

OUR PRIZE COMPETITION.

STATE BRIEFLY WHAT YOU KNOW OF THE SYMPTOMS AND TREATMENT OF THRUSH, SNUFFLES, AND CONVULSIONS IN THE NEWLY BORN.

We have pleasure in awarding the prize this week to Mrs. M. E. E. Farthing, Wem Poor Law Institution, Wem, Salop.

PRIZE PAPER.

1. (a) *Thrush*.—In this disease small white patches appear on the mucous membrane of the cheeks, inner part of the lips, and the tongue. If untreated the spots unite, and form a kind of false membrane, which may extend into the back of the throat and oesophagus. Green diarrhoea may accompany this condition, and consequently excoriation of the skin around the anus. It is directly due to a fungus, the "odidium albicans," gaining access to the mouth and implanting itself in the mucous membrane. This fungus is found in impure milk, and may be caused by decomposed milk on the mother's nipples, or the teat of a dirty bottle, if the baby is bottle-fed.

(b) *Preventive treatment* of thrush consists in washing the mother's nipples before and after feeds; also the infant's mouth out. If bottle-fed, see there are two bottles—plain boat-shaped—and that the teats will turn inside out for cleansing; always boil the bottles for ten minutes after each feed, and leave soaking in cold water until required again. Never allow baby to have a dummy teat.

(c) *Treatment*.—If you have not had the case from birth to be able to prevent the trouble with regard to the mother's nipples, infant's mouth, bottles, and dummy, use the same precautions as above. Well paint all the inside of mouth and tongue with glycerine and borax, and wash out with warm water and borax.

2. *Snuffles* are generally associated with syphilis in the infant. The child finds great difficulty in breathing through the nose, as the passages become blocked up with discharge, which runs down the upper lip and causes excoriation of the skin. It makes it very difficult for the infant to suck properly. The doctor's attention must be called to the child, and his orders must be strictly carried out.

3. (a) *Convulsions*.—Convulsive attacks are by no means uncommon in early infancy. They should be regarded as a symptom of some disease rather than a disease in themselves. The brain, being more irritable in early infancy than later, is the reason they occur so frequently at this period of the child's life.

(b) The causes of convulsions may be divided into three principal classes, viz. :—

(1) The various forms of brain diseases, such as meningitis, tumours, and embolus.

(2) The different forms of nerve irritation, such as severe injuries, prolonged retention of urine, presence of undigested food in the intestinal tract, sudden application of extreme cold to the body, and, later, dentition.

(3) The various factors which may cause auto-intoxication—i.e., poisoning of the infant by poisons found in the child's own body. The most important of these factors, and by far the most common cause of convulsions, is the decomposition of food in the intestines. Also the failure of the kidneys to secrete sufficient urine, and anything which impedes respiration, and so leads to the retention of the different poisons which normal respiration removes from the body.

(c) *Symptoms*.—The muscles of the face and eyes twitch, the body stiffens, the fists are clenched, with slight frothing of the mouth. Respirations, feeble and shallow; heart-beats feeble; appearance, pallid or livid.

Only one convulsion may appear, or a succession. Death sometimes occurs as the result of one single attack, but is usually due to heart failure and weakness from repeated attacks;

(d) *Treatment*.—Call in medical aid. In the meantime place the child in a hot bath (100° F.), the nurse holding it comfortably on the left arm to support back and head. Apply a cold pad to the head, so as to lessen the congestion of the brain. After five minutes in the bath, quickly dry the child with a warm towel, the nurse sitting before the fire with a warm blanket on her knee. Next wrap it in warm woollen garments, and keep it perfectly quiet. If the action of the heart is weak, administer a few drops of brandy and water. The child will be less likely to recover if the convulsions are due to injury of the brain.

HONOURABLE MENTION.

The following competitors receive honourable mention :—Miss Gladys Tatham, Miss J. G. Gilchrist, Miss Dorothy Humphreys, Miss S. Simpson, Miss E. Braham, Miss Dora Vine, Miss I. James, Miss B. Macdonald.

Miss E. Braham writes :—The attack generally begins with twitchings of the face, rolling of the eyes, or grinding of the teeth. Then the head and neck after a few seconds retract, and the limbs bend and stretch out alternately. Unconsciousness comes on speedily. There may be for some little time cyanosis, but this passes off, and copious perspiration breaks out.

QUESTION FOR NEXT WEEK.

State what you know about the physiology of the open-air treatment.

[previous page](#)

[next page](#)