

The nurse's manual, and young mother's guide : containing advice on the management of infants, and conduct to be observed by the mother before and after child-birth / by Richard S. Kissam.

Contributors

Kissam, Richard S. 1806-1861.
National Library of Medicine (U.S.)

Publication/Creation

Hartford [Conn.] : Cooke, 1834.

Persistent URL

<https://wellcomecollection.org/works/uezz6cts>

License and attribution

This material has been provided by This material has been provided by the National Library of Medicine (U.S.), through the Medical Heritage Library. The original may be consulted at the National Library of Medicine (U.S.) where the originals may be consulted.

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

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



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

WY
K62n
1834

R. PAINE'S
Cheap Book Store,
No. 180 N. 2d. St.,
3d door ab. Vine, Phil.

454

M

SURGEON GENERAL'S OFFICE

LIBRARY.

ANNEX

ANNEX

Section, _____

No. **131856.**

Editor of
Poulsons Advertiser
With the respects
of the Publisher

THE NEW YORK

LIBRARY OF THE

NEW YORK

LIBRARY OF THE

NEW YORK

NEW YORK

NEW YORK

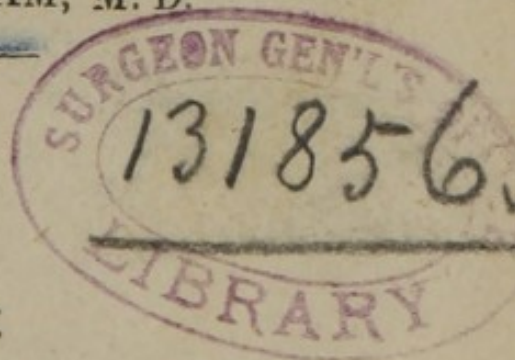
THE
NURSE'S MANUAL,
AND
YOUNG MOTHER'S GUIDE;
CONTAINING
ADVICE ON THE MANAGEMENT OF INFANTS,
AND
CONDUCT TO BE OBSERVED BY THE MOTHER BEFORE AND
AFTER CHILD-BIRTH.

By RICHARD S. KISSAM, M. D.

Hartford :

PUBLISHED BY COOKE AND CO.

1834.



WY
K62n
1834

Entered according to Act of Congress, in the year 1834,
BY COOKE AND CO.,
in the Clerk's Office of the District Court of Connecticut.

PREFACE.

The plan of this volume, it is thought, will be found to differ very considerably from that of other works on the same subject. The object of the author is, to enter into the minute details of the Nurse's duty to the Infant, during the first month of its life. In his own practice, he has often seriously felt the inconvenience of the want of information, in this respect, on the part of the nurse; and it was this which chiefly induced him to prepare these pages.

The advice given to young mothers, it is hoped, will prove beneficial, as peculiar circumstances, or their own delicacy of feeling, may often prevent them from gaining access to more experienced friends.

PREFACE

The plan of this volume, it is thought will be found
to differ very considerably from that of other works on
the same subject. The object of the author is to en-
ter into the various details of the Indian story in the
latest, during the last month of his life. In his own
practice, he has often seriously felt the importance
of the want of information in this respect, on the part
of the natives and it was this which chiefly induced
him to prepare this paper.

The advice given to young authors, it is hoped, will
be useful, as pointing out the importance of their
own history of India, may also reveal them from
certain causes to be mentioned here.

CONTENTS.

PART I.

	Page.
CHAP. I. Qualifications necessary to constitute a good Nurse, - - -	9
II. Length of time for which a Nurse should be engaged in cases of Childbirth, -	13
III. Conduct of the Nurse in the Sick Room, -	16
IV. Duties of the Nurse during Labor, -	18
V. Treatment of the Mother immediately af- ter the Birth of the Child, - - -	22
VI. Treatment of the Child immediately after its birth, - - - -	23
VII. Washing the Child, - - - -	24
VIII. Dressing the Navel, - - - -	27
IX. Of the Belly-band, - - - -	28
X. Dressing the Child, - - - -	31
XI. Feeding the Child, - - - -	32
XII. On putting the Child to the Mother's Breast,—and purging off the Meconium, -	35
XIII. On feeding the Child when the Mother fur- nishes no milk, or only a partial supply, -	37
XIV. Management of the Nipple before and af- ter the Birth of the Child, - - -	42
XV. Food of the Mother, - - - -	46
XVI. General Treatment of the Mother during the month, - - - -	50

XVII. Temperature and Ventilation of the Room,	54
XVIII. On Bed Curtains, - - -	56
XIX. Management of the Child at Night, -	61
XX. Wants of the Child, - - -	64
XXI. On Crying, - - - -	67
XXII. General Treatment of the Child during the Month, - - - -	70
XXIII. On the Mother's assuming the Care of the Child, - - - -	75
XXIV. Subsequent Management of the Child,	77
XXV. Conduct of the Mother during Lactation,	88

PART II.

DISEASES OF THE CHILD.

CHAP. I. Sore Eyes, - - -	93
II. Red Gum, - - -	96
III. Sore Mouth, - - -	97
IV. Sore Ears, - - -	100
V. Costiveness, - - -	102
VI. Diarrhœa, - - -	104
VII. Vomiting, - - -	110
VIII. Croup, - - -	111
IX. Marks, - - -	113
X. Retention of Urine, - - -	114
XI. On the want of a Passage from the Bow- els, - - -	115
XII. Tongue-tie, - - -	116
XIII. Belly-ache, - - -	117

PART III.

DISEASES OF THE MOTHER.

CHAP. I. Lochia,	-	-	-	-	119
II. Milk Fever,	-	-	-	-	120
III. Broken-Breast,	-	-	-	-	121
IV. Sore Nipples,	-	-	-	-	125
V. Costiveness,	-	-	-	-	125
VI. Headache,	-	-	-	-	127
VII. Piles,	-	-	-	-	128

PART IV.

CHAP. I. Teething,	-	-	-	-	131
II. Weaning the Child,	-	-	-	-	134
III. Administration of Medicines,	-	-	-	-	137
IV. Signs of Pregnancy,	-	-	-	-	138
V. Conduct to be observed during Gestation,	-	-	-	-	140

PART III

110	Chapter I. Preliminary
110	Chapter II. The first part of the work
110	Chapter III. The second part of the work
110	Chapter IV. The third part of the work
110	Chapter V. The fourth part of the work
110	Chapter VI. The fifth part of the work
110	Chapter VII. The sixth part of the work
110	Chapter VIII. The seventh part of the work
110	Chapter IX. The eighth part of the work
110	Chapter X. The ninth part of the work
110	Chapter XI. The tenth part of the work
110	Chapter XII. The eleventh part of the work
110	Chapter XIII. The twelfth part of the work
110	Chapter XIV. The thirteenth part of the work
110	Chapter XV. The fourteenth part of the work
110	Chapter XVI. The fifteenth part of the work
110	Chapter XVII. The sixteenth part of the work
110	Chapter XVIII. The seventeenth part of the work
110	Chapter XIX. The eighteenth part of the work
110	Chapter XX. The nineteenth part of the work
110	Chapter XXI. The twentieth part of the work
110	Chapter XXII. The twenty-first part of the work
110	Chapter XXIII. The twenty-second part of the work
110	Chapter XXIV. The twenty-third part of the work
110	Chapter XXV. The twenty-fourth part of the work
110	Chapter XXVI. The twenty-fifth part of the work
110	Chapter XXVII. The twenty-sixth part of the work
110	Chapter XXVIII. The twenty-seventh part of the work
110	Chapter XXIX. The twenty-eighth part of the work
110	Chapter XXX. The twenty-ninth part of the work
110	Chapter XXXI. The thirtieth part of the work
110	Chapter XXXII. The thirty-first part of the work
110	Chapter XXXIII. The thirty-second part of the work
110	Chapter XXXIV. The thirty-third part of the work
110	Chapter XXXV. The thirty-fourth part of the work
110	Chapter XXXVI. The thirty-fifth part of the work
110	Chapter XXXVII. The thirty-sixth part of the work
110	Chapter XXXVIII. The thirty-seventh part of the work
110	Chapter XXXIX. The thirty-eighth part of the work
110	Chapter XL. The thirty-ninth part of the work
110	Chapter XLI. The fortieth part of the work
110	Chapter XLII. The forty-first part of the work
110	Chapter XLIII. The forty-second part of the work
110	Chapter XLIV. The forty-third part of the work
110	Chapter XLV. The forty-fourth part of the work
110	Chapter XLVI. The forty-fifth part of the work
110	Chapter XLVII. The forty-sixth part of the work
110	Chapter XLVIII. The forty-seventh part of the work
110	Chapter XLIX. The forty-eighth part of the work
110	Chapter L. The forty-ninth part of the work
110	Chapter LI. The fiftieth part of the work
110	Chapter LII. The fifty-first part of the work
110	Chapter LIII. The fifty-second part of the work
110	Chapter LIV. The fifty-third part of the work
110	Chapter LV. The fifty-fourth part of the work
110	Chapter LVI. The fifty-fifth part of the work
110	Chapter LVII. The fifty-sixth part of the work
110	Chapter LVIII. The fifty-seventh part of the work
110	Chapter LIX. The fifty-eighth part of the work
110	Chapter LX. The fifty-ninth part of the work
110	Chapter LXI. The sixtieth part of the work
110	Chapter LXII. The sixty-first part of the work
110	Chapter LXIII. The sixty-second part of the work
110	Chapter LXIV. The sixty-third part of the work
110	Chapter LXV. The sixty-fourth part of the work
110	Chapter LXVI. The sixty-fifth part of the work
110	Chapter LXVII. The sixty-sixth part of the work
110	Chapter LXVIII. The sixty-seventh part of the work
110	Chapter LXIX. The sixty-eighth part of the work
110	Chapter LXX. The sixty-ninth part of the work
110	Chapter LXXI. The seventieth part of the work
110	Chapter LXXII. The seventy-first part of the work
110	Chapter LXXIII. The seventy-second part of the work
110	Chapter LXXIV. The seventy-third part of the work
110	Chapter LXXV. The seventy-fourth part of the work
110	Chapter LXXVI. The seventy-fifth part of the work
110	Chapter LXXVII. The seventy-sixth part of the work
110	Chapter LXXVIII. The seventy-seventh part of the work
110	Chapter LXXIX. The seventy-eighth part of the work
110	Chapter LXXX. The seventy-ninth part of the work
110	Chapter LXXXI. The eightieth part of the work
110	Chapter LXXXII. The eighty-first part of the work
110	Chapter LXXXIII. The eighty-second part of the work
110	Chapter LXXXIV. The eighty-third part of the work
110	Chapter LXXXV. The eighty-fourth part of the work
110	Chapter LXXXVI. The eighty-fifth part of the work
110	Chapter LXXXVII. The eighty-sixth part of the work
110	Chapter LXXXVIII. The eighty-seventh part of the work
110	Chapter LXXXIX. The eighty-eighth part of the work
110	Chapter LXXXX. The eighty-ninth part of the work
110	Chapter LXXXXI. The ninetieth part of the work
110	Chapter LXXXXII. The ninety-first part of the work
110	Chapter LXXXXIII. The ninety-second part of the work
110	Chapter LXXXXIV. The ninety-third part of the work
110	Chapter LXXXXV. The ninety-fourth part of the work
110	Chapter LXXXXVI. The ninety-fifth part of the work
110	Chapter LXXXXVII. The ninety-sixth part of the work
110	Chapter LXXXXVIII. The ninety-seventh part of the work
110	Chapter LXXXXIX. The ninety-eighth part of the work
110	Chapter LXXXXX. The ninety-ninth part of the work
110	Chapter LXXXXXI. The hundredth part of the work

PART FIRST.

CHAPTER I.

Qualifications necessary to constitute a good Nurse.

A very important, and in almost all cases, essential qualification in a professional nurse, is, that she possess a sound and vigorous constitution. The reason for this is obvious. The labors required both of the mind and body are of a most fatiguing and trying nature, such as a feeble person cannot undergo and retain her health, and spirits, both of which are requisite to the faithful discharge of her duties.

The invalid perceiving the want of strength and loss of vigor in her attendant, is sometimes induced to forego comforts and necessities, and is thus delayed in regaining her health. Frequently the nurse through bodily exhaustion, and overcome with sleep, neglects to administer remedies, or nourishment, and thus becomes the unconscious cause of a relapse in the patient.

Loss of health is seldom or never accompanied by uniform cheerfulness,—a grand requisite in a nurse ;

besides, a feeble body has enough to do to administer to its *own* wants, the pains of such, being frequently expressed by groans and sighs which are very distressing to the invalid.

A cheerful *manner* in nursing is of great importance. It produces a corresponding cheerfulness in the patient, as all who are conversant with the sick know, and is of essential service in restoring health.

The comfort of the sufferer is much promoted by the appearance of those around her, especially of the nurse, to whom she looks for kind words and a bright countenance.

It is unnecessary here to go into an explanation of the effect of the mind on the body ; and to shew how a cheerful disposition induces the kind action of all the functions of nature, or how an irritable temper produces disease, and prevents the return of health. I have known mothers after child-birth linger a long time in a nervous, uneasy state, under the care of an uncompromising nurse, and soon recover on changing her for a cheerful and an agreeable one.

The importance of pleasant associations will be shown by the following anecdote related by Dr. Rush.—

A lady with whom he had associated in early childhood was very ill with a fever ; and he was

consulted in her case. On entering the room where the patient lay, he exclaimed, "Mrs. B——, do you recollect the bird's nest in the old oak tree?" This was recalling a pleasant moment of her life, and the delightful associations of youth connected with it, produced a cheerful feeling which contributed much towards her recovery; from this moment the Doctor states that the lady began to recover, and was finally restored to health.

This is one out of many examples which might be produced to shew the immense effect that the mind exercises over the body.

A nurse should possess good *common sense*; or in other words a sound judgment in deciding upon ordinary occurrences.

I know of scarcely any situation more responsible than that of a nurse; health, nay, even life itself, is often at her disposal. An error committed for want of a correct decision may terminate in death: whereas by resorting to means trifling in themselves, but timely, and judiciously applied, the greatest evils may be prevented. In cases of violent and sudden floodings, for instance; if the nurse be well instructed she may often stop the flow of blood by proper applications, which if long neglected will surely end fatally.

In all the minute concerns of the sick room, great

importance is justly attached to the decision of the nurse. A clear understanding is as necessary to the correct performance of the smaller duties of life, as in the discharge of the greater ones.

Industry is an other qualification to be considered in the choice of a nurse. The thousand and one duties to be discharged, especially in lying-in rooms, require constant exertion, so as to have every thing done in season, and with neatness and good order.

Many mothers are kept awake until a late hour, from the neglect of the nurse to make seasonable arrangements for the night. This infringement upon the first hours of sleep, is generally succeeded by a restless night, which to persons in feeble health is a great injury.

Implicit obedience to the directions of the attending physician, ought always to be rendered by a conscientious and faithful nurse. The physician is presumed to be the best judge of the case. He is entrusted with the safe keeping of the invalid. He is the director,—the nurse is the agent to execute his orders. When I say this, I mean that the utmost and scrupulous exactness is to be observed in the fulfilment of his directions, and that any intentional variation from them is a great neglect of duty.

The nurse may indeed suggest her opinion as to

the treatment of the patient to the physician, to which he will give all due weight, but his decision must be considered final. The nurse fulfils her duty by obedience, and then the responsibility of the case rests with the physician and the patient who made choice of him.

It is scarcely necessary here to add, that good principles and strict integrity are essential in the character of a nurse. This will enable her to perform her part well. It will restrain her from divulging family secrets, or from any other indiscretion and impropriety of conduct; and if she is both an intelligent and pious woman, she may contribute very essentially, not only to the temporal, but the spiritual good of the individual whom she attends.

CHAPTER II.

Length of time for which a Nurse should be engaged in cases of Child-birth.

