



A Lullaby.

Sleep sweet, birdikin,
In the nest, mother's breast,
Silk-soft for birdikin,
With wind in the east.
Hush, Oh, birdikin,
Sleep away another day,
Much too cold for birdikin,
Is east-wind day.

Sleep soft, leafikin,
Softly curl not unfurl,
Silk sheath for leafikin
Of pink and pearl,
Hush, Oh, leafikin
Nor unclose, baby rose
Much too harsh for leafikin,
East wind blows.

Creep close, lambikin;
Nestle, hide by mother's side
Till upspring, for lambikin
Daisies pied.
Hush, Oh, lambikin,
Safe in fold from the cold
Till south wind for lambikin
Her wings unfold.

Hush, Oh, babykin,
Mother's joy, father's boy,
Pearl of price is babykin
And winds are keen.
Dream, sweet babykin.
Golden head in rosy bed,
Over sleepy babykin,
Angels, lean!

A Diet Cure.

It is a deplorable fact that many children of the present day suffer as much as do their elders from stomach troubles. A weak stomach and indigestion are by no means confined to grown persons.

Sometimes the symptoms are such as to make it easy to locate the trouble, as in the case of sick headaches, nausea and the like, but often the symptoms are of such a nature as to leave a mother quite in doubt as to their origin. Sometimes there are severe pains in the back and limbs, weakness and pain in the eyes, and general listlessness and debility, all arising from this fruitful source of trouble.

In such cases, whether of occasional local distress, or of more chronic and serious disorder, a strict diet will work greater wonders than medicine. It is only reasonable to suppose that the stomach when out of order needs rest, just as we when sick or over-worked, need rest.

A child of our acquaintance, who had occasional and slight disorders of the stomach, became, one winter, utterly listless and lifeless. She complained of pain in the back and limbs, her eyes were not as strong as they had been, then she began having intense pains in her head. The family physician was consulted again and

different medicines were given, all without effect. The parents became worried and then alarmed.

At last a friend said to the mother that she believed the trouble all arose from the child's stomach, and advised a strict diet.

It was tried as a last resort, and the child soon began to improve. She kept on improving, and at the end of six weeks was well. She has had less trouble with her stomach since that time than ever before, and has been strong and hearty.

Her diet for the first two or three weeks was nothing but broths and fresh milk. There are some stomachs that milk does not agree with, but not many. During that time she took no solid food of any kind.

After the third week crackers and bread, not fresh bread, were crumbed into the broth and milk, and from that time on a greater variety of foods was gradually, very gradually, permitted. These were all of a nature to be easily digested, and not until the end of the six weeks was the ordinary diet fully returned to.

Of course it was hard for the child, for she did not like broths, and for the mother too. It takes time to make broths, and when they are the sole diet, there must be variety. So she made mutton, veal, beef, oyster and chicken in turn, seasoned them well with salt and pepper, but no butter, and tried to make the time of self denial as easy for the child as she could.

Of course in a less severe case than this it would not be necessary to continue the treatment for so long a time, but a day at a time, three or four days, or a week, as the case may be, will accomplish wonders, and certainly as experimenting with medicines.

Study Your Children.

Have you not often thought as you have seen other people's children misbehave at the table, or have seen them carried screaming from the room to be put to bed, that you would like to have the training of that child yourself for awhile, and see how different it would appear? says a writer.

Do not believe, as we are often told, that they are naturally bad tempered and cross. They come to us just as sweet tempered and gentle as they leave the hands of God, and all the evil tempers, and frowns and cross words are the reflections of ourselves. Have you ever thought of it? Think of it the next time that you see a mother dealing with her child, and if you know them both sufficiently well to be able to look back, you will find you can recall a time when those harsh words fell from the mother's lips within hearing of the little one.

Not many days ago two sisters, aged four and two, were playing together, and the elder called to the younger: "Come here!" in no pleasant

tone of voice. The little one looked around, but failed to respond to the ungentle command.

"Come here!" the elder repeated, louder than before, and this time the face was overshadowed by an ugly frown. The mouth was drawn into harsh lines, and the foot was stamped impatiently. The little one stole quietly up to the side of the other and looked wonderingly up into the distorted face, and the big blue eyes filled with tears. The mother sat by unheeding, and the uncontrolled little temper had gained another notch, and had fastened itself by another tendril.

I dislike above all things to see an elder child, allowed to tyrannize over a smaller, and to tease it; remembering my own experience and how my temper, over which I never had too good control, was tried by an elder brother being allowed to tease me, in a "harmless" way.

