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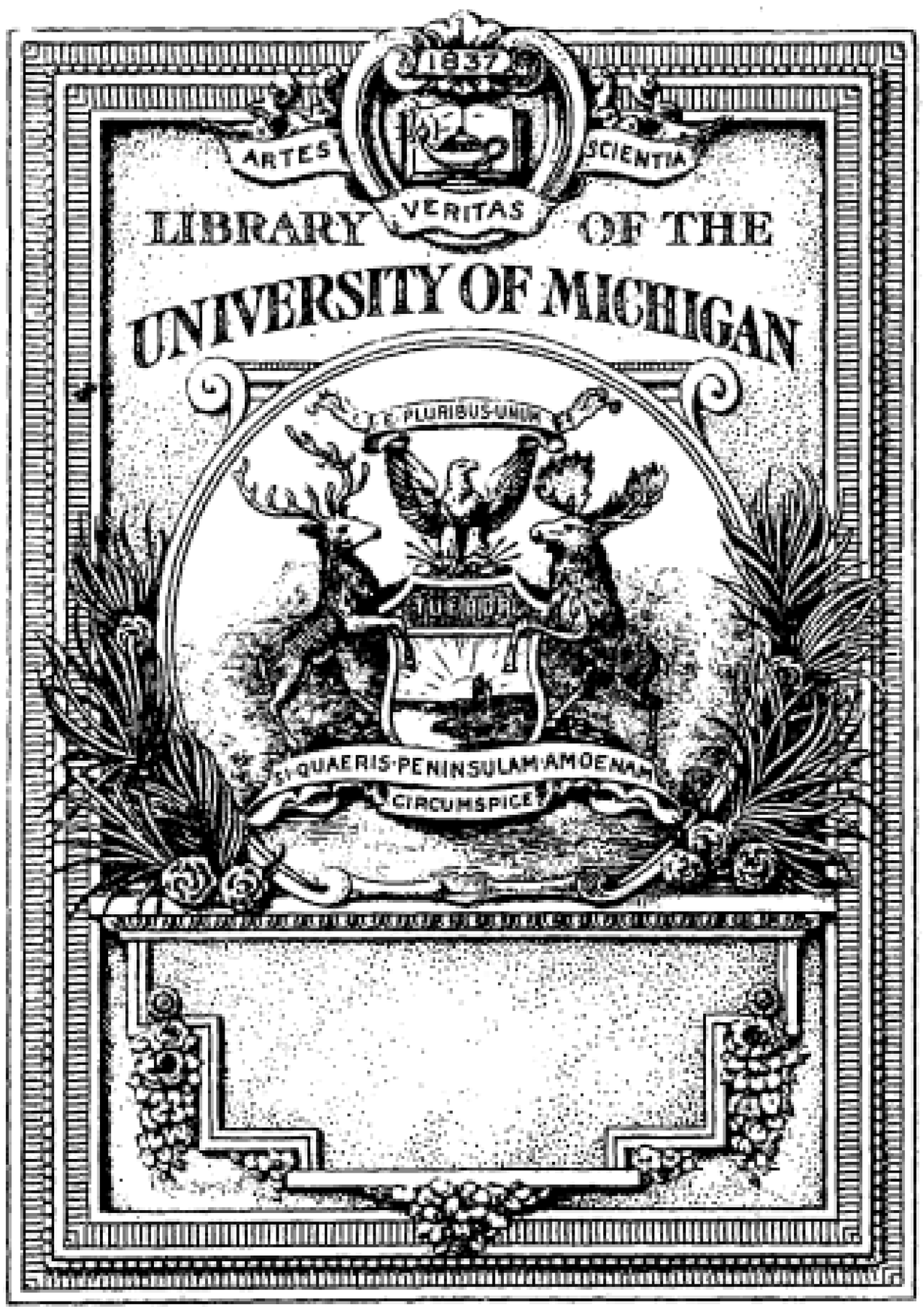

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DR. FRANZ HARTMANN'S

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DISEASES OF CHILDREN

AND THEIR

HOMŒOPATHIC TREATMENT.