The time for which the services of a Nurse are required must necessarily vary with circumstances; these are—

I. The strength or feebleness of the constitution.

II. The situation of the family as regards the capacity of some of its members to assist in the care of the sick.

III. The actual condition of the invalid.

IV. The ability to reward extra services.

If a female of a delicate constitution is about to give birth to a child, she will do well to engage a nurse for at least two months; one week of which should be spent in her family prior to delivery.

The advantages arising from a nurse being in the family a week or more previous to the birth of the child, are :

I. She becomes acquainted with the locality of the articles necessary to be used during confinement; this will prevent loss of time and confusion if they should be required suddenly.

II. It will be in the nurse's power to instruct the mother in many things which it may be necessary for her to learn.

III. The invalid will become accustomed to the manners and appearance of the Nurse, and the mother will naturally place more confidence in her, when acquainted with her good qualities.

If there is no individual in the family to succeed the monthly nurse, then most assuredly six or seven weeks is not too long to retain her.

I am aware that four weeks is generally considered a sufficient time for a female to recover her strength after delivery; but if this is safe in a majority of cases, still the possibility of becoming the victim of sudden and fatal disease from violent and untimely effort, should warn all mothers of the necessity of having sufficient assistance, and prevent unnecessary exertions on their part.

There is scarcely an instance in which the mother does not regret to part with her nurse at the expiration of four weeks.

If the mother be decidedly feeble, it is most unwise to discharge the nurse prior to entire recovery.

To the nurse a long engagement has decided advantages. The fatigue consequent on attending the mother and the child during two or three weeks after delivery is in many cases very great, and of such a nature too, that one week does not suffice to restore impaired strength.

If, then, the engagement continues three or four weeks after the most laborious duties are discharged, the nurse has ample time to read and improve herself in her profession; to attend to the arrangements of her clothes, and to various other personal affairs, which in short engagements are adjusted during such times as should be devoted to sleep, or to the wants of her charge.

It is evident that a woman worn out by unabated care and anxiety, is unfit to take the charge of a mother and her newly born infant immediately after four weeks of incessant toil.

Those nurses who fulfil engagements every month in the year, should seriously consider that they are doing themselves a great injury by over exertion, and their employers a wrong, by undertaking duties which they are physically unable to perform.

CHAPTER III.

Conduct of the Nurse in the Sick Room.

It is to be presumed that an individual who expects to be employed as a nurse by the respectable portion of the community, is a modest and discreet woman.

I am aware that I am here treading on delicate ground, and perhaps may be considered over nice in these matters. But all individuals, wishing to discard from the lying-in room indecent innuendoes, and stale jokes and witticisms, will surely feel the im-

portance of the subject. There has been a decided improvement in this respect of late ; and I hope before long to find no other conversation tolerated in lying-in rooms, than such as would be considered delicate elsewhere.

A scene of suffering, surely, is no place for merriment. The hazard of life should rather induce seriousness than frivolity. The mother's pangs call for active sympathy, rather than idle babbling ; and a delicate sympathy for the distressed is a sure test of correct and generous feelings.

In performing all the offices in the sick room, the utmost delicacy of manner is to be maintained ; and in all necessary professional communications a proper regard in the choice of words ought to be observed.

Alarming stories of fatal cases, and of marvellous births, should never be related, because they tend to excite fear in the patient and thus prove injurious to her.

Long conversations when the invalid is in a feeble state tend much to exhaust her. This should be checked, and an affectionate and respectful exterior preserved, accompanied with benevolent feelings.

Nicety of dress, and neatness of person, will always endear the offices rendered by the nurse. A disagreeable task performed in a delicate manner

will by degrees be considered less offensive, and more acceptable.

Self, is to be disregarded. A nurse occupies a peculiar situation ;—admitted to the confidence of the invalid, and performing tasks about her person, sometimes in themselves extremely disagreeable, she ought to have perfect command of her feelings, and never to betray the least appearance of being uncomfortably situated. Expressions of disgust may occasion disaffection—disaffection leads to dislike—open complaint follows, and thus both mother and nurse will regard each other with improper feelings.

CHAPTER IV.

Duties of the Nurse during Labor.

The duties of the nurse during labor may be advantageously considered under two heads.

I. Duties in and about the room. These consist in the proper arrangement of the bed, and procuring all articles necessary during and after labor for the comfort of the mother and child.

It is taken for granted that the mother has designated the clothes she wishes the child to be dressed in. These the nurse should place in a basket in some convenient situation, so as easily to be found. This basket should also contain a piece of narrow tape and a sharp pair of scissors, for the use of the physician; soap, a soft linen wash rag, a piece of muslin containing arrow root for dusting the babe, a hair brush, and a napkin.

The moment that labor is ascertained to have commenced, the bed on which the mother expects to be delivered should be prepared. A narrow cott or cross bedstead, on many accounts is preferable on these occasions; standing, as it should, away from the walls of the room, it affords space for more persons to attend on the mother than a large bedstead.

A mattress is better than a feather bed, as its surface is more even, which is a great advantage, it facilitates a change of position; besides it is cooler, and allows the physician a better opportunity to perform his duties.

The mattress or bed should be protected in such a manner as to prevent incidental injury; this is effected by placing immediately over the bed a piece of oil cloth, and over this some folded sheets, sufficient to absorb the fluid which may escape from the mother.

A few simple drinks, such as toast water, balm tea, or green tea, should be provided for the refreshment of the mother.

Plenty of water, both cold and warm, should be near at hand ; a wash basin and towels also should be provided. Napkins and a pot of soft pomatum should be within reach for the use of the physician : in some cases he may call for a sheet, which together with a small blanket for receiving the babe, should not be omitted. A good syringe may be required, as also a bed pan. It is well to lay in a convenient place a napkin or band, for encircling the mother after delivery ; this should be eighteen inches wide, and a yard long.

In protracted cases it is well for the Nurse to provide some refreshment for the attendants ; this should be of a simple nature ; a cup of tea, and a piece of bread and butter is often very acceptable.

II. The duties to the mother consist in arranging her person, and encouraging her to bear with fortitude the pain she is about to endure.

The linen of the mother should be drawn up to the arms, folded smoothly and secured so as not to become wet. This prevents the necessity of changing it after the birth of the child.

The mother should be encouraged to assist the pains, by holding her breath, and exerting herself

gently and steadily to favor the action in the expulsion of the child.

Violent pulling with the hands, and pushing with the feet should not be encouraged, as it tends to fatigue, and produces general soreness after labor.

The back of the mother should be supported by the hands, or a pillow firmly held against it.

If she sleeps between the pains she should not be disturbed ; it is an excellent symptom, and refreshes the sufferer ; should she become faint and exhausted, some light food may be given her ; a cup of coffee with plenty of cream, or any simple nourishment most agreeable to her.

A careful attention should be given to the state of the bowels, and of the urinary bladder. The water should be freely evacuated, when labor commences, and during it, at any moment that it may be desired. The bowels also may with advantage in most cases, be freely cleared by the administration of an injection of warm soap suds in the early part of labor.

CHAPTER V.

Treatment of the Mother immediately after the Birth of the Child.

The attending physician will most generally direct when it is proper to "put the mother to bed," or in other words when she shall be adjusted in the situation proper for her to remain in.

If the labor be a natural one, and there is no flowing, or faintness, it will be proper to remove the mother to that part of the bed which shall be deemed most comfortable for her; to take away all the wet clothes from under her, to adjust her linen, and to administer to her comfort in every possible manner.

The room should be darkened and perfect silence preserved so as to induce sleep.

The bed covering must be light, and not much in quantity; much heat will be likely to induce a febrile state.

If she is in a profuse perspiration it will be necessary to delay removing the mother until it has subsided; should she be faint it will be proper to administer some warm drink to recover her. Spirituous liquors are to be banished from the lying-in room,

never to be given except by the direction of the physician.

After sleep, and upon awaking, the patient will require some refreshment. This should consist of a cup of tea with a cracker, or a bowl of gruel made either of indian or oat meal.

The oat meal is preferable unless the indian is thoroughly cooked, to do which requires two hours boiling.

A glass of punch, or ardent spirits of any kind, or a full meal of meat, might prove fatal. The feebleness of the mother should be kept in mind, and she must be treated accordingly.

CHAPTER VI.

Treatment of the Child immediately after its Birth.

As soon as the nurse has received the child, it should be given to some assistant, that she may be at liberty to attend to the immediate wants of the mother.

'The child should be placed in a fine warm blanket, and taken to some part of the room, where there is no draft of air, and where the light shall not shine in its face. I have known an attack of sore eyes produced by sitting with the child near a fire place to wash it, where there was no fire.

If the physician neglects to wipe the child's eyes, the nurse should not fail to do it immediately after she receives it; for this purpose a soft linen rag or sponge should be dipped in warm water, and the region about the eyes thoroughly cleansed; this a precaution which I consider of great importance in as much as it often prevents an attack of inflamed eyes.

The child should not be allowed to remain long without being washed, because the substance adhering to the skin may become dry, and when it does, it is difficult to remove it.

CHAPTER VII.

Washing the Child.

As has been just stated, the child is often covered with a fatty substance which is not readily removed.

When this is the case, a small quantity of lard or sweet oil rubbed gently over the skin, and then washed with warm soap suds, will greatly facilitate its removal.

This substance ought to be removed at the first washing ; especially from the head, armpits, groins, &c.

The child should be washed as expeditiously as is consistent with entire neatness ; all unnecessary exposure should be sedulously avoided, and great care be taken not to fatigue it.

In the choice of soap, care should be taken to select old castile, or mild white soap. The skin of the child is easily irritated, therefore a rubbing motion when washing should be avoided ; and after washing, the skin should be thoroughly dried ; and in places exposed to chafe it should be powdered with pulverized arrow root.

The question is often asked, shall warm or cold water be used ? Doubtless it should be warm, because the child must sustain a great deal of suffering from the use of cold water. When we consider that it has just left a temperature equal to blood heat, we must become convinced that the feeble creature will suffer from cold applications. Professor Dewees states that he has known death to be caused by washing the child in cold water.

All who have seen these delicate little creatures exposed to the effects of cold, even for a short time, will not be surprised at this.

The child has but little power to generate heat, and unless this small quantity be carefully preserved, it certainly must suffer, either from contracting a cold, or from immediate death.

I am aware it is often said, that the savages in all cases immerse their children in cold water, immediately after birth ; and that the mother generally does it. Perhaps we may find an apology for this act in the *ignorance* of a savage. Why should we be bound to receive *domestic* instruction from them, rather than instruction in the arts and sciences ; for the cases are parallel.

Should adults be willing to sleep on the ground in the open air, because savages do so, and acquire a great degree of health and vigor ? If men and women recoil from this process of hardening, why should a similar one be imposed upon the tender infant.

Pure warm water and soap are the best materials to use in cleansing a child ; rum or brandy are not only unnecessary but absolutely hurtful ; they irritate its tender skin and produce a rapid evaporation, which exposes it to take cold.

After the infant is thoroughly washed and dried,

it should be allowed to rest about five minutes, and then the navel must be attended to.

CHAPTER VIII.

Dressing the Navel.

All that is necessary to be done is :—

I. To prevent the navel from coming in contact with the skin. This is accomplished by cutting a hole through a piece of soft linen of several thicknesses two inches square, and placing this linen on the belly, allowing the navel to pass through the hole, which should be just large enough to admit it easily.

II. To cover the navel with the same material greased with a small quantity of pomatum, to prevent irritation.

The navel should be watched carefully, and the dressings changed as often as they become foul. It will separate about the eighth day.

If it should not heal healthfully, or if it remains raw, a *very weak* solution of lead water may be

applied by dipping a rag in it and washing the parts. This wash may consist of

Sugar of lead 5 grains,

Rose water 1 ounce,

Mix well.

If there is any unusual disease about the navel, the physician should be immediately consulted.

CHAPTER IX.

Of the Belly Band.

The comfort of the child greatly depends upon the proper proportions and adjustment of the band.

It should be made of flannel of that description which shrinks the least,—cut bias,—five inches in width and five-eighths of a yard long ; at each end it must be faced with linen, about two inches broad ; the sides should be turned down and secured by cross stitching. The advantage to be derived from the facing, is that it affords a secure spot for pinning.

The pins used in the band, as also in the general dress of the child, should be of a superior quality ;

those about three quarters of an inch long, with flat heads, are preferable on every account.

Pins are allowable in a child's dress only when no better substitute can be found ; great care should be taken to confine the points in such a way as not to wound the child ; for this purpose they must take up a small portion of the cloth at once, until the whole of the pin has entered ; the point must turn out, rather than in.

The use of the belly band is to support the bowels, but more especially the navel, so as to prevent a pouting out of it, technically call *Hernia* ; this seldom occurs ; and then only in weakly children who cry violently from neglect. The flannel being next to the skin, no doubt acts in a beneficial manner by keeping the child warm, and promoting gentle perspiration.

From what is stated above, it will readily be perceived that the belly band is *not* intended to be pinned *tight* around the child, but loosely.

Having dressed the navel as directed, the belly band is to be placed under the child, so as to be exactly as much above the navel, as below it : it should be laid smoothly over the bowels and secured with pins in sufficient number to prevent it from wrinkling. Let the following be impressed on the nurse's mind : *when the child is lying on its back, the*

body is much smaller in circumference than when it assumes its natural position ; consequently if the band be put on even moderately tight in this position, it becomes uncomfortably and sometimes dangerously tight, when the child is placed in any other position. Instead therefore of pinning the band close to the child, insert the *whole hand* between it and the bowels, and still pin it loosely ; if upon raising the child the band retains its place, it is sufficiently tight.

I have been thus explicit on this subject because I have seen much suffering occasioned by neglecting to attend to the proper adjustment of the band. I have seen children instantaneously relieved from apparent acute suffering, by loosing the band ; even in the hands of experienced nurses this article has sometimes become an instrument of torture instead of comfort.

Mothers should look to this, whenever they have an opportunity, and frequently remind the Nurse of the band when the child is uneasy.

The same thing may here with propriety be stated with regard to the *diapers*, or as they are sometimes called squares ; care must be taken not to pin these too tight ; the hips may become contracted, and the legs crooked and weak, by being tightly confined in these articles of dress.

CHAPTER X.

Dressing the Child.

After the belly band has been properly adjusted, the nurse should proceed to dress the child. In doing this it must be recollected that warmth is essential to the preservation of the life of the newborn babe. I do not mean by this that the child is to be loaded with clothes, but that a moderate quantity of *warm* clothing should be allowed it.

A fine linen or cotton shirt over the band ; a long flannel petticoat with a broad waist, at least four inches wide, pinned on, as the belly band, and over this a loose cambric slip of an equal length with the petticoat, is sufficient in summer ; in winter an additional petticoat, and a fine flannel blanket may be added.

On the subject of caps I am persuaded that they are useless, if not injurious, except when the child is carried from one part of the house to another ; and then a handkerchief thrown over its head affords as good a protection.

The head of a child is always inclined to be hot ; a cap only tends to increase this heat. If it be worn during the day, it becomes necessary to wear

one at night ; this will be very injurious, because it produces perspiration, which keeps the poor infant constantly suffering with what is familiarly termed the *snuffles* ; and exposes it to take cold, terminating sometimes in croup, and other inflammatory diseases.

So far as my experience goes, and it is confirmed by writers on the subject, those children who wear caps are by far the most affected with diseases resulting from cold ; such as croup, sore eyes, ear ache, &c. In addition to this they are expensive, not only in the first cost, but in the subsequent care necessary to keep them in order.

The hair does not seem to grow as well by being kept from the action of the air ; and when the first crop falls, the second does not start so soon, or as thick, nor remain of so good a color.

CHAPTER XI.

Feeding the Child.

From the frequent cries and restlessness of the child, it is often supposed to be hungry. This

perhaps is true ; and the question arises, should any other than its natural food be given ? I am in the habit of giving a tea-spoonful of moderately cold water, and am not aware that it does any harm. If any thing is harmless, surely it must be pure water. It serves to rinse the mouth, and gives some little vigor to the stomach ; but more than this I never administer until the child has been put to the mother's breast. If no milk has been formed, it may be fed with *fresh cow's* milk prepared in the following manner : Take *two table-spoons* full of fresh milk, put it in a tea cup ; add *one* table-spoon full of hot water, and a small piece of loaf-sugar. This may be given the child with a tea-spoon ; allow it to suck the contents of the spoon rather than pour the milk into its mouth, for there is danger of strangling it.

