

speedily as possible, placed in bed, and most carefully watched.

So far as the Nursing of such cases is concerned, from whatever cause the unconsciousness arises, the Nurse must first remember that loss of sensibility and motion implies loss of brain and nerve power over every function of the body, and that, therefore, the greatest care must always be taken to guard against the ill effects and uncleanness of the involuntary discharges which invariably occur. In the next place, if unconsciousness be prolonged, the patient, lying like a log in any position in which he is placed, the tendency to bed-sores is naturally increased, and every precaution for their avoidance must therefore be taken. Thirdly, the question of feeding arises; and here, of course, the Nurse will in every case receive definite instructions from the doctor. Owing to the patient's insensibility, it is generally most difficult, if not impossible, to feed him, even with fluids, by the mouth; because these may very probably flow down the unguarded and insensitive larynx into the lungs. And, in consequence of the relaxed condition of the rectal sphincter, it is equally difficult to obtain the retention of any nutritive enemata. In many instances, therefore, the only method available is to feed the patient in the manner described in a previous lecture—through a catheter passed from the nose into the œsophagus.

(To be continued.)

Baby's Bath.

THE following interesting instructions concerning the bathing of infants in our American contemporary, the *Archives of Pediatrics*:—"The bath is the most essential item in the hygiene of infancy. Its proper administration is so important to the well-being of the child that instruction regarding it should always be given by the medical attendant. The changes which take place at birth are so radical that the first bath should be given with great care. The child is suddenly transferred from an unvarying temperature of 100° F., where surface evaporation is impossible, to a varying temperature twenty to thirty degrees lower, where evaporation from surface and lungs is constant, and

where it must rely wholly upon heat generated within its own body. It is remarkable that such a change is tolerated as well as it is. We should certainly do nothing to reduce the vital forces, and should take every precaution for preserving the vital heat. The temperature of the water should be decidedly higher than that used subsequently. The first bathing should be done as rapidly as possible. The tub is not necessary, and, in the case of delicate children, it is unwise to use it.

The *vernix caseosa* is soluble in fat, which should be employed for its removal. An animal oil is best; lard removes it more readily than any other substance. After anointing thoroughly every portion of the body, especially folds and creases, the oil should be wiped away with a soft towel, a sponge with a little warm water and soap being used in places. On the following day, when the child has become more accustomed to its new surroundings, a more thorough bath may be given, but it is best not to use the tub until the cord has fallen off.

When the tub is first used, the period of immersion should be short. The Nurse should take the child upon the lap, where it is carefully soaped and sponged, care being taken to avoid draughts and undue exposure. It may then be dipped into the water, more for the purpose of rinsing than actual bathing. The duration of the bathing may be increased until the whole bath is given in the tub, this being determined by the strength of the child and its power to react.

A healthy child of ordinary vitality should be bathed daily until it is at least two years old. The bath should be given midway between meals, the late morning or forenoon being the most suitable time. In hot weather the child may also be sponged in the evening. Washing for purposes of cleanliness should be done as frequently as the occasion may arise.

Cold baths should never be given to an infant, and all attempts at "hardening" should be strictly forbidden. A cold bath accomplishes good only when the shock it produces to the cutaneous surface is followed by brisk reaction. Little children are very susceptible to cold; reaction is slow and imperfect. Hence, if the bath is too cold the child remains pinched and blue, and is restless and fretful. If such baths are frequently repeated, the child becomes continuously irritable and ceases to thrive. Very serious results may immediately follow excessive chilling of the surface. Too hot baths, on the other hand, should be avoided with equal care.

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