OUR PRIZE COMPETITION.

WHAT ARE THE CAUSES OF CONSTIPATION IN AN INFANT DURING THE FIRST TEN DAYS OF ITS LIFE?
HOW IS THE CONDITION TREATED?

We have pleasure in awarding the prize this week to Miss E. O. Walford, Layer de la Haye, Colchester.

PRIZE PAPER.

By constipation is meant the lapse of twentyfour hours or more without the passage of a stool

Causes.—Constipation may be due in early infancy to:—(1) Some peculiarity in the milk, such as (a) a deficiency of sugar or fat, which would lead to a deficient stimulation of the bowel; (b) general poorness of the milk, so that it is nearly all absorbed, and practically no residue is left to promote peristalsis; (c) too much protein in the milk. (2) Inanition, or starvation, which may be due to the supply of milk being insufficient, or though the supply is sufficient, the infant may be unable to obtain it. (3) Accurate adaptation of the food to the digestive capacity may leave a deficient residue in the bowel. (4) Defective intestinal secretions. (5) Spasmodic contraction of the bowels, which, by narrowing the passage, forms an obstacle to the onward passage of the intestinal contents. (6) Congenital atony, or want of power in the wall of the bowel. (7) Sluggish rectal reflex is common in mentally defective infants, especially Mongolian idiots and cretins. Congenital narrowness of the anal orifice. (9) Fissure of the anus. (10) Malformation of the bowel.

Treatment.—This will naturally depend on the cause of the constipation, but strong purgatives, such as castor oil, should not be given, and enemata should be used with great caution, as the mucous membrane is so delicate that it may easily be injured; also, as the cause of the constipation is frequently high up in the intestine, enemata will not always reach the seat of the trouble. The cause must, therefore, be discovered and treated, but a single feed withheld and replaced by an ounce or two of freshly made barley water containing one teaspoonful of extract of malt, or one teaspoonful of manna dissolved in hot water, will often meet the case. (1) Deficiency of sugar in the milk may be remedied by the addition of one teaspoonful of cane sugar to each feed if bottle-fed, or in water if breast-fed, while fat may be supplied in the form of a teaspoonful of cream or olive oil. (2) Inanition may be overcome by treating the

cause. If the mother's supply of milk is too small, it may be supplemented with a bottle once or more during the day, though this is best avoided if possible, as after taking a feed from an easily flowing bottle, the infant will probably be disinclined to make a laborious attempt to obtain milk from the breast. The supply of milk will generally be increased to a sufficient quantity by feeding the infant at regular and not too frequent intervals, and, if necessary, helping him to empty the breast by means of a breast-pump. If the cause is inability to suck owing to (a) depressed nipples, and if they cannot be drawn out by manipulation, a shield and artificial nipple may be of use; if the inability is due to (b) cleft palate or hare-lip, an early operation may be necessary, the mother's milk in the meantime being drawn off and given to the baby with a pipette; (c) premature infants, who lack the necessary strength to suck, should be kept warm, rubbed with olive oil, and wrapped in cottonwool till the condition improves; (d) dyspnœa, due to adenoids, bronchitis, snuffles in syphilis, &c., may also render sucking difficult, and in these cases too an artificial nipple is often beneficial. (3) When constipation is constant in spite of the baby taking sufficient milk of a correct standard, one teaspoonful of emulsion of paraffin, flavoured with peppermint, given once or twice a day, frequently produces the desired (4) Intestinal secretions may be ineffect. creased by giving 5 grns. of sulphate of soda three times a day. (4) and (5) Spasmodic contraction of the bowel and atony may both be treated by massage, which is also of benefit in constipation due to other causes. (7) Constipation in cretins can generally be overcome by the administration of thyroid extract. (8) Narrowness of the anal orifice may be treated by stretching under an anæsthetic. (9) Anal fissure is generally cured by the application of orthoform or weak cocaine ointment. (10) Mal-. formation of the bowel necessitates immediate operation.

HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss Mary Hall, Miss Mabel Forrest, Miss Lucy Cooper, Miss D. Mackintosh, Miss M. Thompson.

QUESTION FOR NEXT WEEK.

What is the difference in the nature and action of a vaccine and an anti-toxin serum? What is a common dose of a diphtheria anti-toxin? How would you prepare the skin for the injection?

previous page next page