The advantages, to be derived from preparing the milk as directed above, are:—

I. That only enough for the present supply is furnished, and the nurse is not *tempted* to give the delicate little being sour food ; as milk warmed and sweetened, soon sours on being exposed to the air. If a large quantity is prepared at one time, it becomes sour ; and on being given to the infant, it is apt to produce disordered stomach, colic, and wind ; this the child manifests by constant uneasiness and cry-

ing. Its restlessness is often taken for the effects of hunger, and now more of the sour milk and water is forced upon it, or something worse, in the shape of pap, or gruel. Thus one error leads to another, and the child is sometimes sacrificed, either through laziness or ignorance.

II. The temperature is better regulated ; it is not over heated, and then cooled in the mouth of the Nurse. Here I cannot avoid quoting the following from Dr. Dewees' System of Midwifery. "Many of the preparations in use are as nourishment for young children, cannot be too strongly condemned ; such as crackers and water boiled together, and sweetened ; or bread, water, and sugar ; than which nothing can be more uncongenial to the infant stomach—for they are masses which begin to ferment the instant they are received into the stomach, and quickly declare how ill suited they are to it—green and watery stools, amounting in fact to diarrhœa, colic, sour eructations, or throwing up their milk strongly curdled, are almost the constant result of their employment. Besides, we must object upon general principles, to the use of any substance which needs to be made so warm as to require tempering for the child's mouth, by first entering that of the Nurse. This is a horrible practice, and cannot be too severely reprobated. The child is thus obliged to take into

its ill confirmed stomach, food, not only improper in itself, but which has the addition of a rank saliva from a mouth, studded perhaps with a score of carious teeth."

I entirely coincide with the above extract it certainly is a nasty practice to force upon the child that which in its riper years it would turn from in disgust. The foul practice of "mouthing" the child's food should be abandoned from principle, because it is easily avoided by properly warming the food.

CHAPTER XII.

Putting the Child to the Mother's Breast, and Purging off the Meconium.

As soon as the child is dressed, and the mother put to bed, the child must be taught to draw its food from the legitimate source—its mother's breast.

If there is no milk formed, then proceed according to the advice given in the last chapter; but if there is milk, nothing is necessary to be done to the child except applying it to the breast once in two hours.

Should there be no milk for six hours, a tea-spoon full or two of molasses and water may be given occasionally, until a passage from the bowels is obtained ; when the milk is formed there is no necessity for this, because the first milk secreted contains the property of purging off the contents of the bowels. These first contents are technically called "Meconium." There is often a great error committed in supposing that violent measures are necessary to purge a new-born infant. Nature does wonders in her operations, and adapts her means to the end to be obtained ; in purging the child she presents a mild, bland fluid, differing very little from the common food of the child, only slightly more stimulating ; this effects its object in the best possible manner. If we would be successful physicians or nurses, we must study nature, and imitate her mild laws. If the milk is not secreted, and the molasses and water does not produce an evacuation in the course of twelve hours, a tea-spoon full of warm castor oil may be given, and even repeated, if in the course of three or four hours more the evacuations are not free. It is generally acknowledged that it is far better for the child to be rid of the first contents of the bowels, especially in hot weather, and warm climates ; but the means employed should not be

more dangerous than the presence of it if suffered to remain. The molasses and water generally answers. If convenient, consult the attending Physician, before proceeding farther. Recollect he is, or ought to be, the best judge ; besides, you lessen your responsibility.

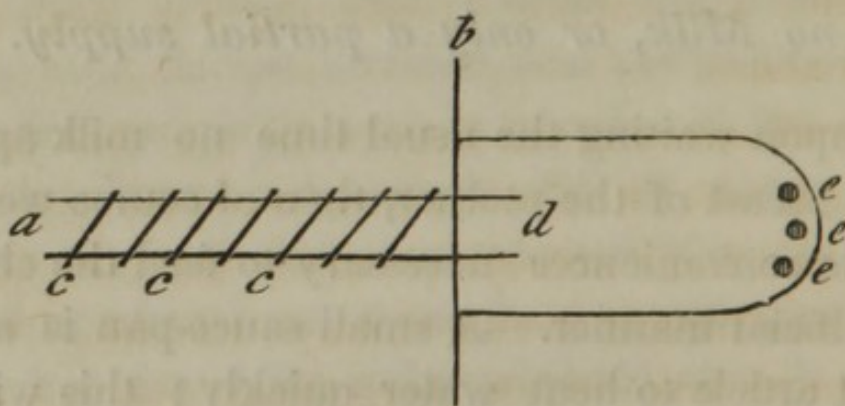
CHAPTER XIII.

Feeding the Child when the Mother furnishes no Milk, or only a partial supply.

If upon waiting the usual time no milk appears in the breast of the mother, then of course we must provide conveniences necessary to feed the child in an artificial manner. A small sauce-pan is an excellent article to heat water quickly ; this will answer the purpose during the day ; at night, a night lamp will become necessary, both on account of the light, and the convenience of a constant supply of hot water.

The milk must be prepared in such proportion as heretofore pointed out, viz. one third hot water, two-thirds fresh milk, and a moderate quantity of loaf sugar.

The most convenient method which I have found to feed children, deprived of their mother's milk, is from the German Cologne bottles; they are of an equal thickness, thin, and consequently not so liable to break in cold weather, as those bottles prepared for the purpose: besides, the expense will be found to be much less. The shape of the latter is most convenient; they may be purchased for fifty cents a dozen. A silver tube fastened in a cork is the best adapted for suction. A simple tube of the following shape will greatly be preferred upon trial.



a The tube to pass through the cork; not reaching far beyond *b* the shield. *d*, The tube to put in the child's mouth; this simple shape is better adapt-

ed to the mouth than those tubes which are somewhat concave on their outside. *c*, A spiral wire passing around the tube *a*, and fastened to it to act as a screw to secure it in the cork. *e e e*, Three holes to allow the milk to pass into the child's mouth. If the tube *a* be made to pass up to the end *e*, the milk has but one outlet, which is not so pleasant to the child; moreover the space in the tube *d* allows some circulation of air which prevents the milk from passing so rapidly into the child's mouth, and from so frequently strangling it.

All the new inventions of tubes for this purpose seem to be made on the principle of allowing the air to pass into the bottle freely; this ought rather to be avoided than encouraged; because a free passage of air into the bottle allows the milk to pass out too rapidly, producing the bad effects stated above.

A sufficiency of air may be let into the bottle by cutting a slit into the cork on the side next to the bottle, just large enough to allow the air to pass as fast as the milk is drawn through the tube.

Sponges have of late been substituted for tubes. They are sometimes more congenial to the child than the tube; but *more than ordinary nicety* is required to keep them clean. If preferred, they must be scalded every time before using, and rinsed

thoroughly. The milk absorbed by them is so much exposed to the air, as very soon to become acid and offensive to the child.

In all the articles used to feed the young child, the most scrupulous care is necessary to keep them sweet. For this purpose the milk should be kept in glass vessels which are not only most easily washed, but exert no chemical action on the milk, and this must be kept in a cool place.

The bottle, tube or sponge, pitcher and spoon, are all to be rinsed in hot water each time before they are used.

When the food for the child is wanted, have a small milk-pitcher at hand, with a narrow nose ; into which put your two, four, or six table-spoons full of milk, and half as much hot water. Then sweeten with loaf sugar rolled fine, which will facilitate its solution. After stirring it a sufficient time to take up all the sugar, pour it into the bottle, and by the hand it will readily be discovered if the milk is of the right temperature. If it should be too cold, put the end of the bottle in the hot water for a moment ; recollect if the weather be cold you must warm the bottle by holding it to the fire before you put the warm fluid in it, otherwise you may crack it.

At night this method will be found an easy one ;

as the nurse, mother, or whoever feeds the child, will lay outside, next to the stand containing the night lamp, glass of milk, tea-cup of sugar, and a spoon, bottle and small pitcher. The milk, with these conveniences, is easily prepared at any time during the night without arising.

During the first month, the child will require to be fed once in two or three hours; but at night it should never be awakened for the purpose of feeding it.

Never force much in quantity on the stomach of the infant; it will cease sucking when it has a sufficiency; frequent and small feeding is the proper method for young children.

If the child vomits frequently, and the milk is hard curdled, and if it is sour and smells offensively, it may be corrected by adding to the milk as much sub-carbonate of soda, as you can, without imparting a disagreeable taste to it. This or a minute quantity of calcined magnesia, should be given once or twice a day as long as the stomach is acid; preferring the magnesia if the bowels are costive, and the soda if they are loose.

CHAPTER XIV.

*Management of the Nipple before and after
the Birth of the Child.*

If the nipple were in its natural state, it would be unnecessary to pursue any treatment before applying the child to it. Unfortunately for females, fashion has led them to consider *corsets* as an indispensable part of their dress. One out of the many bad effects arising from their use, is the compression of the breast and nipple, causing sometimes an almost total disappearance of the latter, and retarding the full developement of the former.

In vain we may urge the propriety of allowing the breasts to take the place which nature has assigned to them; we are not heeded when we say that pressure causes the breasts to be absorbed. We are answered that the pressure is very light; grant it, (which is not true,) but the fact is, a very slight pressure if continued from year to year will produce, and has produced, more diseases of the nipple than all other causes combined.

How seldom does a female with her first child escape sore nipples? Very many women suffer more from this cause than in giving birth to chil-

dren ; and in a great many cases it occasions broken breasts.

The constant pressure on these delicate organs prevents them from becoming fully developed ; consequently when they are called upon to perform the office of mature parts, they are found wanting. The milk-tubes in some breasts are entirely destroyed, in others, the external communications to the nipples are closed.

When the nipples are small, the child is almost insensible of the presence of them when in its mouth.

A healthy, well formed nipple, on being handled, will enlarge its size very considerably. This is caused by the blood flowing into it. The benefit of this is, that the child may have something large enough to draw upon strongly ; sucking a large nipple is far less tiresome than drawing upon a small one.

One, two, or three weeks, before confinement, the nipple should be washed two or three times a day with cold water, and thoroughly handled in imitation of the motion of the child when nursing ; the object is to accustom the parts gradually to the irritation. A weak solution of *borax* in water is an excellent article for washing them ; and rum, or brandy, is good for this purpose. But a better

mode than this, is to allow some individual to draw with the mouth in imitation of the child ; then to wash with cold water, and thoroughly dry the parts. This plan pursued for three or four weeks before confinement will be found eminently beneficial.

All pressure should be absolutely withdrawn from the breasts and nipples during gestation ; this will materially help to restore the parts to a healthy condition.

When the child is first applied to the nipple, it should not be allowed to remain long if there is no milk. Frequent application of fifteen or twenty minutes duration, is better for stimulating the breasts to perform their part in supplying milk, than when irritated by undue exertion.

Each time the child is applied, the nipples should be washed with a bit of sponge dipped in water, or if it does not irritate, rum and water may be used ; they should then be carefully dried with a clean soft cloth. This tends to keep off inflammation, and prevents them from cracking.

Sore nipples are a great calamity to the female ; and difficult to cure, not on account of any peculiarity of the sore, but because of the constant irritation caused by the child's sucking.

The only thing to be kept in view in curing them, is to keep them covered from the air. I

have never found but one application effectual, and this properly belongs to the physician. If he is present he should be called upon to apply it. This application is lunar-caustic or nitrate of silver. If the cracks in the nipple are large and open, I generally apply a piece of the stick itself. If they are small, take a camels hair pencil, dip the end in soft water and rub it on the caustic until it has dissolved and taken up a sufficient quantity, then gently open the fissures and apply it to them. At first you must use great caution in applying it, as it often produces intense pain ; when this is the case, only a small spot must be touched at once.

The peculiarity of this application consists in the fact, that the substance of the caustic unites with the flesh and produces an artificial skin which protects the sore from the air. If after it is applied the parts be gently washed, there is no danger to be apprehended in applying the child, as the caustic unites entirely with the flesh.

If this should meet the eye of a physician, I feel myself bound to offer an apology for thus giving advice to nurses. It is no doubt a powerful remedy, but the disease and misery to be overcome are great ; besides, I advise to this course (which I think from experience a very safe one,) only when the physi-

cian is not to be had ; and if he is present, the nurse may communicate it to him.

Frequently washing and cleansing the nipples, and carefully drying, is one of the most efficacious means to be used, both before and after child-birth.

When the nipples are well formed, and become only tender, bathing them with a weak solution of borax, or anointing them with pomatum or tallow, will generally effect a cure.

CHAPTER XV.

Food of the Mother.

We have now come to a most important part of our subject. An error committed in diet during the eight or ten days immediately after delivery, is often followed by much suffering, and sometimes by death. The food of the mother for the first ten days after delivery must consist entirely of vegetable substances, such as gruel made from corn-meal, oat-meal, or prepared barley groats.

When indian meal is used, I here repeat that it ought to be boiled at least two hours, or you must expect the patient to be troubled with sour stomach, accompanied with sour windy eructations, colic pains, and flatulence.

These gruels are to be made simple, without spice, or butter, for the first week ; after which you may gradually add these articles, as taste may indicate.

After the time specified, if the mother is free from fever, and other diseases, you may begin to give weak cocoa, and chocolate, or tea and coffee; then, veal or chicken tea and broth. To make broths and soups well, you must proceed in the following manner.—

Put your meat in a vessel scrupulously clean. All fat must be entirely removed from the meat. Pour on cold water, and set it where the water may become hot, but not boil, for at least two hours. The longer the meat is in hot water without boiling, the better the broth will be. The reason of this is, that boiling the meat as soon as it is put on, causes the tendons and fleshy and bony parts to become hard, so that it will not dissolve in the water. Just before you use it, and indeed during the whole time of preparing, keep all the scum well skimmed off, so that it may not be left to darken the broth.

When wanted for use, take up as much as you wish. Let it cool ; skim off the fat ; then heat it, and add a little salt and toasted bread.

A tea-cup full of broth, well prepared, is as much as should be given to the mother at one time. If this should produce a flushed cheek, head-ache and feverish symptoms, diminish the quantity, or cease giving it entirely. All animal food should be given in the forenoon ; never just before sleep, but always on awaking. If food be wanted when retiring for the night, a bowl of gruel or plain panada must be given.

If the mother furnishes the child with milk, she generally will require some light nourishment during the night ; this may consist of toast water, gum water or panada. To make toast water in the most nourishing manner, you must toast a slice of bread slowly, and for a long time ; then pour on it a quart of boiling water ; this when cool, may be sweetened to taste ; it forms a nutritious beverage.

The gum water is made by adding a tea-spoon full of pulverized gum-arabic, to half a pint of hot water ; sweeten it, if liked, when cool.

Balm tea, is a pleasant drink during the night. It is sometimes customary to give the mother ginger tea, to force the milk to flow ; this I consider a hazardous practice ; the ginger is too stimulating

to be taken within the mouth. I have known a broken breast to follow its use, and frequently feverish symptoms.

This tea, when carefully prepared, is a delightful beverage for the mother at ordinary times. To make it, boil some good ginger in water, say two teaspoons full to a pint. When the strength of the ginger is given out, which it will impart to the water in about twenty minutes, strain it and add a pint of new milk, and sweeten it with loaf sugar. It may be drank either warm or cold.

The use of fruits generally are injurious during the first month. A roasted apple is the most harmless; this may either be eaten, or a pint of hot water may be poured on it, and drank; it will act as a gentle cathartic in some cases.

A very fine ripe peach, or a few sweet water grapes, rejecting the skin and seeds, may occasionally be indulged in, as also red and Antwerp raspberries; strawberries are in general too acid; these may be used occasionally, but in very small quantities. It is better to avoid all dried fruits.

Shell fish are to be considered as animal food, and subject to the same directions.

CHAPTER XVI.

General Treatment of the Mother during the first Month.

