## OUR PRIZE COMPETITION.

WHAT IIS MALNUTRITION? AMONG WHAT CLASSES IS IT PRINCIPALLY PREVALENT? WHAT ARE THE CAUSES AND HOW SHOULD THEY BE COMBATED?

We have pleasure in awarding the prize this month to Miss Hilda Hallett, S.R.N., The Sydenham Infant Welfare Centre, 5-7, Adams and Lee Road, S.E.26.

## PRIZE PAPER.

This term is applied to the condition arising in infants from an inability to assimilate food, resulting in nutritional disorders, loss of weight, and a greatly lowered resistance.

The primary cause of the disease is improper feeding occurring in artificially fed babies, at an early age, and unless a careful and intelligent regulation of diet is observed, it frequently leads to a chronic state of malnutrition.

The principal cause having been considered, its remedy lies in the encouragement of breast-feeding among all classes, the chief characteristic being the immunity it brings to infections of all kinds. It is undoubtedly true that disturbances of nutrition lower the resistance of the child, whilst proper food increases it. The weight curve and general condition is sufficient proof as to whether satisfactory progress is being made.

Should there be any doubt, test feeds for twenty-four hours must be given, and if the total amount taken is below the infant's needs, supplementary feeds are advised. A modified milk diet is the most satisfactory. The decrease in the mother's milk may only be a temporary measure, and care should be taken to ensure the child not being overfed. At the first sign of overtaxing—vomiting, indigestion, &c.—the quantity of each supplementary feed should be reduced.

The future health of the child is greatly determined at the period of weaning. This should be done gradually, at the ninth month, avoiding hot weather, if possible; a modified cow's milk is a satisfactory food, slowly working up the strength, until whole milk can be tolerated.

Many of the cases of badly nourished, debilitated children are the result of starchy patent foods being given at this important time.

One of the frequent errors in artificial feeding is overfeeding. The child may be fretful, or the mother not sufficiently satisfied with its progress, and an increase in food is given. The infant, more especially if three months old or under, when the tolerance for food is limited, is unable to stand the increase of one or all of the constituents, and the digestion is severely disturbed, so as to cause vomiting, and diarrhea, frequently followed by dyspepsia.

In young babies the most common cause is an excess of sugar, especially in the poorer classes, where condensed milk, indiscriminately used, is frequently responsible for the more severe types.

An excess of fat may be another cause for disturbance, and too frequent feeding, which not only overtaxes the digestive organs by keeping them constantly working, but leads to more food being given than can be assimilated. The rule of keeping under the limit

of tolerance in food is the safest plan. The best means of combating these faults is by educating the mother upon the subject of infant feeding. She should be taught the difference in the proportions of human milk to cow's milk and the necessity for modifying the latter to the human standard. Cleanliness in utensils used for preparation, and bottles, &c., is essential; also the supply of pure, clean milk. The use of patent foods as a proprietary factor should be condemned. If used with milk, and in proportion, they can be a useful means of introducing starch into the diet of the older infant. Regularity in feeding at all times should be observed.

The care of the toddler has not been considered here, owing to lack of space. The same care should be observed with regard to routine and diet, but it is in the first year of life that the foundations of a good physique may be made or marred.

Other predisposing causes to malnutrition are

congenital diseases.

Congenital syphilis is responsible for a severe type of malnutrition. The infant appears healthy at birth, but within a few weeks shows signs of ill-health. The disease should be treated first, and if this can be arrested, careful dieting frequently yields very good results.

In congenital heart disease there is usually seen a distinct state of malnutrition, but these cases stand a very poor chance of recovery.

Prematurity is another cause of retarded growth and nutrition, especially if the child has to be artificially fed. Cases of this kind require skilled care and attention if they are to attain normal development.

Hygiene plays a very important part in the development of the child, and it is due to poor hygienic surroundings and unsuitable environment that malnutrition is so much more prevalent in the poorer classes of our large industrial towns.

Sunlight, fresh air, warmth, cleanliness and care are indispensable to a child's health—they are its birth-right—and, if withheld, form a handicap from which

it will suffer throughout its life.

The advancement of Public Health work, in the form of health-visiting, ante-natal and infant-welfare centres, has done wonders during recent years, as statistics prove; but these results cannot be lasting, nor can they attain the effective standard desired by its workers, until reforms which will relieve the present distress of housing and overcrowding are put into force.

## HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss A. M. Burns, S.R.N., Miss Ethel M. Holmes, S.R.N., Miss M. Ramsey, S.R.N., Miss P. Thomson.

Miss Ethel Holmes writes:—"The chief combatant of malnutrition is to have more training schools for the young woman and young mother, teaching them the bodily food-value of food-stuffs and the kinds necessary for child life."

## QUESTION FOR JUNE.

How would you clean :--

(a) A head infested with Pediculi (lice)?

(b) A mouth caked with Sordes?

(c) A patient's skin for the application of a Blister?

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