

should not be induced to take more than sufficient to satisfy its appetite, after which it should at once be removed from the breast. Simple as this rule is, it is constantly neglected, every cry of the child being thought to denote hunger; and to call for a fresh supply. Too large quantity, and too frequent repetition, should, however, be carefully avoided, for over-distention of the stomach is almost as bad as giving indigestible food. A positive proof of such over-feeding is the eructation of the milk soon after suckling; although this, in some rare instances, may be due to some fault in the milk. Chronic vomiting and gastro-intestinal disorders can very commonly be traced to this over-suckling, or to too great frequency of suckling. Upon this last point there is much difference of opinion, although it is generally thought sufficient to give the infant the breast every two or three hours during the day, and once or twice during the night—the milk being extremely liable to cause colic, diarrhoea, etc., when given oftener in the night. When called to a case in which, owing to over-feeding, vomiting and intestinal disturbance have been going on for some time, giving rise to emaciation, etc., the urgent indication is to give the stomach rest. All medicine and alimentation should be stopped when the case is urgent, giving, perhaps, a teaspoonful of cold water every fifteen or twenty minutes. The stomach in this way should have absolute rest for twenty-four hours, and, when nursing is resumed, the child should suck only a few mouthfuls at moderate intervals during the next eight or ten days, when it will very frequently be found that the normal quantity of food can be taken without trouble. Constipation, as well as diarrhoea, is very often due to over-suckling or too frequent nursing. The stomach is over-taxed, and the food, instead of being finely coagulated, comes into contact with old coagula, and the coagula then formed are large and hard, and if not thrown up by the stomach pass into the intestinal canal little or not at all changed; and there, as hard, dry masses, give rise to constipation. It is an accumulation of such curds that sometimes gives rise to intestinal catarrh, which may finally terminate in severer forms of intestinal disease, and is probably one of the frequent causes of cholera infantum. Abnormal acidity of the stomach may sometimes be the cause of the formation of these abundant coagula, but that is exceptional.

If an *artificial diet* be judiciously selected, there is no reason why a child should not thrive as well upon it as upon the breast; but to this end it must consist of a liquid food possessed of heat, and fat-producing properties. Cows' milk should in general be preferred to that of other animals, and, when properly prepared, may answer all purposes. To this end it must be diluted, and for this purpose water is usually employed. But in far the greater number of cases mischief results from this, for the addition of water does not improve the digestibility of casein, inasmuch as it does not dilute it; and when milk so treated is taken into the stomach, the water is soon taken up, leaving the casein unchanged. Nor does the addition of sugar make the coa-

gula easier of digestion, while skimming the milk deprives it of one of its most important constituents. Inasmuch as the mother's milk contains proportionally more fat than other milks, it may be that the finer coagula produced by it are due to the presence of this fat, and it would be better to use other milk from which casein had been removed than that which had been deprived of its cream. The admixture of farinaceous-substances also leads to disastrous results. Barley-water, however, is an article that contains so small a quantity of starch that it may be advantageously employed for dilution—good cows' milk diluted with from one-third to one-half of barley-water forming one of the best articles of food that can be used for infants when it is necessary to bring them up artificially. When it cannot be procured, oatmeal may be substituted with advantage. By these a real dilution of the casein is produced, rendering the coagula much finer and more nearly like those produced in human milk.

In the discussion which followed, Dr. Joel Foster expressed his belief that almost as much mischief is done by over-feeding as by under-feeding infants. Attached to the New York Infant Asylum, he has found it necessary to use a substitute for breast-milk owing to the difficulty of getting a supply of this. For this purpose he employs cows' milk, which he allows to stand until the cream begins to rise, then taking the upper portion and diluting it with barley-water. He is very particular in giving it at regular intervals, and at a temperature near that of the body, for, when given below this, it may readily produce gastro-intestinal disturbances. It has been found that milk taken directly from the cow does not do for children nearly so well as when allowed to stand for about two hours, when a partial separation of the cream has taken place, and then taking the upper portion of the milk. In this way more fat and less casein is obtained. Dr. Messenger urged the propriety of thoroughly cooking whatever article is used for diluting the milk, and he always insists that the barley-water should be boiled for three or four hours. Dr. Lewis Smith remarked, with reference to the use of farinaceous food, that up to the third month the salivary gland and pancreas are present only in a rudimentary state, and consequently that the fluid suited for the digestion of starchy matters is absent; but it is also probably true that starch is not so irritating as is the undigested casein. He has been accustomed to employ the upper portion of the milk, after it has stood for a short time; and he prefers to use as a diluent some article that has been changed, into dextrine or glucose, and recommends Liebig's food. He does not think that sugar should be added in warm weather when diarrhoea is present; but if there is constipation he gives it in the form of sugar of milk, which is the best. He is decidedly of opinion that many deaths occur among children from the fact that mothers regard numerous stools as necessary while the child is teething. Dr. Robinson suggested that the weight of the child might determine whether it is receiving sufficient food or not.—*Med. Times & Gaz.*