical man.

158. A pregnant lady must retire early to rest;—she ought, every night, to be in bed 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, or in the garden, while the air is pure and invigorating.—But how often, more especially when a lady is first married, is an opposite plan adopted!—The importance of bringing a healthy child into the world, if not for her own and her husband's sake, should induce a wife to attend to the above remarks.

159. 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.

160. A Young Wife is usually averse to consult a Medical man concerning several *trifling* ailments, which are, nevertheless, in many cases, annoying and distressing.—I have, therefore, deemed it well to give a brief account of such *slight* ailments, and to prescribe a few *safe* and *simple* remedies for them.—I say *safe* and *simple*, for *active* medicines require skillful handling, and, therefore, must not—unless in certain emergencies—be used except by a Doctor himself.



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

162. A costive state of the bowels is common in pregnancy; a *mild* aperient is, therefore, occasionally necessary.—The mildest must 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.

163. 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 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.

164. The best aperients are,—castor-oil,—salad-oil,—compound rhubarb pills,—honey,—stewed prunes,—figs,—grapes,—roasted apples,—Normandy pippins,—oatmeal-and-milk-gruel,—coffee,—brown bread.

165. Castor-oil, in pregnancy, is a valuable aperient.—Frequent and small—are preferable to occasional and large doses.—If the bowels be at all constipated (but not otherwise),—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 dessertspoonful.



166. 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 necessary quantity of oil 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, thus prepared, drink it off at one draught, 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 must, in the usual way, be previously sweetened and mixed with cream. There are two advantages in giving castor-oil on coffee,—(1) it is a pleasant way of giving it—the oil is scarcely tasted ; and (2) the coffee itself acts as an aperient—less castor-oil, in consequence, being required ; indeed, with many patients the coffee alone is a sufficient aperient.—A fourth way of administering it, is,—swimming on half a wine-glassful of orange-juice.

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

168. If *salad-oil* be preferred, the dose must be as much again as of castor-oil ; and, the patient should, during the day she takes it, eat a fig or two, or a dozen or fifteen of stewed prunes, or of stewed French plums : as salad-oil is much milder in its effects than castor-oil.



169. Where a lady cannot take oil,—one or two compound-rhubarb pills may be taken at bed-time ; or, —a Seidlitz-powder, early in the morning, occasionally ; or,—a quarter of an ounce of *tasteless salts*—phosphate of soda—may be dissolved—in lieu of table-salt—in a cupful of soup, of broth, or of beef-tea, and be occasionally taken at luncheon.

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

171. A basin of thick Derbyshire oatmeal gruel, made either with new-milk or with cream and water, with a little salt, makes an excellent luncheon or supper for a pregnant lady : it is both nourishing and *aperient*, and will often entirely supersede the necessity of giving opening medicine.—The occasional substitution of coffee for tea at breakfast, usually acts beneficially on the bowels.

172. Let me again urge the importance of a lady, during the whole period of pregnancy, being particular as to the state of her bowels,—as costiveness is a fruitful cause of painful, of tedious, and of hard labours.—It is my firm conviction,—that if a patient, who suffers from constipation, were to attend more to the regularity of her bowels, that difficult cases of labour would rarely occur ; more especially, if the



simple rules of health were adopted, such as,—attention to diet; the patient partaking of a variety of food, and allowing the farinaceous—such as oatmeal—and the vegetable and fruit element to preponderate; the taking of exercise in the open air; attending to her household duties; avoiding excitement; late hours; and all fashionable amusements.

173. Where a lady cannot take medicine, or, where it does not agree with her, 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 ought to be put on at bed-time, and should be allowed to remain on until the morning; and should, until the bowels are relieved, be repeated every night.—Or,—the bowels should be well rubbed, every night and morning, with castor-oil.—One or other of these plans should, in such cases, be tried, and if either of them succeeds, it will be an agreeable way of opening the bowels.

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



for administering it, is, early in the morning, twice or three times a week. 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, by the patient herself,—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.

175. If the bowels should be opened once every day—it would be the height of folly for a pregnant lady to take either castor-oil or any other aperient. She ought then to leave her bowels alone—as the less medicine she takes the better. If the bowels are daily and properly opened—aperients of any sort whatever would be highly injurious to her.—The plan in this, as in all other cases, is, to leave well alone, and never to give physic for the sake of giving it!

176. *Diarrhœa*.—Although the bowels, in pregnancy, are generally costive; sometimes they are in an opposite 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 must be careful how, by the taking of chalk and of astringents, she interferes with the relaxation.

177. 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 afford relief.—Sometimes, provided she is not unnecessarily interfered with, she succeeds.—At others, it is advisable to give an aperient to help Nature in bringing it away.

178. When such is the case,—a mild, gentle aperient—such as castor-oil, or rhubarb-and-magnesia, should be chosen.—If castor-oil,—a teaspoonful or a dessertspoonful, 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, half a drachm ;  
Carbonate of Magnesia, one drachm ;  
Essence of Ginger, half a drachm ;  
Compound Tincture of Cardamoms, half an ounce ;  
Peppermint Water, five ounces and a half :

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

179. The diet must be simple, plain, and nourishing, and should consist—of beef-tea, chicken-broth, arrow-root, and of well-made and well-boiled oatmeal gruel.—Meat, for a few days, should not be eaten ; and stimulants, of all kinds, must be avoided.

180. If the diarrhœa be attended with pain in the bowels,—a flannel bag filled with hot table-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.\* The patient must, as soon as the diarrhœa has disappeared, gradually return to her usual diet,—provided it be plain, wholesome, and nourishing.—She should pay particular attention to keeping her feet warm and dry; and, if she be much subject to diarrhœa, she ought to wear around her bowels and next to her skin, a broad, flannel belly-band.

181. *Heartburn* is a common 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, as she has two to sustain, she requires more food during this than at any other time;—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 thereby weakened.

182. An abstemious diet must be strictly observed.—Great attention should be paid to the *quality* of the food;—greens, pastry, hot-buttered toast, melted butter, and everything that is rich and gross, must be carefully avoided.

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\* The Hot-water Bag, or Bottle as it is sometimes called, is composed of vulcanized India-rubber, and is made purposely to hold very hot water. The bag should not be more than *half-filled* with water, as it will then better adapt itself to the shape of the bowels. The water must be hot—but not boiling hot.—If it should be too hot, the bag must be wrapped in flannel.



183. A teaspoonful of Henry's magnesia, or half a teaspoonful of carbonate of soda—the former to be preferred if there be constipation—should occasionally be 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 should 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.—Two 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 in such a case be used.

184. *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, they are sometimes 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.

185. When the pile or piles are very large, they

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\* This mixture, and all other prescriptions, should be made by a chemist.



sometimes, more especially when she has a motion, drag down a portion of the bowel—which adds much to her sufferings.

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

187. 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.

188. 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 gently opened; or—by diarrhœa; or—from her taking too strong purgatives—especially pills containing aloes.

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

190. Every time after and before the patient has a

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\* 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.



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, two ounces :

Mix, to make an ointment.

191. If there be great irritation and intense pain,—let some very hot water be put into 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).”\*

192. 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.†

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

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\* Waring's *Manual of Therapeutics*.

† Let the ointments be made by a druggist.



Take of—French Brandy ;

Glycerine, of each, half an ounce :

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

194. The bowels must be kept gently and regularly opened—by taking, every morning, one or two teaspoonfuls of Compound Confection of Senna, 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.

195. Magnesia and milk-of-sulphur 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.

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

197. 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 teaspoonful or a dessert-spoonful of castor-oil.



198. In piles, if they are not much inflamed, and provided there be constipation, a pint of tepid water, administered early every morning as an enema,—will be found serviceable.—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.

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

200. 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 likewise inflame the piles.

201. 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 usually afford great relief, even if they do not effect a cure.

202. *Swollen legs from enlarged veins (varicose veins).*—The veins are frequently much enlarged and distended, causing the legs to be greatly swollen and very 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 varicose 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 distend.

203. 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 ought to wear a *gauze* stocking next the skin, and the *elastic* stocking over it : as the gauze stocking can then, from time to time, be washed. Moreover, the gauze-socking will be more comfortable, next the skin, than the elastic-socking.

204. If the varicose veins should be very painful, 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.

205. If the feet and legs be cold as well as swollen,—a *domette*† bandage, two inches and a half wide and eight yards long, nicely applied to each leg, from the toes to the knee, will be found a great comfort.—One great advantage that *domette* has over calico, is, that it will

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

† *Domette* is a mixture of flannel and cotton : one of good quality should be used for the purpose.



keep in its place for days, while calico will be loose in an hour or two.

206. *Stretching of the skin of the abdomen (belly)* 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 camphorated-oil, and to apply a broad *flannel* belt, which should be put on moderately but comfortably tight.—The belt must be secured in its situation by means of properly adjusted tapes.

207. *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 equal parts of simple cerate and lard—lard without salt—well mixed together,\* 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).

208. *Pendulous abdomen*.—Sometimes a lady, from being unusually large at these times, suffers severely; 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

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\* Which should, as all prescriptions ought to be, prepared by a chemist.



has neglected proper bandaging after her confinements.

209. She should, in such a case procure, from a surgical instrument maker, an elastic abdominal belt, made purposely for pendulous abdomens ;—which will be a support without unduly pressing on the parts.—It is a good plan to have the belt made, either to lace behind, or with straps and buckles ; in order to accommodate the abdomen (belly) to its gradually increasing size.

210. If the patient be delicate and if she has a languid circulation, she ought to apply, instead of the elastic belt, a broad flannel belly-band, which must go twice round the bowels, and should be put on moderately and comfortably tight.

211. *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.

212. *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.

213. If the tooth be decayed,—the hollow should



be filled with cotton-wool, soaked in oil of cloves ; or, in equal parts of oil of cloves and of 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, from time to time, renewed.—I have frequently found the above plan most efficacious in toothache, and to afford relief when other means have failed.

214. 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.

215. 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 (but not crumbed bread), be soaked for five minutes in boiling milk, and be frequently placed inside the mouth—between the cheek and the gum ; and let a large hot bread-poultice be applied at bedtime to the outside of the face.

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\* Ten grains of powdered alum to half an ounce of chloroform.



216. If the above does not have the desired effect,—a piece of brown paper—the size of the palm of the 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 should be renewed from time to time.—This simple and old-fashioned remedy will sometimes afford great relief.—It is, in these cases, preferable to a mustard-poultice ; as it is less painful, and it never blisters nor injures the skin.

217. If the pepper-plaister does not afford relief, a ginger-plaister may be tried :—

Take of—Powdered Ginger ;

Flour, of each, two teaspoonfuls ;

Water, a sufficient quantity :

To be well mixed together, adding the water drop by drop (stirring it the while) until it is of the consistence of paste,—Let it be applied at bedtime, on linen rag, *outside* the cheek, and let it remain on all night, or until the pain is relieved.

218. If the tooth be not decayed, and if the pain of the face be more of a neuralgic (*tic douloureux*) character, the following pills will frequently afford great relief :—

Take of—Sulphate of Quinine, twenty-four grains ;

Powdered Extract of Licorice, six grains ;

Treacle, a sufficient quantity :

To make twelve pills. One to be taken three times a day.

219. The teeth, in pregnancy, are very apt to decay.



—I have known several patients, each of whom have lost a tooth with every child!

220. *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 and relish her food as though nothing ailed her.

221. Morning-sickness begins *early* in the morning with a sensation of nausea; and as soon as she rises from bed, she feels sick and retches; and, sometimes, but not always, vomits a little, sour, watery, glairy, fluid; and, occasionally, if she has eaten heartily at supper the night previously, 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.

222. 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!

223. 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 latter, after she has quickened, will generally leave of its own accord.

224. 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.

225 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!



226. A good way to relieve it, is,—by taking, *before rising in the morning*, a cup of strong coffee.—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 tablespoonfuls of this mixture to be taken with one of lemon-juice, every hour, whilst effervescing, until relief be obtained.

