

OUR PRIZE COMPETITION.

WHAT ARE THE SIGNS OF PREMATURITY IN THE NEW-BORN CHILD? WHAT ARE THE DIFFICULTIES WHICH MAY BE ENCOUNTERED IN THE MANAGEMENT OF A PREMATURE CHILD? HOW SHOULD THESE BE DEALT WITH?

We have pleasure in awarding the prize this week to Miss Florence Peyton, Registered Nurses' Society, 431, Oxford Street, London, W.1.

PRIZE PAPER.

A premature baby may often be recognised by its feebleness and inanition. The length of its body, when measured from the crown of its head to the heel is less than twenty inches, the fingers and toe nails do not reach the end of the fingers and toes as in a full term child; the weight of the baby is oftentimes below the average seven pounds. The body is covered with a soft downy hair known as lanugo. The body is often more pink than usual, with a tendency to become jaundiced during the first week, and owing to the lack of fat, the body and especially the face, is very wrinkled.

These signs vary in degree according to the prematurity of the infant.

The difficulties to be encountered in the management of a premature infant are: difficulty in maintaining the normal body temperature; extreme feebleness of the infant; feeding, especially for the first three days, before breast milk is available.

All difficulties in the management of a premature baby are best obviated by remembering that in the usual course of events the child would still be "in utero," and by trying to produce by artificial means surroundings which have the like effect on the baby as those to which it has been accustomed before birth. To this end the baby is treated with great care and gentleness to avoid jarring and shock. Its cot must stand in a warm place, and a screen be placed around three sides of it to avoid draughts: an ordinary clothes basket placed on a small table and surrounded on three sides by a towel horse covered in at the top and on three sides by a sheet makes an admirable "tent" for the premature baby. The clothing of the baby should consist of layers of cotton wool and woollen garments which can easily be removed without lifting it from its cot. The baby should be surrounded by three covered hot water bottles, and the heat of them so arranged that only one bottle would need refilling at a time. Instead of bathing, the baby should be gently oiled over the whole of its body daily; this not only cleanses the body, but supplies warmth and food to the tissues.

The feebleness of the premature baby makes a great difficulty during the first few days of its life. It cannot afford to lose even an ounce, so that until the ideal food—breast milk—is available, it must be constantly and regularly nourished. In district practice Nestlé's condensed milk, made to the strength of 1 in 16 and given 2 drms two hourly is invaluable for the first few days. In extreme feebleness the failure of the child to suck from the smallest teat causes the nurse many anxious moments, and often a baby is fed from a pipette consisting of a sterilised fountain pen filler. One drop of milk is dropped into the mouth at the time, and the throat gently stroked to make the baby swallow. With infinite patience the child is taught to suck, and whenever breast milk is available the baby nearly always thrives at once.

HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss E. K. Dickson, Miss E. O. Walford, Mrs. Farthing, Miss M. Stevenson, Miss K. James.

Miss E. K. Dickson writes:—"In France premature and weakly infants are often fed by 'gavage,' i.e., by passing a soft rubber catheter down the throat, connected with glass funnel, into which the food is poured gently, when finished the tube being quickly removed to prevent fluid returning. In about a month or six weeks, if the child has got on well, it may be treated as an ordinary baby, but will require special care for months or even years afterwards. Of course, where the parents are able to afford it, a baby incubator solves a great difficulty."

Miss E. O. Walford suggests the following mixtures if mother's milk is not available:—

- (a) Milk, 1 part, water or barley water, 3 parts (sterile).
- (b) Whey and cream: whey 3ss, cream and lactose each $\frac{1}{2}$ of teaspoonful.
- (c) Whey and cream diluted with water or barley water.

Increase quantity of food and interval between feeds gradually if baby takes well and thrives.

If constipated, give olive oil 3ss each morning or a little Virol in each of the three feeds daily.

Baby must not be treated as normal till normal birth-weight is reached.

QUESTION FOR NEXT WEEK.

Name some of the superficial injuries to the eye in industry; and how they are treated.

[previous page](#)

[next page](#)