TRANSLATED, WITH NOTES,

AND PREPARED FOR THE USE OF THE AMERICAN AND

ENGLISH PROFESSION,

BY

CHARLES J. HEMPEL, M. D.

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PREFACE.

On entering upon the practice of his profession, the young physician must naturally desire to avail himself of the knowledge he has acquired, and to supply existing deficiencies from sources which exhibit the truths of medicine in a simple and unvarnished form.

The beginning physician may have studied the Materia Medica with tolerable accuracy, without finding it easy to apply its rules and avail himself of its resources in practice. This is the reason why young students, under the direction of older and more experienced practitioners, are offered an opportunity, in hospitals and clinical institutions, (where children are seldom treated) of conducting the treatment of different cases of disease, and watching and noting the effects of the medicines which had been recommended to them by their teachers. This, at any rate, is the usage of the old-school. But a young physician who, adhering to the principle, "prove all things and hold fast that which is good," had examined and embraced homœopathy as the most useful and the most humane system of medicine, has no such means of enlightenment at his command; he has no hospital where he could make a practical trial of his Materia Medica and perfect himself in the practical and theoretical knowledge of medicine. And yet, how desirable is it that such opportunities for the progressive study of his profession should be offered him; how difficult must it be for an inexperienced practitioner to appropriate to himself the chaotic pathogenesis of our drugs in such a manner as will enable him to apply it in every particular case with positive certainty. More-

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over the position of a teacher in a homœopathic academy is not always encouraging, for among his hearers he has to tolerate many who came there for the express purpose of catching a few sentences, distorting their meaning, and charging upon homœopathy absurdities that exist only in their own crooked brains. This will always be so until the State shall make it obligatory upon all who study medicine to study the homœopathic system likewise, and to pass an examination on this subject before the State censors; not till then will a homœopathic hospital be regularly visited, and be advantageous to both teachers and students. Until this result is accomplished, other means of improvement will have to be provided for the students of homœopathy. It is the opinion of all experienced practitioners that the best method of conveying practical knowledge to a young physician, is a clinical work which shall give a simple and lucid description of both the disease and the treatment, and shall at the same time guide the young physician in his attempts to establish a correct diagnosis and to apply a suitable remedy from his own choice and judgment.

Notwithstanding Hahnemann's former opposition to such a course, which he was afraid might lead to mechanical routine, it is absolutely necessary to simplify the study of our Materia Medica by some arrangement of this kind, lest beginning practitioners should neglect it altogether, or be frightened away from our healing art by the impracticability of the avenues that have led to it heretofore. A clinical guide is therefore the best and most expeditious means of enlightening the young physician on the subject of homœopathy, and of enabling him, after leaving the university, where homœopathy, if the subject be mentioned at all, is caricatured and spoken of in abusive terms, to apply it in the sick-room, and to be led, by gradual success and progressive study, to cherish the principles of our art.

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In accordance with these views and with the requests of my friends and fellow-practitioners, I have determined to write and publish the present work, which treats of diseases that afford our art the fairest field of success; for the diseases of children are more or less uncomplicated by the heterogeneous influences of society, and no artificial taint impairs the efficacy of our delicate preparations. And what a pleasure it is to relieve the sufferings of a child. A child's gratitude is so much more penetrating and glowing than the thanks of a full-grown person. But it is not this pleasure or the helplessness of children that causes a physician to desire to treat their diseases; he prefers this sphere because a secret instinct as it were, tells him that it affords him the fairest opportunities of testing the value of his drugs and the correctness of his principles. This is my excuse for writing the present volume, concerning the diseases of children and their homœopathic treatment, to which I have devoted the best half of my professional career. Even if not every thing that is contained in this work, should be complete or perfectly positive, or even if some statements should be more or less problematical, yet I can truly affirm that I have had the earnest desire to write a sound, truthful work, and that, in its therapeutic portion, I have uniformly adhered to the physiological pathogenesis of our drugs.

On perusing this work, the reader will find that, although it treats of the diseases of the young generally, yet I have devoted particular care to those diseases which are more or less peculiar to children. I have thought it best to leave the beginning practitioner, for whom this work is principally written, a broad margin for self-study and observation; and certainly, with a work like the present, he must find further study and observation an easy and agreeable business.

