

No. 2 or 3. Besides, the question of water does not enter into this calculation at all, and, as water is a part of the weight of a child, so it must be a part of its food. So that Caloric Value of infant food cannot be the correct method upon which to base a formula. Ladd, of Boston, after feeding twenty (20) infants with the Caloric Value Theory as a basis, concludes as follows: "The Caloric Value of the food expressed either in terms of the number of calories ingested daily, or as the energy-quotient, is not the most important consideration in determining the quality of an infant's food. The nutrition of an infant depends primarily upon its power to digest and assimilate milk. These functions are best served by modifying the percentages of the constituents of milk, so as to adapt the food to the individual needs of the infant. In a given case, neither the number of calories nor the energy-quotient of the food can be positively determined by rule, but like the fats, sugar and proteids in percentage feeding, must be ascertained by experiment. The calculations of calories and energy-quotients in connection with percentage feeding can be easily made, but they add nothing in the way of information which cannot be obtained by careful observation of the gastric and intestinal functions and the weekly gain in weight."

English and American laboratory chemists, in considering that it is the inherent unsuitability of cows' casein, which is the chief difficulty in feeding, have placed before us enough facts to show that by sub-dividing the proteid of cows' milk into caseinogen and whey proteid through the agency of rennet, that a food can be obtained upon which children will thrive and gain in weight. Further, it has been shown by Dunn, of Boston, and Still, of London, that by making whey proteid and caseinogen equal in a mixture, indigestion results, and by making the whey proteid double the caseinogen, the symptoms diminish, while by constituting a formula, consisting of Fat 3.50, Sugar 7.00 and whey proteid .90, with caseinogen .25, there is a maximum gain in weight and a minimum of untoward symptoms. Any variation from this disturbs the upward progress. By application of this knowledge then, the proper proportion of the divided proteid will make a food suitable for the great majority.

It is an easy matter to order such a formula when a milk laboratory is at hand, but, unfortunately for most of us, this is beyond our reach. To this majority I would venture to suggest a practical method of feeding upon a theoretical basis. Two methods are employed. The first is to place the child upon formula of milk, cream, sugar and water, the proportions of which will be presently discussed. The second, which is employed only, when after a trial of two weeks, during which time certain changes are made in the first for-