

Obstetric Nursing.

— BY OBSTETRICA, M.R.B.N.A. —

PART II.—INFANTILE.

CHAPTER V.—HAND FEEDING.

(Continued from page 45.)

At their completion, this Course of Lectures will be published as one of the Series of "Nursing Record Text Books and Manuals."

I HAVE mentioned to you in one of my former papers that I prefer to use one of our long-tubed glass nipple shields (reversed) to either spoon or bottle, by which means you can let the fluid *gently* flow into the infant's mouth, the swallowing of it being due to a suctorial act, and this again can be regulated by pressing upon the tubing at intervals. And, furthermore, baby can be fed in his cot, which cannot be done by spoon-feeding; and bottles are too large for our requirements, or baby's powers, at this early stage of his existence. On the third day from birth we will begin the milk-food, an important epoch in infantile life.

There is one point I wish to emphasise (as it really is more the duty of employers than Nurses), which is, that the former should spare neither time, expense, nor trouble to obtain for the infant the purest possible milk. There is no difficulty about this in the country; but we know that in towns the difficulty of getting pure supplies is almost insuperable. The lactometer affords our best means of testing the amount of water *added* to the milk before we get it; but even this is *not* infallible, so this consideration must weigh with us when we come to the question of *further* dilution with water. Shall the milk be boiled or not? As a matter of precaution I strongly advise that it should, and beforehand—that is, when it comes, not as we want it. At the third day we may require a pint for twenty-four hours' use: boil it *up at once* in a clean saucepan (I prefer a tinned iron one to any other), and this should be kept for baby's milk *only*. The milk should then be poured into a clean *jug* (not a basin), and this also should be kept apart from other jugs, and the milk kept in a cool place. When the steam ceases to rise from the hot milk cover the top of the jug over with a piece of clean writing-paper.

Now, what sugar shall we sweeten our baby's food with—cane or milk sugar? Our best authorities are in favour of the latter, hence I advise its use. You can get it from chemists and

grocers, and it is cheap. There is one point you must bear in mind—it must be used in a *very finely powdered* condition, otherwise the crystals of which it is composed would not *dissolve* in the infant stomach for a length of time, if at all; and even if you are obliged to use *cane* sugar, let it be the *castor* sugar, not *lump* nor moist—we can ascertain the quantities better in the first-mentioned form.

We will next consider the water we put to our baby's food; and here again, as in the milk, every reasonable precaution should be taken to obtain it free from contamination, and there is *one* precaution that should never be omitted: it should *invariably* be *boiled* before using, *separately* from the milk. It is a good plan to boil up a pint say every day, and put it into a clean jug and keep it apart for your use, and in the same place as the milk; the reason for this is that if we have to give the milk hot, when we first boil it, for instance, we require the *cold* boiled water to cool it down to 98deg., but if we use the *milk cold* we have to boil up some water for that purpose. A Nurse should have *two* pint jugs for the milk kept apart for her use, and one for the water, the former to be used in change, and the greatest care exercised to keep them clean within and without, and so with the jug for the water. A foul jug will spoil the best of milk. The jugs should be daily cleansed inside and outside with *boiling-water* (to which add one teaspoonful of Californian borax) and rinse in clean *cold* water. I prefer borax to washing soda for this purpose, as it has *antiseptic* as well as alkaline properties. It is, in my judgment, better *not to re-boil* the milk, as you want it, but add *boiling* water to it when you mix the food. It does not matter how often the water is boiled over again; but the same cannot be said of milk.

The most perfect form in which we can use water for infantile feeding is *clean, distilled* water, which is *invariable* in quality—which is more than we can say for ordinary water—and it is absolutely free from organic, inorganic, or mineral impurities; this last being noteworthy, because, as I pointed out to you in a previous paper, the cow's milk already contains an excess of solid constituents. Distilled water can be obtained from most chemists. I have it in a gallon at a time; keep it in a clean stone bottle, and in a cool place. The cork should always be kept in, and every now and then the bottle rinsed out with a weak solution of Condyl's fluid. I am of opinion that cases of infantile diarrhoea can be traced to *impure*

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