During the four weeks following the birth of the child, the mother is to be considered an invalid, and treated as such.

Civilization seems to have affected the female constitution in such a manner as to produce great debility, when the functions of child-bearing are completed.

We have accounts of savage tribes, whose women are scarcely confined a day in giving birth to a child ; and rare instances occur in civilized life, when the mother makes her own bed, immediately after delivery.

Early and improper efforts after child-birth, in our own country, are so often followed by frightful disease and death, that persons of ordinary prudence are unwilling to expose their health and lives by premature or unnecessary effort.

It is a good and safe rule not to allow the mother to leave the recumbent posture for at least three days ; or to walk or stand for a week. Instances of falling down of the womb have become fre-

quent ; nine tenths of the cases of which are caused by too early assuming the erect posture, after giving birth to children.

It is difficult to form invariable rules ; but in this case the certainty of good, which will follow, and the great evils to be avoided, are reasons sufficient to induce their observance.

Many of the worst diseases following child-birth are produced by too early leaving the bed, and by errors in diet.

The recumbent posture may be made tolerable, by care and proper management. A change from one side to the other, raising the head and shoulders for a short time, and then lowering them ; frequently arranging the bed clothes ; and a due attention to the wet clothes, will contribute greatly to the promotion of this object.

A bed pan may be used for all necessary purposes ; this should be warmed when called for.

The comfort of the mother depends very much upon the regularity with which she and the child are treated by the nurse. In the lying-in room, regularity is often interrupted by the wants of the child and mother. A system however may be preserved, to the great advantage of both the nurse and her charge.

If the child should be easy, and awake early,

embrace that time for washing it ; or if the mother should be ready, attend to her. Never be idle a moment in the morning. Have the room cleaned early, and the mother's nourishment ready at a moment's warning. If she is obliged to wait long for it, it is apt to produce faintness and irritability. An excellent plan I have seen followed, and one which appeared to lighten labor much, was this : Every time a dish was used, it was washed immediately ; the nurse appeared to have no work on hand, but herself in advance of her work. A small closet near by, should be devoted to the use of the nurse, that she may then have conveniences to wash her dishes, fill her lamps, &c.

If the mother continues well, and the weather is *fine*, she may ride out for a mile or two in an easy carriage, between the third and fourth week, taking care to guard herself well with clothes, and especially the feet. If the weather is not mild, and the mother is rather feeble, she had better delay this, or not go until all circumstances are propitious.

The clothes of the mother should be often changed, but previous to their being put on, great care must be taken in airing them. They should be allowed to hang in the vicinity of a fire two or three hours before using them ; and the parts around the shoulder must be held near the fire so as to dissi-

pate every particle of dampness. If these parts should be damp they may cause inflammation of the breasts, as they come in close contact with them.

The feet must be carefully guarded before rising from the bed; for this purpose the stockings and shoes should be warmed and put on before leaving it.

Flannel worn next to the skin in cold or damp weather tends to promote a free action of the skin, by inducing perspiration and preventing chills. If the flannel occasions too much irritation, substitute the cotton flannel.

The nurse must guard against going to the bedside of the mother with damp clothes on, and be equally careful about handling her with cold hands. The sheets, napkins, or any other article of clothing, to be used about the mother, must be carefully aired.

Currents of air blowing even for an instant on the mother, may prove fatal. Instances like the following are not rare. A lady within the first month went to the head of the stairs, to call for assistance. The wind blew cold upon her; in half an hour she felt a chill, "milk leg" was the consequence, which confined her in bed for six weeks, suffering the pain consequent on this tedious disease.

During the first week after the birth of the child, the mother should be kept secluded from society.

A few intimate friends may indeed have access to her for half an hour at a time, but further than this, is not safe. The excitement of seeing company is often injurious, besides conversation is apt to produce exhaustion in the mother, when in a feeble state.

If the child cries much, when convenient it should be taken to another room; especially if it produces much anxiety in the mother.

In very cold weather the bed may be slightly warmed before the mother goes into it.

Much heating, and burning sugar, is apt to produce febrile symptoms.

CHAPTER XVII.

Temperature of the Room and Ventilation.

The temperature of the lying-in room must of course vary with circumstances. These circumstances are the habits and constitution of the patient; the absence or presence of unusual symptoms; and lastly the season of the year.

If the confinement take place in summer, and the weather be pleasant, the temperature of the

room will in a great measure be regulated by the atmosphere entering it.

If the weather be uncomfortably warm, the blinds and shutters must be closed to prevent the light and rays of the sun from entering the windows. Light contains a great deal of heat ; therefore, it should be excluded. The windows and doors are to be thrown open, and the fire-board to be removed ; great care is to be taken to prevent any current of air, however trifling, from blowing on the mother or child.

If possible, a woman should not be confined in a room without a fire place, because the current of air, constantly passing up the chimney, causes a thorough change of it, which of itself is sufficient (in ordinary cases,) for ventilation.

If the weather be cold, of course a fire will be wanted, and for this purpose an open fire place is to be preferred ; not simply because it produces a more thorough ventilation. Heat from stoves, either from the use of wood or coal, often causes head-ache. The lehigh coal gives off a vapor very disagreeable to the invalid.

The cheerful appearance of a wood fire in an open fire place, is a substantial comfort. It prevents melancholly feelings from arising. It produces cheerfulness, and preserves a more even temperature.

If the room be a large one, which is very desirable, opening the windows and doors will not be necessary in order to ventilate it during the winter. But if it be small, the mother should (after ten days) go into the adjoining one, which should be of the same temperature as the one she leaves, and remain an hour or two, so that her ordinary room may be thrown open ; the bed shook and aired, and the room thoroughly swept and dusted.

Pure air is the very best restorative for the invalid, and it is of the greatest importance that she should have it.

About 55 degrees of Fahrenheit, is the right medium to be preserved ; a few degrees above or below it is not material. If the invalid be rheumatic, great care is to be taken not to allow the temperature to become low, as it will produce distressing pain.

The bed clothes ought to be in sufficient quantity to keep the mother warm, but not to induce perspiration. For in this state there is great danger that the least current of air will produce a cold, or some worse disease.

It is well to keep a thermometer in the sick room, by which the temperature can always easily be ascertained.

Sudden changes are to be avoided. I knew a

lady confined to her room the whole of a winter, by her physician throwing open the window to let in fresh air. He did not recollect that if he could bear the cold of winter, a weak rheumatic female could not.

Foul linen and clothes should not be allowed to remain in the room an instant longer than is necessary ; for they vitiate the air. Whenever the bed-pan is used, this of course must be instantly removed. Before using it, a tea-spoon full of the chloride of lime, dissolved in half a pint of water and put into the vessel, will destroy the disagreeable effluvia. If the physician should express a wish to examine the contents of the bed-pan, the lime must be omitted, because it will destroy the color and appearance of its contents.

Plants should not be allowed to remain in the sick room at night, as they absorb a portion of the vital principle of the air, and give off an injurious gas. It is well to have them in the room during the day, as the case is then reversed. They absorb the injurious gas, and give off oxygen, the vital principle of the air. For the same reason, if the house be situated near a forest, and the wind is blowing from it towards the house, the windows better be closed.

The same injurious gas is given off when char-

coal is burning ; for this reason it should always be ignited in the open air, or in the chimney corner. This gas is called carbonic acid gas ; it is highly injurious to human life. The method of restoration, if any one has been affected by it, is to throw several pails full of cold water over the person. This is the same gas which lies in the bottom of deep wells and cisterns.

CHAPTER XVIII.

Bed Curtains.

As soon as the female finds herself pregnant, she commences to labour for her expected offspring, and her thoughts naturally are directed to the adornment of the room in which she expects to be confined. Among other things of which she thinks, bed curtains form a part. Physicians, almost without exception, regard bed curtains, as they are sometimes used, as highly injurious,—and this they do with very good reasons.

Some persons are in the habit of drawing curtains close together, and shutting themselves snugly up in a nice little box, six feet square, there remain to pass the night. Perhaps there are two or three persons in this bed, to breathe for eight or ten hours, the pestiferous air, made so by being breathed over a hundred times. In the morning they arise feverish, languid, and without appetite; and if this be the effect on persons in health, evidently the invalid must be a greater sufferer.

They are an expensive and troublesome ornament. But if not closed about the bed, they will not cause a *great deal* of mischief. They always prevent in some measure, the free change of air, which would otherwise take place, from the bed, to other parts of the room. They confine the sleeper in *some* measure to the same polluted atmosphere which he or she has been breathing over and over again. But if not closely drawn around the bed, they will allow the occupant to breathe a *tolerably* pure atmosphere. Certainly a person sleeping without them will rise much more invigorated; and why then sacrifice some degree of health to fashion.

When they *are* used, they should be thrown open as far as possible, and frequently shaken. When this is done the mother may cover her head so as to protect it from the cold air.

The only possible good which they effect is by affording some protection from too free a circulation of air. But this is more easily and securely effected by having a moveable screen, and if a door opens so as to allow the air to pass directly on the bed, the screen should always be interposed.

When we consider the vital importance of pure air, we are led seriously to think of such measures as will always secure a plentiful supply, and to reject all obstacles which tend to prevent its enjoyment. The air after it has entered into our lungs is deprived of a portion of its life-giving principle, and becomes in a measure unfit to be breathed again. Many children are destroyed in a short space of time by being deprived of pure air. This destruction of life is effected by covering over their faces with the blanket in which they are wrapped. This is a most dangerous practice, and never to be allowed.

Bed curtains act much in the same way. They do not kill outright, but act as slow poison, by producing fever and languor. The air in the room not being agitated by the opening and shutting of doors at night, is not disseminated freely; the curtains preventing it from being drawn away by the draft of the chimney.

CHAPTER XIX.

Management of the Child at Night.

To the new-born infant, night and day are alike devoted to sleep. During the first few weeks of its existence, the child sleeps almost constantly, occasionally rousing itself to take nourishment. From this it will be seen that it requires much the same treatment during the night, as in the day.

If the mother nurses the child, and it is healthy, there will be little trouble in attending to its wants.

Care is to be taken to lay the child in such a position as to prevent its becoming too warm, and consequently bathed in perspiration. It is well to put a small blanket around it, which will prevent it from becoming exposed, should the bed-covering by accident be lifted from it.

If the nurse should sleep with the mother and child, the bed should be a large one, otherwise the child is liable to be hurt. Sleeping between two grown persons will generally produce too much heat for the child. If the mother is feeble, it is better to let the nurse sleep in a separate bed with the child, and take it to the mother when it requires nourishment.

The child should not be accustomed to lay on the mother's arm, for several reasons. It is fatiguing to the mother. It induces the child to nurse too frequently, and it eventually becomes restless when deprived of the breast. It prevents both mother and child from resting comfortably, because of the uneasy posture; and the child by this habit desires to nurse from its *favorite* breast, and is uneasy if removed to the opposite one.

The child should be laid some distance from the mother and left to itself; it will sleep better for it, and its naps will be longer. The mother, too, will be less disturbed. Every slight movement must not be taken as an expression of hunger. Perhaps it is only uneasy, and wishes to change its position; or its wet clothes need to be changed. Each time after nursing, the child should be laid on its opposite side. A child very soon, if indulged, acquires the habit of lying on one side. This is injurious, as it will cause it to grow one sided, and its head especially. The naps may often be prolonged by turning the child from one side to the other.

If the child is wet at night its clothes should be immediately changed; this promotes its comfort, and if the plan is pursued it will not produce much disturbance. It is obviously very uncomfortable to be forced to lie wet for a length of time. Besides, it

will be chafed—boys especially are apt to become sore if left unchanged during the night.

If the child is well, and should be restless and uneasy, it probably arises from some uncomfortable feeling, hunger or wakefulness. After examining it, and properly attending to its wants, if it still be restless, do not attempt to force it to nurse, or to sleep, for these must be spontaneous actions. If it is hungry it will eat, if it is sleepy it will go to sleep. Put it in some easy position, or take it into the arms. Allow it to amuse itself in any manner it chooses. When wearied it will soon fall sweetly to sleep.

Attempting to force a child to sleep produces unnatural rest. It serves to make it nervous and cross, and is often the surest means of defeating your object.

It is a very bad practice to rise at night with the child, for the habit once formed is not easily broken. Occasionally a child will be seized with a fit of wakefulness, which may, and ought to be gotten over with, by any proper indulgence ; such as walking with it, amusing it, or talking to it.

Walking with the child in the arms is generally condemned as a bad practice. Perhaps it is considered to be so because it is troublesome ; but according to my experience it is less so than vainly attempting to make it sleep by rocking and singing. It

may be practised occasionally, but not habitually ; being a soothing exercise.

CHAPTER XX.

Wants of the Child.

Faint as are the indications of intellect in a new-born child, still it has its desires, and its preferences. Minute and close attention are necessary in the mother and nurse to discern its wants. The only and unfailing methods it has of expressing its necessities are, uneasiness, and crying.

Nature has so formed all animals that in the youthful part of their lives they require the care of the mother to preserve their existence. The new-born babe, above all other animals, is the least capable of providing for itself ; and calls most loudly for maternal aid. Pure air is as necessary to its existence and growth as to the adult. Its food must be regularly and sufficiently supplied ; and its clothing properly adjusted, and kept scrupulously clean.

Among the wants of the child, is changing its wet clothes. It is often indeed asserted by mothers and nurses that the child is injured by the frequent application of *clean* linen ; and that it is better to use diapers which have been saturated with urine, and then dried, in preference to clean linen.

I presume it is unnecessary to argue this question with intelligent mothers and nurses.

What is it that can render clean linen injurious, and foul linen beneficial ? Is there any thing detrimental in clean linen, which is remedied by urine ? The trouble attending the labour in keeping the diapers clean, is what renders clean linen unhealthy, foul and dirty linen healthful.

There is a medium to be observed in this, as in every thing else. The same diaper may be applied two or three times without injury. But it is to be recollected, that the salts which the urine leaves on the diaper, must render it very uncomfortable to the skin of the child. Besides, the evaporated urine fills the nursery with any thing but a pleasant odor. A short time since I happened in at the house of a poor man whose wife had twins ; along the walls on a line hung the wet linen, yellow as saffron, and yielding the most unpleasant savour. This was the extreme of this dirty practice, and it served as a decided argument in my mind against it.

The diapers if used more than once, ought not to be dried in the nursery. The evaporation renders the air impure and unfit for the delicate lungs of the child ;—the open air is the proper place to dry them.

To all who would promote the real comfort of their children, I would recommend to use clean linen, every time that it is necessary to change it.

The *diapers* should be hung about the fire, or in the open air through the day, before using them. Let a sufficient number be taken from the drawer in the morning to last during the day and night, and disposed of as directed.

The child *wants* its position changed frequently ; for it becomes tired by laying on one side long. The parts of the body form very rapidly in infancy, and the blood circulates with great rapidity to all the extremities, so that a bad position persevered in, even for a short time, is injurious.

The child *wants* to lie comfortably in bed. The pillow must be so placed that it will not bury its head in feathers, and for this purpose, turn both ends of the pillow under. This will leave a firm surface to lie on. At the same time, be careful that the neck and shoulders are supported, for if they are not, the poor child may have an attack of stiff neck, and recollect it has no way of telling its pains but by crying, which is often a dead language to parents.

The child *wants* gratifications. These may be given it in various ways; by tossing it gently; by talking to it; by allowing it to remain undressed a short time evening and morning, that it may have a free use of its limbs and body; and lastly, the child may be gratified by gently rubbing it, especially its little back, and limbs. This is not indulgence alone, but it contributes to health, and it acts as exercise does on the adult.

CHAPTER XXI.

Crying.

As soon as the child enters upon its new existence, if healthy, it cries. This is probably owing to the somewhat painful effect of the air upon its skin and lungs. It has just emerged from a temperature of blood heat to one somewhat below it; this to the tender infant is a new and painful feeling, and consequently produces *crying*, or an expression of pain. The entrance of the air into the lungs, for the first

time, is effected with some violence, and this no doubt has a share in producing pain.