Mothers, study your children more, if the last fashions and the least fancy work must be neglected for this more common and every day study. You will not be the only one to profit thereby.

Nosebleed.

Nosebleed is so common in childhood that little account is ordinarily made of it. Where it occurs repeatedly without apparent provocation, however, effort should be made not only to check the immediate attack, but to ascertain the cause of the trouble. It is well known that heart-disease, congestion of the liver, and other conditions affected by, or affecting, the circulation of the blood, predispose to nosebleed, and considerable anxiety is frequently felt lest the nosebleed of childhood may be the result of serious constitutional causes. Most commonly the cause is local.

The best means of checking the immediate attack is pressure with the fingers on the upper lip just beneath the nostrils. A small pad of absorbent cotton or a piece of handkerchief may be placed inside the lip and tightly pressed against the gum from without, thus compressing the two small arteries of the upper lip that supply the nose. These can ordinarily be felt pulsating in this locality.

If the bleeding is profuse or prolonged, the child should be placed in a restful position, but with the head elevated, while ice may be held to the forehead or the back of the neck. To decrease still further the blood pressure within the vessels of the nose, a mustard foot-bath is of service.

In the meantime, blowing the nose must be avoided. Plugging the nostrils both in front and back is a last resort to keep the sufferer from actual peril.

The predisposing causes of nosebleed are, as has been said, commonly local. Careful examination of the nose by the physician is, therefore, always necessary in recurrent attacks. Diseased areas in the nose are usually found, in which the vessels are spongy and unnaturally turgid.

The depression of the child's health caused by repeated attacks of nosebleed not frequently requires attention. If the trouble is due to systemic weakness, attention is to be especially directed to an improvement of the general condition; while if the lungs are themselves weak, repeated attacks of nosebleed are sometimes indications of the need of a change of climate, or of proper physical exercises at home.

The formation of scabs or crusts, often attended in childhood with picking of the nose, must not be overlooked as a cause of nosebleed. Watchful-

ness may be required to prevent the formation of an unfortunate habit, but the affected spots must also be treated with ointments or other simple means of healing.

Sucking the Thumb.

The dangers associated with the habit of thumb-sucking have been so often made the topic of discussion, both written and oral, that it is mainly with the idea of reassuring persons who are particularly interested that we venture to refer to the subject.

There is nothing to recommend the habit. It should be discouraged, of course, and the steps to prevent it should be taken as early as possible.

Sometimes children suck the thumb only when ailing, or on going to sleep, or to quiet the nervousness natural to some children on retiring. It is then hardly worth while to notice the matter, except to remove the thumb from the mouth at night. As the child grows older the habit is quickly discontinued.

The case is different when the habit, begun in early infancy, becomes so firmly established that the thumb is sucked throughout the greater part of the day, and night. In such cases the habit may even be continued almost to adult life.

Deformities of greater or less extent result from such a state of affairs, the most common one being the production of the "V-shaped jaw," in which the front upper teeth are pushed forward and outward, so that they meet at a more acute angle than is natural, while the upper teeth also overlap those of the under jaw, like the teeth of the rabbit.

The constant pressure of the thumb against the roof of the mouth and the nose may also affect the shape of the nose, so that it becomes "pugy" and deformed.

The nightgown sleeves are often best made long and closed at the ends, to keep the thumbs out of the mouth at night; or some other strategic means may be employed for the same purpose.

Disagreeable substances are often placed on the thumb in order that the child may be driven from the habit, but the expedient is rarely successful. The habit will overcome any repugnance of taste or smell after a little, and the child will simply become a source of discomfort to others. Really to cure the habit, persistent effort is often required for a long time.

"Don'ts" for the Nursery.

Don't hang heavy curtains around baby's bed. The most that can be endured are light swiss draperies, and these should be laundered every week. Children need fresh air, especially when sleeping, and curtains prevent free circulation, while they collect dust.

Don't place the baby's crib in a position where the light will fall upon his eyes, nor in a draught.

Don't make the baby's bed on the floor. The air near the floor is always draughty.

Don't load a child with heavy clothing. His garments should be warm, but light.

Don't neglect to air the bed-clothing every day, and remember that a half hour's airing in the open air is equal to a whole morning's in a room.

Don't allow a child to sleep with an elder person, even its own mother. Its rest will be less disturbed and more beneficial alone.