227. A glass of champagne, taken the over-night, I have sometimes known to be the best remedy, and if it has the desired effect, it certainly is the most agreeable!

228. 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.

229. The morning-sickness, during the early months, is caused,—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.

230. The bowels ought to be kept gently opened, either—by a Seidlitz-powder taken early in the morning; or—by one or two 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.

231. 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. Any of the above may be made either with water, or with new milk, or with cream and water.

232. 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; occasionally occurring, 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 a patient to the brink of the grave.—Fortunately such a case is extremely rare.—Another old and generally true saying is,—“that females who have sick pregnancies seldom miscarry.”

233. *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, for six weeks, or two months, before her confinement, she were to bathe her nipples, every night and morning, for five minutes each time, either,—with *Eau de Cologne*; or,—with brandy and water—equal parts of each. The better plan will be to have the brandy and water in a small bottle, ready for use, and putting a little each time, in to a teacup—using it fresh and fresh.—A soft piece of fine, old linen rag should be used for the purpose of bathing.—All pressure must be taken from the nipples; therefore, if the stays unduly press them—let them 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.—Let me recommend every pregnant lady—*more especially in her first pregnancy*—to adopt one or other of the above plans to harden the nipples; it might avert much misery,—as sore nipples are very painful and distressing; and prevention, at all times, is better than cure.

234. 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 bosom.—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 breasts—they are developing themselves and are preparing for the important functions they will have to perform the moment the labour is completed.

235. *Treatment*.—The patient cannot do better than to well rub them, every night and morning, with equal parts of *Eau de Cologne* and 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 relief.

236. 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 ought all to be removed, or serious consequences might ensue.

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

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



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

239. 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.

240. *The bladder.*—The patient during pregnancy is liable to various affections of the bladder.—Sometimes, there is a *sluggishness* of that organ, and she 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 time,—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.

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

242. *Irritability of the bladder.*—The patient should, during the day, 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.

243. The bowels ought to 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.

244. *Where the patient cannot hold her water.*—There is not a great deal to be done, 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.—She ought frequently in the day to lie down on a horse-hair mattress, or on a couch.—She should drink but a moderate quantity of liquid, and if she has a cough (for a cough greatly increases this inability to hold the water) she should 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:

Two tablespoonfuls of this mixture to be taken three times a day.

245. *Fainting.*—A delicate woman, when she is *enceinte*, is apt to feel faint, or actually to faint away.—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 sur-



prising that she should do so.—There is one consolation, that although fainting, at such times, is disagreeable, it is not dangerous.

246. *Treatment.*—If the patient feels faint,—she must *immediately* lie down, flat upon her back, without a pillow under the head—that is to say—her head should be on a level with her body.—The stays, and any tight articles of dress—if she has been foolish enough to wear either tight stays or 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 ought to be applied to the nostrils.—The attendants—there should only be one or two present—must not crowd around her—as she ought to have plenty of room to breathe.

247. 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, twelve grains;  
Diluted Sulphuric Acid, half a drachm;  
Syrup of Orange-peel, half an ounce;  
Distilled Water, seven ounces and a half:

Two tablespoonfuls of the mixture to be taken three times a day.

—If she be very delicate, a change to the country, or



to the coast, if the railway journey be not very long, will be desirable.

248. A nervous patient, during this period, is subject 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,—there is greater pressure on the blood-vessels at these times, from the position.—Moreover, when she is lying down, the diaphragm—midriff—in consequence of the increased size of the abdomen is pressed upwards, and hence the heart has not its accustomed room to work in, and palpitation is the result.

249. 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 of 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.

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\* Camphor Julep may be made—by putting a few lumps of camphor in a wide-mouthed 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.



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

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

252. *Cramps* of the legs and thighs, during the latter period, and especially at night, 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 opodeldoe: 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 filled with hot water.

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\* 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. The temperature of the water need only be hot, and not boiling hot. It is a most



and covered with flannel; or a stone-bottle, containing hot water, wrapped in flannel,—be applied over the part affected; and let a stone-bottle of hot water; or a hot brick, either of which should be encased in flannel, be placed to the soles of the feet.—If the cramp of the bowels, 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, if necessary, in four hours.

253. "*The whites*," during pregnancy, are frequently troublesome, especially during the latter months, and particularly if the lady has had many children; 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, a great part of each day, on a bed, or on a sofa.

254. She ought to 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, at these times, and indeed at all times, is particularly objectionable,—the

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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 any respectable India-rubber Warehouse.



perspiration cannot pass readily through it as through blankets, and, thus, she 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 should occasionally be taken early in the morning.

255. 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, night and morning, be bathed with it.—If the Fuller's earth should not have the desired effect,—an Alum Injection\* should be syringed up the parts, every night and morning, by means of an India-rubber vaginal syringe.† Or,—fifteen drops of Solution of Diacetate of Lead should be added to a quarter of a pint of lukewarm water, and be used in a similar manner as the alum injection.

256. Cleanliness cannot be too strongly urged in these cases.—Indeed, every woman—either married

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\* 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. The best kind of India-rubber vaginal syringe, is, the one purposely made for the patient to use herself.



or single—should, every morning of her life, use either the bidet or a sitz-bath.—If she has *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, every morning, in the water—in cold water—for a few seconds; throwing a small blanket or shawl over her shoulders the while; but having no other clothing on except slippers on her feet.—For the first few mornings, she should make the water lukewarm; but the sooner she can use it cold—quite cold—the more good it will do her.

257. If the above plan was more generally followed, women, of all classes and ages, would derive immense benefit from its adoption, and many serious diseases would be warded off.—Besides, after a time, the use of the sitz-bath would be a great comfort and enjoyment.

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

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\* See pages 13, 54, and 99.



259. When the patient has been much weakened by the "whites," she will derive benefit from a quinine mixture\*—a dose of which ought to be taken twice or three times a day.

260. *Irritation and itching of the external parts.*  
—This is a most troublesome affection, and may occur at any time, but more especially during the latter period of the pregnancy; 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.

261. 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.†

262. 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,

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\* See page 93.

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



being thrown over her shoulders: which shawl or blanket should be the only covering she has on the while.—She should remain only for a few seconds in the bath.—Patients generally derive great comfort and benefit from these salt-and-water-sitz-baths.

263. 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, three or four times a day, with the lotion.—Or, the parts may be bathed, two or three times a day, with equal parts of vinegar and water.

264. In these cases, the external parts are not only *irritable* and *itching*, but are sometimes *hot* and *inflamed*, and *are covered with small pimples*; then, the addition of glycerine to the lotion is a great improvement, and usually gives immense relief. Either of the following is a good lotion for the purpose:—

Take of—Biborate of Soda, six drachms;  
Glycerine, five ounces;  
Distilled water, ten ounces:

To make a lotion.—The part affected to be bathed every four hours with the lotion, first shaking the bottle.

Or,—

Take of—Solution of Diacetate of Lead,  
Rectified Spirits of Wine, of each, one drachm;  
Glycerine, five ounces;  
Rose Water, ten ounces and a half:

To make a lotion.—To be used in the same manner as the preceding one.



## MISCARRIAGE.

265. *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.*

266. 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!*

267. Now, as miscarriages may *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.—I am quite convinced that in the majority of cases, miscarriages may be prevented.



268. Hence, the importance of a *popular* work 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 make a shipwreck of their most cherished hopes and treasures !

269. Let it, then, be thoroughly understood,—first, that miscarriages are very weakening—more weakening 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 !

270. *Causes.*—A slight cause will frequently occasion the separation of the child from the mother ; and the consequent death and expulsion of the foetus ; 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 a carriage over rough roads ; a *long* railway journey ; over-exerting herself, and sitting up late at night.—Her mind, just after marriage, is frequently too much excited—by large parties, by balls, and concerts.

271. Moreover, the following are frequent causes of a 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, anything and everything that injuriously affects either the mind or the body.

272. 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 that she can—by avoiding the usual causes of a miscarriage, which I have above enumerated, to prevent such a catastrophe.—A miscarriage is no trifling matter,—it is one of the most grievous accidents that can occur to a wife, and is truly a catastrophe!

273. *Threatening or warning symptoms of a miscarriage.*—A lady, about to miscarry, usually for one or two days, experiences a feeling of lassitude, of debility, of *malaise* and 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, and one in which a judicious Medical man may, almost to a certainty, be able to stave off a miscarriage.



274. *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! There may, even now, be but little pain, and, the miscarriage *might*, with judicious treatment, be even now 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.

275. *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.

276. 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 *at the time* attended with



little danger; although, if neglected, it may for *ever* injure the constitution.

277. 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 farther 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.

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

279. *If bearing down, expulsive pains*—similar to labour pains—should accompany the flooding;—if the flooding increases and if large clots come away;—if the breasts become smaller and softer;—if there be coldness and heaviness and diminution in the size of the abdomen;—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 [belly] as the patient changes her position;”<sup>\*</sup>—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

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<sup>\*</sup> Tanner, *on Signs and Diseases of Pregnancy*.



being only a question of time.—Of course, in such a case,—if she has not already done so,—she ought *immediately* to 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.

280. *Treatment*.—If a patient has the slightest “show,” she must immediately confine herself either to a sofa, or she should keep in bed.—A soft feather bed must 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 should lie flat upon her back or upon her sides; as it is quite absurd for her merely to rest her legs and feet.

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

282. 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.

283. Let me strongly urge upon the patient, the importance of preserving *any* substance that might



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 might follow.

284. 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 for a few days keep her bed; and should live upon the diet I have recommended after a confinement; avoiding, for the first few days, 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.

285. A patient subject to miscarry, should, *before* she become pregnant again, use every means to brace and to 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.

286. Early hours are quite indispensable.—She ought to 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 should alternate with frequent rest.



287. Cold ablutions must every morning be used, 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.

288. *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*.

289. A lady, who is prone to miscarry,—should, *as soon as she is pregnant*, lie down a great part of every day ;—she must keep her mind calm and unruffled ;—she should live on a plain diet ;—she must avoid wine and spirits and beer ; she should retire early to rest ;—*and she must have a separate sleeping apartment* ;—she ought to abstain as much as possible, from taking opening medicine ;—and, if she be actually obliged to take an aperient—for the bowels must not be allowed to be constipated—she should select the mildest (such as castor-oil or lenitive electuary or syrup of senna),—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.

290. The *external* application of castor-oil, as recommended at page 71, is a good and safe remedy for



a patient prone to miscarry ; and, in some cases, is even preferable to the mildest aperient.—Another great advantage of the *external* application of castor-oil, is—it does not afterwards produce constipation, as the *internal* administration of castor-oil is apt to do.—If the *external* application of castor-oil, in one or other of the forms advised at page 71, should not have the desired effect, then,—a lavement—a clyster—of warm water—a pint—should in the morning be administered, two or three times a week.

291. Gentle, walking exercise, daily, is desirable : *long* walks and horse-exercise, ought to be sedulously avoided.—A trip to the coast—provided the railway journey be not very long—would be likely to prevent a miscarriage ; although, 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 seasickness would be likely to bring on what we are anxious to avoid.

292. As the *usual* period for miscarrying approaches (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 every exciting amusement 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 *instantly* be sent for,—as he may, at an early period, be able to ward off the threatened mishap.

#### FALSE-LABOUR-PAINS.

293. 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.

294. 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 cognisant 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.

295. It is sometimes 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, probably, of *false* pains ending in *true* pains.

296. *How, then, is a patient to know that the pains are false and not true pains?*—False-labour pains come on three or four 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—changing from place to place—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, the pain is sharp; at another, trifling; true pains come on with tolerable regularity, and gradually increase in severity.

297. But, remember,—the most valuable distinguishing symptom, is—the *absence* of “show” in false-labour pains, and the *presence* of “show” in



true-labour pains.—It might be said, that “show” does not always usher in the commencement of labour?—Granted! but such cases are exceedingly rare, and may be considered as the exception and not the rule.

