

Royal Hospital for Sick Children at Glasgow, when thanks were expressed for Miss Pater-son's munificent gift of a country branch, very great stress was laid on this point by Professor Samson Gemmell, who pointed out that the extension was not to be a con-valescent home; but a branch of the ordinary hospital. The Professor remarked that the directors and staff were fully convinced that this was an advance in the right direction. It embodied an ideal which had been in their minds for some time. The branch would be utilised for the treatment of more chronic cases which demanded constant attention and fresh air and light. The work, however would not trench on that of the convalescent homes, while at the same time it would relieve the city hospital. Some of them thought that perhaps the country branch might be the nucleus of the hospital of the future. It was gradually being recognised that hospitals should be removed from big cities. This was specially true of childrens' hospitals, and it was possible that the entire hospital accommodation of Glasgow would some day be revolutionised in this way.

CLEAR AWAY THE SLUMS.

It was a magnificent gathering with which the Progressive Party opened its campaign at St. James's Hall on Monday evening, and Mr. McKinnon Wood evidently voiced the opinions of the audience in his remarks on the Housing of the Poor. He said:—"The gravest and blackest problem we have to face is the housing problem. In our towns there is growing up a vast population physically and morally degraded. Children are growing up in our cities so depressed by their circumstances that it seems beyond the power of our educational machinery to raise them. There are circum-stances in our cities in which modesty seems impossible, where there is a craving for drink and for coarse excitement which is making our streets a menace. In face of this shall we listen to the Moderate cry that we shall interfere with private enterprise and private interests? We must attack this evil with courage, earnestness, and faith from every side. We must clear away the slums. We must house every person we displace. We must build dwellings for more than the persons we displace, as we are doing already. We must provide transit cheap and quick to these dwellings. We must do our best to support fair wages in London."

The Nursing of Children's Diseases.

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LECTURE I.

ARTIFICIAL FEEDING.

(Continued from page 104.)

The weight of the child should be taken at regular intervals, because this is the best indication how it is thriving. But if the child is flabby, even though the weight is good, there is something wrong, and the cause should be carefully inquired into. When the child reaches the age of twelve months, and is strong and healthy, the bottle may be gradually left off, and though milk should still be the staple food, other articles may be added to the diet. For instance, breakfast may consist of bread and milk well soaked, or oatmeal porridge, made with milk. Dinner may consist of bread crumbs and gravy, or a lightly boiled egg, with bread and butter; for tea, bread and milk may be given.

After eighteen months, small quantities of underdone meat, such as mutton chop well minced and mixed with bread crumbs, or well mashed potatoes, may be the mid-day meal; or boiled fowl prepared in the same way, or small quantities of boiled fish such as whiting or sole all of which of course must be very carefully freed from bones. This may be followed by a milk pudding of well-cooked rice, sago, tapioca, ground rice etc. and carefully stewed fruit. The child should always be instructed to masticate its food thoroughly and the nurse should watch that this is done. The want of proper mastication both causes present indigestion and lays the foundation for digestive troubles later on.

Children should never be given biscuits and sweets between meals as the stomach requires rest and is sure to become deranged sooner or later if this is not afforded to it.

It may be mentioned here that the disease known as Scurvy is not very uncommon among children fed exclusively upon dessicated or sterilized foods. The symptoms of this disease will be mentioned later; but as a preventative measure it is necessary not to continue prepared proprietary foods for too long as an exclusive dietary and I am in the habit of suggesting that two or three times a week a child who is

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