

CAUTIONS TO WOMEN,

RESPECTING THE

STATE OF PREGNANCY,

&c. &c.

BY

S. H. JACKSON, M. D.

1798

CAUTIONS TO WOMEN,
RESPECTING THE
STATE OF PREGNANCY;
THE
PROGRESS OF LABOUR AND DELIVERY;
THE
CONFINEMENT OF CHILD-BED;
AND
SOME CONSTITUTIONAL DISEASES:
INCLUDING
DIRECTIONS TO MIDWIVES AND NURSES.

To which are added,
OBSERVATIONS ON THE MODE OF RECOVERING A
STILL-BORN INFANT; THE MANAGEMENT OF
CHILDREN IN THE MONTH; AND THE DISEASES
OF EARLY INFANCY;

BY
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"Sens veritatis Amor, et communis Utilitatis studium, ad has partes sus-
cipiendas impulerunt. Quis quantumque hoc meum sit, prudentis, ac boni
viri judicium esto; mihi satis superque erit, illud, et publicæ utilitati, et
præsertim MULIERUM incolumitati, consecrasse."

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ADVERTISEMENT.

THE propriety of drawing up the following cautions, and observations, was suggested to the Author, by perusing the Memoirs of the late Mrs. Woolstoncraft Godwin, in which an account has been given of the unfortunate illness which terminated her life; an illness that, as far as a conclusion can be drawn respecting it, from a bare recital only, appears to him, in a great measure, if not wholly, to have been occasioned by a want of attention to those things, which ought always to be regarded by women in that situation; and not to have *clearly* originated from the circumstance, hinted at in that publication, as connected with her labour.

On

On the whole of those Memoirs, (particularly the last chapter) the Author had intended to publish some remarks, which he announced by an Advertisement in several newspapers. But he has now laid aside that intention, thinking it would be more usefull, to guard the fair sex in general against those errors, which so often prove injurious both to themselves, and their offspring. With this view he offers the following pages to their consideration.

Hanover-street, Hanover-square,
August 16, 1798.

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CAUTIONS
TO
WOMEN, &c.

CHAPTER I.—*On Menstruation, and
its connection with the Diseases of Wo-
men.*

THE constitutional characteristic of the female is principally formed by that function, on which the pregnant state wholly depends; I mean menstruation, or the monthly evacuations peculiar to the sex.

This important change takes place in this country about the age of thirteen;

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or fourteen, but varies through the world, either in degree or frequency, both from constitution and climate; so that the Laplanders experience the commencement of it much later in life, and with them it only occurs once, twice, or three times a year, and that commonly in their summer months. In this country its return is generally regulated by the lunar month, and in robust constitutions, it continues for a shorter period, than in the more weakly, and therefore it is more free, while it lasts.

I wish women to consider, that occasional irregularities are not always morbid. Constitutions vary as much in respect to the regular returns of this discharge, as they do with regard to its first appearance, or its final cessation. They, in whom the change takes place very early, from vigour of constitution, require little to be done for them; but
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in weaker, and less plethoric, young women, the non-appearance of this evacuation is too often considered as the cause, whereas, it ought to be viewed as the effect of a state of the habit, unpropitious to its taking place. It is of importance to discriminate well in this matter. A just knowledge of the different temperaments will always guide the practitioner, on whom they should depend for relief. But let me caution mothers against the general custom of giving stimulating, and forcing, medicines, to their daughters, at the approach of this change. They have often had bad local, as well as bad general, effects. Care should be taken so to manage the habits of their lives, as to improve the general state of their health. Nature will do the rest for them in due season.

When the habit of a young woman is full, and the complexion fair and florid,

it will often admit of the use of the lancet, to relieve some occasional indisposition: but the same complaint must be treated differently, if the constitution be backward, the frame delicate, and marked by the brown, or melancholic, temperament, even though the lips may be florid. These differences should be attended to, even when a bleeding may be proper; but it is too often had recourse to, because menstruation is supposed to be concerned, more than in truth it is.

The rules generally admitted about exercise should also be attended to. It is too often taken to excess by the practices of dancing, riding, &c. so frequently recommended by physicians to promote the menses. But, as I think it a mistaken notion, that menstruation takes place with the professed design of nature to relieve the constitution, or that, when it is about to cease

cease at the turn of life, the constitution is at all concerned in it, I must recommend caution to be observed by young people, lest a needless, or even injurious, degree of exertion be made use of by them. Menstruation is, in my opinion, to be viewed, as a principle, or local arrangement of a particular system, in the female, for a specific purpose, and depends on a peculiar organization, as much as the functions of digestion, chylication, &c. which also may become, in a secondary manner only, disturbed by inattentions to the general health : and it may, in its turn, from injudicious management, cause a general irritability of the whole system. But both menstruation, and the general state of the habit, are innately, and primarily, distinct from each other.

It will here be proper to take some notice of the consumptions, which so frequently occur in this country, at the

age of puberty, particularly in the female sex, with whom a complication of causes tend to aggravate, and increase their danger. They are much oftener occasioned by those imprudencies, into which parents, through affection, fall; of introducing their daughters into the society of the world at that tender age, when, by a sudden change from the regular habit of their lives before, they are now, by dancing, late hours, and heated rooms, so unguardedly exposed to the baneful effects of a cold and variable atmosphere, with the aggravating addition of extraordinary warmth, and fatigue of their own persons, at the time. From such occasional causes pulmonary consumptions as often arise, as from constitutional disposition. If this conduct should occur at the time of menstruation, which may be perhaps unknown, or concealed from the parent, the hazard is greater, because the
function

function has a separate and distinct interest in the constitution, and produces the complication above alluded to.

