

son and traits of character. The seeds of these elements are implanted at the time of *conception*.

Then comes the *embryonic period* (organogenesis) lasting for about two months, followed by the *foetal period* lasting normally till the end of the ninth month after conception, during which the growth of the new life is taking place *in utero*. Then comes the *birth* of the infant, a most important episode in its development, after which it begins an independent existence. The first month following birth, during which the adaptation of the infant to its extra-uterine environment is proceeding, is usually

which cannot be exaggerated. And for the immature weanling this period is all important. I wish you, therefore, to concentrate your attention particularly on the study and care of the infant during its neonatal days.

THE CHARACTERISTICS OF IMMATURE WEANLINGS.

As I have frequently pointed out to you the normal infant should be born having a weight not far short of 8 lbs., a length of nearly 21 inches, and possessing vigorous powers by which it is enabled readily to adapt and to adjust itself to its new environment and avail itself of its new means of sustenance by the proper use of its respiratory and digestive organs.

Now the *immature weanling*, with which we are alone concerned to-day, starts on its precarious journey of life generally lacking in one or more or indeed sometimes all of these desiderata.

The immature infant is commonly underweight, frequently undersized, generally slow to adjust itself to its new conditions of environment, lacking in powers of adaptation, feeble and fickle in its means for procuring and benefiting by food, and oftentimes manifesting restricted respiratory functions.

And accompanying these indications of immaturity, there are often other anatomical and physiological characters, similar to or practically identical with those I described to you last week when describing the features of prematurity.

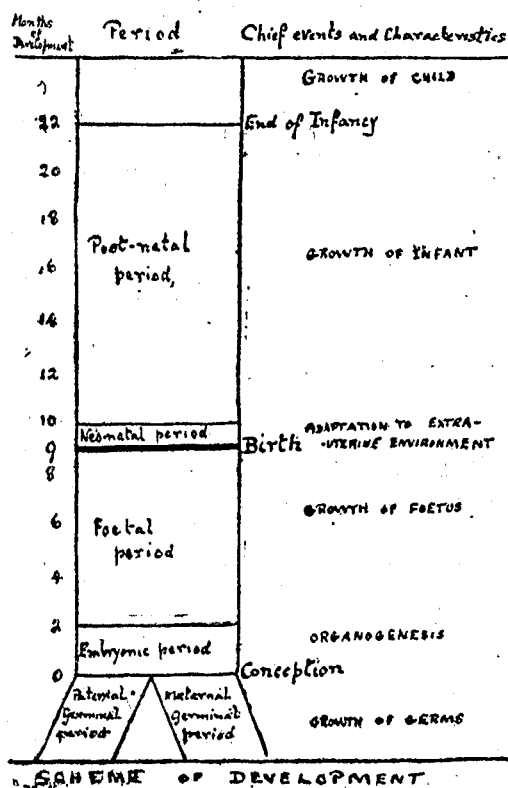
Indeed, the immature infant, although born nominally at full time, is actually imperfect in its fulfilment, and it would sometimes seem as though there had been an arrest or delay in its proper ante-natal development.

THE CAUSATION OF IMMATURETY.

When we turn to a discussion of the causation of immaturity we are at once met with difficulties which seem to be almost insuperable. And yet if we would discover rational means for preventing the propagation of the immature it is essential that earnest endeavour should be made to analyse all the possible influences which may in any way make for the production of this class of weanlings.

A glance at our scheme will suggest several possibilities.

1. The paternal germ may be lacking in vitality.
2. The maternal germ may be deficient in vigour.
3. Influences may derange development during the embryonic period.
4. Agencies may hinder and hamper proper growth during the so-called foetal period.



termed the *neo-natal period*. From the tenth to the twenty-second month is the *post-natal period*, in which rapid growth of the infant is going on. At the twenty-second month infancy ends, and childhood begins.

THE NEO-NATAL PERIOD.

In our study of the immature child, you will see at once that it is all important to recognise the influence of what is best spoken of as the *neo-natal period*, the period of the newly-born. Then is the critical time of adaptation and adjustment. The transition from a dependent, protected, intra-uterine existence to a more or less independent and often unprotected, extra-uterine life, is a change, the importance of

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