

## PROFESSIONAL REVIEW.

### SICK CHILDREN—DIAGNOSIS AND TREATMENT.\*

"Sick Children, Diagnosis and Treatment," by Donald Paterson, B.A. Manitoba, M.D. Edin., F.R.C.P. London. Physician to the Hospital for Sick Children, Great Ormond Street, and Physician for Diseases of Children, Westminster Hospital, a third edition, revised, of which has just been published, is an excellent handbook. While intended primarily for students and medical practitioners, the fact that it contains a number of examination papers set by the General Nursing Council for England and Wales, for the Final Examination for the Supplementary Part of the Register for Sick Children's Nurses, and also for the Senior Nurses' Medical Examination at the Hospital for Sick Children, Great Ormond Street, proves that it is intended to appeal also to Nurses.

Dr. Paterson says in his preface to the present edition that "considerable advances have been made in the past twelve months in chemotherapy, especially with the introduction of the sulphanilamide group. Suitable references to these drugs have been made throughout. An attempt has also been made to improve further the section on anæmia, and a new portion has been written on acute and chronic antritis in infancy and childhood. Sonne dysentery has been particularly dealt with, and special reference has been made to epidemic jaundice. The section on diabetes has been revised, and the list of examination papers on diseases of children has been brought up to date." It will be appreciated, therefore, that the book should be extremely useful to those who wish to bring their information as to the diagnosis and treatment of diseases of sick children up to date.

The first chapter gives precise information as to the examination of a normal child and the points which should be observed in regard to it. Abnormalities are also discussed in detail. In regard to heredity we read, "It is commonly thought, and taught by some, that heredity plays a very small part in a child's physical or mental make-up. There can be no doubt that this is a great error, and to the pædiatrician it is a commonplace to see the physical characteristics of one or other parent completely reproduced in their child."

"In the adoption of children, which is now practised on a large scale, the greatest care should be exercised to exclude children who may have inherited undesirable tendencies. The family history should be carefully inquired into for asthma, epilepsy, and mental defect, and in addition a Wassermann test should be done to exclude syphilis. The mentality and appearance of the parents should also be ascertained, as almost all their chief characteristics may later be reflected in the child."

A useful chapter is given on "The Feeding of the Normal

Infant and Child," which opens with the statement that "it should be taken as a general principle that every infant should be breast fed, wholly or at least in part. Where, for some reason, this cannot be carried out, certain principles of artificial feeding must be considered. The importance of understanding the fundamentals of infant feeding is being more and more appreciated, both by the doctor and the general public. No practitioner can be said to be a properly trained doctor without a full knowledge of these principles."

A very useful list is then given, first of cow's milk of different grades: (1) Tuberculin tested; (2) accredited milk, similar to No. 1, but the tuberculin test is not required, but a veterinary examination of the herd takes place every three months; (3) pasteurised milk, concerning which it is stated that "milk so treated gives protection against milk-borne disease." The author considers that "all milk given to a child should be boiled or pasteurised. Tuberculin tested, certified, pasteurised milk is the cleanest and safest milk obtainable."

The composition of a number of the better-known brands of condensed milk is given in a special table, with the caloric value, with the fat, protein, carbohydrate and water per cent. respectively. The warning is given that sweetened skimmed condensed milks are unsuitable for feeding to the human infant without some additions, but if cow's milk and cod-liver oil emulsion are also given their deficiencies are made good. Fruit juice should always be given to infants so fed.

Dried milks are then discussed. "During the process of drying cow's milk the curd is modified to some extent, so that it becomes more easily digested by the infant than that of fresh cow's milk. . . . The advantages of dried milk are: (1) It is sterile, and tends to remain so over long periods; (2) in the process of drying the curd has been modified and becomes

more digestible than in fresh milk; (3) it is easy to keep a supply, and this is a great advantage when travelling or when fresh milk cannot be properly kept; (4) the vitamin loss is very small and in many brands there is no loss at all, moreover this point is becoming less important, as cod-liver oil and fruit juice can be given as a safeguard."

### CONJUNCTIVITIS:

Concerning conjunctivitis we read that "various forms of conjunctivitis, common to adults, are also seen in childhood, that due to the Koch-Weeks bacillus is probably the commonest. Bathing the eyes with boracic lotion or lotio hydrarg. perchlor. 1 in 10,000, or instilling drops of silver nitrate 1 per cent., or Protargol 2 to 5 per cent. are considered the best treatments. This Great Ormond Street lotion is recommended:

*Lotio acidi borici cum zinci sulphas.*

Zinc sulphate 2 grains.

Boric acid 15 grains.

Distilled water to one ounce.

To be used with an equal quantity of water."



Splinting the head in cervical adenitis, showing cotton-wool wound round the neck.

\* Cassell and Company, Ltd.

[previous page](#)

[next page](#)