

results, and requires great care in the treatment, and a considerable period before it can be cured. Mucus is an indication of irritation affecting the intestinal mucous membrane. It is largely seen in older babies suffering from rickets.

As regards the colour of the dejections, there is a very important point, and that is, as long as there is any yellow in a motion, a small amount of green is not a serious indication. The yellow colour will disappear soon after the motion is passed, by exposing it to the air, so that it becomes green, and in those cases where you see a fair amount of yellow present, the pathological indications are not severe. We should always distinguish between the motion containing any yellow colour, and the typical grass green motion resembling chopped spinach. That is an altogether pathological feature, and should be differentiated from the distinctly yellow, or slightly green motion, in which we can notice a decided shade of yellow, even if it is hidden by the green colour to some extent.

Another characteristic of chronic intestinal disorder is that the motions are markedly offensive, owing to the putrefactive changes which occur in the intestine, leading to ammoniacal decomposition of the products. In these cases it must be remembered that the vital activities of the intestine have been largely replaced by processes altogether foreign to what goes on in the healthy baby. As a result of the disorder, the liver is no longer pouring out the secretions, the pancreas has largely ceased to act, the intestine itself is yielding but a poor supply of the juices it freely secretes in normal circumstances, and the food material of the intestines is simply a mass of material undergoing putrefactive changes, just as it might do outside the body. But the putrefactive changes are greatly intensified by the fact that the decomposing material is maintained inside the baby at a temperature of about 100 degs. Fahr. The result is that all kinds of pathological signs in the dejections are observed, while the absorption of the products produced by these decompositions poison the baby, and are largely responsible for the anæmia, pallor, and unhealthy appearance of the infant so suffering.

Obviously then, in such cases, the treatment at first must be to rid the baby of these products. I have admitted eleven babies this afternoon, and in most of these cases there is a prescription that a dose of castor oil should be administered immediately, the simple reason being it is no use putting good food into that mixture of decomposing material. In such a condition as that, however, it is hardly

likely that one dose of castor oil will put an end to the pathological processes, and so we administer some drug which will counteract as far as possible these putrefactive changes, and the only drugs which attain this end that I know of are the drugs that stimulate the liver. I dare say you will have heard of a very large number of intestinal antiseptics as being of very great value. None of them are in my experience of any value. But there is one drug of the very greatest value, and that is mercury in the form of Grey Powder or Calomel. It does not matter as a rule which you use, in some cases one is better than the other, but they are both extremely useful drugs, and as a preliminary treatment of intestinal disorder, nothing that I know of can replace them.

Where there is a great deal of colitis, due to inflammation of the intestinal mucous membrane, irrigation of the colon is very often of value, particularly where the infant suffers from continuous motions which are exhausting it. In such cases irrigation of the colon for one or two days will relieve the infant very quickly, and do more to secure its recovery than almost anything else.

Another difficulty in the treatment of these cases is that when the disorder has persisted for some time, with the deprivation of food consequent on the decomposition that is taking place, the intestine becomes very weak and atonic. It is a common feature in this hospital to find that after the baby has been in the hospital a few days, the Sister draws attention to the fact that the abdomen is distended, so much so that it is quite tense and tympanic, and the intestine is filled with air as the result of the paralysis of the muscular wall of the intestine. Again, in these cases, irrigation of the colon is very desirable, and we are accustomed to add to the water in these cases some turpentine to stimulate the contraction of the intestine.

As regards the dietetic treatment of these cases, it proceeds much on the lines I have laid down in my previous lecture on Atrophy, that is to say, the first thing is to begin with a dilute food, which is within the power of the baby. If that food agrees with the baby, does not give rise to disorder, then it is acting as a powerful stimulus on the liver and pancreas. They will secrete their juices, and when they are performing normal functions, then we shall be able to provide the baby with stronger and better food day by day. By attempting to press the food, we shall only defeat our own ends, because directly the amount of food reaches the limit beyond which the baby can-

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