Crying is the provision which nature has adopted to expand the lungs, so as more readily to admit the air to penetrate the minute air cells. Crying is also the only means given the young child to express its wants.

The mother, therefore, need not be alarmed if her offspring should cry violently, when very young. After all its wants are attended to, still it *may* continue to cry through the want of power to cease immediately. The nurse will generally be enabled by a practised ear, and a strict attention to the motions and appearance of young children, to decide if they are suffering pain.

There is a thin mucus secreted by the inner lining of the lungs, which requires some effort to expel it; this the child is only enabled to do by crying. The adult effects its expulsion by the free exercise of his body, by talking, laughing, singing, &c.

If crying be continued for a great length of time, the child probably wants its position changed, or its appetite satisfied, or it is suffering pain either by the pricking of a pin, tight bandaging, or from sickness. These difficulties of course must be reme-

died ; and the child soothed by nursing and caressing.

According to my experience the most healthy children cry the least. Neglect is often the cause of crying. A child who has the undivided care of its mother or nurse, unless sick, will seldom cry. A child seriously ill seldom or never cries loud—they *moan*.

As children become older, they frequently obtain the gratification of all their wishes, however improper, by loud cries ; this is a bad habit and the mother must sedulously guard against it.

There is an excitement, in conjunction with crying, in children beyond the age of six months, which is injurious. The redness of the face, the nearly bursting veins, and the hot head, will scarcely have escaped the notice of the most careless observer. These, the effect of impeded circulation, produce an extra flow of blood to the brain, which if often repeated cannot but prove injurious to the child's health. The disposition is thus rendered morose, and the temperament irritable.

When the child is feeble, in connexion with a disposition to much crying, during the first few months of its existence, great care must be taken to prevent "hernia" or rupture, both at the navel and private parts. For this purpose, when the child cries, it

should be placed in a *flexed position*, that is, it should be so held that its little body is bent with its head towards its knees, the knees drawn up, and the navel supported with your hand. This is easily effected by placing one hand under its bowels, and allowing the other one to support its seat. It is an *easy* as well as *safe* position.

The child frequently cries from pain in the bowels. This is generally expressed by drawing up the legs. The pain occasionally remits, and then the child stops crying, and is inclined to sleep from the exhaustion consequent upon the pain.

When belly-ache is suspected, see that the feet are made warm, and the bowels covered with a warm linen cloth. This will generally ease it ; for further particulars on pain in the bowels, see Chapter XIII., Part II.

CHAPTER XXII.

General Treatment of the Child during the first Month.

The general treatment of the child during the month devolves principally upon the nurse ; and

she is to treat it as if it were a healthy child, unless it be actually diseased.

Nurses are too apt to treat infants as if diseased rather than as healthful babes. For every sneeze, they prepare a *tea* ; for every cough, a *syrup*, and for every turn of crying or restlessness, an *anodyne*.

This system is a most injurious one. The remedies given, more frequently do injury than benefit. I would protest against the use of stimulating teas, and the administration of "Paregoric." The first are generally composed of a decoction of catnip, coriander or annisseed, which are given at every imaginary turn of "wind," or of belly-ache. They are good medicines in themselves, and in proper quantities, and when combined with other remedies ; but used as they are in large quantities, they actually create a kind of intoxication ; which when it has subsided, leaves the tender infant in a listless state, caused by a want of action which invariably follows an excited state.

Pain in the bowels, for which these teas are given, is produced either by an acid state of the stomach, or a costive habit, for which there are better remedies, and far less injurious to the child than stimulating teas. See Chap. XIII. Part II.

Paregoric, sometimes called elixir asthmatic,—

opium and laudanum, should be labelled "touch not, taste not, handle not."

Parents are not aware of the immense injury an habitual use of opium in any form produces. An adult seldom survives two years under an habitual and free use of it; and if taken habitually but not freely, it produces wasting, insanity and death, in a very short period of time.

The *brain* and *liver* are permanently affected in children, by an habitual use of opium, in any form, be it called "Godfrey's cordial," "Bateman's drops," elixir asthmatic, or laudanum.

The child will soon bear, and require increased doses of this drug to produce sleep. The following instance came under my notice :

An abandoned female was in the habit of giving her little boy paregoric to make it sleep, in order that she might neglect it, to pursue her own pleasure. From paregoric she went to laudanum; from this to opium, it being less expensive; and when I saw the child at the age of two years, she was in the habit of giving three or four grains of opium two or three times a day. When under the effect of this drug it lay asleep; but when its subduing power passed off, the child appeared perfectly miserable, and in order to appease it, more opium was given. The effect of this drug upon the child was

truly deplorable. At the age of two years it was unable to walk or sit ; its teeth had not appeared ; the complexion was yellow ; as for flesh it may be said truly, there was none, or scarcely none. It was mere skin and bones, and its evacuations passed involuntarily ; these were of a green color and of the most offensive odour imaginable. Its urine passed seldom, but when it did it caused extreme agony.

By dint of a promised reward, I persuaded the mother of this little sufferer to abandon the use of the opium, which I informed her was the cause of her child's illness, and would most certainly soon terminate its life if she persevered in the use of it. The opium was withdrawn gradually, and in the space of a fortnight entirely abandoned. In the mean while, a few gentle purgatives were administered, and generous food allowed it. The child now was good natured, slept well during the night, and began to improve in health. This occurred three years ago. I occasionally see the little fellow, who is in sound health, though small in stature. His mind I fear is permanently affected. He is dull of apprehension, and wanting in youthful hilarity.

The tender stomach of the infant requires no other nourishment during the first month than its mother's milk ; or if this be wanting, the preparation already spoken of. No substance whatever, of

a *solid* nature, should be given the child during the first month, as it will surely produce distress, and may prove fatal.

The child must be washed daily in tepid water. This conduces to health ; and the whole of the body is included in this direction. Care must be taken to dry it thoroughly each time after washing, and to dust pulverized arrow root in all places exposed to chafing.

Two or three times a day the infant may be taken from its bed and *exercised*, by walking with it, trotting on the knee, or gently tossing it.

Only a moderate degree of silence is necessary to be observed while the child is sleeping. It will rest as easy and as profoundly where conversation is carried on, as when the utmost silence is preserved. It will not wake as often. An unusual noise will not be so likely to disturb it, in addition to which it occasions vastly less trouble to the nurse, who is not obliged to go on tiptoe for fear of waking the baby.

The use of a cradle may be carried to an excess, in which case it becomes injurious to the health and disposition of the child. If a cradle is used as a forcing machine to put the child to sleep, it becomes a complete inquisitorial apparatus for tormenting it. Sleep, as I have said before, should be spontaneous ; and if so, a cradle is as good a bedstead as any

other I know of, for the purposes of repose. It possesses the advantage of being easily moved from place to place, and affords an easy and harmless method of soothing the child should it be awaked by any accident. The child should never be put into one when *indisposed* to sleep, and rocked for a great length of time ; thus stupifying it to sleep. If the child is sleepy, a moment's rocking will soothe it.

After the infant has slept a proper time, it should be allowed to rouse itself and enjoy existence in a waking mood, and not be doomed to unnatural repose.

If it become necessary to remove the child from one room to another, it should invariably be covered with an extra blanket ; but it should on no account be moved to a room of a lower temperature.

CHAPTER XXIII.

On the Mother assuming the care of the Child.

As the time approaches for the nurse's departure, the mother should minutely watch the process of

washing and dressing her infant, and if able, perform it several times herself.

The mother will experience a rush of joys and fears, when she really assumes the whole management of her infant; but she must undertake the task with resolution. The process of washing and dressing her babe will be highly prized by the affectionate mother. In order to its pleasant performance it will be found necessary to observe the following directions :

Besides a change of soft and thick napkins, which will quickly absorb the water; a soft sponge, a cake of mild soap, a piece of oil-cloth one yard square, for the purpose of spreading over the lap to protect the clothes from water, while over the oil-cloth may be spread a fine flannel or cotton blanket. In addition to this, a hair brush will be wanted. A child's hair should never be combed; it will not be needed, if the brush be freely used. The comb, I have found, creates dandruff, which the brush does not.

A mother's care is necessary to the comfort of her child; for no matter how capable the nurse may be, or how kind her disposition, she will not enter upon the care of a child with as much disinterestedness as the mother. There are a thousand small and nameless attentions which none but a mother will

be willing at all times to perform. On no account, except the debility of the mother, should the washing and dressing of an infant be delegated to another person.

It is well to *commence* washing the hands of the child. This it is more accustomed to; consequently it will not be frightened, as it would if you were to begin on some more unaccustomed part.

Children generally enjoy their daily ablutions highly. Plenty of water should be used, so as thoroughly to wet the skin, and remove every particle of soap.

CHAPTER XXIV.

Subsequent Management of the Child.

In order to illustrate the subject of this chapter, it becomes necessary to consider it under the following heads :—

- 1st. Of the child's food.
- 2d. Of the child's dress.
- 3d. Of the exercise proper for the child.

4th. Effects of mental cultivation upon the child's health.

I. *Of the child's food.* I have already stated that the mother's milk is the only proper food for the infant; and where this is wanting, a mixture of cow's milk with water and sugar. As a general rule, the child may be weaned when it is about one year old. During the first seven or eight months, no other food than the mother's milk should be allowed it, unless she does not supply a sufficient quantity; in which case, proceed as directed in chapter XIII.

After the eighth month, the nursing child may be gradually taught to drink fresh cow's milk undiluted; and then to eat bread soaked in milk. Occasionally it may be allowed to suck a piece of lean meat, and potatoes mashed may be given it in small quantities.

The *feeding* child, or the one fed in an artificial manner, may, after the second month, be allowed clear milk. Such children will early learn to drink it from a glass; and it should be warmed slightly during the winter. The sooner the child can bear undiluted milk, the better for its health. After eight months, it is to be treated in the same manner as the nursing child.

As soon as you begin to change the diet of the

child, your vigilance must be redoubled. You must carefully observe the effects of each new article upon the child's health, and note how it affects its bowels, which must be strictly observed, and if disordered, immediately corrected.

The sleep of children is often disturbed by improper diet. It is a critical period with children, when their diet is begun to be changed. They are subject to febrile symptoms, indicated by a hot head and flushed cheek. An occasional dose of magnesia in milk, or castor oil, will prove beneficial when an error has been committed in diet. A repetition of an injurious article should not be indulged in.

As the child becomes older, it may gradually take a stronger diet. Children are more healthy if fed on simple food, such as bread and milk, and occasionally a little ripe fruit, and tender vegetables. Meat should be given very sparingly, and dried fruit not allowed, unless well cooked. Nuts of all kinds, and confectionary, should be abstained from.

II. *Of the child's dress.* I have already given directions for the dress of infants. This is to be continued until they commence walking. They will then require a warmer dress in cold weather; because they are left more exposed by running alone, being deprived of the protection they gain by being in contact with the person who holds them.

The dress should vary with the weather, but be at all times sufficiently warm to protect them, should they be exposed to the air. In cold weather, children should be kept warm by their clothing, rather than be made to depend upon the fire; this will induce them to take more exercise, and will prevent them from hovering around the fire, which is injurious; in addition to which, they are liable to accidents when near it.

The advantages of warm clothing are illustrated in the following extract of a letter from Dr. Cogan to the celebrated Dr. Beddoes, who wrote an essay on pulmonary consumption. He is speaking of the mode of warming houses in Holland, and of the dress of the inhabitants, as preventing a frequency of consumption.

“Five or six turfs, about the shape and size of our bricks, which is the usual fuel of the country, are arranged in the form of a chimney, and a glowing coal placed at the top, by which means the inward surfaces are enkindled, and the turfs are half consumed, before any share of a very moderate heat is received in the apartment. The females never approach the fire, but generally place themselves at the greatest distance, contented with a small coal of the turf completely charred in an earthen pot, filled with ashes, to moderate the heat. This is placed in

a wooden box, with a perforated surface, and applied to the feet.

“Supported by this consolation, they prefer placing themselves at the greatest distance from the fire, generally by the windows, which, by the way, from their immense size, greatly contribute to the coolness of the rooms. In short, by the extreme airiness of their rooms, and warmth of their dress, they are secured against those extremes of heat and cold, to which the inhabitants of those countries are hourly exposed during the winter season. Their customs are a direct contrary to ours, it being customary among us to dress as lightly as possible, and render our apartments as warm as possible, by the united aid of large coal fires, double doors, warm carpets, and ceiled rooms, and by every caution that can prevent the external air from entering at chinks and crevices, to restore the balance of circulation. This contrariety in the mode of living, in these two essential articles of dress and habitation, will fully explain, my dear sir, the cause of the frequency of catarrhs in this country, and their being comparatively seldom in Holland, without imputing it, exclusively or principally, as some have done, to the general variableness of our climate. The transitions from heat to cold in Holland, are fully as frequent as in England, and the extremes of heat and cold are

generally greater ; but their effects upon the constitution are by no means so immoderate or violent. Thus, I fear, that the opprobrium that has been cast upon the climate of England, rather belongs to the injudicious conduct of its inhabitants. It has been remarked, that as luxury increases in Holland, respecting the greater comfort and accommodations of their apartments, they are becoming more subject to catarrhs."

I have introduced this extract principally to induce mothers to clothe their daughters more properly ; for in this country a great majority of cases of consumption are brought on by insufficient clothing. It is monstrous, that in a civilized country the females should be allowed to dress themselves too thinly to prevent disease and death.

It is necessary to real comfort in this climate, to wear either woollen or cotton flannel next to the skin ; children do not generate as much heat as adults, therefore they require extra protection.

III. *Of the exercise proper for the Child.* As soon as the child commences walking, the proportions of its body begin to assume a more perfect character. Exercise strengthens the muscles, and reduces the quantity of fat ; the limbs become stronger, and the abdomen more flat. The child should not be forced to walk. It ought to be allowed gra-

dually and voluntarily to take the erect posture. The legs may become crooked from too early walking. The hip joints are easily injured at this tender age, and I have no doubt that a large number of children laboring under "hip joint disease" became so by being urged to walk when too young. The exertion to their imperfectly developed joints and muscles must be immense. As soon as the child walks firmly, he should be taught to exercise carefully, and to avoid jumping, especially from such objects as chairs, tables, &c.

The open air is the only proper place for exercise. When the weather is mild, children should spend much of their time out of doors. The morning and evening air is to be avoided. After the dew has left the ground in the morning, and before it is formed in the evening, are the hours best calculated for their exercise.

All violent exercise should be prohibited, such as very fast running, jumping over fences, down steep banks, or climbing up trees. It not only exposes the child to severe accidents, but is positively injurious to the proper developement of the frame.

The bones of young children are tender, and easily bent or broken, and their joints are not fully developed; hence any *violent* exercise tends to injure them. I do not mean to say that the free and unre-

strained use of the limbs should not be allowed, but that children should not be urged by competition to deeds beyond their strength. Let them frolic and play as much as they please, but do not permit them to risk their limbs and lives by "extraordinary feats of agility." Children accustomed to the air are far less subject to catarrhal and inflammatory diseases. They acquire a vigour of mind and body to which children immured in a nursery are strangers. Their muscles are more fully formed; their complexion more healthy, and their digestion more perfect.

IV. *Effects of mental cultivation upon the Child's health.* The education of children cannot be too early commenced. Even in extreme infancy the moral character begins to develope itself; and as man is naturally inclined to evil, so the first voluntary actions frequently require correction.

Childhood is the *time* for moral cultivation. It is the proper season to impress elementary religious truths. The mind, although naturally possessing a certain conformation peculiar to each individual, is greatly modified by early education. The sacred volume says, "Train up a child in the way he should go, and when he is old he will not depart from it."

This direction alludes to moral and religious cul-

tivation rather than to mental discipline. No one who receives the word of God as our unerring guide in duty, can doubt the importance of thus early impressing the minds of children with religious truth.