Although I have endeavored to give all the views and experience of modern pathologists with tolerable accuracy, for

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which purpose I have made copious extracts from various authors, I have nevertheless avoided the completeness of a monograph, as well as the brevity of a compendium. The therapeutic portion of the work has likewise been restrained within suitable limits. I have only chosen few, although a sufficient number of remedies, and it has been my endeavor not to confuse the beginning physician with all sorts of new medicines, even should they have been praised by their advocates as brilliant additions to our Materia Medica. We accomplish a vast deal more with a few and well known remedies than with many, that are known only imperfectly. Nevertheless, the therapeutic portion will be found as complete as need be; the best and most important remedies will be found mentioned first, together with a circumstantial account of their characteristic therapeutic indications; after these I mention all the medicines of secondary importance, and refer the reader to the Materia Medica for a more complete description of their symptoms.

In establishing the prognosis of diseases I have adopted the views and experience of the old-school as my standard. This I did partially to secure the young practitioner an unimpeachable position towards his colleagues of the old-school, and also to enable him to measure, by his more successful treatment, the vast superiority of the new over the old-school of medicine.

I have no apologies to make for the form and arrangement of the work; I will do my critics the justice to believe that they will not overlook that which is essential in criticising that which is of minor importance. If those for whom this work has been more especially written, derive from it the benefit I desired they should, I shall feel abundantly compensated for the time and labor which I have bestowed upon it.

F. HARTMANN.

Leipzig, July, 1852.

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THE

EDITOR'S PREFACE.

The present work on the diseases of children, is undoubtedly the best work which our School possesses on this interesting subject. It is from the pen of the distinguished Hartmann, a veteran in our ranks, and who, by his valuable and comprehensive treatise on the treatment of acute and chronic diseases, has so materially contributed to the spread, and increased the practical usefulness of homœopathy. The present work may be considered the completion of this highly interesting treatise, and with this latter, constitutes a complete series of clear and practical instructions concerning the treatment of both acute and chronic diseases. In his work on the diseases of children, Hartmann has pursued the same plan which he adopted in his larger work of which the present one forms, so to say, the concluding volume. In describing the pathognomic character of all the principal diseases, he has not contented himself with furnishing notes from his own experience, but he has given the eminently interesting and scientific diagnosis of such pathologists as Schœnlein, Canstatt, Heim and others, thus imparting to his work a truly scientific character, which scarcely any similar work in our literature can boast of. To facilitate the business of prescribing as much as possible for the beginning practitioner and the intelligent layman, the dose of the appropriate remedy has been carefully indicated wherever and whenever this was found practical.

I have endeavored in translating the present work, to fol-

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low the original text as closely as possible. Hartmann is sometimes a little diffuse, perhaps unnecessarily so, but I have not allowed myself to alter the original text in the least, except where idiomatic differences rendered such alterations absolutely necessary for the better comprehension of the original as well as for the production and preservation of a correct English phraseology. My chief aim has been to render the author's meaning in a clear, unmistakeable language, and in the same simple forms which characterize all the author's productions. I have deemed it necessary to interpolate several notes, some of them of considerable length, and, I trust, of interest to the reader. I refer particularly to my notes on "summer-complaint and constipation;" it seemed to me that these two subjects had not been treated with sufficient minuteness by the distinguished author, most probably for the simple reason that, in Germany, children are not near so much troubled with the distressing cholera infantum, which destroys so many young lives in our own country.

May the reader be pleased to receive my translation with as much kindness and forbearance as I am persuaded, he will hail the work of the eminent author with pleasure and confidence.

CHARLES J. HEMPEL, M. D.

New-York, May, 1853.

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INTRODUCTION.