298. *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, either with camphorated oil, previously warmed, or with laudanum (taking care not to drink it by mistake).—Hot salt, in a flannel bag, or a Hot-water Bag, applied every night at bedtime to the bowels, frequently affords great relief.

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

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

#### PERIOD OF GESTATION—THE “COUNT.”

301. The period of gestation is usually\* two hundred

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\* 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 com-



and eighty days—forty weeks—ten lunar—or nine calendar months.

302. It will be well for a lady in making her “count,” 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.\*

303. A good plan to make the “reckoning” is, as

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prises 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, 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.*



follows:—Let forty weeks and a few days, from the time specified above, be marked on an almanac, 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.

304. Another plan, and one recommended by Dr. Tanner, to make the “count,” 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.”\*

#### BEING OUT IN THE RECKONING.

305. A lady, sometimes, by becoming pregnant whilst she is suckling, is put out of her reckoning; not being unwell at such a time, consequently she does not know how to “count.” She ought, in a case of this kind, to 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 be-

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\* *On the Signs and Diseases of Pregnancy.*



lieve, that she has 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.—She must bear in mind, however, that she can never make so correct "a count" from quickening (quickening takes place at such various periods) as from the last day of her "being unwell."

306. A lady is occasionally thrown out of her reckoning, by the appearance, the first month after she is *enceinte*, of a little "show."—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 its being much smaller in quantity, by its clotting, and by its lasting, generally, but a few hours.—Therefore, this discharge ought not to be reckoned in "the count;" but the one before should be the guide ; and the plan should be adopted as recommended in page 113, paragraph 302.

"IS IT A BOY OR A GIRL?"

307. It has frequently been asked,—Can a Medical man tell, before the child is born, whether it will be a boy or a girl? Dr. F. J. W. Packman, of Wimborne, answers in the affirmative.—"Queen bees lay female eggs first and male eggs afterwards. In the human



female, conception in the first half of the time between menstrual periods produces female offspring, and male in the latter. When a female has gone beyond the time she calculated upon, it will generally turn out to be a boy." \* It was well to say *generally*, as the above remarks are not *invariably* to be depended upon, as I have had cases to prove.—Notwithstanding, I believe that there is a good deal of truth in Mr. Packman's statement.

#### MONTHLY NURSE.

308. It is an important—a most important—consideration to choose a nurse rightly and well.

309. A monthly nurse 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 should have calmness and self-possession. She must be gentle, kind, good-tempered, and obliging, but firm withal, and she should have a cheerful countenance.—“Some seem by nature to have a vocation for nursing; others not. Again, nursing has its separate branches; some have the light step, the pleasant voice, the cheering smile, the dexterous hand, the gentle touch—others are gifted in cookery for the sick.”† The former

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\* *Braithwaite's Retrospect*. A Synopsis of Dr. Packman's Paper on Impregnation, in *The Lancet*, July 18, 1863.

† *Belforest. A Tale of English Country Life*. By the Author of *Mary Powell*. London: Richard Bentley.



good qualities are essential to a monthly nurse, and if she can combine the latter,—that is to say,—“if she is gifted in cookery for the sick,” she will, as a monthly nurse, be invaluable.—Unless a woman has the gift of nursing she will never make a nurse.—“Dr. Thynne held that sick nurses, like poets, were born, not made.”\*

310. She must neither be a tattler, nor a tale-bearer, nor a “croaker,” nor a “potterer.” A tattler 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 “croaker,” one that discourses of the dismal and of the dreadful cases that have occurred in her experience: many of which, in all probability, she herself was the cause of! She is a very upas tree in a house!—A “potterer” should be banished from the lying-in room, she is a perpetual worry—a perpetual blister! She is a nurse without method, without system, and without smartness.—She potters at this, and potters at that, and worries the patient beyond measure.—She dreams, and drawls, and “potters.”—It is better to have a brusque and noisy nurse than a pottering one—the latter individual is far more irritating to the patient’s nerves;—and is aggravating beyond endurance!—“There is one kind of nurse that

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\* *Not Proven.* London: Hurst and Blackett.



is not uncommon in hospitals [and in lying-in rooms], and that gives more trouble and worry than all the others together—viz., the ‘pottering’ nurse. Of all nuisances, defend us from a potterer. . . . The woman always has the very best intentions in the world, but is totally devoid of method and smartness. You never know when she has begun anything, and you certainly will never know when she has finished it. She never does finish it, but she sometimes leaves off. . . . She seems incapable of taking in a complete and accurate idea of anything, and even while you are speaking to her it is easy to see that her attention cannot be concentrated, and that her mind is flying about among half a dozen subjects. If she is in the least hurried she loses what little intellect she ordinarily possesses, moans feebly in a *sotto voce* monotone, fetches the wrong articles, does the wrong thing at the wrong time, and is always in the way.”\*

311. Some monthly nurses have a knack of setting the servants at loggerheads, and of poisoning the minds of their mistresses towards them. They are regular mischief-makers, and frequently cause old and faithful domestics to leave their situations. Therefore, it will be seen that it is a most momentous undertaking to choose a monthly nurse rightly and well.

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\* The Rev. J. G. Wood's *Duties of the Hospital Chaplain*, in the *Churchman's Family Magazine*.



312. Fortunately for ladies, the class of nurses is wonderfully improved, and that the race of Sairey Gamp and Betsey Prig is nearly at an end!

313. She ought to be either 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 for the first time to the breast), as a *married* woman.

314. 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 neither be melancholy, nor hippish. She ought to be fond of children, and 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.

315. A fine lady-nurse that requires to be constantly waited upon by a servant, is not the one that I would recommend. A nurse 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 her situation.

316. As the nurse, if she does her duty, devotes her time, her talent, and her best energies to the lady and



to the infant, a mistress 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.

317. 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. A lady frequently has to put up with an indifferent nurse from neglecting to engage her betimes. The Medical man at the eleventh hour is frequently besought to perform an impossibility—to select a *good* nurse; and which he could readily have done if time had been given him to make the selection.

318. It is always desirable, whenever it be possible, that the Doctor in attendance should himself 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 that she understands her business, and whether she is in the habit of attending and of following out his directions,—for frequently a nurse is self-opinionated and fancies that she knows far better than the Medical man.—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.

319. 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.

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

321. A monthly nurse should understand the manner of putting on, and of tightening the bandage after a confinement.—This she ought to 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 the support, the comfort, and the advantage it will be to his patient, and he will be glad to know that the nurse herself will be able to continue putting it on properly for some weeks—for at least three weeks—after the lying-in.

322. If nurses better understood the proper method



of bandaging patients after their labours.—there would not be so many ladies with pendulous abdomens and with ungainly figures. It is a common remark, that a lady's figure is spoiled in consequence of her having had so many children. This, provided efficient bandaging after *every* confinement had been properly resorted to, ought not to be.

323. A monthly nurse, who thoroughly understands her business, will always have the lying-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.—If it be winter, she will take care, 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 her mistress; and she will make a point of taking charge of the baby, and of keeping him quiet while the mother, during the day, is having her necessary sleep.

324. 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 under-



stand the proper manner of using a vaginal-syringe.—If the nurse is self-opinionated, and tries to persuade her mistress 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 a *second* time.

325. 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 to guard the bed from being wetted, and will not expose the patient unnecessarily during the process, she will be quick over it, and she will have soft, warm, dry towels, in readiness, to speedily dry the parts that have been bathed.—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.

326. Before concluding a list of some of the duties of a monthly nurse, there are four more pieces of advice I wish to give both to a wife and to a monthly nurse herself, which are these (1)—never to allow a



nurse, until she be ordered by the Doctor, to give either brandy, wine, porter, or ale to the patient. (2.) I should recommend every respectable monthly nurse to carry about with her, an India-rubber vaginal syringe.—The best for the purpose is the India-rubber ball syringe with a metallic valve, and one constructed to act either as an enema apparatus, or, by placing a vaginal pipe over the enema pipe as a vaginal syringe. She will thus be armed at all points, and will be ready for any emergency.—The India-rubber ball syringe with metallic-valve may be procured at an India-rubber warehouse, or of a surgical instrument maker.—It is an admirable invention, and cannot be too well known. (3.) I should advise a monthly nurse while on duty, whatever she may do at other times, to doff her crinoline. A woman nursing a baby with a stuck-out crinoline is an absurdity; and if it were not injurious to the mother and to the infant (as the nurse in crinoline cannot do her duty either to the one or to the other) she would be a laughable object! A new-born baby pillowed in steel! (4.) I should recommend every monthly nurse, while in the lying-in room, to wear either list slippers, or the rubber slippers—as creaking shoes are very irritating to a patient.—“Nurses, at these times, should wear slippers and not shoes. The *best* slippers in sick-rooms are those manufactured by the North British Rubber Company, Edinburgh: they enable nurses to walk in them about the room without causing the slightest noise—indeed they may be called ‘the noiseless slipper’—a great desideratum in



such cases—more especially in all head affections of children. If the above slippers cannot readily be obtained,—then list slippers—soles and all being made of list—will answer the purpose equally as well.” \*

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\* Pye Chavasse's *Advice to a Mother*. Eighth Edition.



## PART III.

### LABOUR.

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#### THE PRECURSORY SYMPTOMS OF LABOUR.

327. 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.

328. 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*—a *dropping*—of the womb lower down the abdomen.—This is the reason she feels lighter, and more comfortable, and that she can breathe more freely.

329. 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.

330. The *subsidence—the dropping—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.

331. She has, at length, 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, she may rest assured—that labour has actually commenced.—One of the *early* symptoms of labour is a frequent desire to relieve the bladder.

332. She has now “*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 ought to be in the house, to make preparations for the coming event.—Although, at this early period, it is *not* necessary to send for the Medical man; 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 quickly be found.



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

334. She must not, on any account, unless it be ordered by the Medical man, take brandy, as a remedy for the shivering.—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.—The *extra* clothing should, as soon as she is warm and perspiring, be gradually removed: as she must not be kept very hot, or it will weaken her, and might retard the labour.

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

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



337. 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, ought not to be given.

338. She must not, on any account, force down—as her female friends, or as a ‘pottering’ old nurse, may advise—to “grinding-pains:” if she do, it will rather retard, than forward, the labour.

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

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

341. After an uncertain length of time, the character of the pains alters.—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.”\*

342. As soon as the pains assume a “bearing-down” character,—the Medical man ought to 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.

343. *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 for a lengthened period in one position:—hence the importance of allowing her, during the first and the second stages of labour, to move about the room.

344. Cramps are generally worse during the third or the last stage of labour, and then, if they occur at all, they usually accompany each pain.—The poor patient, in such a case, has not only to bear the labour-pains but the cramp-pains!—Now, there is no danger

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



in these cramps: it is rather a sign that the child is making rapid progress, as he is pressing upon the nerves which supply the thighs.

345. The nurse must well rub, with her warm hand, the cramped parts; 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, one 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.

346. I observe, in a subsequent paragraph, 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.

347. Labour—and truly it may be called “labour”<sup>\*</sup>—is a natural process, and therefore, must not unnecessarily be interfered with, or woe betide the unfortunate patient!

348. I firmly believe,—that a woman would stand

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



a much better chance of getting well over her confinement *without* assistance, than, if she had been hurried, *with* assistance.

349. 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 legibly written on your memory.—Of course this advice only holds good in natural confinements.

350. 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.

351. 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,—by constantly “taking a pain,”—to greatly expedite a natural labour.—Now, this is a mistaken and mischievous, although a popular, notion.

352. The *frequent* “taking of a pain” is very injurious and most unnatural.—It irritates and inflames the passages, and frequently retards the labour.



353. 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.

354. 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, 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!

355. The above advice, for many reasons, is particularly useful. 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 she 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 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, and, in an ordinary labour, the importance of non-interference!

