

# The Midwife.

## NURSING IN INFANCY AND CHILDHOOD—

### DEVELOPMENT AND CARE OF THE NORMAL BABY IN ITS FIRST YEAR.\*

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In order to care for sick babies intelligently, it is necessary for the nurse to know something about the development of the normal child. At birth the average boy weighs  $7\frac{1}{2}$  pounds; the average girl 7 pounds. At the end of the first year the boy will weigh  $20\frac{1}{2}$  pounds and the girl  $19\frac{1}{2}$  pounds. At birth the average boy is 20.6 inches long; the average girl, 20.5 inches. At the end of the first year the boy is 29 inches; the average girl, 27.7 inches long.

#### FUNCTIONS.

*The Voice.*—During the first year the infant uses its voice merely to express discomforts and desires. At about twelve months it begins to enunciate single words, and in the middle or toward the end of the second year learns to form short sentences. As the voice is almost the sole means of expressing itself, a baby cries for many reasons. It cries:

1. For exercise—crying is the common method of expanding its lungs.
2. Because it is hungry.
3. Because it is thirsty—babies need water, and often water will satisfy them when an unthinking person would feed them.
4. Because it is wet or cold.
5. Because it is sick.
6. To express discomfort from any source, whether from too tight clothes, pins, &c.

*Mental Expressions.*—A baby seldom smiles before the fifth or sixth week. It does not recognise objects before the sixth or eighth week. Touch, taste, and smell apparently are more or less developed at birth.

*Lachrymal Glands.*—Babies usually shed tears when three or four months old. Tears are suppressed when an infant is profoundly affected by disease, and a return of tears is an indication for a favourable prognosis.

*Teeth.*—There are twenty teeth in the first set and thirty-two in the second. The teeth of the first set appear in the following order:

- 6 to 8 months, 2 middle lower incisors.
- 8 to 10 months, 4 upper incisors.
- 12 to 14 months, 2 lateral lower incisors.
- 4 first molars.
- 18 to 20 months, 4 canines.
- 28 to 32 months, 4 second molars.

\* From *The Modern Hospital*, U.S.A.

The symptoms of teething are temperature, distaste for food, drooling, and gastrointestinal disturbances. The ingenuity of the nurse is sometimes taxed to soothe a teething baby. A ring of hard rubber or ivory, or an old-fashioned wooden clothes pin, is easily kept clean and affords something hard on which to bite. When the teeth are very near the surface, they may often be rubbed through with a rough towel.

*Sweat Glands.*—The sweat glands usually become active during the third to fifth week.

*Saliva.*—The normal flow of saliva is much diminished during the first three or four months.

*Urine.*—Kidney functions begin early in fetal life, and the bladder is often found full at birth. The amount passed during infancy is relatively greater than that passed during adult life. An excess of uric acid stains the napkins red.

*Intestinal Discharges.*—Meconium is found during the first three or four days to the end of the first week; then the movements gradually change from a dark green to a golden yellow when on breast milk. Normally there are two to four dejections a day. Meconium is sterile at birth, but infection quickly takes place through the mouth and rectum.

The normal stool in a breast-fed baby is a soft, smooth, golden yellow. The stool of the bottle-fed baby will depend entirely on the composition of the milk it is receiving. A milk too high in proteids will cause a stool with large, hard curds; too high in fat, small, soft curds, which when smoothed out have a greasy, soapy appearance and a sour odour. Stools may contain mucus, pus, and blood. The green colour which sometimes appears is due to fermentation.

*Intertrigo*—(*Irritation of the Buttocks*).—This is caused by too frequent or too irritating stools, or by wet diapers. When caused by the latter, it is a nursing problem entirely, as relief of the condition demands that the baby be kept dry and that the diapers be changed as soon as wet or soiled. Soothing powders, corn starch, talc, &c., are often helpful as adjuncts to dry napkins.

Successful feeding of a baby is partly dependent on the nurse. A baby should be fed slowly, twenty minutes to a feeding. It should be fed regularly, at definite intervals, and, if on the bottle, stated amounts. The bottle should always be held, not propped against a towel and the infant left to its own resources. The milk should be heated to 100 deg. F., and should fill the neck of the bottle, so that the infant will not get a mixture of milk and air.

Vomiting in the breast- or bottle-fed may be due to a variety of causes. Overfeeding quantitatively, too rapid feeding, overfeeding qualitatively, and moving about after feeding all tend to induce vomiting. Of the anatomical deformities which induce vomiting, stricture of the

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