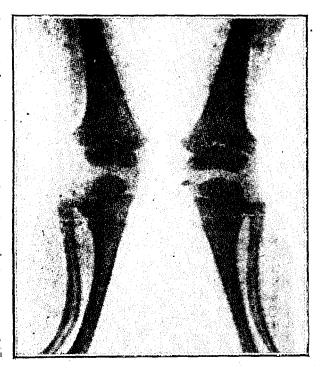
Its skin is weak and flaccid; it perspires easily, and one of the first and most significant signs is that the child's pillow is always wet from the excessive perspiration of its head. This, by the way, is a practical point which the nurse should never forget. Nothing denotes extreme weakness, either in life or approaching death, so obviously as the free perspiration from the head and face when the body is at perfect rest, and when therefore there is no physical exertion to produce such a symptom. Then the child is always restless—even when asleep. The softened swollen bones are so tender that he is



Fig, 12.—Skiagram showing how the bones of the thigh and leg are bent in Rickets.

constantly moving about—trying, unconsciously even, to find a comfortable position for his legs and back; and it is again very significant to observe that for this reason he is always kicking off his bed clothes to escape their pressure. When these symptoms are observed, the temperature should always be taken very carefully night and morning, and it will almost invariably be found to be higher than normal in the evening, and often lower in the morning. Now-a-days, these symptoms lead to the earlier detection of Rickets than was formerly the case, because the disease is most insidious in its first stage. Needless to say, the earlier it is recognised, the safer for the child's future health and recovery.

Associated closely with Rickets, are certain

complications. Indeed, it is often the occurrence of one of these which causes the child to receive medical treatment, and then its bone discase is first discovered. The chief of these troubles are diarrhœa and stomach derangement, due probably to the same weakness which produced the other symptoms already noted. for the same reason, these children are very subject to Bronchitis or inflammation of the lining membrane of the lung tubes, which again often goes on to inflammation of the lung tissue, or Pneumonia. This is an especially dangerous complication, because the weakness of the bones of the chest causes them easily to | end in or out with the violent efforts of coughing. And so, in chronic cases, we find that the child is "pigeon-breasted," perhaps remaining with that deformity for the rest of his life; or in acute cases, the ribs may be drawn in and so diminish the power of breathing that the child rapidly dies.

So far as the nursing of these cases is concerned, prevention, of course, is a hundred times better than cure. No child should be allowed to walk until its bones are strong enough to bear its weight. The infant must be fed on Nature's diet—Milk—and if then any signs of weakness of the bones present themselves—and there are children in which there is an hereditary tendency to this form of disease—the deficiency of the earthy salts must be compensated for by lime and phosphates being administered as a medicinal addition to the diet, and perhaps especially useful in these cases is Cod Liver Oil. With care and proper feeding, few children ought to be affected with "Rickets," and the occurrence of the disease should, therefore, be looked upon, in the great majority of instances, as a disgrace to the mother, or the child's nurse, or both.

(To be continued.)

League Mews.

The first of a course of lectures to the League of St. Bartholomew's Hospital Nurses on Hygiene and Public Health by Dr. Newman, Medical Officer of Health for Finsbury took place at the hospital last Friday. The subjects dealt with were Sanitation of buildings, Site and Soil, Drainage, etc., and the lecture, which was illustrated by a considerable number of admirable diagrams was listened to with great attention and evident interest by the many members of the League who were present. The subject is one with which it is most desirable that nurses should be acquainted, and the Bart's League is to be congratulated on having secured so competent and lucid a lecturer.

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