On looking at a treatise specially devoted to the treatment of the diseases of children, we are inclined to ask the question: Do these diseases require a different treatment from those of full-grown persons? My own answer to this question is, that they do not, though I admit that the diseases of children require a peculiar study which, however, is less intricate for the homœopathic than the allœopathic physician, inasmuch as the former is guided, in the selection of his remedies, by the perceptible symptoms, and the latter has to make up his diagnosis agreeably to a mere name based upon a speculative theory of the objective and subjective symptoms, and must, therefore, be constantly apprehensive of having mistaken the character of the disease. Nevertheless, though a homœopathic practitioner is less liable to erring, he should not fail to study the diseases of children with particular zeal and attention; for, as a general rule, one-third of our patients are children, and the diseases to which they are subject, require a peculiar mode of treatment, a peculiar exhibition of our drugs, and differ from the diseases of full-grown persons by their pathology and diagnosis. Childhood, moreover, impresses a peculiar character on the diseases incidental to this period of human life.

The fundamental condition of the first age of man is a continually progressive growth of the undeveloped organism. *Hufeland* designates the first year, as a continuation of the process of generation. Even if we look upon this definition as somewhat exaggerated, yet it is undeniable that, in the first year of human life the productive energies of the organism are much more active, than in the subsequent periods. In the first year of life

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new organs spring into existence; existing organs are developed, perfected, altered; other organs disappear, in consequence of which the vital process assumes different modes of manifestation. First, it is the functional life of the lungs which undergoes an essential change; next, the senses, and lastly, the mental faculties. It is as yet an undeveloped existence, a constant effort of the vital forces towards an integral and harmonious action; and the very disorders of their mechanism may be looked upon as manifestations of the formative energies at work in the inmost recesses of the infantile organism.

What a wise provision of nature, to allow the new-born infant to remain so to say, even after its birth, a part and portion of its mother, and to draw from her its sustenance and support. To check this dependance of the infant on its mother, would be a gross violation of nature's laws and will be fraught with as much mischief as the faithful adherence to her natural duties on the part of a mother, confers blessings upon her offspring. The physical and moral welfare of the future man may be said to depend upon the sustenance which the new-born infant derives from its mother. There does not exist a perfect substitute for the mother's milk, and it is only in cases of physical inability that a wet-nurse should be resorted to, provided a healthy person, and one who has a cheerful disposition and is free from worldly cares can be found; otherwise, the bottle or feeding with the spoon would be preferable.

The productive energies of the child's organism being much more energetic than those of the full-grown man, it follows that the vital functions, such as circulation, assimilation, reproduction and waste, take place much more rapidly. For the same reason, the diseases of children run a more rapid course, a critical change takes place much sooner, and the little patients are more easily and more completely reinvigorated by sleep. The superior action of the heart favours on the one hand the

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reproductive energy of the organism, but, on the other hand, originates a higher degree of irritability; hence, it will not appear strange, if inflammations, nervous affections and spasms are the prevailing diseases among children. The vegetative system, the reproductive functions, the growth of the organs, being the principal manifestations of vitality in this age, it becomes a matter of the greatest importance to attend to the digestive and assimilative functions, and more particularly to the lymphatic and glandular systems, a derangement of whose functions occasions a variety of diseases.

In the first years of life some organs are disproportionately larger than others; they seem to require a larger amount of the circulating fluid for their more rapid development and functional perfection. Such organs are especially the brain, the thymus gland, the surrenal glands, the liver and the intestinal canal.

According to Hufeland, they constitute the pathogenetic or disease-engendering portions of the childlike organism, the more immediate spheres of the vegetative life, and they show that the gradually increasing or decreasing functional activity of certain organs and systems is proportionate to the phases which characterise the period of growth from the infantile age to that of fully developed manhood.

Modern physiology and the physical signs have shown that the superior action of the heart determines likewise a superior action of the respiratory organs. Formerly, every increased action of the thoracic organs, was supposed to denote fever, whereas pathological anatomy has satisfactorily shown that every abnormal process of the vital functions of the child is attended with an inflammatory condition of the respiratory organs, and that the ignorance of physicians respecting this fact has but too often been the cause of the little patient's death. It is this functional relation of the heart and lungs that constitutes *Hufeland's* supposed sympathy between the in-

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testinal canal, the stomach, and the brain, from which he derives the manifold disturbances that so frequently terminate fatally.