356. Bear in mind, then, that in every well formed woman, and in every 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, 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 greatest wonders and processes! It might with as much truth be said, that in every case of the process of *healthy* digestion it is necessary for a Doc-

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\* “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.



tor 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 should take the place of such folly.—A natural labour then, ought *never* to be hurried or interfered with; or frightful consequences might, 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 whatever, be interfered with* by the Doctor, by the nurse, or by herself.—These pains are sent for a wise purpose and they ought to be borne with patience and resignation; and she will, in due time, be rewarded for all her sufferings and anxieties by having a living child. Oh, how often have I heard an ignorant 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 might 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 dwelt upon, and cannot be too often brought, and



that energetically, before the notice of a lying-in-woman.

357. 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.\*

358. I say *improper* interference.—A case sometimes, *although rarely*, occurs, in which it might 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.

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

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\* 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.



360. 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.

361. It ought to be borne in mind, too, that *tedious labours* are oftentimes *natural labours*, and that they only require time and patience from all concerned to bring them to a successful issue.

362. 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.

363. 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, from the Doctor, and from the friends; notwithstanding which, if she is not hurried and is not much interfered with, both 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 when young.

364. Slow labours are not, necessarily, dangerous: on the contrary, a patient frequently has a better and 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* it is over.

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

366. 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, a Doctor possesses valuable remedies to alleviate the after-pains.

367. Nature,—beneficent Nature—ofttimes works in secret, and is doing good service, by preparing for



the coming event, unknown to all around!—In the *very earliest stages of labour*, pain is not a necessary attendant!”\*

368. Although pain and suffering are the usual concomitants of child-birth, there are, nevertheless, well authenticated cases on record of *painless parturition*!†

369. 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.

370. 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, it is better

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\* “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).



for her to be moving about the house, and to be attending to her household duties.

371. 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 should, occasionally, walk to it, and if a pain should come on the while, lie on the sofa.—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.

372. In the first and the second stages, she must not, on any account, strain, or bear down to the pains,—as many ignorant nurses advise: as, by robbing her of her strength, it would only retard the labour.—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 by bearing down, she 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 the rupture of the womb!—Therefore, for the future, let not a lady be persuaded by any ignorant nurse, or by any officious friend, to bear down until the last or the completing stage, when a gentle bearing-down will assist the pains to expel the child.

373. In the third or the completing stage, of course, it is necessary that she should lie on the bed, and that



she should, as above advised, bear gently down to the pains.—The *bearing-down* pains will indicate to her when to *bear down*.

374. If, towards the last, she be in great pain, and if she feel inclined to do so, let her cry out,\* and it will relieve her. A foolish nurse will tell her that if she makes a noise, it will do her harm. Away with such folly, and have nothing to do with such simpletons!

375. Even in the last stage, she 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 strain down as though she were straining to have a stool.

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

377. Nurses, sometimes, divide a labour into two kinds,—a “back-labour” and a “belly-labour.”—The

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\* “Like as a woman with child, that draweth near the time of her delivery, is in pain, and crieth out in her pangs.”—*Isaiah*, xxvi, 17.



latter is not a very elegant, although, it might be, an expressive term.—Now, in a “back-labour,” the patient will derive comfort by having her back held by the nurse.—This ought not to be done by the *bare* hand, but let the following plan be adopted,—let a pillow be placed next to the back, and then the nurse should 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.

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

379. Let a large room, if practicable, be selected for the labour, and let it be airy and be well ventilated; and, if it be summer, take care that the chimney be not stopped.—If the weather be intensely hot, there is no objection to the window being, from time to time, a little opened.

380. The old-fashioned four-post mahogany bedstead is the most convenient for a confinement, and is far preferable to either brass or to iron.—The reasons are obvious,—in the first place, the patient can, in the *last* stage of labour, press her feet against the



bed-post.—And secondly, while she is walking about the room, and “a pain” suddenly comes on, she can, by holding the bed-post, support herself.

381. If there be a straw-mattress and a horse-hair mattress, besides the bed, let the straw-mattress be removed; as a high bed is inconvenient, not only to the patient, but to the Doctor.

#### PREPARATIONS FOR LABOUR.

382. I should strongly urge a patient *not* to put everything off to the last.—She must take care to have in readiness a *good* pair of scissors and a skein of whity-brown thread.—And she ought to have in the house a small pot of 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 the baby be well aired and ready for *immediate* use, and be placed in such order, that all things may be found, without hurry or bustle, at a moment’s notice.

383. 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 dessertspoonful (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 lave-



ment—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, by giving the adjacent parts more room, much expedite the confinement, and lessen her sufferings.

384. 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.

385. The valances of the bed and the carpet, and the curtains at the foot of the bed, had better all be removed, they are only in the way, and may get soiled and spoiled.

386. “*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—one yard by one yard and a half—of water-proof-cloth, or bed-sheeting as it is sometimes



called, which is sold for the purpose;\* over this, folded sheets must be placed.—If a water-proof cloth cannot be procured,—an oil-cloth table-cover will answer the purpose. Either of the above plans will effectually protect the bed from injury.

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

388. Every now and then, in order to change the air, let the door of the room be left a-jar; 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 sash of the window may be opened a few inches.—It is wonderful how refreshing to the spirits and how strengthening to the frame, a well-ventilated room is to a lying-in patient.

389. Many attendants are not only unnecessary, but injurious:—they excite and flurry the patient, they cause noise and confusion, and rob the air of its purity.—One lady friend, besides the Doctor and the monthly nurse, is all that is needed.

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\* And may be procured at any India-rubber warehouse, or at a baby-linen establishment.



390. In making the selection of a friend, care should be taken, that she is the mother of a family, that she is kind-hearted and self-possessed, and of a cheerful turn of mind.—At these times, all “chatterers,” “croakers,” and “potterers” must be carefully excluded from the lying-in room.—No conversation of a depressing character should for one moment be allowed.—Nurses, and friends, who are in the habit of telling of bad cases that have occurred in their experience, must be avoided as the plague! If nurses have had bad cases, many of them have probably been of their own making; therefore, such nurses must on every account be shunned!

391. 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 beneficial.

392. A mother is often present on these occasions; but, of all persons, she is the most unsuitable, as, from her maternal anxiety, she tends rather to depress than to cheer the spirits of her daughter.—Though the mother ought not to be in the *room*, it is, if practicable, desirable 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.

393. 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.

394. 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 her anguish.—“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.”\*

395. 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 favorable position, and that everything is progressing satisfactorily.—Moreover, he will be able to inform her of the *probable* duration of the labour.

396. 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

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\* *St. John*, xvi, 21.



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 the 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 do it as seldom as he can)—her life, and, perhaps, that of her child, might be the penalty of such false delicacy.

397. French brandy, in case it is wanted, ought always to be in the house ; but, let me impress upon the minds of the attendants, the importance of withholding it—unless it be ordered by the Doctor—from a lying-in woman.—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.

398. 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, during the progress of labour, to force her to eat : her stomach recoils at it ; as, at these times, there is generally a loathing of food, and, if we will, as we always ought to, take the appetite as our guide—we shall never go far wrong.

399. A patient, during labour, ought frequently to



make water ; by doing so, she will materially add to her ease and comfort, and it will give the adjacent parts more room, and will thus expedite the labour.—I wish to call attention to this point, as many ladies—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 after the labour is over to make water, without the assistance of the Doctor ; who might in an extreme case deem it necessary, to introduce a catheter into the bladder, and thus to draw the water off.

400. I recommended, in a previous paragraph, 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 either her bladder or her bowels, 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, would cause a great diminution of misery, of annoyance, and of suffering.—I have given the subject great attention, as 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.

401. If the patient, twelve hours after the labour, and having tried two or three times during that time, is *unable* to make water, the Medical man ought to be



made acquainted with it, or serious consequences might ensue.

#### CHLOROFORM IN HARD AND IN LINGERING LABOUR.

402. Mothers and Doctors are indebted to Dr. —now Sir James—Simpson for the introduction of Chloroform—one of the greatest and most valuable discoveries ever conferred on suffering humanity.

403. 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, especially in cases of hard and of lingering labour, is every day becoming more general, and will do still more extensively as its value is better understood, and when, in well selected cases, its comparative freedom from danger is sufficiently appreciated.

404. 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.

405. The inhalation of chloroform causes partial or complete unconsciousness, and freedom from pain, for a longer or for a shorter time, according to the will of the operator.—In other words,—the effects



might, with perfect safety, be continued for a few minutes, or, from time to time, for several hours; indeed, if given in proper cases, and by a judicious Medical man, with immense benefit.

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

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

408. It might 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 or expedient to administer it.

409. 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, before administering it, I would, as a rule, wait for at least six hours, from the commencement of the labour.

410. 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!

411. When once a lying-in patient has experienced the good effects of chloroform in assuaging her "pain," she importunately, at every recurrence of "the pain," urges her Medical man 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 childbirth with confidence and hope.

412. It might be asked,—Does the inhalation of chloroform retard the patient's "getting about?"—I emphatically declare—*That it does not do so.*—Those who have had chloroform have always in my practice had as good and as speedy recoveries as those who have not inhaled it.

413. One important consideration in the giving of chloroform in labour, is, *that a patient has seldom, if ever, while under the effects of it been known to die:*—which is more than can be said when it has been administered in surgical operations, in the extraction of teeth, &c.—"I know there is not one well-attested death from chloroform in midwifery in all our journals."\*

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\* Dr. Kidd in *Dublin Quarterly*. Dr. Kidd is an authority on Chloroform.



414. 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, and the danger in the other case.—“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.”\*

415. 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.

416. The Doctor, too, as I before remarked, is deeply indebted to Sir J. 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

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



probability, materially shorten the duration of the confinement.

417. 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 must be allowed to run its own course.—Patience, gentleness, and non-interference, are the best and the chief requisites required in the *majority* of labour cases.

HINTS TO ATTENDANTS, IN CASE THE DOCTOR IS  
ABSENT.

418. It frequently happens after the *first* confinement, that the labour is so rapid, that the child is born before the Doctor has time to reach the patient.

419. It is consequently highly desirable—nay imperatively necessary—for the interest and for the well-doing both of the mother and of the baby, that the nurse, or the lady friend, should, in such an emergency, know—*what to do, and what NOT to do*:—I therefore purpose, in the few following paragraphs—in the simplest and clearest language I can command—to enlighten them on the subject.



420. 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 the patient be made to thoroughly understand that there is not the slightest danger: as the principal danger will be in exciting her with *unnecessary* fears as to herself or to her child.—Tens of thousands are annually delivered 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 the mother and the 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.

421. 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-

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\* “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 he 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 babe must be wiped away with a soft napkin, or it might impede the breathing.

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

423. 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 ought to 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

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\* 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 [child] 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*.



sprinkled on the face.—The navel-string, as long as there is pulsation in it, ought not to be tied.

424. 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 be 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.

425. 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."

426. Another plan of restoring suspended animation, is,—by artificial respiration,—which should be employed in the following manner:—Let the nurse (in the absence of the Doctor) squeeze, with her left hand, the child's nose, to prevent any passage of air

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\* See page 158, paragraph 429.



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, with the right hand, be pressed out again—so as to imitate natural breathing.—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.

427. Until animation is restored, the navel-string—provided there is pulsation in it—ought not to be tied.—If it be tied before the child has breathed, and before he 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.

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

429. *Should the child have been born for some time before the Doctor has arrived*, it may be necessary to tie and to divide the navel-string.—The manner of performing it is as follows:—A ligature—composed of four or five whity-brown threads, nearly a foot in length, and with a knot at each end—ought, by a



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

430. *The after-birth must never be brought away by the nurse*: if the Doctor has not yet arrived, it should be allowed to come away (which if left alone, in the generality of cases, it generally will,) of its own accord. The only treatment, that the nurse ought in such a case, to adopt, is, that she apply, by means of her right hand, *firm* pressure 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.

