

## Medical Matters.

### INFANT FEEDING.



Dr. Robert Hutchison, lecturing last week at the Institute of Hygiene, referred to the great variety of methods of Infant Feeding suggested by various people, but confined his remarks chiefly to the methods which he himself found, after a considerable number of years of much experience at the Children's Hospital, etc., gave perfectly good results with the majority of infants.

Children, said the lecturer, should be fed by the natural method, which, fortunately, gave the least trouble, but there were one or two points he laid special stress upon. First, the importance of regular feeding; second, the importance of weighing; and third, discouraging mothers being worried about sickness. He dealt also with the importance of weaning the child at the proper time, and condemned the popular notion that the appearance of teeth is a guide to discontinue natural feeding. The proper time for weaning is, generally speaking, the tenth month, while the frequent cause of rickets is too prolonged breast feeding.

In dealing with artificial feeding, the lecturer impressed upon his hearers the importance of proceeding upon a definite plan. He said that it was foolish to resort to the common practice of using one food after another in the hope of alighting upon the correct one, as thereby the progress of the child might be seriously impeded. Cow's milk is, of course, the best substitute for human milk when it can be digested. It has, however, one great disadvantage, which is that it clots. This can be best remedied by diluting it with water in equal parts. The question arises as to whether water, or barley water should be used. Dr. Hutchison considers pure water is preferable, as barley water contains starch and this should not figure in an infant's diet. Should the infant not thrive on this half-and-half mixture, citrate of soda (a harmless vegetable salt) may then be added to the milk in proportion of one grain to every ounce of milk. Good condensed milk, rightly used, is capable of being of immense service, notwithstanding popular prejudice. By a good condensed milk he understands one from which the cream has not been extracted and which contains a proportion of sugar, one tea-spoonful should be added to six table-spoonfuls of water. He here added the warning that its use should not be continued, generally speaking,

beyond the age of four months. Dessicated milk, he believed, would have a great future. With regard to peptonised milk, which might be regarded as the last resource, he said that a child who required such food should certainly be under medical care. If, after the above methods of feeding have all been tried, the child does not progress, it may safely be concluded that it cannot digest cow's milk in any form.

He regarded the screw-top feeding bottle, as well as the old-fashioned tube bottle as quite unworthy of approbation, and the simplest bottle as certainly the best. He touched upon the importance of the hole being large enough, as cases had come under his notice of babies being exhausted by strenuous sucking. In order to determine this, he suggested that the bottle should be turned upside down, and, if the hole was of the correct size, the milk would fall at the rate of about one drop per second. Children are rarely met with who cannot digest milk foods in some form, but there are such infants, and then we have to resort to patent foods. With regard to weaning from the bottle, he said the same rule applied as for weaning from the breast, viz., at the tenth month. He concluded by once more urging the necessity for marking out a definite plan of campaign and never, under any circumstances departing from it until satisfied that the child was not making progress.

### THE OUTBREAK OF CEREBRO-SPINAL MENINGITIS.

Professor Osler, lecturing last week to Edinburgh University Medical Students, stated that in New York within the last two years there had been nearly 4,000 cases, some 3,000 of which proved fatal. The disease was not pandemic, and one of its most remarkable peculiarities was its occurrence in widely separated areas. Its mortality as an acute infection raised it to the highest point, almost equalling plague. No disease was known which struck a patient with such lightning rapidity. It had probably the same degree of infectiousness as pneumonia in home epidemics. There had been a number of instances which demonstrated clearly that the disease might be communicated from one person to another. There was no widespread epidemic in Britain and no reason why there should be. It was not likely that the disease would prevail longer than the winter season. As to treatment, frequent hot tubs had been found to be a great comfort to the patient, and a hopeful feature was that a serum had been prepared and monkeys had been rendered immune.

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