Though childhood may be divided into three periods, which differ essentially one from the other, yet there is no essential difference between the diseases which prevail in each, with their mode of treatment, and the diseases of full-grown persons; it is the essential nature of the child's organism that constitutes the difference, and claims the serious attention and reflection of the physician. The first period extends from the birth to the commencement of dentition; it is in this period that the greatest number of infants, probably one-third, die, which is owing to the fact, that the functional processes are carried on with the utmost rapidity in this period, to which the reproductive process is strictly allied, and prepares the first dawn of the spiritual life of man. The second period extends from the commencement of dentition to the shedding of the first teeth; there is less susceptibility to disease and less mortality in this period; inflammations with exudations and adhesions, especially of the brain and larynx, are the prevailing diseases. The graduations of age adopted by the older physicians, are not quite so valueless as to deserve total oblivion; this is evident from the fact, that in the seventh year, which seems to constitute a remarkable period in the child's life, full one-sixth of all children die. The third period extends to the age of pubescence, and is the least liable to danger from disease.

It is undoubtedly a difficult task to satisfy all demands in writing a treatise on the diseases of children. The present manual will probably share the fate of similar works; it will satisfy some, and disappoint others, though its arrangement and contents might have been rendered satisfactory to all, if the tastes and wants of all had been known to the author previous to his setting about the

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execution of his plan. If a work like the present should fail to give general satisfaction, the author may at least be judged with leniency, inasmuch as all his readers must feel convinced, that previous to his commencing the work, he must have made himself acquainted with the opinions and statements of all good authors who had written on a similar subject, in order to ascertain whether their experience is adequate to our present wants. Though a homœopathic physician may not lay any particular stress on the value of such sources, yet I felt anxious that our allœopathic brethren, should likewise be deprived of every just cause of accusing me of ignorance. It is but too well known, that the criticism of these gentlemen stops at the mere external technicalities of our art, because they profess to have neither the desire nor the leisure to study every form of medicine as a legitimate portion of our universal experience. For such reasons, and in order to satisfy the demands of my readers and my own pretensions, I have determined to compose the present work after the example of such men as: *Hufeland*, *Henke*, *Formey*, *Barez*, *Armstrong*, *Alex. Hamilton*, *M. Underwood*, *Chambon*, *Autenrieth*, *&c.* Some among the above named authors confine themselves in their treatises on the diseases of children, to such as belong exclusively to infancy, excluding cutaneous diseases, cholera-morbus, and several spasmodic and worm-affections; others, on the contrary, such as *Hufeland*, *Henke*, *&c.*, rank among the diseases of children, all those diseases which are, if not exclusively, but chiefly incidental to childhood, and are more or less modified by the nature and progressive growth of the childlike organism. In composing this manual I have sided with the latter class, and I trust that, by this means, I shall have attained a desirable and satisfactory completeness.

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CHAPTER I.

DIAGNOSIS OF CHILDREN.

This diagnosis is rendered difficult in consequence of the little child being deprived of the principal means of expressing its sensations or pains, viz., speech and reason. Owing to the excessive irritability of the organism, even the pulse is no safe criterion; and, moreover, the symptoms of disease in the childlike organism are too vague to be perceived with positive and unfailing accuracy.

The following are the principal phenomena and conditions which claim the attention of the physician:

The temperature of the body. An excessive *dry* heat of the whole body denotes fever. When an acute fever is about setting in, the skin is scarcely ever *cold*, and never to any high degree; but, whenever this coldness sets in suddenly in some acute diseases, it is a dangerous symptom, and points to a fatal termination of the disease, as in acute exanthema, where it is generally the immediate precursor of death.

As regards *the pulse*, it is unreliable only in the first years; afterwards, as it becomes more regular, it becomes likewise one of our principal diagnostic symptoms. In the first year, the normal pulse of an infant ranges about 90 beats in a minute; a greater number of beats would seem to denote fever, provided an infant's pulse is at all considered a reliable diagnostic indication. In subsequent years, the pulse deserves more attention, in which case, according to Meissner,* we have to note, 1. whether the child sleeps, during which period the pulse is always

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* The diseases of children, (die Kinderkrankheiten, bearbeitet von Friedrich Ludwig Meissner, dritte Auflage, Leipzig, 1844.