It is otherwise with regard to mental cultivation in its more extended sense. The brain, which is the apparatus of the mind, does not arrive to complete organization until about the seventh year. Before this period, therefore, no task which requires any great degree of mental *effort* should be imposed. Children have a certain aptitude for learning the elements of all kinds of knowledge, far superior to the adult. This no doubt is the provision which the God of nature has instituted to prevent, or render unnecessary, a long continued effort of the child's mind. When we consider the utter ignorance and helplessness of the infant when ushered into the world, we are led to suppose that we cannot too early commence giving it instruction, and urging it to mental exertion. Children learn principally by imitation during the first few years of their existence, and the exercise of this part of the mind does not appear to produce any bad effects. If the reasoning capacity of the child be urged to action, before the mind has acquired facts to reason upon, then the exercise of the reasoning faculty produces injury, because it is called upon to construct without

materials, or in other words, to arrive at conclusions without premises.

Whenever the mind is called upon to act, an extra quantity of blood is sent to the brain ; and though this extra quantity is very small, still a long continued flow of it to the delicate and immature brain of the child is apt to produce disease. A blister applied to the skin will cause an extra quantity of blood to go to the spot where it is applied, and this is caused by the stimulating quality of the blister salve. Thinking acts on the brain in the same manner as the blister does on the skin. If a child be allowed to think too long, the blood which goes to the brain will produce a kind of irritation there, which is apt to lead to inflammation, sometimes terminating in dropsy of the head. But the irritation, even if it does not end in inflammation, if kept up a long time by the cause which produced it, does not readily subside. The consequence is, the brain is soon worn out. This is caused upon the same principle as blindness, when produced by looking at a very bright light. The eyes lose their power of vision, because their nervous energy becomes exhausted. They were used so fast that nature was incompetent to supply the energy as fast as it was lost.

The food we eat is converted into blood, which

furnishes the supplies necessary for restoring the lost energy of the system.

It is impossible to lay down rules for the regulation of all children. The minds of all vary, and some come forward much earlier than others.

Children generally prefer play to study ; and the reverse of this is very rare. I am inclined to think too much has been said on this subject of late, to induce parents to postpone their children's education. An enquiring curiosity is not to be discouraged. The mind is active ; it must be exercised on some subject. It cannot be folded in a napkin and laid aside. Its province is *action*, and act it must.

Great care is necessary to direct this action into the proper channel. If the parent discourages the enquiries of his child for knowledge, he will seek it elsewhere. Knowledge he must and will have, and perhaps he will draw it from a polluted source. This will be destructive. It will encourage the passions to the detriment of his reasoning faculties.

Those children who have a great desire for knowledge, are indisposed to muscular action. Great muscular action or continued exercise, is incompatible with much thinking, and hard study. This is owing to the fact that the blood is sent to the limbs, and retained there by exercise. The brain of course cannot have an extra supply. The best

course, therefore, to be pursued with children who are disposed to too much study, is to induce them to exercise freely ; and in addition to this, they must be furnished with simple food, and a hard bed. This will restore the balance of circulation.

Children having a diseased brain are very apt to exercise the mind too much ; when this is the case the family physician should be applied to for advice.

CHAPTER XXV.

Conduct to be observed by the Mother while Nursing her Child.

The mother may seriously affect the health of her offspring by improper conduct during lactation. Many mothers impart to their milk the properties contained in their food ; while others may gratify their appetites in any article of diet without injury to the child.

The mother's milk has often been the medium through which an infant has received its first fond-

ness for ardent spirits. Other articles besides ardent spirits taken by the mother during lactation are equally injurious to the health of the child, such as porter, ale, cider, wine, and high seasoned meats. Dr. Dewees says, "Baldini, as quoted by Struve, relates the case of a little girl of seven years of age, who had an irresistible desire to drink brandy, which she had contracted by drawing the breasts of a nurse, who was an habitual tipler. If this be so, more faith may be given to the story of Nero and his nurse, than is commonly bestowed upon it."

The diet of the mother should consist of simple and nutritious articles. Her meats should be broiled, or boiled; and this with bread, cocoa, and a few vegetables, should be her main diet. As the child consumes a portion of the food taken by the mother, perhaps she should indulge in rather a larger quantity than usual. This however better be avoided, by eating articles more nourishing, and less stimulating. Upon going to bed, a bowl of weak cocoa, or a glass of milk will generally agree with the mother, and prevent faintness consequent upon nursing the child during the night.

Some mothers are completely exhausted in the morning, after nursing their children. In this case a draught of new milk, or a bowl of panada should be taken before arising.

Occasionally mothers become very feeble during lactation. Such may try an occasional supply of American porter or sound ale, (the London porter contains injurious drugs,) and if the child be not affected by its use it may be continued for a short time.

It is a great privilege for a mother to be able to nurse her child; but if her health suffer by it, it should be undertaken by another individual, or the child must be fed in an artificial manner. If you cannot employ a nurse in whom you have the utmost confidence, it is far better to adopt the artificial method.

Mothers while nursing their children must find in their employment as a nurse, their sole occupation, and pleasure. If the mind of the mother be withdrawn from her child, to other pleasures, her milk will be less nutritious and less in quantity. A perfect equanimity of temper is to be preserved, and her exercise must be moderate and frequent. The best nurses are those who exercise freely in the open air, who preserve a peaceful mind, and who indulge in no stimulating food; but confine themselves to a plentiful and simple diet.

A poet has aptly described the pleasure the mother feels in the act of nursing her infant—

“The starting beverage meets its thirsty lip,

“’Tis joy to yield it, as ’tis joy to sip.”

The mother can save her child the inconvenience of swallowing medicine, by taking it herself. In a majority of cases a cathartic taken by the mother will act on the bowels of her child, and this will be affected through the medium of the milk, in a most *gentle* manner.

The sympathy which the mother feels for her child, her willingness to deny herself, that she may preserve her child's health, is beautifully contrasted with the selfishness of the nurse in the following lines—

- " Sick, pale, and languid, when your infant's moans,
- " Speak its soft sufferings in pathetic tones,
- " When nature asks a purer lymph, subdued
- " By needful physic, and by temperate food ;
- " Say, will the nurse her wonted banquet spare,
- " And for your infant stoop to humbler fare ?
- " Or with her pamper'd appetite at strife,
- " One portion swallow to preserve its life ?
- " Self her sole object—interest all her trade,
- " And more perverse the more you want her aid."

But these lines are applicable only in a few cases. Human nature has natural or acquired sympathies connected with it, which endear the helpless, and insures protection to the dependent. A mother's love is alone adequate to the care of her infant.

The mother can save her child the inconvenience of swallowing medicine by taking a morsel in a morsel of cake or a cracker taken by the mother will get on the bowels of her child, and this will be effected through the medium of the milk in a most

gentle manner. The sympathy which the mother feels for her child her willingness to do for herself that she may preserve her child's health is beautifully contrasted with the selfishness of the nurse in the following

lines:

"By, good, and kind, when your infant's moans,

"I speak as with intention in my voice I sound,

"I have seen a poor, poor, orphan child,

"By, good, and kind, and by my voice I sound,

"I have seen a poor, poor, orphan child,

"I have seen a poor, poor, orphan child,

"I have seen a poor, poor, orphan child,

"I have seen a poor, poor, orphan child,

"I have seen a poor, poor, orphan child,

"I have seen a poor, poor, orphan child,

"I have seen a poor, poor, orphan child,

"I have seen a poor, poor, orphan child,

"I have seen a poor, poor, orphan child,

"I have seen a poor, poor, orphan child,

"I have seen a poor, poor, orphan child,

"I have seen a poor, poor, orphan child,

"I have seen a poor, poor, orphan child,

PART SECOND.

DISEASES OF THE CHILD.

CHAPTER I.

Sore Eyes.

Children, from the fourth to the eighth day, are subject to a dangerous inflammation of the eyes, which if not cured is apt to terminate in the entire loss of sight. My object in treating of the diseases of children, is rather to shew how they may be prevented than cured. The causes of sore eyes in the infant are various. Authors generally attribute the cause to the matter which may be lodged in the eyes of the child at the time of birth. This is one cause, and perhaps the most frequent, and this matter is the result of what the women call "whites."

From the fact that the child has other symptoms of a "*cold*," such as a discharge from the nose, I am led to believe that sore eyes are frequently the result of a cold taken during the time the infant is exposed to the air, before and while it is first washed and dressed.

In the chapter on washing the child, I have given directions how to prevent it from taking cold during that operation. I would here repeat the injunction, that the nurse should *invariably* wash the eyes *freely* immediately after the birth of the babe.

Early exposing the infant's eyes to a strong light, is also a source of inflammation.

The first symptom of inflammation of the eyes, is the gluing up of the lids. This will generally be observed on the morning of the fourth or fifth day after birth. The lids soon become swollen and constantly closed. On the second day after the lids are observed to be glued, matter of a yellowish color will ooze from between them. This, if not removed, will accumulate in large quantities and cause the lids to pout out, and swell as large as a pigeon's egg. The inflammation commences on the inside lining of the lids, but soon extends to the eye-ball, which, when you can get a sight of it, presents a fiery red appearance. In the course of eight or ten days, sometimes sooner, a white speck will be observed on the edge or centre of the colored part of the eye. This is an ulcer, and the result of inflammation. If the disease be not now checked, the eye will be permanently injured, and perhaps rendered blind.

To cure this disease we must commence early

If ulcers have appeared before the treatment is commenced, in all probability it will take a long time to perfect a cure.

In the first stage of the disease, that is, during the continuance of active inflammation, which will be known by the *swelling* and *heat* of the lids, the following is my plan of treatment.

If the child evidently suffers much pain, give it ten or fifteen drops of paregoric once in six hours, provided the pain returns after the first dose.

Take three grains of *calomel* and divide into three powders. Give one powder once in four hours; and follow the powders by a tea-spoon full of warm castor oil. If this does not purge freely, an injection of half a tea-spoon full of *epsom salts*, dissolved in a gill of molasses and water, may be administered.

For an eye-water, the following may be used: Take one eighth part of a grain of corrosive sublimate. Dissolve it in one ounce of good rose-water, or clean rain-water; and with a camels hair brush, apply two or three drops between the lids. This must be done effectually, and the eye-water must go *into* the eye to do any good. None but a physician or practised apothecary should be trusted in preparing this medicine.

A linen cloth of several thicknesses, wet in weak

lead-water is to be kept laid over the eyes constantly. Two or three times a day the lids should be separated to allow the matter to flow out. There is no necessity for using a syringe to wash them out.

When the eyes cease to discharge matter, a blister may be placed behind each ear alternately, once in four or five days ; and the following eye-water may be used :

Rose water, one ounce ; nitrate of silver, one grain ; to be used in the same manner as the first eye water. This may be continued *once a day* until the eyes can bear the light. *Poultices* are never to be used.

These directions are given, not to induce nurses and mothers to depend upon themselves, but only in case no judicious physician can be obtained.

CHAPTER II.

Red Gum.

This is an eruption which may appear on the child's skin any time during the first month of its

life. It is sometimes looked upon as indicating a vigorous constitution. It presents various appearances, (being of no specific character.) It generally first shows itself about the neck and breast of the child, by a light red, uneven and slight elevation of the cuticle. This is no specific disease, but the result of too much warmth, either of clothing or atmosphere. Sometimes if the stomach be acid, it will cause a similar eruption—as will costiveness.

The remedies then for this artificial eruption, are less clothing, and small and frequently repeated doses of calcined magnesia, or soda.

CHAPTER III.

Sore Mouth.

There are two kinds of sore mouth. One which is called "*Apthæ*," is a kind of eruption. It is first perceived in the corners of the mouth, generally on the inside of the lips, and on the tongue. When

first perceived, the pustules appear like small pieces of curdled milk.

This disease is generally easily cured ; sometimes however, it extends to the windpipe, and even to the stomach and intestines. It frequently appears on the verge of the anus, and this is probably induced by the acrid nature of the evacuations. When this is the case, great care is to be taken to keep the parts entirely clean and cool ; to effect which a weak tea of flax seed, or honey and water, may be used as a wash after each evacuation. *Clean* linen must be used each time on changing.

* This disease is most frequently accompanied with a disordered state of the bowels. The stomach contains too much acid, which is indicated by sour eructations, and vomiting hard curdled milk mixed with mucus.

The bowels are in a loose state, and the dejections are green, watery, and sour, accompanied by a great quantity of wind. When this disease first makes its appearance, the child sallows, and refuses to nurse.

The treatment consists in regulating the bowels and stomach, and in topical applications to the sores.

Half a tea-spoonful of rhubarb mixture, repeat

* The child is generally much inclined to sleep—rarely, though sometimes wakeful.

every three hours until a free evacuation is induced, is sufficient in the mild cases, aided by washing the mouth with sage tea sweetened with honey.

When the sores assume a dark livid color, a weak solution of the nitrate of silver should be used. Take of rose water one ounce, and nitrate of silver four grains, and apply it to the sores three times a day with a camel's hair pencil. The mouth should not be washed with any thing but the sage tea, or a weak decoction of Peruvian bark. A little molasses taken into the mouth serves to produce good effects.

The way to prevent this species of sore mouth, is to keep the bowels in good order, and to wash the child's mouth occasionally with cold water.

The other form of sore mouth is "*ulcers*," which first appear on the inside of the cheeks, and occasionally on the gums and under the tongue. These sores are sometimes as large as a finger nail. They appear like pits dug out, their edges are raised, and the sore itself resembles raw flesh. This disease is accompanied with general heat, and costiveness. Nursing causes pain, which makes the child desist and cry.

The cure consists in giving a tea-spoon full of castor oil once in three hours, until it operates freely; and in applying the nitrate of silver wash as directed above. If the heat continues after the oil

has operated, ten drops of ipecac wine may be put to a wine-glass of water, and a tea-spoon full of the mixture given once an hour until the heat ceases.

CHAPTER IV.

Sore Ears.

Children are subject to bad sores behind the ears. These appear more frequently on fleshy than thin children. Sometimes the sores are accompanied by costiveness, and when this is the case, it is well to give magnesia dissolved in milk, in small doses, night and morning, for several days.

Goulard's extract of lead is the best application with which I am acquainted for this disease. After washing the sores with soap suds twice a day, bathe them with the undiluted extract, and generally in a few days they will dry up.

These sores are frequently accompanied with similar ones in the groins; and these are to be treated as the former.

Children are also subject to ear-ache. This is very painful, and if neglected sometimes proves fatal. In those cases where matter is discharged, I have been in the habit of using, with success, a solution of chloride of lime. To prepare this, take a tea-spoon full of the chloride of lime and dissolve it in half a pint of water. After it has become clear, warm a tea-spoon full and pour it into the ear ; repeat it three times a day. This method when joined with aperients of magnesia and rhubarb I have seldom known to fail of perfecting a speedy cure.

When there is no discharge, the pain is owing to inflammation produced by cold. In this case apply the following liniment to the neck and throat ; soak some cotton wool in it, warm it, and put it in the ear.

R. Ol. Camph. 3vj

Tinct. Opii. 3ss

Ol. Origan. aa

Aqua Ammon. 3ij

M. ft. Lin.

After having rubbed the parts thoroughly with this liniment, tie a handkerchief around the head so as to protect the ears. Then give a dose of epsom salts dissolved in coffee.

CHAPTER V.

Costiveness.

An infant under three months of age, will enjoy better health in a majority of cases if the bowels are in a free and relaxed state, that is, to have two evacuations daily. Soon after the third month of its life, if the child be well regulated, it will form the habit of having its evacuations return at a certain hour.

If costiveness be constitutional and does not produce any bad effects, there is no necessity for administering cathartics to overcome it. Some children will go from two to four days without evacuating their bowels, and receive no harm. It is desirable that in most cases every child should have a passage from its bowels daily. This may be induced either by an injection of warm water, or by introducing a suppository into the rectum. The suppository may be made from various substances, such as brown soap, molasses candy, or what is easier and better, a piece of white paper rolled firmly, about as large as a quill and about an inch and a half long. This is to be anointed with lard, and with a quick but gentle motion introduced half its length up the rectum.

of the child. After it has remained there for a few moments it will generally induce an evacuation.

