

OUR PRIZE COMPETITION.

WHAT CONGENITAL DEFECTS MAY BE PRESENT IN A NEWLY BORN INFANT? WHAT IS THE NURSE'S DUTY WITH REGARD TO THEM?

We have pleasure in awarding the prize this week to Miss D. J. Goddard, Clydesdale, 8, Richmond Terrace, Brighton.

PRIZE PAPER.

The chief defects met with in newly born infants may be considered under the following headings:—

1. *Defects of Head and Face:* (a) Hydrocephalus, where the head is distended with an abnormal amount of fluid; (b) meningocele and meningo-encephalocele, when there is a swelling in the middle line of the head, between two bones, caused in the first instance by projection of the brain membranes, and in the second, by the brain membranes and substance; (c) tongue-tie, where the tip of the tongue is fastened down tightly by a fold of mucous membrane, and the child cannot suck; (d) hare-lip: Here there is a division in the middle line of the upper lip, sometimes reaching to the nose, or there may be a double deformity; (e) cleft palate, when the roof of the mouth is divided down the middle line; (f) deformity of nose, when the bridge of that organ is sunken.

2. *Defects of the Spinal Column.*—Spina Bifida: Here there is an opening in the vertebral column, through which project the spinal membranes, with or without the spinal cord.

3. *Thoracic Defects.*—Congenital heart defects: (i) the inner lining of the heart is inflamed (endocarditis), the aortic valve between the right ventricle and the aorta being chiefly affected; (ii) there is malformation of the valve-like opening (foramen ovale), the communication between the right and left auricles, and consequently, it does not close properly, and the colour of the baby remains blue.

4. *Abdominal Defects.*—(a) Affecting the stomach: The child may be unable to digest any of its feeds, owing to the absence of the lower (pyloric) opening of its stomach, or it may have difficulty, if the opening is narrowed (pyloric stenosis); (b) Icterus gravis, when the bile ducts are deformed, causing severe jaundice; (c) enlarged spleen or liver; (d) umbilical hernia, when the intestine protrudes through a gap in the muscles in the region of the umbilicus, forming a swelling under the skin; (e) Imperforate or absent anus, in which case the anus has no external opening or is absent,

and imperforate rectum, the rectum being closed at its lower end.

5. *Defects of the Urinary Organs.*—(i) imperforate urethra, the canal along which the urine is expelled from the bladder being closed; (ii) phimosis, a condition in a male baby, where the foreskin is so tight that the orifice is almost obliterated; (iii) ectopia visicæ, when the bladder is deformed and misplaced.

6. *Deformities of the Limbs.*—(a) Talipes or club-foot, where the foot is deformed, certain muscles and tendons being contracted; (b) deformity or absence of fingers and toes; (c) congenital dislocation of joints, especially hip joints.

7. *General Defects.*—Congenital syphilis is the most important, but its signs rarely appear till a few weeks after birth.

When a baby is born with any defect whatsoever, the nurse's duty is threefold:—

- (a) To send immediately for medical help.
- (b) If a midwife, to notify the Local Supervising Authority.
- (c) Pending the doctor's arrival, to do her best to improve the child's condition.

1. (a), (b) In dealing with head defects, all pressure must be avoided; (c) if the tongue-tie is bad, the baby must be spoon-fed till cured; (d) in severe cases of harelip and cleft palate, spoon or tubal feeding will have to be resorted to, and carefully carried out.

2. For a spina bifida, the swelling must be protected from pressure, and the child kept particularly warm.

3. Little can be done for congenital heart defects, but warmth may be applied and drops of brandy given with discretion.

4. (a) When pyloric stenosis is present, small frequent feeds must be given, and if necessary rectal salines; (b) an umbilical hernia may be kept in place by a pad of wool enclosing a cardboard disc, placed underneath a firm abdominal binder.

5. (ii) To relieve temporarily the condition of phimosis, the foreskin must be drawn back and carefully cleansed at regular intervals.

7. The general condition of the child must be improved by careful attention to feeding and warmth, and the nurse must use every antiseptic precaution, as regards mother and child, to prevent the spread of infection. Other deformities can only be met by operation.

HONOURABLE MENTION.

The following competitors receive honourable mention: Miss B. Brown, Mrs. J. M. Jepson, Mrs. Farthing, Miss P. Thomson, Miss M. James, Miss Marian Gillam.

[previous page](#)

[next page](#)