

OBSTETRIC NURSING.

— BY OBSTETRICA, M.R.B.N.A. —

PART II.—INFANTILE.

CHAPTER IV.—INFANTILE FEEDING.

(Continued from page 221.)

At their completion, this Course of Lectures will be published as one of the Series of "Nursing Record Text Books and Manuals."

NOW we come to that dreaded trouble in Obstetric Nursing—bad nights for the Nurse from the baby crying. I think you will find at this early period of infantile life that *breast-feeding* and *good* management will greatly minimise the evil; at least, such is the outcome of my observation. We will assume that our baby wakes and begins to cry at two a.m.—*i.e.*, four hours after his supper (supposing he had been awake to take it). Before using the milk you have kept warm for him, you gently go and see if the mother is awake; if *not*, do not arouse her, but feed baby. Of course he might have required feeding at midnight, if he were asleep when the lady was being put right for the night, and you have the *breast-milk* ready for him then. If the mother is awake, the baby is put to the breast—two a.m.—and afterwards the patient must have some nourishment; the best is milk gruel, but sometimes a cup of tea with milk is preferred, but I do not recommend it, as it may hinder sleep. The infant must be put back to his cot (*no* walking about with him), and under favourable conditions he will slumber on till the morning. At six a.m. he *may* be ready for an early breakfast, and as his mother had hers *earlier* still, it may be quite ready for him; if so, it will about carry him on till nine or ten a.m., when our cycle is completed, and Nurse has had a fair amount of sleep during the night part of it.

By the little plans I have brought before you a Nurse can see how important it is in breast-feeding that the mother's meals should be served with the greatest *regularity*, and that they should *precede*, not *follow*, those of the baby—*i.e.*, times of suckling. An infant should not be put to an empty breast, nor when the mother is faint for want of food, nor every time he thinks proper to indulge in "cries," which are *not* invariably those of *hunger*. In well-managed and favourable cases of breast-feeding our baby grows like a

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flower. We can almost *see* him grow. Dyspeptic troubles are very slight, and we can cheerfully dispense with such dubious compounds as "gripe water" and soothing (?) syrup, at least during the comparatively short time that an Obstetric Nurse has the charge of her little patient; and I do not hesitate to aver that in my opinion a good Nurse makes a "good"—*i.e.*, healthy and happy, baby (subject to the maternal permission and co-operation, of course).

Before concluding the subject of breast-feeding, I must say a few words upon an important Nursing part of it—the lady's dress. In one of my early papers I pointed out to you how convenient in that matter was the *jacket* over the ordinary night-dress, to be worn with a long chemise; in cases where the lady nurses it is still more necessary—I would almost say indispensable for promoting the comfort of the patient. The chemise, also, should be different in shape to those usually worn by lying-in women; it should be as long as an ordinary night-dress, cut low back and front, so as to slip *easily* over and under the breasts during suckling; or tape can be run round so as to fasten the chemise over the chest afterwards, but it is not absolutely necessary. The sleeves must be short. The jacket night-dress should reach to just below the knees, and be fastened over the chest and down the front. It can be trimmed as much as may be desired, as it in no wise interferes with its usefulness for the purpose required. Mothers and Nurses who may have tried this attire will know and feel the comfort it is, not only in suckling, but for the breast care and treatment necessary at those times; it greatly aids all the manipulations required. For delicate women—and I think all women who are suckling are so—I consider a very light woollen vest, high-necked and short-sleeved (with the *front gores cut out*), most desirable; it entirely protects the chest during suckling from chill, and with the jacket night-gown as well, the protection is complete. Numbers of women "catch cold" when suckling from *not* keeping the chest well covered whilst the infant is at the breast.

Amongst the nobility (and the monied *parvenus* who ape them, and would, if the aforesaid stood on their heads) we have breast-feeding by a Wet Nurse—perhaps of all arrangements the most easy for an Obstetric Nurse—as the former can wait upon herself, and watch baby at night, thus giving Nurse a chance of getting a refreshing amount of sleep. But it must ever be

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