

taining excess of casein is apt to produce constipation.

A normal baby should pass two or three motions daily — semi-liquid homogenous orange-coloured stools, without effort or straining.

In constipated infants the motions are dry, pale, usually with an excessive quantity of mucus. There is generally straining and blood-tinged mucus may accompany the motion.

What are the causes of constipation?

1. As I have already stated, errors in food or mistakes in feeding are accountable for the majority of cases.

2. In some instances it is a condition which seems to be hereditary.

3. Occasionally it is dependent on a congenital maldevelopment of the bowel.

4. Sometimes a local lesion such as a fissure or ulcer at the anus may be answerable for the condition.

5. Diminished tone or lack of muscular power in the walls of the lower bowel is the cause in many cases.

6. Diminution of or alteration in the intestinal and biliary secretions are also influential factors in many instances.

CUTANEOUS AILMENTS.

In the hygienic management of the infant there is need for much care and attention in the cleansing and preservation of the skin.

Adults are often advised not to be too thin-skinned, and the way some mothers neglect the cutaneous structures of their offspring would seem to indicate that the advice given to and taken by themselves is also adopted for their children.

Just as derangements in the digestive powers and nutritional processes of the infant are the direct outcome of the ignorance of the mother or nurse of the elementary and fundamental principles of physiology, so morbid states of the skin must often be viewed as manifestations of a lack of knowledge or a neglect of the practice of domestic and personal hygiene. Every woman responsible for the care of an infant should know the how and why of a rational care of the skin, nails, and hair, and be taught the means where the common forms of minor ailment of these structures may be presented, and should they occur be early recognised and effectively dealt with.

THE SCIENCE AND ART OF WEANING.

From what we have seen of the ailments arising from improper food and imperfect feeding and from what we know of the moral and economic as well as physiological and hygienic advantages of maternal nursing, every mother should be encouraged and assisted by every

means in our power to maintain a normal secretion for the nourishment of her offspring. If this were only possible the major part of the problem of the Protection and Preservation of Infancy would at once disappear.

But important as is the Hygiene of Maternal Nursing, it is very necessary that proper attention should be given to the science and art of weaning.

This, in by-gone days, was almost always an ordeal distressing for the infant and distasteful for the mother. Now, however, much of the discomfort formerly connected with weaning may be overcome by a little thoughtful care and methodical arrangement.

The normal period of nursing in this country would seem to be about a year. Many mothers, however, lose the power to secrete a physiological food long before this. The causation of this lamentable lack we must discuss in a later lecture. The healthy mother should arrange for a gradual and long drawn out process of weaning—if possible, for the last two or three months, say from about the ninth month of lactation. The advantages of this method over the old way of concentrating the agony of weaning into some three days or so, must be so evident as to require no demonstration.

[Dr. Kelynaek explained the method and advantages of prolonged weaning.]

The Irish Press on Registration of Nurses.

The Irish press in dealing with the question of the Nurses' Registration Bill, to which many columns have been devoted in the last few weeks, appears to be unanimous in its support of the demand of Irish nurses to be included in the scope of the Bill. We subjoin a few of the opinions expressed.

The *Freeman's Journal*, says:

"The Irish Nurses' Association, and the large Irish public friendly to the interests of Irish nurses, are wisely maintaining an attitude of watchfulness towards the Bill for the State Examination and Registration of Trained Nurses. . . . The promoters of the agitation can be congratulated on its rapid success. They immediately enlisted the sympathy of the medical profession and the public Boards of Ireland. Resolutions promising support came from the governors of hospitals and infirmaries in town and country, and the various Boards of Guardians were unanimous in condemning the imposition of disabilities on the nursing profession in Ireland. No second opinion was expressed on the subject. This measure of exclusion meant much more than leaving nurses in Ireland to attend to their own concerns. It struck at the profession in its prestige; it limited the field of

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