

disturbances liable to occur which are due, not to the pricking through of the teeth as is popularly supposed, and this idea is not entirely foreign to the profession, but the appearance of the teeth is but an index of the general evolution of the alimentary canal. Bear this in mind, and consider the necessary alterations which take place in the digestive function as a consequence, and we have an important guide to therapeutics. The therapeutics of early infancy is mainly alimentary. The mother's milk is the normal food for her infant. I need not say that she should be free from emotional disturbances which are so common to American life. Doubtless the prominent cause of those changes which render the human milk innutritious is psychic and emotional, and is often removed by what Bulwer Lytton calls the "calm intelligence" of the medical adviser. But artificial feeding must often be resorted to, for the mammary secretion is often deficient. Now we have to avoid both the Scylla and the Charybdis of medical extremes. A wet nurse may be the poorest substitute for the mother. On the other hand the market is flooded with foods which have become an abomination, and the commercial aim back of them is so far from being humane that it has for its object only the transmutation of nostrums into nuggets. In my experience, and it has not been too limited to justify me in expressing an opinion, the best artificial food is made of rice flour with water or with pure cow's milk. Cheap, wholesome, pure, highly nutritious, and easily digestible, there is no one article which commends itself more strongly to the judgment of the physician. When I use cow's milk alone, I generally follow Vogel and deprive the milk of its property of coagulating into large, compact lumps by adding at every meal a teaspoonful of a solution of carbonate of soda (3j. to water 5vj.). In hot weather he also renders the milk alkaline by adding a tablespoonful of the solution to five ounces of milk.* The following is a very useful formula which was given me years ago by Dr. B. E. Cotting, of Boston Highlands, and has now and then served me well. Take of gelatine, 5 grains; arrowroot, 25 grains; water, 1½ pints; milk, 1 pint and 4 ounces; cream, ½ pint. Dissolve the gelatine in half the quantity of water cold. Dissolve the arrowroot in the other half, hot. Mix. Boil, adding the milk. In cooling add the cream. Sweeten a little. A very exact dietary, prescribing the food for different ages, in sickness and in health, would be desirable, because babies, like nations, cannot subsist on "glittering generalities." The nearest approach to a reliable dietary is to be found in Eustace Smith's work.†

With variations in quantities and with regard to the difference between our climate and that of

London, and with due consideration of the peculiarities and idiosyncrasies of American children, I have found this dietary a very useful guide. So useful in fact that I transcribe it for the benefit of the readers of the *Review*.

DIET IN HEALTH.

I. FROM BIRTH TO SIX MONTHS OLD.

DIET 1.

If the child be suckled, and the breast-milk be found in all respects suitable :

No other food.

The child should take the breast alternately every two hours for the first six weeks ; afterwards, every three hours, except between 11 P.M. and 5 or 6 A.M.

In cases where the secretion of milk is slow to be established, and the quantity drawn is insufficient to supply the wants of the infant, the following food may be given as an addition to the breast-milk, until the secretion becomes sufficiently abundant :

One tablespoonful of fresh cream.

Two tablespoonfuls of whey.

Two tablespoonfuls of hot water.

This mixture must be taken from a feeding bottle. The whey is made fresh in the house by adding one teaspoonful of prepared rennet to a pint of new milk. The coagulated casein is removed by straining through muslin.

DIET 2.

If the infant be brought up by hand :

New milk and lime water in equal proportions.

Three to four ounces, sweetened with a teaspoonful of sugar and milk, are to be given at first every two hours from a feeding-bottle.

The proportions of milk and lime water may be varied according to the age of the infant.

From six weeks to three months, one-third of lime-water may be used ; and from three months to five months this quantity should be reduced to one-fourth.

DIET 3.

If the infant be partially suckled, the breast milk being poor and scanty :

The breast must be given only twice a day.

For the other meals the child must be fed upon milk and lime water as directed in diet 2.

Up to the age of six months the milk should be warmed by dipping the bottle containing it into hot water. After the age of six months it may be boiled if convenient. New unskimmed milk should always be used. If the milk has been previously skimmed a teaspoonful of cream must be added to each meal.

In all cases where the child is artificially fed, the utmost attention should be paid to the cleanliness of the feeding bottle.

2. FROM SIX TO TWELVE MONTHS OLD.

* Alfred Vogel, M.D., "Diseases of Children," p. 43. Raphael's trans. N. Y., 1873.

† Eustace Smith, M.D., "The Wasting Diseases of Infants and Children." Phil., 1871.