

and extensibility of the ligaments, and weakness of the muscles, are also often present. When children arrive at school age disabilities due to malnutrition during the infant stage of life become apparent, resulting often in crippled childhood and impaired manhood and womanhood. In women especially the results are far-reaching, as a rachitic pelvis is a serious complication in pregnancy and labour.

THE MOUTH, THROAT, AND NOSE.

In older children other evidences of something wrong may also be found in connection with the mouth, throat, and nose, in mal-developed jaws, a vaulted palate, hypertrophied tonsils, and adenoids. The nature and importance of these conditions I cannot now explain fully.

I do not say that infantile malnutrition is the one and only cause for these abnormal states of the mouth and nose and pharynx, but I have no hesitation in affirming that it is often the initial error which starts the pernicious influences in their prejudicial action.

The story runs through many chapters which may thus be summarised—(1) Neglect of the mother to nourish the child. (2) Resort through ignorance to improper food. (3) Irritability of the child. This is the first sign of nature that something is wrong, but, frequently, instead of regarding it as a symptom calling for treatment and for the removal of the cause, the mother flies to artificial foods as the remedy, and so accentuates the evil with resulting persistence of malnutrition leading up to (4) Rickets. (5) As a result also of the irritability of the infant, the "comforter" comes into use. (6) The proper development of the bones forming the palate is further hindered by the use of this mechanical deranger, and we enter upon another chapter. Septic conditions develop in the irritated mouth; there is undue secretion of saliva; and interference with the respiratory function. (7) Other results are imperfect development of the jaws and teeth, and vaulting of the palate. (8) The inflammatory conditions of the mouth conduce to late development and early decay of the teeth. (9) The tonsils become hypertrophied, with the result that there is difficulty in swallowing and breathing; the vaulted mouth involves a diminished nasal cavity, and resultant mouth breathing, which tends to the development of adenoid growths. (10) Delay in the development of the teeth leads to the postponement of mastication, and the lengthened use of soft foods all favourable to the development of adenoids. (11) The mental as well as the physical development is delayed, and the child may be backward at school and blamed

at home. (12) Consequent upon the condition of the throat, the Eustachian tubes may be involved, leading to permanent deafness, handicapping the child throughout life. Thus from small beginnings there may arise such serious consequences as mental backwardness, ear trouble, bad teeth, and predisposition to phthisis. We are slow to see that the harvest which we are now reaping has had its origin in the seeds sown in infancy, and is the result of neglected feeding during that important period.

THE TEETH.

The teeth of many school children afford a very good illustration of the results of neglected infancy, and it is not too much to say that on the conditions of the teeth often depend the future good or ill health of the individual.

PRACTICAL CONSIDERATIONS.

The practical considerations connected with the defects of infantile malnutrition as found in school children are very serious. The nation is spending an enormous amount on education, and if we are to gain the full benefit of this outlay it must be by training healthy children to become vigorous and useful men and women.

It is only recently that steps have been taken for the recognition of the symptoms of infantile malnutrition, which I have described to you. It is now of supreme importance to take such means as will prevent their recurrence in another generation.

To further this end, the importance of adequate infantile nutrition should be placed before all thinking people.

It is a significant fact that in Norway, where the infant mortality is the lowest in the world, rickets is known as the "English disease." We must see to it in the future that girls are trained for the duties of motherhood, that men and women receive teaching concerning their responsibilities to their children, that a race of women is reared who shall be willing and capable to fulfil the first duty of motherhood, and that in some way adequate substitutes are provided, when the supply of the infant's natural food fails for any reason. The provision of adequate substitutes involves first of all a pure milk supply.

CONCLUSIONS.

At the commencement of our lecture I told you that we must ever view the infant as a means to an end—namely, a healthy child. But we must not stop there, for the child is the father of the man. And so in protecting and preserving infant life from all that would hamper and hinder the processes making for

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