

### THE REARING OF CHILDREN.

WERE we to say all that mothers should know on this important subject, we should then be obliged to write a large book—much larger, indeed, than we can expect mothers to have time to read. We will, therefore, limit ourselves to one or two points which seem to us to deserve more attention than they usually receive.

Take, for instance, a baby four or five months old, who at once, and without any obvious reason, becomes peevish and restless. The first thing the mother does is to put it to the breast, but the child refuses the breast, and screams and moans unceasingly. In nine cases out of ten the peevishness and restlessness of the child are due to the fact that it suffers from wind in its bowels.

On inquiry the doctor finds out that the mother suffers from indigestion, and therefore he tells her that she must stop nursing the child for a while, and that she must try and get rid of her indigestion before being able to resume nursing without inconvenience to the child; but on calling again the doctor finds out that the mother thought it was too cruel to refuse the breast to the child, that she had never heard before that the mother's milk could do any harm to a child, and the consequence is that the child is either worse or no better.

To such a mother we would say: Go and buy of the chemist Zymine Peptonizing Powders, employing them according to the directions found on the label. Milk peptonized by means of these powders may be sweetened with Kepler Extract of Malt, sugar of milk, or pure loaf sugar, and a little fresh cream added. Pay any amount of attention to the cleansing of the feeding-bottle, which is to be thoroughly washed with hot water before and after use. The safest and most reliable bottle we know is the "Burroughs, Wellcome & Co.'s Patent Thermo-Safeguard Feeding Bottle," which contains a thermometer embedded in the glass that can be read with ease. This bottle is so simple in its construction that it may be easily kept sweet and clean. When the child is all right we may try the breast again.

Another very objectionable practice is to stuff up young children with biscuits, arrowroot, &c. For the first six months of their life children require nothing but milk, and to give them anything else is not kindness, but cruelty.

What shall we say of the enormous amount of cakes, buns, puddings, &c., which are never wanting in almost every household? What about the criminal habit of transforming the stomach of a child into a store of all those things? What, finally, of that other dangerous practice of accustoming children to have tea at every meal? If you sow thorns you cannot expect to reap roses, and if you rear your children in

this way, the fact will soon become apparent that you have done your very best to injure their health. An unwise mother has not the good sense and firmness to give her children the necessary amount of good food, but has the mistaken kindness to give them many other foods of a decidedly injurious character. It is a pity, indeed, that such a woman should ever have become a mother.

But a mother who knows that the most enjoyable thing for her is to see her children cheerful and strong, lively and healthy, will take good care that her children do not become the slaves of dyspepsia and biliousness in the early days of their life, and martyrs to toothache when they ought to have teeth in a perfectly sound condition.

### FEVER AND FEVERISH STATES.

NO feverish state is to be considered as beneath notice. Consumption first begins with a shade of increase in temperature, and the slightest lesion working harm to the body increases the body-heat. In children, the temperature darts up on the slightest provocation, and it is wise for every mother with young children to have a clinical thermometer in the house.

In times past, probably the greatest enemies of man were malarial fevers. Wherever there is decomposing vegetable matter—and where is there not this in great forests?—there malaria abounds. Close at hand, in many parts where fevers flourished, grew a tree the bark of which, if infused, could dispel the malarious disease. Not, however, it is believed, till about the middle of the seventeenth century was the civilized world cognizant of its virtues. Humboldt, in his *Memoirs on the Cinchona Forests*, states that the cinchona is unknown as a remedy to the Indians where it grows, and that these people adhere to the habits of their ancestors. "They have generally the most violent prejudices against it, considering it poisonous, and in the treatment of fever prefer the milder indigenous remedies." Markham and Spence confirm Humboldt's statements, the former remarking that the native Indian doctors do not use the bark, and that the Cascarilleos of Ecuador believe that their red bark is used solely for dyeing. The U.S. Dispensary says, "It is uncertain whether the Jesuit fathers received their knowledge from the Indians or, as Humboldt believes, discovered the virtues of the drug for themselves, having been led to make trial of it by its extreme bitterness."

Every one knows quinine, but every one does not know that it is insoluble, except in very large quantities of water. If a little acid be added to the water the quinine will dissolve, but it will then be most bitter, and, if taken in pills, may not be all absorbed, as the acid of the stomach is often absent in fever. Without doubt, much of the quinine that has been administered was not absorbed because insoluble. This insolubility renders ordinary quinine a most expensive drug, because it may not all be taken up by the system. The Soluble Quinine "Tabloids" are most economical and efficacious, as each grain of the drug dissolves as quickly as it comes in contact with ten drops of water.

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