431. If the after-birth 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 by applying firm pressure over the region of the womb and *not touching the navel-string at all*; as I have known dangerous, and, in some cases, even fatal consequences to ensue from such meddling.



## REST AFTER DELIVERY.

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

433. 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.

434. She should, after the lapse of an hour, or two, be moved from one side of the bed to the other.—It ought to be done in the most tender and cautious manner.—*She must not, on any account whatever, be allowed to sit erect in the bed.*—While being moved, she herself should be passive, that is to say—*she must use no exertion—no effort*; but should, by two attendants, be removed from side to side: one must take hold of her shoulders, the other, of her hips.

435. 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 ought to be careful not to overload her with clothes, or it might produce flooding, fainting, &c.; as soon, therefore, 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.

436. 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 linen well aired.

#### REFRESHMENT.

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

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

439. Brandy ought never to be given after a confinement, unless ordered by the Medical man.—Warm beer is, also, objectionable; indeed, stimulants of all kinds must, unless advised by the Doctor, be carefully avoided; as they would only produce fever, and, pro-



bably, inflammation.—Caudle is now seldom given; but still, some old-fashioned people are fond of recommending 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.

440. (1) This consists of thick linen, similar to sheeting, sufficiently broad to comfortably support the abdomen (belly), and about a yard and a half long.—It must be put on moderately tight; and should be retightened every night and morning. (2) Salmon's Obstetric Binder is admirably adapted to give support to the abdomen, after a confinement, and may be obtained of any respectable surgical instrument maker.

441. If there be not a proper bandage or Binder at hand,—(3) a yard and a half of *unbleached* calico, folded double, will answer the purpose.—The best pins to fasten either of the above bandages, are, the Patent Safety-nursery-pins. Salmon's Obstetric Binder requires no pins.

442. A support to the abdomen, 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 abdomens, which gives them a most unwieldy appearance!

#### POSITION.

443. *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 384,—her soiled linen may readily be 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: *as she herself must not be allowed to use the slightest exertion.*

444. 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.

445. *The room to be kept cool and well ventilated.*—A nurse is too apt, after the confinement is over, to keep a large fire.—Nothing is more injurious than to have the temperature of a lying-in room high.—A



little fire, provided the weather be cold, to dress the baby by, and to encourage a circulation of the air, is desirable.—A fire-guard should be attached to the grate of the lying-in room.—The 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 breathe it!

446. 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.

447. It is really surprising, in this 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 it being what it really is—a *natural process*; and that old-fashioned notions, and not common sense, ought to guide them.

448. The patient must, after labour, be strictly prohibited from talking; and noisy conversation 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 wasted strength.—As soon as the baby is washed and dressed and the mother is made comfortable in bed, the nurse



must alone remain,—let every one else be banished the lying-in room.—Visitors should, on no account, until the Medical man gives permission, be allowed to see the patient.

## THE BLADDER.

449. *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 might tell her that there is); nevertheless, before she goes to sleep, if she feel any inclination, she may respond to it.

450. 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.

451. “The Female Slipper”\* (previously warmed by dipping it in very hot water and then quickly drying it) should, at these times, be used, and for some days after a confinement.—It is admirably adapted for the purpose, as it takes up but little room, and is conveniently shaped, and readily slips under the patient, and enables her to make water comfortably—she being perfectly passive the while.

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\* *The Female Slipper* may be procured at any respectable earthenware warehouse, or of a surgical instrument maker.



It should be passed under her in front, and not at the side of the body.

452. If there be any difficulty in her making water, the Medical man must, through the nurse, be *immediately* informed of it.—False delicacy ought never to stand in the way of this advice.—It should be borne in mind,—that after a *very* lingering, or severe labour, there is frequently *retention of urine*,—that is to say—that, although the bladder may be full of water, the patient is, without assistance, unable to make it.

453. After the patient while lying down trying several times to pass her water, 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, let her, supported the while by the nurse, kneel *on* the bed, her shoulders being covered with a warm shawl,—then let her, with the *pot de chambre* properly placed, between her knees, on the bed, try to make water—and the chances are that she will *now* succeed.

454. If she does not, twenty-four hours having elapsed,—the Doctor must 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 might 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.

455. 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 for three days.—Sometimes before the expiration of the third day the bowels are relieved, either without medicine or merely by the taking of a cupful of warm coffee.—If such be the case, all well and good; as it is much better that the bowels should be relieved *without* medicine than *by* medicine; but if they are not opened by the end of the third day, then early on the following morning—a dose of castor-oil should be given in the manner recommended at paragraph 166.—A teaspoonful, or a dessert-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, as I have before proved, was a mistaken plan.

456. After a lying-in, and when the bowels are not opened either naturally or by the taking of a cupful



of warm coffee,—castor-oil is the *best* medicine, as it does not irritate either 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 not be taken.

457. If the patient objects to the taking of castor-oil, let the nurse, by means of an India-rubber enema-apparatus, administer a Clyster. This is an excellent method of opening the bowels,—as it neither interferes with the appetite nor with the digestion, it does away with the nauseousness of castor-oil, and does not in the administration give the slightest pain. If the first clyster should not have the desired effect, let one be given every quarter of an hour until relief be obtained. 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.

458. If the patient objects both to the taking of the castor-oil and to the administration of a clyster,—then the following draught will be found useful; it will act kindly, and will neither gripe the mother nor the child:—



Take of—Concentrated Essence of Senna, half an ounce ;  
Syrup of Ginger, one drachm ;  
Distilled Water, seven drachms :  
To make a draught. To be taken early in the morning.

—If in six hours the above draught should not have the desired effect (although, if the essence of senna be good, it usually does long before that time,)—let the draught be repeated.—But let every lying-in woman bear in mind,—that as soon as her bowels will act without an aperient, either naturally or by the taking of a cupful of warm coffee, not a particle of opening medicine should be taken.

459. When the patient's bowels, for the first few days after the confinement, require to be opened, she ought to use either the French Bed Pan or the Bed Pan of the Liverpool Northern Hospital. Either the one or the other of these pans is a great improvement on the old-fashioned bed-pan, as they will readily slip under the patient, and will enable her, while lying down and while she is perfectly passive in bed, to have her bowels opened ; which, at these times, is very desirable. The French Bed Pan or the Bed Pan of the Liverpool Northern Hospital, are admirably adapted for a lying-in room ; indeed, no lying-in room ought to be without either the one or the other of these useful inventions.—“A flannel cap for the toe-part, held on by strings round the heel, will afford considerable comfort to the patient.”\*

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\* “The Female Slipper,” and the French Bed Pan, and the Bed Pan of the Liverpool Northern Hospital may be procured



## “CLEANSINGS.”—ABLUTIONS.

460. *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.”—It has in some cases a disagreeable odour.—A moderate discharge is necessary; but when it is profuse it weakens the patient.

461. Some ignorant 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, to cleanliness, and to comfort.—Ablutions, indeed, at this time, are far more necessary than at any other period of a woman's existence.

462. There is nothing better for the purpose, than a soft sponge and warm water; unless the parts be very sore: if they are,—a warm fomentation, two or three times a day, of marshmallows-and-camomile,\*

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at any respectable earthen-ware warehouse, or of a surgical instrument maker.

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



will afford great relief; or—the parts may be bathed with warm oatmeal-gruel, of course without salt. In these cases, too, I have found warm barm (yeast) and water a great comfort, and which will soon take away the soreness.—The parts must, after each fomentation, be well, but quickly, dried with warm, dry, soft napkins.

463. If the *internal* parts be very sore, it may be necessary, two or three times a day, to syringe them out, by means of a vaginal-syringe,\* with either of the above remedies.—Hence the importance of having a good monthly nurse—of having one who thoroughly understands her business.

464. Let the above rules be strictly followed.—Let no prejudices and no old-fashioned notions of the nurse, or 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.

465. A horizontal—a level—position, for ten days or a fortnight after a labour, is important.—A lady frequently fancies, that if she supports her legs, it is all

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



that is necessary: now, this is absurd;—it is the womb, and not the legs, that requires 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, day and night, on a bed; and, then, for the next five or six days, she should be *removed* for a short period of the day, either to another bed, or to a sofa.—Which other bed, or sofa, should be wheeled to the side of the bed, and she should be placed on it by two assistants,—one taking hold of her shoulders, and the other of her hips, and thus lifting her on the bed or sofa,—she herself being perfectly passive, and not being allowed to sit erect the while.—During the time she is on the sofa, she ought to maintain the *level* position.

466. She ought, after the first nine days, to sit up for an hour; she should gradually prolong the time of the sitting up; but still, she must, for the first fortnight, lie down a great part of every day.—She should, after the first week, lie on a sofa or on a horse-hair mattress.

467. The above plan may appear irksome, but my experience tells me that it is necessary—absolutely necessary.—The benefit, the patient will ultimately reap from it, will amply repay the temporary annoyance of so much rest.—Where the above rules have not been adopted, I have known flooding, bearing-down of the womb, and even “falling” of the womb, frequent miscarriages, and, ultimately, ruin of the constitution, to ensue.



468. "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 might have been prevented if the recumbent posture, for ten days or a fortnight after delivery, had been strictly adopted.

469. 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.

#### DIETARY.

470. *For the first day*—the diet should consist of nicely made and well-boiled gruel, arrowroot and milk, bread and milk, tea, dry-toast-and-butter, or bread-and-butter.—Taking care not to overload the stomach with too much fluid; therefore, either a cupful of gruel or of arrowroot, or of tea, at a time, should 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.

471. *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 bread and milk, 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, made either with water, or with fresh milk, or with water with a tablespoonful of cream added to it.

472. If beef-tea, and arrowroot, and milk, be distasteful to the patient, or if they do not agree, then for luncheon, let her have a light egg-pudding or a little rice-pudding, instead of the beef-tea or the arrowroot.

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\* 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 the shoulder-blade of beef, taking care that every particle of fat is removed ;—then let her put the meat into a saucepan or into a digester with three pepper-corns and a pint and a half of *cold* water ; let it be put on the fire to boil ; let it boil slowly for an hour, and then let it be strained ; and you will have most delicious beef-tea—light and nourishing—grateful to the stomach and palate. When cold, carefully skim any remaining fat (if there be any) from it, and warm it up when wanted. It is always well, when practicable, to make beef-tea the day before it is wanted, in order to be able to skim it when quite cold. It may be served up with a finger or two of dry toast and with salt to suit the taste. Sometimes a patient prefers the beef-tea *without* the pepper-corns ; when such is the case, let the pepper-corns be omitted.

If you wish your beef-tea to be particularly strong and nourishing, and if you have any beef bones in the house,—let them be broken up and slowly boiled, in a *digester*, for a couple of hours, or even longer, with the finely minced up beef.



473. *On the third and fourth days* :—Similar diet to the *second day*, with this difference, that, for her dinner, the patient should have mutton—either a mutton-chop or a cut out of a joint of mutton—instead of chicken or game.—Gradually the diet ought to be improved, so that at the end of four days, she should return to her usual diet; provided it be plain, wholesome, and nourishing.

474. The above, *for the generality of cases*, is the scale of dietary; but, of course, every lying-in woman must not be treated alike. If she be weak and delicate, she may, from the beginning, require good nourishment, and instead of giving her gruel, it may, from the *very commencement*, be necessary to prescribe—good strong beef-tea, veal-and-milk broth,\* chicken-broth, mutton chops, grilled chicken, game, &c. Common sense ought to 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.—There is no universal guide, then, to be followed in the dietary of a lying-in woman—each case may and will demand separate treatment: a delicate woman, as I have just remarked, may, from the very first day, require generous living; while, on the other hand, a strong, robust, inflamma-

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\* A knuckle of veal boiled in new milk makes a light and nourishing food for a delicate lying-in woman. Milk is an admirable article of food for the lying-in room.



tory patient may, for the first few days, require only simple bland nourishment—without a particle of stimulants.—“And hence the true secret of success rests in the use of *common sense* and *discretion*—common sense to read Nature aright; and discretion in making a right use of what the dictates of Nature prescribe.”\*

#### BEVERAGE.

475. *For the first week*—either toast-and-water or barley-water-and-milk†—with the chill taken off—is the best beverage.—Wine, spirits, and beer, during this time, ought not to be given, unless the patient be weak and exhausted, or unless ordered by the Medical man.