In cases where children are habitually costive, and in consequence restless and feverish, the mother during lactation should regulate her bowels by a mild diet, and occasional doses of slightly relaxing medicines. The child may be fed with molasses.

When constipation is accidental it should be instantly removed by a simple injection, followed with a draught of milk sweetened with manna.

Regularity of the bowels is of the utmost consequence to the health of the child.

Where opium in any form is given, it is invariably followed by irregularity of the bowels.

Mothers and nurses should make it a standing rule to *know* that children of all ages have an evacuation at least once in twenty-four hours, except in a few rare instances, when once in forty-eight hours is sufficient.

That parent is certainly culpable to a high degree, who neglects to watch this important function in her child. I have known children subject to headache and pains in the bowels, and who have suffered almost constant pain, entirely relieved by a daily evacuation from their bowels. As soon as a child is old enough to understand any thing, it should be taught the necessity of obeying the calls of nature.

Boys in their desire for amusement will often neglect the kind warnings of nature, and remain several days together without an evacuation from their bowels. A regular hour ought to be observed, no matter if the child has no desire, still when the hour arrives he should be taught to retire and solicit nature.

CHAPTER VI.

Diarrhœa.

This is a very common disease among children. It annually carries off its tens of thousands, either directly, or by terminating in other diseases. There are many varieties of diarrhœa. I shall consider them in connection with their causes, so that their prevention will be more readily understood.

What is commonly called a "looseness," is either the effect of error in diet, or a sudden change of the weather, from warm to cold.

A large amount of food, or any indigestible sub-

stances will produce a looseness. The evacuations in this simple diarrhœa appear natural, and large in quantity ; sometimes a few indigested substances can be seen ; and if so, they are probably the cause of the disease. When there is mucus with the evacuations, and there has been a change of weather, you may conclude the temperature to be the cause.

Occasionally this looseness is caused by an extra flow of bile into the intestines. A dry and hot skin accompanies this form of the disease.

Where the bowels suffer from indigested food, the cure consists in freely purging the bowels with castor oil and giving mild farinaceous preparations.

When cold produces the disease, give twenty drops of ipecac wine once in half an hour, until vomiting or purging is induced ; then administer a warm bath, and apply flannel next to the skin.

If a child is easily affected in this manner, he should be fed principally on milk, and preparations of wheat flour. Meat, vegetables and soups must be avoided. When children are teething, it often occasions a loose state of the bowels. The teeth should always be examined ; if they require it, simply cutting them will often remove the diarrhœa.

The *billious diarrhœa* is known by the bright yellow colour of the dejections ; this is what is

known as the "*Summer complaint*." The colour of the evacuations sometimes varies to a greenish shade, and is very offensive.

This is a disease which appears in the latter part of the summer, and early in the fall; and it is owing to the heat of the Summer producing a disordered state of the liver.

When this disease first appears, a cathartic of magnesia, followed by castor oil, may be given. But if this does not check it, your physician should be immediately consulted. There is no disease more difficult to manage than diarrhœa in children, the opinion of "infallible remedy" makers to the contrary notwithstanding.

Children having dark hair and sallow skins are more subject to this form of diarrhœa, than those having light hair and fair complexions.

When the teeth are coming forward, children are more subject to the Summer complaint, than after the teeth are through.

The irritation caused by teething, together with the effects of warm weather, often produce a violent form of this complaint. Indeed teething always aggravates diarrhœa of any kind, and often is the sole cause. It should always be suspected as a cause, and the teeth examined accordingly. Teething produces fever. The looseness is nature's method

of lessening and curing the fever. If we should be guilty of giving laudanum at this time, to check the diarrhœa, and allow the cause to remain, we might produce much mischief to the constitution. The head would principally suffer.

Sometimes, in this form of the disease, there is no fever ; and if so, a small quantity of beef tea may be given to the child. There is another form of diarrhœa called *chylous*. It is called by that name because the *chyle* passes through the bowels without being digested, and consequently the child emaciates very rapidly. The food becomes chyle when it has passed into the intestines, and here the bile comes to it and promotes digestion. In the disease before us, the bile does *not* go into the intestines, consequently digestion does not take place, but the food passes from the child in a *milky* form, very light colored. This is the distinguishing mark of chylous diarrhœa. The bile may become absorbed into the system ; this will be known by the sallow appearance of the child ; or no bile may be secreted ; in this case, of course, it would be wanting in the intestines.

This disease must be treated with small doses of calomel. The parent must not object if the physician should order calomel in minute doses for a *length of time*.

The bowels may be covered with flannel ; and

the child kept on the lightest food possible ; such as bread water, gum water, &c.

When the food passes from the child in such a state as to be recognized, as potatoes frequently do, it forms a diarrhœa called "*lienteric*."

The stomach is in fault. The food is not converted into chyme, because the stomach is so irritable that the food will not remain long enough to be acted upon, but passes through the whole extent of the stomach and intestines in an hour or two.

These undigested articles, passing so rapidly down the intestines, produce sharp pain, which is relieved by an evacuation.

The child rapidly loses flesh, as in the last form, and is very thirsty, owing to the irritation of the articles in the bowels.

One grain of Dover's powder should be given three times a day ; or if it should produce sickness at the stomach, twenty drops of paragoric may be substituted. The bowels must be rubbed with flannel, night and morning, for ten or fifteen minutes, and the region over the stomach rubbed with volatile liniment, to which may be added one fourth part laudanum.

The food must consist of fluid articles, such as beef tea, mutton broth, thickened milk, &c.

The whole body should be covered with flannel.

Diarrhœa frequently assumes a chronic form, especially about the time that children are weaned. This, in common language, is called "weaning brash."

Any of the forms above alluded to, may become chronic, and the cure must be sought according to the variety.

There is an intimate connexion between the skin and bowels; this is known and rendered familiar by the following fact. Persons frequently retire to bed with their bowels in regular order; when they arise they are forced to the close-stool, and find they have a violent diarrhœa; this is generally produced by a sudden change in the weather, from hot to cold. The perspiration is checked, and instead of several pounds of fluid escaping from the skin, it is thrown into the intestines, to be evacuated from them.

The skin of children should be kept clean and moist, by frequent ablutions; and if the child is inclined to a dry and hot state of the skin, flannel must be worn next to it.

Exercise is an excellent preventive of looseness. Perspiration is promoted, and thus relieves the bowels. The intestines are rendered less irritable, and consequently not so easily deranged by an error in diet.

CHAPTER VII.

Vomiting.

Children at the breast, when abundantly supplied with milk, are apt to overload their stomachs ; and nature kindly relieves them by throwing off the overplus. When vomiting thus occurs spontaneously, it is beneficial ; but if it is occasioned by roughly jolting the child immediately after nursing, it must be prevented by allowing it to remain quiet for some time after it has nursed.

There is no necessity for applying the child to the breast after vomiting ; it does harm rather than good.

When children at the breast throw off their milk *hard curdled*, immediately after nursing, it is caused by too much acid on the stomach ; I say immediately, because the milk must always become curdled before it can be digested. The natural process takes about half an hour, whereas some children will throw off curdled milk in a few minutes after swallowing it. In addition to this, the naturally curdled milk will not smell sour, as does that which is caused by too acid a stomach.

Small doses of magnesia, lime-water or soda, must be given to remove the acid.

In contradistinction to the above, some children will vomit their milk not at all curdled. This is owing to a want of acid, and must be relieved by frequent small portions of weak lemonade.

Foreign and undigested substances received into the stomach of a child, will produce vomiting; such as lemon peel, nuts, &c.; when this is the case, the child should be encouraged to vomit by giving it warm water, or weak chamomile tea.

Too full a meal in children, as in infants, will produce vomiting; this generally cures itself, and requires no assistance, except perhaps a small dose of magnesia in milk.

Vomiting is symptomatic of many diseases, such as fever, a disordered liver, &c. This is in the province of the physician.

CHAPTER VIII.

Croup.

This disease is produced by cold, and generally shows itself about four o'clock in the morning. The

evening before an attack, the child appears more lively than usual. This is caused by the incipient inflammation of the throat, and the slight stimulus conveyed to the brain by the inflammation.

The disease is usually ushered in by a slight hoarseness for a day or two, accompanied by a catarrh. Sometimes it attacks suddenly and without previous intimation. The first symptom is a peculiar hoarseness, of a metallic sound, which soon increases, rendering respiration difficult. The inhalations resemble the crowing of a cock. As soon as these symptoms appear, a messenger should be immediately sent for a physician. In the mean time, the child's feet may be put into warm water, and a dose of "the compound syrup of squills" given it. This medicine should always be kept in the house where there are children. A tea-spoon half filled, once in half an hour, or, if the symptoms are violent, a teaspoon-full once in ten minutes, until vomiting is produced, is the proper dose for a child under one year of age. The quantity must be increased as the child becomes older.

Volatile liniment, a *weak* mustard plaster, or any thing which will irritate the skin, must be applied about the throat.

If no physician can be had, three grains of calomel may be given at once, and in half an hour an

emetic of tartarized antimony, or antimonial wine. A teaspoonful of the latter once in fifteen minutes, for a child over two years of age, is the dose, and for an infant under one year of age, forty drops once in twenty minutes. If the tartarized antimony itself is used, take three grains to ten table-spoonsful of water, and use the same as the wine. If after freely vomiting, the child is not relieved, three more grains of calomel may be given, followed by an injection of assafœtida, half a drachm of which to half a pint of molasses and water.

The other remedies, such as keeping the feet in warm water, and stimulating the throat, must be persevered in. Children subject to croup should have their throats washed freely every morning in cold water ; this tends to ward off attacks.

CHAPTER IX.

Marks.

Children are sometimes born with singular marks on their skins ; when this is the case, it should be

communicated immediately to the family physician, because in some instances they require surgical care.

It is a general opinion among females, that they mark their children by being influenced by extraordinary sights. This has been proved to be false, by a regulation of a hospital in Paris. When a woman enters the hospital, she is questioned closely as to what she has seen; what have been her peculiar feelings, and what is her situation. The result has been that out of many thousands of women who had not been influenced by any of the above considerations, many had children with marks, while those who had been thus influenced, if marks appeared on their children, they did not in a single instance accord with the uncommon impressions of the mother.

Fright and other debilitating causes are, notwithstanding, to be avoided, because they may occasion premature labour or a sickly offspring.

CHAPTER X.

Retention of Urine.

Infants occasionally do not pass their urine for twenty-four hours after birth; but they should not

be allowed to remain longer than this, without ascertaining the cause. The natural passage is sometimes, though seldom wanting. A cloth wrung out of hot water and applied to the lower part of the abdomen will generally induce a flow of urine. If after applying the warm cloth, there is still no flow, the physician should be informed of the fact. Frequently a dose of castor oil will produce the effect.

Children for a year or two after birth occasionally complain of pain when passing their urine, and sometimes the pain is so violent that they scream, and cannot be induced to attempt to void it. This is an inflammation of the parts, and must be removed by the exhibition of a dose of epsom salts, and drinking plentifully of flax seed tea, a weak decoction of parsley roots, or pumpkin seeds boiled in water. The parts may also be fomented with hot water.

CHAPTER XI.

Want of a passage from the Bowels.

The natural passage from the bowels is very rarely wanting. Where this is the case it can be

ascertained by examination, and it is safe to suspect this to be the case if the child does not have an evacuation for twenty-four hours. If the nurse after examination, suspects the want of a passage, she should immediately inform the physician of it ; saying nothing to the mother until after his opinion is given.

CHAPTER XII.

Tongue-Tie.

Young mothers are almost always suspicious that their children have their tongues unnaturally tied. If the child nurses well, the mother may rest satisfied that the unruly member will be enabled to perform its proper share of talking through life. When the tongue is tied the child in sucking makes a kind of clucking noise ; in such a case apply to the physician.

CHAPTER XIII.

Belly-Ache.

Young children frequently suffer from pain in the bowels. This can be ascertained in infants, when, together with continued crying, they draw up their limbs, and occasionally have turns of relief.

These symptoms are accompanied with hot hands, and, the palms, are wet with perspiration. In such a case, the state of the bowels, being either too much relaxed, or costive, will produce pain.

An acid state of the stomach will cause pain in the bowels. When the bowels are costive, castor oil must be given ; when the stomach is sour, some soda in milk.

A linen cloth, heated as hot as the child can bear, and applied to the bowels, will generally produce temporary relief.

If the child's feet are cold, they should be put into warm water ;—indeed cold feet of themselves are sufficient to cause pain in the bowels.

Children who are fed in an artificial manner are the most subject to pains in the bowels, caused by a bad state of their food. For this subject see Chapter XI., Part I.

When the pain is violent, and the above means do not relieve it, some warm anisseed tea with a few drops of laudanum may be given. Costiveness will generally follow the administration of laudanum, which must be overcome with a mild injection.

Children over two, and under ten years of age, frequently complain of belly-ache. This is almost uniformly the result of an error in diet; and when this is ascertained to be the fact, mild purgatives must be given to remove the offending cause. This is accomplished by giving half an ounce of the tincture of Rhubarb, which by its warmth relieves the present pain.

PART THIRD.

DISEASES OF THE MOTHER.

CHAPTER I.

Lochia.

I have placed this among the diseases, for want of any better head under which to place it. The Lochia is that flow which continues from the woman after the birth of the child, until the milk is fully formed in the breasts. This is certainly one of the wisest provisions of nature. During the period in which the child is supported within the mother, there is a certain quantity of blood sent to sustain it; but as soon as it is born, that blood is no longer wanted in the same place. The child is still to be supported by the mother, but by different organs. The blood which went to the womb, is now sent to the breasts to form milk. Nature does all her works gradually; and it is evident, that if this quantity of blood should be sent suddenly to the breasts, it would cause pain and disease; so to dispose of a portion of it, the lochia is established, to act as a

drain until the breasts are capable of receiving all the blood without injury.

It is evident from what has been said, that if the lochia be suddenly dried up, it is in consequence of disease ; or if it continue a long time, and in immoderate quantities, the breasts must be robbed of a supply of blood.

The lochia generally begins to diminish in four days, and ceases at the end of a week.

If there be much variation from this, the physician should be informed, and his advice strictly followed.

CHAPTER II.

Milk Fever.

Like red-gum, milk fever is an artificial disease ; it is produced by a too stimulating diet, and too much heat.

As was stated in the last chapter, nature does her work gradually ; so she cannot be hurried

without manifest injury. After the child is born, the extra blood being determined to the breasts, a stimulating diet forces it unnaturally towards its destination, and produces disease and pain there. This is accompanied by a general fever, which is called "the milk fever," and which is increased by a sudden cessation of the lochia, or by stimulating diet. A tingling sensation, and occasionally a chill is felt when the milk commences to form, even in those cases where the food and management has been entirely proper ; but no inconvenience is suffered from it ; whereas if the exciting cause of milk fever be carried far, the breasts become swollen and frequently end in inflammation.

CHAPTER III.

Broken-Breast, or more properly Milk-Abscess.

This most tedious disease is, in most instances, caused by neglecting to draw off the accumulated milk from the breasts, and from the too early use of animal and other stimulating food. I have al-

ready given directions when to apply the child to the breast, (see Chap. XII. Part I.) And in chap. XV. the proper food for the mother is pointed out. If the mother is taken care of as she should be, there is not much danger to be apprehended from broken breasts.

When the nipples are tender and sore, it becomes the nurse's duty to see that the breasts are regularly emptied, at least twice every day. This she will be enabled to perform, either with her own mouth, or with suitable instruments. It should never be omitted; because the irritation of the sore nipples extends to the milk tubes, which causes them to inflame. The presence of the accumulated milk in the tubes, causes a distention and consequent inflammation; and hence it is obvious how very necessary it becomes to draw the breasts frequently.

The first symptom of an inflamed breast is a slight uneasiness in the parts, which is increased on moving the arms. This leads to an examination. A small and hard spot is discovered, either near the skin, or deep seated. When this spot is handled, it becomes painful. If the swelling is near the skin, it will soon get well, either by disappearing, or by coming to a head and discharging. If the hardness is deep seated, in most instances it becomes a formidable disease, and requires very active treatment.

