Special Symptoms of Diseases Deculiar to Children.*

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THE care of children, and the treatment of diseases peculiar to the child age, have not received from the majority of the medical profession the attention commensurate with their importance. In the child is the human family perpetuated, and both nurse and physician, as they administer to the little ones, largely determine the physical, mental, and even moral qualities of the future adults.

Their responsibility, therefore, is second only to those of the parents who gave the children their being and endowed them with

certain excellences and defects.

· They have no calling more imperative, and no duty more difficult, or exalting, than in combating the dreaded diseases which assail the helpless, innocent childhood. The adult patient is intelligently conscious of a depar-Can say, "I am sick." ture from health. Can apply domestic treatment to simple maladies. He can call a physician and assist him to a correct diagnosis, by describing his feeling. He can locate his pains, state their frequency, severity and duration. But not so the child. All that he can do is to cry, cough, and exhibit thosevisible symptoms which denote a physical derangement.

Somebody else must do for him what the adult can do for himself. His very helplessness makes the strongest and most pathetic appeal that we inform ourselves of his needs, and train to alertness our eye and ear in his defence. I say "train to alertness," for it is our duty to discover those apparently trifling symptoms which escape the non-professional observer, but which neglected may often terminate in serious and even fatal diseases. We may say of our patient it is "only a child." but in my humble opinion there is no occasion which makes a greater demand upon our sympathies and ability, nor has greater need of the vast and ever accumulating resources at our disposal, than when we minister as physician or nurse at the crib-side of the child. These remarks, I think, will sufficiently indicate the importance of our subject.

The scope of our paper will not permit an examination of all the symptoms in detail of children's diseases.

I shall, therefore, confine myself to those which I deem the most important and positive.

We begin with the distinctive signs which appear in the form of a rash on the skin.

First, Scarlet fever—which is the rash most dreaded—usually makes its first and sudden appearance upon the chest. It is a scarcely perceptible scarlet flush, or pin-point eruption, very closely resembling in colour and stippling the shell of a freshly boiled lobster, and is generally followed by scaling.

Measles is distinctly patchy and usually manifests itself on the forehead, after two or

three days of illness.

Simple erythema has no raised points, and disappears in a few days.

We will next consider the face, for by it we

can learn very much.

As a rule we can read the locality of the child's trouble by the expression of the face.

We divide it into three different parts. The upper third is modified in expression in affections of the brain, the middle third in diseases of the chest, and the lower in losions of the abdominal viscera.

First, the upper third from frowning indicates pain, and continuous contraction of the brow denotes pain in the head.

Strabismus is a sign of meningitis, as are irregular pupils. The fontanelles should be ossified as completely closed sometime between the fifteenth or twentieth month; if much delayed, it indicates a general malnutrition.

Either rickets or hydrocephalus or sinking of the fontanelles is a sign of systematic exhaustion.

Bulging is a symptom of hydrocephalus (or dropsy of the brain).

Squinting in acute illness is a grave prognostic; it may occur from reflex irritation, or convulsions.

The convulsions may cease, and the squint remain for awhile, or even permanently.

When the eyelids twitch, look out for convulsions.

Strabismus occurs in tubercular meningitis; it is an almost fatal sign.

The contracted pupil is caused either by acute congestion of the brain, or by opium

Puffiness of the eyelids indicates dropsy, due to kidney disease.

^{*} Delivered to the School for Nurses of the Binghamton City Hospital, U.S.A.

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