476. When the patient is weak, and faint, and low, it may, as early as the first or second day, be necessary to give a stimulant—such as, a tumblerful of home-brewed ale, or a glass or two of wine, daily; but

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\* Letter from Edward Crossman, Esq., in *British Medical Journal*, Nov. 19, 1864.

† Barley-water and new milk, in equal proportions, was Dr. Gooch's favorite beverage for a lying-in woman.—“After the fifth day,” he says, “the patient should be quite well, and your visits are merely for the purpose of watching her. Women now generally wish for wine or porter. I usually mix good barley-water with milk (equal parts), making barley-gruel; and, presenting this beverage, I tell them,—This is your wine and your porter too; it will relieve your thirst and sinking at the stomach and will manufacture milk better than anything else.”



as I before remarked, in the generality of cases, either toast-and-water, or barley-water-and-milk, for the first week after a confinement, is the best beverage.

477. *After a week*—a tumbler of mild home-brewed ale, or of London or Dublin porter—where it agrees—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.

478. In this case, barrelled 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.

479. Great care is required in the summer; 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.—A nursing mother sometimes endeavours to correct *sour* porter or 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, by any artificial expedient, to make *tart* beer or porter sound and wholesome, and fit for a nursing mother.—If beer, or porter, is sour, it is not fit to drink, and should either be thrown away, or be given to the pigs!



480. Sometimes, neither wine, nor malt-liquor, agree; then, either new-milk-and-water, or equal parts of fresh milk and barley-water, will generally be found the best beverage.—If milk should also disagree,—barley-water, or toast-and-water, ought to be substituted.

#### CHANGE OF ROOM.

481. *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.—She may, after the first fourteen days, usually, change the chamber for the drawing-room, provided it be close at hand; if it be not, she should, during the day, remove—be wheeled in a chair—from one bedroom to another; as, change of apartment will then be desirable.—The windows, during her absence from the room, ought to be thrown wide open; and the bed-clothes, in order that they may be well ventilated, should be thrown back.—She may, at the end of three weeks, take her meals with the family; but, even then, she must occasionally, during the day, lie on the sofa, to rest her back.

#### EXERCISE IN THE OPEN AIR.

482. The period at which a lady, after her confinement, should take exercise in the *open* air, will, of course, depend upon the season, and upon the state of the wind and 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 at first be the most suitable.—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, provided the season and weather will allow, go out of doors regularly, and gradually resume her household duties and employments.



## PART IV.

### SUCKLING.

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#### THE DUTIES OF A NURSING MOTHER.

483. A mother should not, unless she intends to devote herself to her baby, undertake to suckle him. She must make up her mind to forego the so-called pleasures of fashionable life. There ought, in a case of this kind, to be no half-and-half measures,—she should either give up her helpless child to the tender mercies of a wet-nurse, or she should devote her whole time and energy to his welfare—to the greatest treasure that God can give her!

484. Oh! if a mother did but know the joy that suckling her infant imparts, she would never, for one moment, contemplate 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.” \*

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\* *The Nurse*: a Poem.



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

## THE BREAST.

486. 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, more especially in a *first* confinement, to the bosoms.

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

488. To wash away any viscid mucus from the nipple, or any stale perspiration from the bosom,—let the breasts and the nipples, before applying the baby, be first sponged with a little warm water, and then be dried with a warm, dry, soft towel:—for some infants are so particular that, unless the breasts and the nipples be perfectly free from mucus and from perspiration, they will not suck.—If after the above cleansing process, there be any difficulty in making him take the bosom, smear a little cream on the nipple, and then immediately apply him to it.



489. If the breasts be full, hard, knotty, and painful—which they generally are two or three days after a *first* confinement—let them be well but tenderly rubbed, every four hours, either,—with the best olive-oil (a little of which should, before using it, be previously warmed, by putting a little of the oil, in a teacup, on the hob by the fire); or,—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.

490. On the second, or the third day—more especially after a *first* confinement—the breasts are apt to become very much swollen, painful, and distended. If such be the case, it might be necessary, for a few days, to have them drawn, once or twice daily, by a woman who makes it her business, and who is usually called either a breast-drawer, or, in vulgar parlance, a suck-pap! A clean, sober, healthy, respectable woman should be selected.—There is, in nearly every large town, one generally to be found, who is at the head of her profession! Such a one should be chosen.

491. If the bosoms are more than usually large and painful, in addition to assiduously using the above liniment—apply to the breasts, in the intervals, young cabbage-leaves, which should be renewed after each rubbing.—Before applying them, the “veins” of the leaves must, with a sharp knife, be cut smooth—level with the leaf.—It will require several, as the whole of the breast ought to be covered.—The cabbage-leaves



will be found cooling and comfortable.—Each bosom should then be nicely supported with a soft, folded, silk-handkerchief—going under each breast and suspending it; each handkerchief should then be tied at the back of the neck,—thus acting as a kind of sling.

492. The patient ought not, while the breasts are full and uncomfortable, to drink *much* fluid; as it would only encourage a larger secretion of milk.

493. When the milk is at “its height” as it is called, she ought, every morning, for a couple of mornings, to take a little cooling medicine—a seidlitz powder—and, every four hours, the following effervescing mixture:—

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 two table-spoonfuls of the Acid Mixture, every four hours, whilst effervescing.

Take of—Citric Acid, three drachms;  
Distilled Water, eight ounces:

Mix.—The Acid Mixture.

The best way of taking the above effervescing medicine, is, to put two table-spoonfuls of the first mixture into a tumbler, and two table-spoonfuls of the Acid Mixture into a wineglass; then to add the latter to the former, and it will bubble up like soda-water: she should *instantly* drink it off whilst it is effervescing.



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

495. *Second and succeeding confinements.*—If the breasts are tolerably comfortable (which in the second and in succeeding confinements they probably will be), let nothing be done to them, except, as soon as the milk comes, at regular intervals, applying the child alternately to each of them. Many a bosom has been made uncomfortable, irritable, swollen, and even sometimes gathered, by the nurse's interference and meddling.—Meddlesome midwifery is bad; and I am quite sure that meddlesome breast tending is equally so.—A nurse, in her wisdom, fancies that by rubbing, by pressing, by squeezing, by fingering, by liniment, and by drawing, that she does great good, while, in reality, in the majority of cases, by such interference, she does great harm.—I am quite convinced, that many a breast is made irritable, swollen, and inflamed by fussiness, by interference, and by not leaving it alone! No, in the majority of cases, the baby himself is the best and the only doctor that the bosoms require!—Let this be borne in mind, and much trouble, misery and annoyance might be averted! Nature, in the majority of cases, manages these things much better than any nurse possibly can do, and does not, as a rule, require helping!—The breasts are too much interfered and messed with by nurses, and by nurses who are, in other respects, good ones.



## STATED TIMES FOR SUCKLING.

496. A mother ought to suckle her baby at stated times.—It is a bad habit to give him the breast every time he cries—regardless of the cause ; for, be it what it may—overfeeding, griping, “wind,” or acidity—she 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 bosom.—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, as he becomes older,—increasing the distance of time between ; until, at length,—he has the breast about every four hours.—If he were suckled at stated periods, he would only look for it, at those times, and be satisfied.”\*

497. A mother frequently allows her infant to be at the bosom a great part of every night.—Now, this plan is hurtful both to her and to him ; it weakens her, and thus enfeebles him ; 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.

498. It is surprising how soon an infant, at a very

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



early age, may, by judicious management, be brought into good habits; it only requires, at first, a little determination and perseverance; therefore, a nursing mother must, at once, commence by giving the child the breast at stated periods, and she should rigidly adhere to the times above recommended.

499. A mother, must not, *directly* after taking a long walk, and while her skin is in a state of *violent* perspiration, give her baby the bosom; if she does, it will inflame the milk, and will thus disorder the child's bowels, or it may originate in him some skin disease, and one which might be difficult to cure.—She ought, therefore, to wait, before she gives him the breast, until the surface of her body is *moderately* cool. Let her be careful the while not to sit in draughts.

#### CLOTHING.

500. A nursing mother ought to have her dress—more especially her stays—made loose and comfortable.

501. A gathered breast sometimes arises from the bones of the stays pressing into the bosom: I should, therefore, recommend her to have the bones removed.

502. If a lady be not in the habit of wearing a flannel waistcoat, she ought, at least, to have her bosoms covered with flannel; taking care, that there be a piece of soft linen over the nipples.



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

## DIETARY.

504. A nursing mother ought to live plainly:—her diet should be light and nourishing.—It is a mistaken notion that, at these times, she requires *extra* good living.—She must never be forced to eat more than her appetite demands; if she is,—indigestion, heart-burn, sickness, costiveness, or a bowel-complaint, will ensue.—It is a folly, at any time, to force the appetite.—If she be not hungry, compelling her to eat, will do her more harm than good.—In such a case, a Medical man ought to be consulted.

505. The best meats are—mutton and beef: veal and pork may, for a change, be eaten.—*Salted* meats are hard of digestion; therefore, if boiled beef be eaten, it ought to be only *slightly* salted.—It is better, in winter, 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.

506. Some persons consider,—that there is no care required in the selection of the food, and that a



nursing mother may eat anything—be it ever so gross or unwholesome; 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 will have a turnipy flavour.—This, beyond a doubt, decides 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 her, or greens taken by her at dinner, will sometimes purge the baby as violently, or, even more so, than it will herself.

507. Even the milk of a healthy wet-nurse acts differently, and less beneficially, upon the child, than the mother's *own* milk.—The ages of the mother and of the wet-nurse; the ages of her own and of the latter's infant; the constitutions of the one and of the other; the adaptability of a mother's milk for *her* own particular child;—all tend to make a foster-mother not so desirable a nurse as the mother herself. Again, a mother cannot, at all times, get to the antecedents of a wet-nurse; and if she can, they will not always bear investigation!

508. 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 difficult to subdue.

509. Do not let me be misunderstood,—I am not advocating that a mother should be fussily particular—by no means.—Let her take a variety of food—both animal and vegetable;—let her from day to day vary her diet;—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 peas (provided they are young and well-boiled) and French-beans.—“The maxim of the greatest importance in reference to the materials of human food is—mixture and variety; a maxim founded, as has been stated, upon man’s omnivorous nature. Animal and vegetable substances, soups and solid meat, fish, flesh, and fowl, in combination, or succession, ought, if due advantage is to be taken of the health-sustaining element in food, to form the dietary of every household.”\*

510. But what I object to a nursing mother taking are,—gross meats—such as goose and duck,—highly salted beef,—shell-fish—such as lobster and crab,—rich dishes,—*highly-seasoned* soup,—pastry—unless it be plain,—and cabbages and greens and pickles—if found to disagree with the baby,—and with any other

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\* From an admirable paper on *Health of Body and Mind*, in *Good Words*, Jan. 1, 1866.



article of food which is either rich, or gross, or indigestible, and which, from experience, she has found 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 on common sense.

511. 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. There is much more nourishment in either ale—home-brewed—or in porter than in wine; therefore, for a nursing mother, either ale or porter is far preferable to wine.—Wine, if taken at all, ought only to be used sparingly.—In the higher ranks of life, where a lady is in the habit of drinking wine, it is necessary to continue it; although, the quantity should not be increased.

512. A nursing mother is subject to thirst: when such is the case—she ought not to fly to beer, or to wine, to quench it; this will only add fuel to the fire.—The best beverages will be—either toast-and-water, milk-and-water, barley-water, barley-water-and-new-milk (in equal proportions), or black-tea.