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smaller, and from 5 to 10 beats less; 2. whether the pulse is influenced by moral causes, such as dread of the physician, anxiety; 3. whether the child, shortly before we feel of its pulse, had been very restless or had cried a good deal; 4. whether the child had been fed shortly before, especially warm food or drinks, in which case, and generally during the period of digestion, the pulse would perceptibly rise; and, 5. at what period of the day the pulse is felt, for Knox,* and Lisle,† and several others, have shown that, in the morning the pulse is slowest; that it increases in frequency in the after-part of the day, and that it is most rapid in the evening.

The *secretions*, and especially the passages, their color, consistence, frequency or suppression, eructations, emission of flatulence, vomiting, smell from the mouth, appearance of the tongue; the urine, the stain it leaves on the diaper, the moist or dry skin, eruptions, &c. For the benefit of the beginning practitioner I will subjoin a few additional remarks.

After an infant is born we have to examine the anus, whether it is closed, or otherwise abnormally formed, and whether the meconium has passed off. The passages of infants are of a bright-yellow color, soft, and occur several times a day; the little milky granules with which the passages are mixed up, are normal constituents. When infants are troubled with flatulence, the passages have a greenish tint. In case of inflammation of the bowels, the passages are transparent, glassy, mixed with slightly sanguineous mucus. When the passages are acrid, the anus becomes inflamed and looks red. Alternate diarrhœa and constipation points to an affection of the mesenteric glands, and obstinate constipation with retching and vomiting to the approach of hydrocephalus.

* See the Edinburgh Medical and Surgical Journal, No. CXXXI., 1837.

† Gazette médicale de Paris, No. XLIV. 1837.

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Eructations, flatulence, bad smell from the mouth, are symptoms of some gastric derangement which may have been caused by a cold, bad diet, &c.; sometimes colicky pains are likewise present.

The desquamation of the skin which takes place during the first fortnight of the infant's life, is a natural process arising from the action of the atmospheric air which dries up the amniotic fluid adhering to the epidermis, in consequence of which, the latter dies and scales off. In a judicial investigation this process of desquamation is of the utmost importance, for it always takes place one or more days after the birth of the infant, and therefore furnishes an almost incontrovertible evidence of the child's having been born alive.—The redness of the skin which sets in shortly after birth, should not be mistaken for erysipelas, or the yellowness which shows itself five or six days later, for jaundice; the brighter the redness, the darker will be the yellow colour.—If a *rash* should make its appearance during the first weeks of an infant's life, it is generally attributable to some accidental cause, such as excess of clothing, excessive warmth of the room or bed, inordinate use of warming-pans, &c. A removal of these causes is sufficient to remove the rash.

The condition of the abdomen, especially of the præcordia and the hepatic region. I deem it unnecessary to advert to this circumstance more in detail. A physician who has studied his profession fully and attentively, does not require any further information on this point; ignoramuses, of whom there are, alas! but too many in our ranks, would not be benefitted by any thing I might offer them in this place; they could not be enlightened by me, because they would not understand me.

Respiration, cough, rattling, hot breath. Howsoever unreliable the pulse may be in the first years of infancy, the respiratory process, on the contrary, is so much more valuable; for the frequency of the inspirations is our prin-

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cipal indication in case of an internal inflammation. Dilatation of the nasal wings, and shortness of the inspirations generally denote an inflammatory affection of the chest. Frequent sighing during fever frequently portends an approaching exanthema. A sudden expiration after a slow inspiration indicates pulmonary congestion or hepatization. Singultus during respiration points to inflammation of some important viscus in the neighborhood of the diaphragm, which will inevitably terminate in gangrene and death; death is likewise sure to follow after the breath becomes cold and fetid. However, many of these symptoms may depend upon other accidental causes, on which account it is important never to lose sight of the general condition of the organism. The character of the cough sometimes furnishes us the best evidence in reference to the disordered condition of the respiratory organs; for instance, when the cough is loose and the child raises with ease, we infer the existence of some catarrhal affection; when the cough is dry and seems to cause pain, we suspect an inflammatory affection of the lungs, pleura, larynx. The peculiar sound of the cough in laryngitis, bronchitis, croup, whooping-cough, &c., will be described in the particular chapters on these diseases. In many diseases of infants and children, the physical signs are of great and even greater importance than in the case of full-grown persons; they furnish the best proof of the alterations which may have taken place in the condition of the thoracic, and especially the respiratory organs.

