

tracted, and rarely recovers its normal shape in later life. The abdomen is protuberant owing chiefly to the diaphragm pressing downward on the intestines and also to the enlargement of the liver and spleen. The lymphatic glands are enlarged, and may be felt quite plainly under the skin in the region of the groins and under the arm-pit. The ligaments are relaxed and the muscles are soft and flabby, which result in a late walking and in a loss of desire for any activity or exercise. The teeth are late in appearing, and although dentition is accomplished without much trouble, the teeth soon decay. If dentition is delayed beyond the tenth month, other rachitic symptoms should be watched for. There is always anæmia and loss of flesh, although in the early stages some children are remarkably fat, which condition is, alas, often mistaken for muscle development. The bowels are confined or act capriciously, and the stools consist of whitish, curdy matter, mixed with mucus, and of a most offensive smell. The child appears drowsy by day and restless at night, and is only happy when still and undisturbed.

The first thing to be aimed at is the supplying of the food deficiency of the past and this can only be done by a well regulated diet. A child who is nursed at the breast of a healthy, well-nourished mother never suffers from rachitis unless lactation is continued too long, and the weakened milk supply is not supplemented by other food, or unless the mother becomes pregnant again while suckling. Failing a proper supply of human milk, asses' milk stands next in point of digestibility and lightness, and if this cannot be obtained, cow's milk can be adapted to an infant's digestive powers by dilution with barley water or lime water, and by the addition of lactose or sugar of milk. Thus milk is the best food for all rachitic children, but it must be treated as described, or, in extreme cases, be humanised or peptonised, in order that it may be adapted to the feeble digestive powers of the patient. In this way there is an abundant supply of phosphate of lime and other mineral matters to bring about the perfect ossification of the bony parts. Nor is this all. Dr. Cheadle records conclusive proof that the disease arises mainly from a deficiency of animal proteids and of fats. Milk contains both these food substances, but Dr. Cheadle advises that milk be supplemented by raw meat juice prepared by squeezing beef steak in a lemon press, and also by fat in the form of cod liver oil and cream. The former must be given sparingly at first, and the stools must be closely observed so that any smell of the oil shall point to a

reduction of the quantity, as if evacuated unchanged it shows that more has been given than the body is capable of assimilating.

In order that the tone of the body may be braced up to deal with the food supplies, tonics are prescribed, but attention to hygiene will do much towards the same end. The daily bath should be given just before bed-time, and a gentle stroking down the muscles near the spine for a few minutes each day will do much to strengthen the back and to overcome the curvature induced by the disease. The body should be completely covered with woollen material, and the lower part of the night garment should be bag-like in form so that it cannot be kicked aside. The child should then be placed in a warm, dry bed, and be covered with one blanket in summer or two in winter. Owing to the profuse perspiration it is necessary to dry the pillow and bed-clothes by the fire each morning, exposing them to the air is not sufficient to dry them, and a child in this condition is extremely susceptible to catarrh. Sea or mountain air if of a dry, bracing character will prove of great benefit, and particularly if the little patient is taken frequently into the sunshine and fresh air. Owing to extreme susceptibility to colds and chills it is necessary that the child be well wrapped up and that the feet should be well warmed before starting out, and be well protected from cold while out. The clothing should be light and warm, and one item which must never be omitted is a deep belt of flannel worn round the abdomen. This not only protects from chill but gives support to the relaxed abdominal muscles, which are taxed severely by the pressure of the internal organs.

By degrees the various symptoms will give way before treatment, and although rachitic children never develop large frames, but are generally stunted and wasted, there is nothing to prevent a return to a fair amount of health and strength.

The great point is to guard against complications. Of these the chief are (1) *Scurvy*, which is induced by a long course of peptonised, pancreatised, or humanised milk, but which can be prevented or cured by the use of raw meat juice, orange or lemon juice sweetened, potato gruel, or with children over a year old an occasional meal of an easily-digested vegetable such as asparagus, cauliflower, or sea-kale passed through a sieve and mixed with gravy. (2) *Catarrh*, which should be treated at once by counter-irritants, such as a large poultice made of linseed-meal five parts, mustard one part, and by doses of ipecacuanha wine when ordered. (3) *Diarrhœa*, which

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