

The Midwife.

The Prevention of Infantile Mortality.

Dr. H. Lowenburg, in a lecture delivered before the South-East Branch of the Philadelphia County Medical Association, and published in the *Dietetic and Hygienic Gazette*, says in connection with the problem of infant mortality, and the physician's responsibility in preventing it, that his responsibility antedates the birth of the child. It often has to do with its parents, if not its parents' parents. He supports the dictum of an eminent neurologist that "it pays to come of good stock," and thinks that there should be less sentiment and more practical sense in the matter of mating, that the State should control marriages, and should withhold its license until both parties present a clean bill of health, as certified to by a competent medical attendant. The purpose of marriage is, he says, to increase and multiply not tuberculosis, not syphilis, not dwarfs, not criminals, not the insane, but robust, healthy, disease free men and women, and in order to accomplish this we must have healthy infants, and to have healthy infants we must have healthy parents.

With the birth of the child the physician's fight against disease and death begins with the proper care of the umbilical cord and the eyes. It may be worth our while to consider for a moment the most frequent causes of death as they are operative in infancy and childhood. Ten per cent. of all infants born succumb during the first month of their existence from causes varying from general debility, pneumonia and diarrhoea to the various congenital deformities and malformations of the internal organs. According to Holt, one-fourth of all deaths occurs during the first year and one-third during the first two years. The first two years constitute the most dangerous period of existence. During the first year the vast majority of deaths amongst both the rich and the poor are due to gastro-intestinal diseases and marasmus, which are dependent directly upon dietetic mistakes or infections produced by food. Next follow the acute diseases of the respiratory tract and the acute infectious diseases, of which pertussis is the most fatal, with measles following as a close second, though it is comparatively rare at this age. Tuberculosis is not a frequent cause of death during this period. During the second year

gastro-intestinal and pulmonary diseases still head the list, followed by the acute infectious diseases, especially measles, diphtheria, and whooping cough. General tuberculosis and tubercular meningitis occur more commonly during this time. Those children who suffer from rickets, itself a disease of malnutrition, succumb rapidly to the acute infections. From the second to the fifth year the majority of deaths are due to the infectious diseases, especially diphtheria and scarlet fever. Tuberculosis occurs not infrequently during this period.

Contemplating these statements with reference to mortality, we as physicians can come to but one conclusion as to in which direction our duty lies and as to what are the means at our command to remedy the condition. Proper nutriment and the prevention of infection constitute our only prophylaxis. Theoretically it should be an easy matter to secure both, but practically it is decidedly difficult, as will be seen as we proceed. Proper nutriment means maternal milk during the entire first year, and, this failing, properly adapted clean cow's milk. Briefly, it may be stated without fear of contradiction that if every infant were breast-fed infant mortality would at once be reduced 50 per cent. Therefore our responsibility is plain. We must do everything within our power to conserve the maternal milk supply. Before delivery, at the very beginning of conception, the medical attendant must inculcate within the mother a keen desire to nurse her young. She must be taught to look upon this act as a privileged joy to be sought, not a burden to be shunned.

IGNORANCE, SUPERSTITION, AND FILTH.

Dr. Lowenburg points out that the greatest enemies to the prevention of infantile mortality are ignorance, superstition, and filth. He advocates the formation of physician's clubs, to which the poor should be specially invited. The physician should teach that poverty is no excuse for filth, and the advantages of household and personal cleanliness. In their true etymologic sense the majority of poor foreigners suffer from hydrophobia and aerophobia—the fear of water and of air. Northrop's description of how to kill a baby with pneumonia well illustrates this. How often are we, who do hospital and dispensary work among the poor, asked whether it will hurt to bathe the baby, when the poor, suffering youngster is covered with filth and has a crust of inspissated epithelium upon its pate

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