

able, rather than fixed arrangements in the garments. The sleeves, of course, are long with little turn-back cuffs, the gown is caught in at the waist with a band of insertion, and tied behind with long calico strings. We will now put the gown on the baby; lying on his back across your knees, raise him by the shoulders with your left hand, and pass the gown over his head and down to the waist with your right hand. Lay baby down again and carefully pass the arms, raising them from the elbows and hands, into the sleeves; in doing this be careful not to catch the thumbs in the cuffs, which sometimes run small. Having adjusted the sleeves, turn the baby on to his face, and fasten the gown round the neck and waist; then again on his back, and adjust the gown in the front, and you may consider you have completed the process of washing and dressing your little patient for the first time in his existence. There is yet another point I will touch upon—what, if any, head-gear? I need scarcely remind my Nursing readers that in the days of their mothers or grandmothers no baby was considered *dressed* without a cap of some sort, and it is to the doctors that the extinction of that treasured article—in maternal eyes—of baby's toilet is due; and in those past days nothing more marked out social distinction than the caps; they ranged from softest, choicest, nay, almost priceless lace, to materials of humblest kind. I have seen them made of flannel, and, *worst* of all, *linen*, with cambric frills round the front—a sort of miniature "Mrs. Caudle" article. These two last were perfectly indefensible; but with respect to the first I confess to a little weak-minded leaning. It was soft, light, and porous; it was trimmed with a border of lace round the front, and in that, at intervals, were placed loops of very narrow pearl-edged satin ribbon, either white, pale pink, or pale blue, and the cap was tied on with strings of same. Times are altered now, and Nurses do not have babies' caps to add to their difficulties—they have enough to do to attend to their own. There is yet another head-covering to which the most uncompromising of Doctors can offer no objection—the soft, silky, curly, baby hair provided by Dame Nature's matchless hand, and never more bounteously than amongst those of her children who are not born to "Mechlin." In our days we cover over our baby's head with what is called a "square," made of softest, finest flannel, and generally embroidered all round with silk. I strongly advise

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that the flannel and the silk should both be white in preference to coloured; but, if coloured, scarlet, embroidered with white, or ingrained crimson silk, is to be preferred: other dyes I deem doubtful.

(To be continued.)

MESSAGE IN COUNTRY PRACTICE.

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NOW that the important question of the Registration of Midwives has been brought under public notice, and the training and education of those desirous of working as Midwives or Monthly Nurses is to be raised, the qualifications of "Masseuses," and those who follow out that profession or calling, might, with advantage to country practitioners, be inquired into. The reason for so doing is obvious—to protect the rights and privileges belonging exclusively to the medical profession; to see that their interests are not interfered with, and not to have women without any medical skill, beyond what many of them gather from reading a book on Massage, attempting to set up their opinions against those of experienced medical men.

In country districts we are over-run with all sorts of riff-raff, who profess and call themselves "Masseuses," whose knowledge of anatomy is limited indeed; who rub, but know not the origin or insertion of perhaps a single muscle in the body; whose physiology is equally imperfect, who have most probably never seen a bone or joint divested of its tissues or muscles, and yet who *massage* a joint or limb with perfect confidence, irrespective of swellings, inflammation, or diagnosis. Not content with this, the country practitioner's field of practice is being still further encroached upon by them. This same body of enterprising, and no doubt well-meaning, ladies do not confine their attentions solely to rubbing and Massage; they take temperatures, attempt to prescribe to a limited extent, and as a favourite remedy recommend change of air for a month.

The question may be asked, "Whose fault is this?" or, "Why do patients seek the advice of these so-called Masseuses?" The answer is not far to seek. The treatment is almost imposed upon a patient, so anxious are these Masseuses to air their knowledge, or to do something which, perhaps, the Doctor has not tried.

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