The physician will probably bleed the mother, give a powerful cathartic, and apply leeches to the breast, and thus endeavor to cause the hardness to disappear without breaking. If he does not succeed, his next step will be to cause it to mature as soon as possible, and discharge itself through the skin; and for this purpose he will generally prefer flax-seed poultices; and if there is much pain, (as there sometimes is) he will no doubt mix some powdered opium with the poultice.

The nurse's duty is, to keep every particle of stimulus, either of meat or drink, far from the patient; to apply the poultices regularly, to keep the feet warm, and to draw the breasts, as directed above.

The following course, pursued by the author, has very seldom failed to disperse the inflammation, if followed in the early stages of the disease.

If there is much fever, bleed freely. Follow this with one ounce of Epsom salts with three grains of tartar emetic, dissolved in a tumbler of water; of this, one third to be drank, which is to be followed by another third, if it does not produce free vomiting in half an hour. Apply cloths wet with rum and water, cold, if the breasts are red and hot.

Some females are more subject to inflamed breasts than others, and to such it becomes a duty so to regulate their mode of living, as to prevent it.

Although the first twenty days is the time in which this disease shows itself; still, mothers are not secure from an attack during any period of lactation.

It has been stated above, that neglect, and the too early use of stimulating food and drink were the most general cause of this disease, still it is often produced by blows on the parts, and by colds taken by sitting in currents of air. It is occasionally caused by over fatigue and mental agitation, and by disease suddenly leaving some other part and settling in the breasts.

Such mothers as are subject to swelled breasts, should wear either a piece of oiled silk, or fur over these parts, which will keep up the action of the skin and protect them from cold. The food of such persons should be simple. They should exercise freely in the open air, and preserve regular hours both as to rest and in nursing their children, and never suffer themselves to go more than six hours without having their breasts drawn.

CHAPTER IV.

Sore Nipples.

For the management of sore nipples, see Chapter XIV., Part I.

CHAPTER V.

Costiveness.

Although nursing mothers are not as subject to costiveness as during the time of gestation, still it sometimes is a serious difficulty, frequently producing a similar state of her offspring's bowels.

Those mothers who are most subject to costiveness, are such as indulge in high living, and pursue a sedentary course of life, while those who deny their appetite for the sake of health, and who freely exercise in the open air, are seldom or never troubled with this inconvenience.

When costiveness is produced by stimulating diet or want of exercise, the remedy is obvious ; it is simple food, such as broths, boiled meats in small quantities, bread a few days old, well boiled vegetables, and the various preparations of milk and flour ; this with moderate exercise will overcome the difficulty.

When the above causes do not operate to produce this state, mild laxatives, such as manna, molasses and water, or magnesia, must be frequently taken ; rubbing the bowels briskly, night and morning, will frequently induce a daily stool. A simple injection of warm soap suds, is an easy and harmless method of removing costiveness.

Roasted apples, stewed prunes, fresh figs, taken habitually, together with a spare diet, will in a majority of cases produce a pleasant state of the bowels. One passage in twenty-four hours is sufficient, and this should always be solicited at a regular hour each day, whether you have the inclination or not. It will assist nature in her duty, and the result will be salutary.

CHAPTER VI.

Head-Ache.

Head-ache is, in a great majority of cases, produced by the same causes which produce costiveness, and is kept up by it. If the advice in the last chapter be followed, this evil will seldom exist.

This affection, however, may arise from various causes, besides errors in diet, and sedentary habits, such as too hot apartments, too thin clothing about the limbs, and especially the feet ; indulging in paroxysms of anger, grief, or any exciting or depressing passion. The remains of an old stump of a tooth, general weakness, accompanied with a nervous state, and a general plethora, may produce it. Head-ache is also a symptom in various fevers, and symptomatic also of some local disease.

After simple diet, regular exercise, and a calm state of the mind has been tried, and head-ache still continues, apply to your physician for advice.

CHAPTER VII.

Piles.

Many females are subject to this troublesome complaint, and it is closely connected with a bad state of the bowels.

There are various kinds of piles. Some do not protrude, others do ; some bleed, others do not.

After the birth of the child, the bowels are torpid for a few days, and when they are moved by a cathartic, piles are apt to become troublesome. If a female is subject to piles, cathartics should be taken in divided doses, so as to produce small evacuations. One of the best cathartics is assafoetida ; it both soothes the pain and causes thin and soft evacuations. Five grains of assafoetida once an hour, until you have taken twenty grains, followed by a tea-spoon full of sulphur in molasses, will produce a very easy evacuation. It is well to drink freely of cream of tartar beverage. When the piles protrude, and are red, hot and painful, they should be reduced by gently, but firmly and gradually, pressing them into their natural situation.

Potter's clay and powdered opium, in the proportion of a tea-spoonful of finely scraped clay, to

five grains of opium, dusted on the tumours, will wonderfully soothe them. When the tumours become flaccid, astringents may be used with advantage, such as strong alum water, or the decoction of white oak bark. The parts should be washed freely two or three times a day with these remedies. Occasionally, when the piles are very painful, a pill of opium of two or three grains may be introduced into the rectum ; when this is done an ejection will remove the ill effects of the opium.

In that variety of piles, where the bowels protrude after each evacuation, and which are unaccompanied with pain, we have found aloes an excellent remedy. Take about three grains of this medicine on going to bed, and repeat it, if necessary, nightly, for several times. This article acts more kindly when combined with equal parts of as-safœtida.

PART FOURTH.

CHAPTER I.

Teething.

About the seventh month after their birth, children begin to cut their teeth. Many, however, have teeth as early as the fourth month, and some, as Richard III. of England, and Louis XIV. of France, are born with them.* Others do not have teeth until seventeen or eighteen months of age.

The teeth are generally cut in the following order : 1st. the two lower front ones, then after a few weeks, come, 2d., the two upper front teeth. Frequently the four upper ones come together, and the two next to the front in the lower jaw. Next, the two canine or sharp pointed and strong teeth show themselves in the lower jaw. This is not invariably the case, for the first two double teeth or grinders precede the canine in some instances. After the canine in the lower jaw, those in the upper, follow ; then come at intervals the grinders of the two jaws.

* Prof. Dewees.

These teeth all come out, and are followed by the second set about the seventh year.

The first symptom of teething is a hot mouth, accompanied with slavering, and this heat is first felt by the nipples. The child should now be watched, and if the gums become swollen, and very hot, they should be cut. The first teeth of the under jaw seldom or never require cutting, those of the upper jaw frequently do. Teething is a natural process, therefore, a child is not to be medicated because it is teething, but only when it produces disorder of the system. The child, in a great majority of cases, is quite feverish when getting teeth; its head is hot, its palms are moist, its cheeks are red, and its mouth burning hot. Frequently only some of these symptoms are present, and but rarely, none of them.

When a child is languid and evidently failing during the process of dentition, it should be narrowly watched. If the weather permit, it should be kept much in the open air. It may with advantage be bathed in tepid water night and morning. Its bowels should be kept rather loose, otherwise fever will rage, and nature will produce a diarrhœa, which is sometimes very troublesome.

The food must at this time be of the mildest character. No meat should be allowed. The most

proper diet is cow's milk, if any other than the mother's is needed.

The bowels are rendered very irritable during the time of teething, and are liable to become affected with diarrhœa ; this must be attended to at once ; for its treatment, see Chapter VI., Part II.

When the gums are hot, they may be soothed by frequently rubbing them with the finger, moistened with honey or molasses ; any thing which will cause saliva to flow, will ease the gums. The poor sufferer may occasionally be allowed to suck a piece of lemon or molasses candy ; it soothes and pleases, and does no harm. Molasses and water is a good drink at this time, and cream of tartar beverage is still better. As the child is in a feverish state during teething, it should be kept quiet. If played with at all, care should be taken not to excite it ; for excitement causes the blood to flow to the brain, which is at this time prone to inflammation.

Eruptions on the skin are frequent symptoms of teething ; they are of no consequence, and may be subdued by tepid baths, and an occasional cathartic.

All other diseases are aggravated by teething, and this may account for the fact that so many children die at this period.

Teething often produces convulsions, when a great number are cutting at the same time. When

this is the case the gums must be cut, and the bowels kept open with assafœtida injections, which should be given at the slightest intimation of a fit. For this purpose take half a drachm of assafœtida, powder it and dissolve it in two gills of warm milk ; this may be repeated in half an hour if the convulsions are violent. The feet should be placed in warm water.

The child may be allowed something to bite during dentition. The best things are the toys composed of gum elastic. They are sufficiently firm to answer all purposes, and still not hard enough to bruise the gums.

CHAPTER II.

Weaning the Child.

One year seems to be the time indicated by nature as the proper period for the mother to supply her child with nourishment from her own body.

The proper season may occur any time during the year ; but it is generally best not to wean a

child in midsummer, or during the prevalence on diarrhœa, or dysentery ; besides, the nights are uncomfortable, and the child will be restless.

When it is determined to wean the child, it should first be accustomed to take milk, and weak broth, and the various preparations of milk with wheaten flour, sago, and arrow-root. This will accustom it to such articles, and weaning will not be so difficult.

The mother must not nurse the child so frequently, and thus it will be led to look to other sources for nourishment. When weaning is once commenced, it ought to be persevered in. Generally after the third night, there will be no trouble, especially if the child sleeps away from the mother, which is certainly to be recommended.

After the child is weaned, care must be taken not to overload its stomach, or to give it heavy and indigestible food. Bread and fresh milk is the best nourishment for children at this time, occasionally indulging them with mashed potatoes, and a small quantity of tender beef.

The health of the mother may render it necessary to wean her child at a much earlier period than has been mentioned. This will be known by the effect her disordered health has on her milk. If it be curtailed in quantity, so as to become insufficient for

the support of her offspring, this is a good reason for weaning the child ; or if the quality becomes deteriorated, so as to produce debility on the part of the child, it should be weaned. If nursing cause debility or pain on the part of the mother, and these cannot be removed, then it is proper to wean the child.

During severe attacks of fever, the child may continue to nurse from its mother, if it does not produce too much fatigue on her part ; for experience shows that the child will receive no injury.

A child generally should not be weaned until it has cut several teeth ; because the presence of these indicate the strength of the stomach and bowels. Nature evidently intends the teeth to masticate with ; consequently their presence indicates that the stomach has power to digest other substances than milk, which requires no mastication.

Perfect health on the part of the child ought to exist at the time of weaning. It would evidently be improper to withdraw the mother's milk during the sickness of the child.

The bowels are apt to become affected either with looseness or costiveness, soon after weaning, arising from the great change of diet. The child must be narrowly watched, and either state of the bowels above mentioned remedied immediately.

It deserves to be again mentioned, that fresh

cow's milk, with bread two or three days old, should constitute atmost entirely the diet of the child ; at this period the digestive organs are very liable to become disordered, consequently great care must be taken in selecting food for the child.

CHAPTER III.

Administration of Medicines.

In a country where there are so many regularly bred physicians, there can be little excuse for other persons administering any other than the most simple medicines. I am persuaded that there is much mischief caused by unnecessarily tampering with medicines. It almost universally happens that one dose administered ignorantly, requires two or more to remedy it ; and it is miserable economy to suffer severe pain, besides loss of time, by neglecting to take suitable advice.

In the former part of the volume, much has been said against the use of opium in any form. It would take volumes to record the misery, disease.

and deaths, which the use of opium has occasioned ; besides, it is a criminal and cruel practice, to poison helpless infants with this drug.

Within a few days, I have been informed of a case, where a child five weeks old had taken three bottles of " Godfrey's Cordial." What a monstrous iniquity, thus to condemn a human being to misery through life, by the administration of drugs by a *parent*, because that parent was unwilling to devote her time to the care of her offspring, but chose rather to stupefy it with poison.

CHAPTER IV.

Signs of Pregnancy.

The most unequivocal signs of pregnancy are an enlargement of the abdomen, suppression of the menses, and the motions of the child. A married female, in good health, may generally depend upon the suppression of her menses as being a conclusive sign of her pregnancy. In deciding by this symptom only, it will be necessary to determine that the

suppression is not the effect of cold, or any other uncommon event.

The abdomen begins to enlarge about the fourth month, at which time the first motions of the child are felt. When these occur, together with suppression of the menses, there can no longer be any doubt.

It is unnecessary here to go into a detail of the doubtful signs of pregnancy, because I am writing for the instruction of *married women*; and these have their family physician, to whom they ought to communicate the symptoms of any disease, which are manifested with signs similar to those of pregnancy. When these diseases do occur, they are of a serious nature, and require prompt medical treatment.

Sickness at the stomach, and vomiting after meals, are symptoms of this condition. Although they do not always occur, yet when they happen in conjunction with suppression of the menses, it generally indicates pregnancy. A great flow of saliva into the mouth, and the spitting of thick saliva, resembling cotton wool, when accompanying the foregoing symptoms, are decisive.

The breasts and nipples have a great sympathy with the womb, and when impregnation has taken place, the breasts generally become enlarged; to-

wards the latter period of gestation, milk may be formed, though this seldom takes place before the birth of the child.

The skin around the nipples becomes of a darker colour after impregnation, especially in dark complexioned women, during the second or any subsequent gestation.

The stomach during pregnancy is generally in such a state as to produce "heart burn;" this is a sign, however, less to be depended on.

CHAPTER V.

Conduct to be observed during Gestation.

The moment a female discovers herself to be pregnant, she should conclude to devote herself to the well being of herself and her expected offspring. Miscarriage is so frequent, especially with the first child, that it is with many persons considered a very inconsiderable and minor affair.

If mothers knew the danger to their own lives, and the subsequent lasting and frightful disease to which miscarriage subjects them, I am confident they would be more careful to prevent this dangerous accident.

The diet during pregnancy ought to be regulated so as to produce satiety without an accompanying arterial fullness. Females generally suppose that because they have to support the growth of the child, that therefore they must take a larger share of food than usual. But what does nature say on this subject? She, by producing nausea and vomiting, points out *depletion* rather than *repletion*.

The fact that the system during this period is in a feverish state, shows that if the diet be altered at all, it should be diminished rather than increased. The child at birth weighs but a few pounds, and if these pounds be divided into as many parts as there are days in the period of gestation, it will be found that it requires but a few ounces of food daily to sustain its growth. The food should be of the simplest kind, and of such varieties as suits the peculiarity of the individual, and of such a nature as to keep the bowels in an open state. All stimulating liquids are to be avoided.

Women during pregnancy frequently have a great desire for some particular article. This is pro-

bably the result of the altered state of the stomach. The same thing occurs occasionally during convalescence from protracted illness. If the articles craved, or as it is termed "longed for," are harmless, they may be allowed ; but if they are only longed for, to satisfy a foolish desire for injurious articles, they must be forbidden.

I have never known a case of "longing" to take place in a female when the stomach and bowels were duly regulated. Is is usually the result of a pampered appetite, and costive bowels.

Costiveness during this period ought not to be allowed ; and, as I have stated before, the food should be composed of such articles as will keep the bowels in a free state.

When costiveness is constitutional, and exists under a regulated regimen, it will be necessary to resort to remedies. These may consist of rhubarb, magnesia, manna, or a decoction of slippery elm bark, taken freely. These remedies are to be regulated so as to produce one evacuation daily.

The amount of *exercise* must now be regulated. During the first three or four months it should be very moderate. Ascending stairs, walking fast, lifting heavy furniture, and reaching for distant articles, are all equally to be avoided, as tending to produce abortion.

The open air may be freely indulged in, and walking moderately in fine weather, and riding in easy vehicles, promotes the circulation without endangering miscarriage.

The *mind* also requires to be kept in a proper state during this most interesting period. All disagreeable subjects of thought should be dismissed. All discussions are to be avoided; and any duty which requires much effort of the mind, or is likely to produce agitation, must be considered as forbidden.

It is advisable to avoid persons and things that produce disagreeable sensations, not that they will mark your offspring, but that they tend to disturb the mind, which is always an injury, and especially so during gestation.

A calm state of both mind and body, during this period, conduces to present ease, to an easy delivery, and to a healthy offspring.

