

Medical Matters.

DEFECTIVE NIPPLES.

Dr. H. B. Billups contributes an interesting note on the above subject to the *British Medical Journal*. He writes, in part:—Very much nowadays is written about excessive infantile mortality, and one of the chief causes alleged is defective artificial feeding. The reasons for the prevalence of artificial feeding have been frequently discussed, but there is one reason on which sufficient stress is not laid—defects in the nipples of nursing mothers. I have seen a number of mothers who, although they had plenty of milk in their breasts, have yet, on this account, been unable to nurse their babies.

The defective nipples present a variety of appearances. In most cases the breasts and areolæ are normal, but the nipple is abnormal. There may be an entire absence of any projecting tissue, and it may be replaced by a crack-like depression in the centre of the nipple, although there is some projection of the nipple beyond the surface of the areola. Sometimes the nipple projects somewhat in one part and is retracted in another.

Where the defect altogether prevents suckling the disadvantage to the baby is obvious, and though in many cases it can eventually obtain milk from one breast in sufficient quantity, there is generally a defective supply at first at any rate. Further, as the nipple does not project properly the normal milking action which comes into play with a well-formed nipple is impossible, and it is only by taking a large grasp of breast tissue and exerting considerably more energy than usual that the baby can get the milk. There is also much difficulty in exerting proper suction, and much air may be drawn into the baby's stomach.

The retracted nipple is very much more difficult to keep clean and free from external infection than a normal nipple, and it would be interesting to know the proportion of cases of diseases of the breast, such as mastitis, abscess, and even cancer, preceded by a retracted nipple.

The statement as to the effect of the pressure of tight corsets on the nipples seems to be one of those theories which pass from textbook to textbook without criticism or verification. Though the condition is common, it is not so common as would be expected if it were due to such a widely prevailing custom as the wearing of tight corsets.

That corsets have little or nothing to do with the matter is indicated by the condition of the breasts themselves.

We have therefore to seek for another cause, and I think it is easily found. In various parts of the country where I have worked I have found that it is the custom of the country midwives of the old-fashioned kind to pinch and squeeze the nipples of newborn babies. It is done every day when the baby is washed and is considered most important, and it is continued for weeks; I remember a case where matter was being daily squeezed from the breasts of a four weeks old infant.

I have had some difficulty in ascertaining the reasons for this custom, as the old ladies are very reticent, but there would appear to be two distinct ideas. One is the removal of milk from the breasts, and the women who have this idea squeeze the breasts of both male and female infants. The other is that unless squeezed so as "to break the nipple-strings," female children will have no nipples when they grow up, and by those who hold this opinion the practice is confined to female babies. In the few cases in which I have observed this custom critically I have noticed that the pinching is done in no gentle manner; no doubt considerable damage is done to the rudimentary tissues of the nipple and galactophorus ducts. It is probable that scar tissue is formed in the neighbourhood of the nipple; as time goes on this contracts, and as puberty approaches and the breasts begin to develop, the strands of abnormal connective tissue cause retraction of the nipple more or less complete according to the extent of the scar tissue.

It is highly probable that the injury caused to the galactophorus ducts and the pressure of scar tissue upon them produce the obstructions of these ducts, giving rise to the frequently non-suppurative mastitis so common in primiparae. I would warn medical men not to judge too hastily that this custom is not practised in their districts, because the old midwives know medical practitioners disapprove of their methods, and therefore the babies' breasts are sometimes pinched surreptitiously.

To sum the matter up, I conclude that the pressure of corsets does not cause these defective nipples, nor is it generally a congenital condition, but that it is probably due to manipulations by ignorant midwives soon after birth. This being so, it is the duty of doctors and nurses alike to teach the women the danger of pinching the breasts of infants, and to see that it is not done. It would be interesting if practitioners would collect evidence concerning the infancy of the mothers whom they attend; in the last I had I found no difficulty in finding out from the patient's mother that the breasts had been squeezed in infancy.

[previous page](#)

[next page](#)