Now-a-days almost every medical college boasts of an able teacher who does his best to initiate his students in the mysteries of auscultation and percussion, by experiments on healthy as well as sick persons. Older physicians have less knowledge of the use of the stethoscope, because they have less frequently an opportunity of using it, and much practice is essential to acquiring this kind of knowledge. On this account, even the young physician, in spite of his preparatory studies, may commit

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mistakes, and may suppose the sounds to be clear even in the second stage of pneumonia. In children of perfect health the clearest sound is obtained by percussing in the interscapular region. Continuing thence towards either side, the physician will find that the sound on the right side is duller than on the left, owing to the liver reaching above the line of the left side. The best place for sounding the lungs is below the nipples; but it is difficult to define all the different kinds of sounds by words; experience alone can teach them. The best stethoscope is the ear of the physician, and I use it even in the case of full-grown persons, whenever it is possible. For further information I refer the physician to the special works on auscultation and percussion.

The *crying* of infants is a diagnostic symptom of the utmost importance. To understand this mode of expressing their pains and wants, should be the object of a particular study on the part of a physician. Cries accompanied by restlessness, indicate unpleasant sensations; a short, wheezing, sobbing or suffocative mode of crying shortly after birth, may cause one to suspect, and not without reason, an asphyctic or apoplectic condition of the respiratory organs; crying with drawing up of the legs to the abdomen, points to colic; crying accompanied by crowding their fingers into their mouths and gnawing them, indicates pain from teething; crying when coughing denotes pain in the chest. If the crying should arise from some hidden cause, it is well to have the infant undressed, when some mechanical irritation will frequently be found to be the cause of the trouble.

Alteration of the voice, hoarseness; impeded sucking, hiccough, excess or deficiency of sleep, quiet or restless sleep, starting during sleep, &c., deserve likewise to be noticed.

The statements of the mother or nurse should be carefully listened to in making up a diagnosis, but they should never be implicitly depended upon, because

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mothers and nurses frequently conceal that which a physician should be told; or they may consider unimportant what a physician may require to know to make up his mind about the true nature of the child's complaint; or an excess of tenderness and fear may cause them to exaggerate the case and report imaginary troubles. The physician's own judgment and observation should be his principal guides in arriving at a true diagnosis.

CHAPTER II.

DIET OF CHILDREN.

In the case of full-grown persons as well as of infants especially when they are sick, the physician should watch and regulate their diet with particular care. There is a good deal in our present mode of living that is unobjectionable, but there are many luxuries that do not suit a strict diet, on which account the reader will perhaps thank me for a detailed account of the more important dietetic rules.

a. First treatment of new-born infants.

The physician should be well acquainted with the manner in which new-born infants have to be taken care of. We may have to correct abuses and enlighten the uninformed. Not only the vegetative, physical life has to be seen to. Also the moral influences should be regulated with the most scrupulous exactitude; lest some discord of the general organism should defeat the best arrangements of the physician in case of sickness. No half-work in sickness on the part of the physician. His regulations should be clear, precise, positive; errors in diet at this early age, may become the cause of disease in after-life, and may even occasion death. Though the mortality of infants is much less under homœopathic than under allœopathic treatment, yet we may safely

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assume, that the difference would be trifling if the diet of the infant were not regulated with great strictness from the moment of its birth.

