

Under no circumstances whatever should the nurse give a nasal douche after any intra-nasal operation, without the surgeon's special instructions to do so.

Hæmorrhage may be checked by cold sponging, especially of the forehead. In serious hæmorrhage, the general treatment is as for serious bleeding elsewhere, but it may be necessary to plug the nose also. This is done by means of long strips of ribbon gauze, soaked in adrenalin, and passed well backwards into the nose with long nasal forceps, remembering that they are to be carried in straight backwards.

We shall continue the consideration of nasal operations in the next lecture.

Gastric and Intestinal Disorder.

A Lecture Delivered at the Infants' Hospital, Vincent Square, S.W.

BY RALPH VINCENT, M.D., M.R.C.P.,
Senior Physician to the Hospital.

This afternoon I propose to make a cursory survey of the conditions of gastric and intestinal disorder, as they are met with in young infants. That covers a very wide field, the peculiar disorder being determined largely by the nature of the disease affecting the infant. As it is very important that we should realise precisely the conditions affecting the infant, we should note with particular attention the precise features of disorder so that we may appreciate the meaning attached to particular symptoms.

Let me draw your attention first to the very different functions performed in relation to digestion by the stomach and intestine. The stomach is very largely a safety valve. It does not take part in the essential processes of digestion; it cannot, for instance, absorb water at all, and it is of small size compared with the length and bulk of the intestine. What the stomach does is to prepare the food; certain preliminary processes take place which are of great importance, so that when it comes to the intestine the food is in a condition in which the intestine can most perfectly deal with it. It is a regulator. At the end of the stomach and the beginning of the intestine the pylorus is situated. That is surrounded by a powerful muscle which is very frequently in a state of contraction, and only expands at intervals, thus admitting the passage of food to the intestine at one time, and preventing it at another. When a baby is fed with food of a highly irritant, perhaps poisonous character, vomiting frequently ensues. The vomiting is

a sign that the food is not healthy, and if it were passed into the intestine the infant might be killed. It is the fact that the stomach is capable of rejecting the injurious materials which saves it from further injury. Vomiting is, then, one of the characteristic features of gastric disorder. It is well, therefore, for me to draw your attention to the characteristics of vomiting as we commonly see it in babies.

Firstly, we see it occurring very shortly after feeding; within a few minutes the baby returns a slight amount. If it is nothing more than that, and it is not a very frequent condition, we may look upon that as nothing more than an adaptation by nature to meet the exact conditions. The infant has taken rather more food than it can deal with, and the stomach returns the excess. A small vomit, very soon after food, with the infant well in other respects, is not as a rule a very important sign of disorder, and we may frequently disregard it, other things being equal. On the other hand, it is not a good sign if it is at all marked and at all constant; it means at least that the stomach is being systematically distended, that the infant receiving more food than the stomach can accommodate, is compelled to reject it. In such circumstances distention of the stomach is likely to occur, and while an occasional distention may not be harmful if in a moderate degree, still if that distention is chronic very great harm is likely to be done.

The next kind of vomiting to which I ask your attention is one occurring at about half an hour to one hour after feeding. That should give rise to considerably more anxiety. The fact that vomiting has occurred at the time of feeding shows that the amount, and not the material, is troubling the infant, but vomiting at the end of half an hour to an hour indicates that digestion having proceeded for some time, the results of that digestion are injurious to the infant, causing irritation, and therefore indicating at once that either the stomach or the food is wrong. The characteristic symptoms of this condition are that the baby is suffering from some discomfort, sometimes a great deal of pain, and relief is obtained as soon as the vomiting occurs. The varieties of this vomiting are many. In the case of improper feeding, for instance, where there is a large amount of cane sugar or maltose, as in patent foods, fermentative changes are taking place in the stomach, giving rise to products of a highly irritant character, so the baby is compelled to vomit. Very often such cases are attended by periodical skin eruptions, due to the absorption of the bodies produced by the

[previous page](#)

[next page](#)