

CARE OF CHILDREN DURING DENTITION.

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THE following article has appeared in our valuable contemporary, *The Journal of Practical Nursing*: "A Physician being asked at what period during gestation the corset should be laid aside, replied, 'A hundred years before the child is born.' So, if in the care of children during dentition we could go back a hundred years, we might do away with many, if not all the ills to which they are especially subject at this period. Dentition is a natural process of growth and development of growth, and should be painless, or nearly so. A pure-blooded, vigorous child will cut the entire twenty milk teeth without any abnormal symptoms, save perhaps a slight elevation of temperature and some nightly restlessness. But we cannot go back; we must care for children as we find them; teach women to live physiologically, dress sensibly, take proper rest and exercise, and trust to the future. Any disease common to childhood may come during dentition, being absolutely independent of it.

"The diseases, however, most common during this period, are those affecting the brain and alimentary canal. Important changes in almost the entire organism take place at this period. The brain is developing more rapidly than at any other period of life. The digestive track is also undergoing great changes. The glands for the secretion of the various digestive fluids are maturing, and there is naturally a state of great excitability, which is easily increased by surrounding circumstances, and which is largely influenced by heredity. Certain children are born with the nervous system extraordinarily susceptible to slight impressions. The inherited diathesis is a great misfortune not easily overcome, but may be modified by judicious regimen.

"Regular feeding has much to do with the health of the child. Once in three hours through the day, and once in the night, is often enough, and when fed give a sufficient time for a full meal; then let the digestive organs have an opportunity for rest, and in this way avoid indigestion. The mother's milk, as a rule, is the most suitable food, as it contains precisely the substance essential to the growth and development of the tissues in a suitable form for assimilation. But unfortunately in many cases, through unfavourable conditions of various kinds, the mother's milk, instead of supplying the best possible nourishment, is lacking in important constituents, for want of which baby suffers; or the milk may be impaired in quality, so as to be really deleterious; or for physical reasons the mother may be unfit to nurse her child. In all such cases

a good Wet Nurse should be procured for the child if possible, but in a large majority of cases this seems out of the question, and we are obliged to find other food best agreeing with the child. In our selection of food we must remember that until a child is three months old the salivary glands secrete only a small amount of saliva, which after this increases slowly, and remains inconsiderable for some months. This is equally true of the pancreas, and its secretion. The digestion of starch does not take place in the stomach, but is first acted upon by the saliva, and passes through the stomach without further digestion, until it escapes into the small intestines, where it comes into contact with the secretion from the pancreas.

"It follows, then, that if we give the young infant starchy food, we give it material, for digestion of which its system has no adequate provision; and if given at all during dentition, it must be with great care and in small quantities. If diarrhoea occurs, it is best to withdraw it altogether after recovery. Corn-starch, potatoes, rice, tapioca, farina, and arrowroot, all contain large quantities of starch, and should be avoided. Oatmeal and barley contain a comparatively small quantity of starch, and these two furnish when combined with milk sufficient for nutrition. Barley is perhaps more digestible, and is to be preferred if there is no diarrhoea. Oatmeal is laxative and good in constipation. A good way to prepare the barley is, for a young child (for an older take a larger quantity), to boil a teaspoonful of powdered barley and a gill of water, with a little salt, for fifteen minutes, strain it and mix it with half as much scalded milk, and a lump of white sugar. Oatmeal may be prepared in the same way. If the mother's milk is not sufficient, this food may be used in connection with it, but it is not best to use cow's milk, unless prepared in some such way, while nursing a child.

"It is safe to say a majority of bottle-fed babies suffer from indigestion, and not a few that are nursed. So it behoves the mother or Nurse to be extremely careful as to the food she gives her child. Many children do well on cow's milk properly diluted, and with a little sugar added, but great care should be taken that it is not sour. Test the milk with a strip of blue litmus paper, which may be obtained at the drug store. In fact, this is a good test for any food. If the milk does not have a good cream, add a little to it. One or two grains of soda, or, better, a teaspoonful of lime-water to each pint of milk makes it more digestible. Condensed milk often suits very well, and is certainly better than unwholesome fresh milk; but while children fed upon it are large and fleshy, they are not particularly strong and vigorous, and seem to fall ill more easily. There are many ex-

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