513. A lady who is nursing is, at times, liable to fits of depression.—Let me strongly urge the importance of her abstaining from wine, and from all 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, or a chat with a friend, would be the best medicine.

514. Spirits—brandy, rum, gin, and whiskey—are during suckling injurious: I may even say,—that they are insidious poisons to the parent, and, indirectly, to the child.

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

#### FRESH AIR AND EXERCISE.

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

517. Whatever improves the health of the mother, of course benefits the child: there is nothing more conducive to health, than fresh air and exercise, and plenty of them both.

518. A mother must not, *immediately* after taking exercise, nurse her infant—but wait for half an hour.



—Nor should she take *violent* exercise; as it would be likely to disorder the milk.

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

#### THE POSITION OF A MOTHER DURING SUCKLING.

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

#### THE TEMPER.

521. Passion is injurious to the mother's milk, and, consequently, to the child.—Sudden joy and grief 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 she is frequently better tempered during suckling, than at any other period of her life; indeed, at such times, she usually experiences great joy and gladness!

522. 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.”\*

523. It is an old, and I believe, a true saying—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 him more healthy, and, consequently, better tempered.

524. 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 his 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.

525. An important reason, then, why a nursing-mother is often better tempered than she is at other

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\* *Good Words*, October 1861.



times,—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!—

“Your stomach makes your fabric roll,  
Just as the bias rules the bowl.”\*

Hear what Shakspeare says of the functions of the stomach. The stomach is supposed to speak (and does it not frequently speak, and in very unmistakable language—if we will but only listen to its voice?) :—

“True is it, my incorporate friends, quoth he,  
That I receive the general food at first  
Which you do live upon : and fit it is ;  
Because I am the store-house and the shop  
Of the whole body : But if you do remember,  
I send it through the rivers of your blood,  
Even to the court, the heart,—to the seat o’ the brain ;  
And, through the cranks and offices of man,  
The strongest nerves, and small inferior veins,  
From me receive that natural competency  
Whereby they live ; And though that all at once,  
You, my good friends, though all at once cannot  
See what I do deliver out to each ;  
Yet I can make my audit up, that all  
From me do back receive the flower of all,  
And leave me but the bran.”

*Coriolanus*, Act i., sc. I.



## OCCUPATION.

526. I strongly recommend a nursing-mother to attend to her household duties.—She is never so happy, nor so well, as when her mind is moderately occupied at something useful.

527. I do not mean by occupation—the frequenting of balls, of routs, or of parties: a nursing-mother has no business to be at such places;—she ought to devote herself to her infant and to her household, and she will then experience the greatest happiness this world can afford!

528. 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 in consequence the functions of the breasts suffer.

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

530. What is the reason that wealthy ladies so frequently require wet-nurses? The want of occupation!—And from whom do they 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 wealthy, and indolent, and pampered ladies! and alter your plans of life, or take the 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!

531. 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, if she wishes to have a good breast of milk, ought to take;—if, in point of fact, she is desirous to have healthy children! 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 of happiness!

532. A mother who is listless and idle, lolling, the greater part of every day, in an easy chair, or reclining on a sofa, in a room where a breath of air is not

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\* Fenton.



allowed to enter, usually makes a miserable and wretched nurse.—She is nervous, dyspeptic, and emaciated; having but little milk, and that little, of a bad quality: her baby is puny, pallid, and unhealthy, and, frequently, drops into an untimely grave.—Occupation, then, with fresh air and exercise, is indispensable to a mother who is suckling.

## AILMENTS, ETC.

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

534. 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! Ladies who never wear stays have much better nipples, and more fully developed bosoms; hence such mothers are more likely to make better nurses to their babies. There is no doubt, that the pressure of the stays on the bosom tends to waste away the gland of the breast (where the milk is secreted) and thus to sadly interfere with its function.—I should strongly advise every



mother, who has daughters old enough to profit by it, to bear this fact in mind, and thus to prevent mischief—when mischief might be prevented—by not allowing them, when young, to wear stays.

535.—*Treatment of very small and drawn-in nipples :*—The baby must suck through the intervention of an India-rubber teat, fastened on a box-wood shield ; or, through an India-rubber teat and shield, made entirely of India-rubber.\*—The India-rubber teat must, before it is used, be softened by dipping it in warm—but not in hot—water.—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, in the generality of instances, will enable the infant to suck with ease.—After this has for a time been used, the nipples will be so improved as to render the continuance of it unnecessary.—Of course, I do not advise the use of an India-rubber teat, 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,—let the teat be tried.

536. Remember, as soon as the nipple is sufficiently drawn out, which, in all probability, it will be in a

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\* Either of which may be procured of any respectable surgical instrument maker.



few days—the teat *must* be dispensed with.—In such a case, when the infant is not at the breast—Dr. Wansbrough's Metallic Nipple Shield, ought to be worn.—Small and bad nipples have, by the wearing of these shields, frequently been drawn out, and made good ones: the dress will suffice to keep them in their places.

537. *Sore-nipples*.—If a lady, during the latter few months of her pregnancy, were to adopt the plan recommended at page 89, paragraph 233, sore-nipples, during the period of suckling, would not be so prevalent as they now are.

538. A sore-nipple is frequently produced—by the injudicious custom of allowing the child to have the nipple almost constantly in his mouth.—Stated periods for suckling, as recommended at paragraph 496, ought to be strictly adopted.—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.

539. *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.

540. Dr. A. Todd Thomson's—my old preceptor's—



remedy for sore-nipple is a very good one,—it is as follows:—

Take of—Finely-powdered Gum Arabic half an ounce ;

Powdered Alum five grains :

To be well mixed together in a mortar to make a Powder, of which a pinch should either be sprinkled over the nipple, or it may be applied to the part by means of a camel's-hair brush, every time directly after the child has done sucking. Let the brush, covered with the dry powder, gently sweep over the sore-nipple.

As there is nothing in either of the above powders injurious to the infant, the powder, before applying him to the breast, ought not to be wiped off; indeed, either the one or the other of the powders (the former one especially as it contains borax) is likely to be of service in preventing or in curing the sore-mouth of the child.

541. If the above powders should not have the desired effect (efficacious though they usually are),—“a liniment composed of equal parts of glycerine and of brandy”—(say a vial containing two drachms of each) should be tried, which must be shaken up just before using. It should, by means of a camel's-hair brush, be painted on the nipple, every time directly after the baby has been suckled.—A piece of old soft cambric or lawn, about the size of the palm of the hand, snipped around to make it fit, ought, then, to be moistened in the glycerine and brandy, and should be applied to each of the sore nipples, and worn (until they are cured) whenever the child is not at the



breast.—These applications will be found of much service and of great comfort, and will act as nipple-shields—protecting and healing the nipples.—A soft sponge of warm water may be gently applied to the nipple just before putting the child to the breast.

542. Another cause of a sore-nipple, is, from the mother, after the babe has been sucking, putting up the nipple wet.—She, therefore, *ought always to dry the nipple*—not by rubbing it, but by dabbing it—with a soft cambric or lawn handkerchief, or with a piece of soft linen rag (one or other of which ought always to be at hand), every time directly after the infant has done sucking, and just before applying either of the above powders, or liniment, to the nipple.

543. When the nipple is very sore, a mother, whenever a child is put to the bosom, suffers intense pain.—This being the case, she had better suckle him through the intervention of an India-rubber teat, properly fastened on a shield, as before recommended, see page 198, paragraph 535.—But she ought never to use an India-rubber teat unless it is absolutely necessary,—that is to say, if the nipple be only *slightly* sore, she should not, on any account, apply it; but there are cases, where the nipple is so *very* sore that a mother would have to give up nursing if the shield and teat were not used: these, and very small and drawn-in nipples, are the only cases in which an India-rubber teat and shield is admissible.



544. A nursing-mother is sometimes annoyed by the milk *flowing away constantly*, making her wet and uncomfortable.—All she can do, under such circumstances, is to wear nipple-glasses; and to apply a piece of flannel to the bosoms, which will prevent the milk from chilling her, and will thus do away with the danger of her catching cold, &c.

545. *The Breast*.—A mother ought, before applying the infant to the bosom, to carefully ascertain if there be milk.—This may readily be done by squeezing the nipple between the finger and the thumb.—If there be *no* milk,—she must wait until the milk be secreted,—or serious consequences both to her and to him might ensue:—to the former—inflammation and gathering of the bosom, and sore-nipples;—to the latter—thrush, diarrhœa, and eruptions on the skin.\*

546. If there be a supply of milk in the breast, and if still the child will not suck, the Medical man's attention ought to 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 trifling, painless operation will soon make all right.

547. If the *bosoms be full and uneasy*, they must, three or four times a day, be well, although tenderly,

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\* 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.



rubbed,—with olive-oil and *eau de Cologne* (equal parts of each, mixed in a vial).—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—the hand being warm ; and, then, to well rub the breasts—taking care to use the whole of the inside of the hand.

548. After the bosoms have been well rubbed, each ought to be nicely supported with a large, soft, folded silk handkerchief ; each handkerchief must pass *under* each breast, and *over* the shoulders, and should be tied at the back of the neck—thus, acting as a sling.

549. If the bosoms be very uncomfortable,—young cabbage leaves (with the “veins” of each leaf cut level to the leaf) should, after each application of the oil-and-*eau-de-Cologne*, be applied.—Or,—a large, warm, white-bread-and-milk-and-olive-oil poultice should be employed, which should 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 in a tea-cup on the hob—should be beaten up, by means of a fork, with the moistened



bread, 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.

550. *Gathered Breast*.—A gathered bosom, or “bad breast” as it is sometimes called—is more likely to occur after a *first* confinement, and during the *first* month; therefore, great care 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, during the act of nursing, must be done by throwing a shawl, or a square piece of flannel, over the neck, shoulders, and bosoms.

551. Another cause of a gathered breast arises from a mother sitting up in bed to suckle her baby.—An infant must be accustomed to take the bosom while she is lying down; if this habit is not at first instituted, it will be difficult to adopt it afterwards.—Good habits may be taught a child from the very earliest period of his existence.

552. A sore-nipple is another fruitful cause of a gathered breast.—A mother dreads, in consequence of the suffering it produces, putting the baby to it; 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.



553. The *fruitless* attempt of an infant to procure milk, when there is very little or none secreted, is another, and a very frequent cause of a gathered bosom.—Dr. Ballard, in his valuable little work, before quoted, considers this to be the *principal* cause of a gathered breast; 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 [gather-



ing]. 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 deserves great attention, and ought to be strictly followed.

554. *How is a patient to know that she is about to have a gathered bosom?* 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 ought to be treated, in the same manner as any other *external* gathering, with warm poultices.

555. In the mild or superficial kind of gathered bosom, 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 ought not, on any account whatever, to 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.

556. The *important* form of a gathered breast I will now describe:—A severe gathered bosom 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.—She is now feverish and ill; she loses her strength and appetite; and is very thirsty.

557. A Medical man must, at the very *onset* of the shivering-fit, be sent for; and he will, in the generality of instances, be able to prevent such a painful and distressing occurrence as a gathered breast. If twelve hours be allowed to elapse after the shivering has taken place, the chances are, that the gathering cannot altogether be prevented; although, even then, it may, by judicious treatment, be materially lessened and ameliorated.

558. We sometimes hear of a poor woman suffering dreadfully for months, and of her having a dozen or



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

559. When a nursing mother *feels faint*, she ought *immediately* to lie down and to 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, as soon as the *immediate* effects of the brandy are gone off, a greater depression to ensue: not only so, but the *frequent* taking of brandy might become a habit—a necessity—which would be a calamity deeply to be deplored!

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

561. *Aperients, &c., during suckling.*—Strong purgatives, during this period, are improper, as they are apt



to give pain to the infant, as well as to injure the mother.—If it is absolutely necessary to give an aperient,—the mildest—such as a dose of castor-oil—must be chosen.

562. If she cannot take oil, then she should apply it *externally* to the bowels, either as a castor-oil compress, or as a liniment, as recommended at page 71.