The passage from the womb into the open air of heaven, occasions important changes in the organism of the infant. From the moment of its birth the infant begins to respire, and the senses begin to be active; other functions, such as the circulation, the functions of the intestinal canal, liver and skin, undergo a total change. Many infants bear these changes without prejudice to their health; others succomb to the effects which these changes produce in the tender organisms of infants; but in every case it is the physician's duty to do his best to enable infants to pass through this first phasis of their existence without injury. This duty is urgent in the higher as well as the humbler walks of life; among the wealthier classes it is fashion and prejudice, and among the poorer ignorance and superstition, that occasion many errors in the first treatment of infants. During the process of parturition the physician should be as watchful as possible. If the face of the child should be born first, the fingers of the hand which supports the perineum, have to be spread, in order not to hinder the process of respiration, which sometimes commences before the rest of the body is born. After the child is born, it should be laid as close as possible to the parts of the mother, transversely between her thighs, so as to prevent pulling or tearing the umbilical cord, in case it should be too short; for this might cause umbilical hernia. After the phlegm in the infant's mouth, which frequently impedes respiration, has been removed by means of the little finger, we allow a few regular inspirations before we proceed to tieing the umbilical cord and then cut it four or five inches from the abdomen of the child.

Of all impressions which act upon the tender organism of the new-born infant, the contact of the atmospheric air is undoubtedly the most unpleasant. The respiratory

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process commences as soon as the air touches the lungs. It would seem as though the sudden transition from the vegetative to the animal life must be more or less painful. In the very midst of the pains of parturition, the infantile circulation changes its course and the first attempts at respiration take place. The irritation which the lungs experience from the penetrating air, and the shock which the respiratory muscles receive in consequence of the sudden change of temperature, and of the whole surrounding medium, are sufficient to start the process of breathing. "The child," (says Daignan in his *Changes of human life*, vol. I., p. 2. Gera. 1799,) "passes from the womb into a cold air which penetrates and concusses it, and oppresses it from all sides. Its first impression is an impression of pain which it manifests by crying and moaning, precursors of the misery which it has to endure from the first to the last breath. Sad inheritance of human nature! This first impression of pain is undoubtedly due to the first contact of the air with the skin and lungs. It penetrates the lungs rapidly, moves and dilates the fibres of the pulmonary cells, and irritates them in an unpleasant manner." Nevertheless, though these first impressions may be painful, we know that the infant, in whom all the faculties are still slumbering, is not conscious of them; but, even were this the case, we must not forget that this sudden penetration of the atmospheric air into the lungs is indispensable to expand the chest and effect a complete dilatation of the lungs, which are in a state of collapse previous to birth. For this reason the sneezing of new-born infants need not be considered injurious; for it is not so much the consequence of a sudden cold as of the irritation caused by the contact of the atmospheric air, and is invariably followed by more vigorous inspirations.

With the respiratory process commences *the passage of the blood through the lungs*. In the fetus the blood passes from the right into the left ventricle through the

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foramen ovale. But as soon as the infant commences to breathe, the foramen ovale becomes closed and is gradually obliterated, and the blood passes through the pulmonary artery into the substance of the lungs, for the purpose of taking in the oxygen which the preservation of the organism requires.

I need scarcely mention, that care should be taken to keep the air which the new-born infant is to breathe, pure and perfectly free from all heterogeneous influences, scents, and the like.

The next thing to be attended to is to *wash the child*. Unless this is done without any unnecessary loss of time, the child will take cold. The best thing to wash the child with, is tepid water. For the purpose of removing the greasy or caseous matter which adheres to the infant, its skin may be first rubbed with sweet oil, grease or washed butter, after which tepid water will easily remove it. Instead of soap, wheat or almond-bran may be used, which will not irritate the skin or eyes of the infant. After washing the child, we dry it speedily and gently, put a warm diaper on, dress it with warm clothes, and wrap it up loosely in warm flannel. In washing and dressing the child, we must take care not to pull the remnant of umbilical cord adhering to the child. This piece of cord is laid between fine linen and turned up alongside the navel, where it is kept in place by means of a bandage.

Rest and *sleep* in pure air are now the most pressing wants of the child. All scents and fumigations in the sick-room should be avoided, whereas we may open the window several times a day, for the purpose of letting in fresh air, of course with proper precautions towards the mother and child.

Although it would seem, to judge from the rather violent handling which the child experiences during the process of parturition, as though the little being could bear a little exposure, yet it would not be safe to risk

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