563. 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.

564. When a lady, who is nursing, is habitually costive,—she ought to eat brown, instead of white bread.—This will, in the majority of cases, enable her to do without an aperient.—The brown bread may be made—by mixing one part of bran and three parts of fine wheaten-flour together, and then making it in the usual way into bread.

565. Stewed prunes, or stewed French-plums, is an excellent remedy to prevent constipation.—The patient ought to eat, every morning, a dozen or fifteen of them.—The best way to stew prunes or French-plums, is the following:—Put a pound of prunes or

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\* Two tablespoonfuls of olive-oil, two tablespoonfuls of table-salt, and a pint of warm oatmeal gruel.



of French plums, and two tablespoonfuls 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.—Stewed rhubarb, too, often acts as a mild and gentle aperient.

566. 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.

567. A Bee-master in *The Times*, or as he is usually called *The Times* Bee-master, has satisfactorily proved, that honey—pure honey—is most wholesome and beneficial to the human economy.—He recommends it to be occasionally eaten for breakfast, in lieu of butter: which latter article, in some localities, and in some seasons of the year, is far from good and wholesome.

568. The Germans are in the habit of eating, for breakfast and tea, a variety of fruit-jams, instead of butter, with their bread. Now, if the bowels are costive, jam is an excellent substitute for butter.—The Scotch, too, scarcely ever sit down to breakfast, or to tea, without there being a pot of marmalade on the table. English ladies, in this matter, may well take a leaf out of the books of the Germans and of the Scotch.

569. A basinful of gruel—made with Robinson's



Patent Groats, or with the Derbyshire oatmeal—every night, for supper, will often supersede the necessity of giving opening medicine.—A tumblerful of cold, spring water—cold from the pump—taken *early* every morning, sometimes effectually relieves the bowels.—Coffee should be substituted for tea for breakfast—as coffee frequently acts as an aperient. A glass of sherry should be taken every day *during* dinner—as, if the bowels be sluggish, it sometimes stimulates them to action.—I should strongly recommend a patient, in such a case, to eat a great variety of food, and to let the *vegetable* element predominate.—*Much* meat encourages constipation. Fruit, farinaceous food, coffee and a variety of vegetables,—each and all incite the bowels to do their duty.

570. Although a nursing-mother ought, more especially if she be costive, to take a variety of *well-cooked* vegetables—such as, potatoes, asparagus, broccoli, cauliflower, French-beans, stewed celery, and turnips—she should avoid eating—greens, cabbages and pickles, as they would be likely to affect the baby and might cause him to suffer from gripings, pain, and “looseness” of the bowels.

571. The “wet compress” is another excellent method of opening the bowels.—The way of applying it, is as follows:—Fold a large napkin a few 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—



which should be considerably larger than the folded napkin, in order to exclude the air;—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 ought to remain on for three or four hours, or until the bowels are opened.

572. 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 the mother and the child.—Moreover,—the more opening medicine a patient swallows, the more she requires; so that if she once gets into the habit of regularly taking aperients, the bowels will not act without them.—What a miserable existence to be always swallowing physic!

573. If a lady, then, during the period of suckling,—were to take systematic exercise in the open air; to bustle about the house and to attend to her household duties; if she were to drink, the moment she awakes in the morning, a tumbler of *cold* water, and every day *during* dinner, a glass of sherry; if she were to substitute *brown* bread for *white* bread and *coffee* for *tea* at breakfast; if she were to vary her food, both animal and vegetable—and partake plentifully of sound ripe fruit; if she were to use an abundance of *cold* water to her skin; if she were, occasionally, at bedtime, to apply a “wet-compress” to her bowels,



and to visit the water-closet, daily, at one hour; if she were—even if the bowels were not opened for four or five days—*not* to take an aperient of any kind whatever, and avoid quacking herself with physic; in short, if she would adopt the above safe and simple remedies—which are in the reach of all—she would not suffer so much from costiveness, which is frequently the bane, the misery, and the curse of her existence! But then, to get the bowels into a proper and healthy state, it would take a little time and trouble; and how readily can a couple of pills be swallowed; and how quickly they act, and how soon they have to be repeated; until, at length, the bowels will not act at all unless goaded into action, and the pills become a necessity! O the folly and the mischief of such a system!

## WEANING.

574. 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 adage 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.

575. *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 mother: on an average,—nine months is the proper time.—If she is delicate, it may be found necessary to wean him at six months; or, if he is weak, or 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.”\*

576. 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—sometimes dies of water-on-the-brain, or, of consumption, or, of mesenteric disease.

577. *The manner in which a mother ought to act, when she weans her child:—*“She must, as the word signifies, do it gradually,—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 ought only to 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 for a few days to go away herself.”\*

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



578. "A good plan is,—for the nurse to have, in the bed, a half-pint bottle of new-milk—which has been previously boiled to prevent it from turning sour,—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 of lamps, of candle-frames, and other troublesome contrivances."\*

579. If the mother is not able to leave home herself, or to send her child *from* home;—she ought then to let the child sleep, in another room, with some *responsible* person.—I say *responsible* person, for a baby must not be left to the tender mercies of a giggling, thoughtless, young girl.

580. If the mother, during the day-time, 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 bosom; and, thus, the weaning will be accomplished.—A mother need not be afraid, that the aloes will injure her baby: the *minute* quantity he will swallow will do no harm; for the moment he tastes it—the aloes

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\* Pye Chavasse's *Advice to a Mother*.



being extremely bitter—he will splutter it out of his mouth.

581. 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 centre to the circumference of each plaister to make a better fit.—These plaisters should be procured from a chemist.

582. 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 bosoms 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.

583. The drawing of the bosoms, when weaning, by means of a breast-pump, by the mouth, and by other like contrivances, has frequently caused gathered breasts.—If not drawn, they scarcely, if ever, gather.

584. 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, every four hours, be well, but tenderly rubbed with equal parts of olive-oil and of *eau de*



*Cologne*;—the nurse supporting the bosom, during such friction, with her other hand.

585. Let me impress the above important advice on a nursing-mother's mind,—it might save a great deal of after suffering and misery.

586. It might be well to state,—that, after the child has been weaned, the milk does *not* always *entirely* leave the breast, not even for weeks, and, in some cases, not even for months: it is not of the slightest consequence, and requires no treatment to get rid of it.

587. The mother must, during the period of weaning, live abstemiously, and should drink as little as possible.—In many cases,—it is necessary to give, every morning, for two or three mornings, 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.

588. *Symptoms denoting the necessity of weaning*:—A mother sometimes cannot suckle her child; 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 of 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 bosom ; pallor of the countenance ; shortness of breath ; swelling of the ankles.

589. Of course, every mother, who is suffering from suckling, 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 ought not to disobey the warnings, but should discontinue nursing ; although, it may be necessary, if the child himself be not old enough to wean, to obtain a healthy wet-nurse to take her place.

590. Remember, then, that if the above warning symptoms be disregarded, dangerous consequences, both to the parent and to the child, may be the result.—It may throw the mother into a consumption, or may bring on a heart-disease ; and, in consequence of his not being able to obtain sufficient or proper nourishment, it may cause the infant to dwindle and pine away.

591. Soon after nine months' nursing, "the monthly courses" generally return:—this is another warning that the child ought *immediately* to be weaned ; as the milk will lessen both in quantity and in nourishment, and the child in consequence will become delicate and puny, and, every day he is suckled, will lose, instead of gain, ground.



592. At another time, although the above train of symptoms does not occur, and notwithstanding she may be in perfect health, a mother may not be able to suckle her baby.—Such a one usually has very small breasts, and but little milk in them; and, if she endeavour to nurse her infant, it produces a *violent aching* of the bosom.—Should she disregard these warnings, and should still persevere, it might produce inflammation-of-the-breast, which will, probably, end in a gathering.

593. 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.

594. Occasionally a mother suckles her infant when she is pregnant.—This is highly improper; as it not only injures her own health, and may bring on a miscarriage; but it is also prejudicial to the baby, and may produce a delicacy of constitution, from which he might never recover.

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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.







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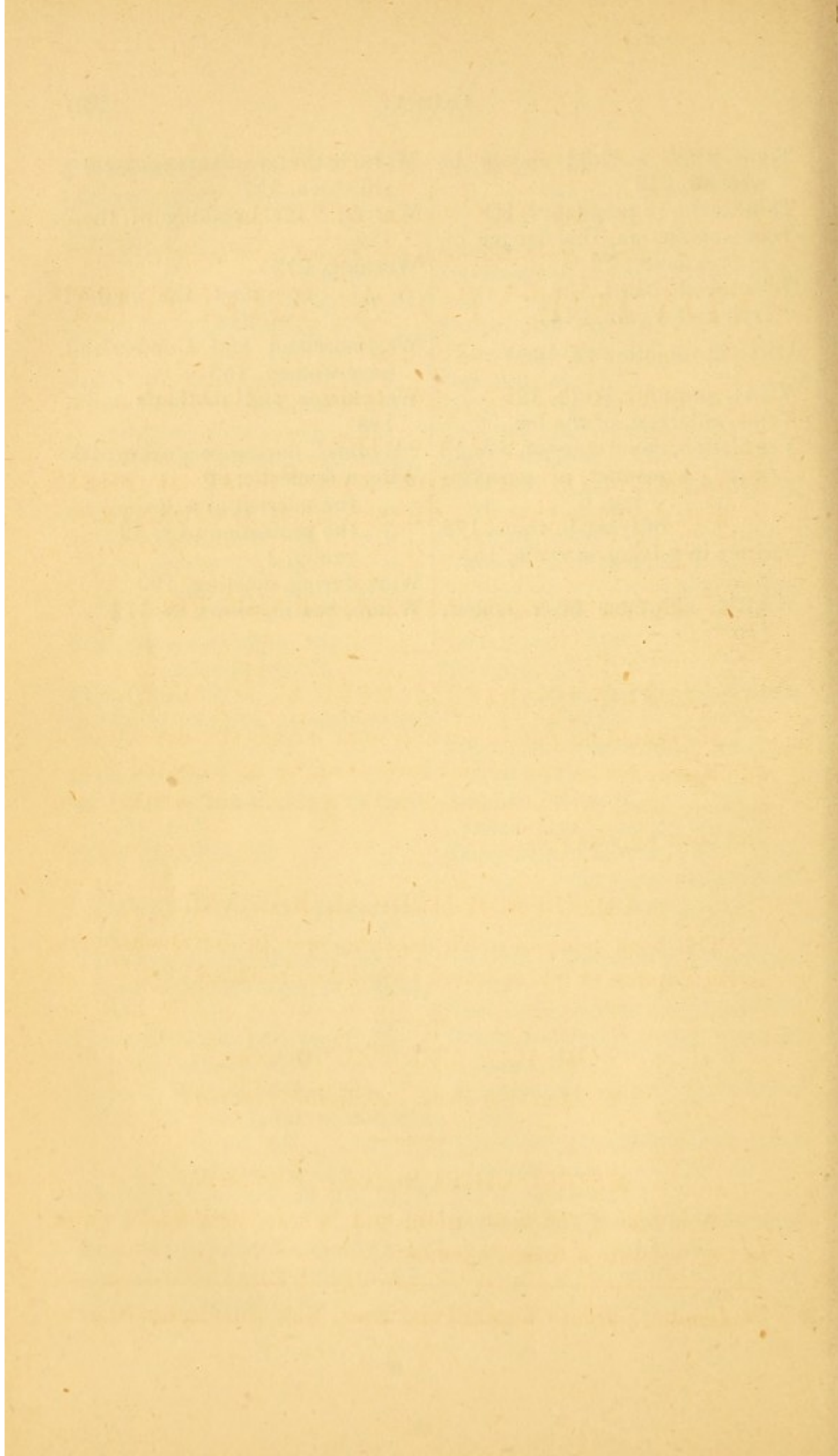


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