I will now suppose a young lady in a decline, from the above misconduct, in whom menstruation has not fully, and regularly, taken place. It is not with me a question, whether the obstruction, or irregularity, be the cause, or the effect. I consider nature as then occupied, in counteracting the danger of pulmonary consumption. It is in this case, that the injudicious use of powerful medicines, to bring on the menses, does so much harm. By their operation on the system in general, they aggravate the symptoms of the constitutional disease. This tends to prove the observation above advanced, that menstruation should be considered more as a passive, than an active, hæmorrhage, as far as the general circulation is concerned in its production, it being the
function

function of a particular organ, the womb, when in an healthful state. It will be often therefore found to take place regularly in constitutions, which, in other respects, cannot be considered as healthy. The function then, as unconnected with the general circulation, is the maturity, or monthly paroxysm, of the womb, during a limited portion of a woman's life.

On the treatment of this complaint, pulmonary consumption, when connected with obstructed menstruation, I could much enlarge, but I think it sufficient to say, that a change of air, particularly to the sea-side, will certainly do more good to the young patient, than stimulating medicines, when she is of a delicate and relaxed constitution, provided she does not injure herself by too much dancing, and other exercises, when there. Let me particularly caution against bathing with the

the least consumptive tendency, or a feverish disposition of the habit. Gentle riding on horse-back with an empty stomach, is, of all exercises, most calculated to benefit weak and tender constitutions.

Let me caution women at all ages, against the imprudence of checking perspirations of the feet, by bathing them in cold water. The greater the strength of constitution, which this trouble accompanies, the greater the evil of suppressing it at any time, but particularly on the approach of menstruation, or during its continuance.

Let me also caution women against the too frequent use of baths, and the application of tepid vapours; for, with the good they have apparently done by their local effects, they have, at the same time, by relaxing too much the general frame, laid the foundation for other complaints, without having permanently

manently removed the suppression of the menses. A constitution, which labours under little or no indisposition, in consequence of the menses being occasionally suppressed, may be materially injured in the end, by producing that artificial state of fever, which the use of the hot, or warm, bath, and its subsequent treatment, may occasion; namely, the going to bed, and drinking whey, and draughts of warm liquor, until the constitution has undergone the regular process of the hot and sweating stages of an intermittent fever. Such treatment has been recommended by some, with the additional mortification of being one day at least confined to the house.

There is often great contradiction in the treatment recommended by authors, for the cure of females diseases, from its being founded on the supposed primary connection of menstruation with the

the constitution: for, with the use of strengthening, and other medicines, will be some times prescribed bleeding, even in delicate habits. There is certainly the greatest confusion in the practice laid down by various writers, and teachers of medicine, for the cure of those female complaints, which have been supposed to depend upon the irregularity of the menstrual discharge, arising wholly, I believe, from its being so much thought the cause, and not the casual accompaniment, of a deranged state of health. The irregularity will often be owing to an impaired constitution, from mental impressions only; and this can be rationally accounted for, as it is reasonable to suppose, that the function of menstruation may be connected with the nervous system, from the many sympathies, and irritabilities, of the habit, appertaining to the situations

situations of pregnancy, delivery, and child-bed.

A few words on painful menstruation must suffice. Does this attend most frequently the married, or the unmarried, state? If the observation of the late Dr. Fothergill, and other physicians, be well founded, "that few of those, who have suffered much by painful menstruation, have borne children," the question is very proper. I believe the single are the greater sufferers, but the married alone can prove the justness of Dr. Fothergill's position.

On what does it depend? On nervous irritability, in my opinion, varying in degree according to the temperament of the patient; and we are to be governed in the treatment, by its particular character. If women are naturally full in their habits, let them
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Be temperate in the general manner of their living, and use a foot bath with caution on the eve of menstruating. Let them determine with caution to let blood, for the spasmodic pains of impeded menstruation will be more relieved by a shew, than by a free bleeding from the arm: but, I think, leeches to the loins have been sometimes recommended with propriety, though they can seldom be necessary.

Let recourse be had to anodyne medicines with great circumspection; but, if they be absolutely necessary, from the above means having failed of affording sufficient relief, let such be prepared with camphor, and they may be then employed with the greatest advantages. Sitting over the steam of warm water may assist; but I think that moderate purging will alleviate the painful symptoms, with the least hazard of doing harm.

If women are relaxed, let them select also, with caution, the tonic medicines, to strengthen themselves. Let them not trust too much to the fashionable practice of depending wholly on peruvian bark, particularly when steeped in port-wine: and let them avoid the use of deobstruent, or forcing, medicines.

I shall say also a few words on the immoderate flow of the menses. Endless is the variety of this female condition, in its degree, from constitution. All women know what is its ordinary quantity, and duration; but they should always remember, that what is to one woman a just and due proportion, would be to another, from the difference of temperament and constitution, an immoderate flow; and before they attempt to restrain it, let them carefully consider, what may have been its exciting, or occasional, cause.

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The deviations, from its natural ordinance, in any individual, arise from causes, which are too often unattended to by the sex. Great as is sometimes the injury done to their constitutions, by the neglect of themselves in this particular, both when single and married, so as to rob some of them of the common enjoyments of the world for many months, yet it seldom deprives them of their lives. This may be comfort to some of the afflicted to know, but to others it would be greater, if they could be told, that they would certainly recover the health they once had. Some, unfortunately, ever after, remain impaired in their constitutions, though they live for many years.

This should induce women to attend in time to the management of themselves, under such circumstances: but let them be careful how they venture medicinally to treat themselves. They

will be too frequently told, that such a situation arises from mere debility, and they will be advised to take the bark. In general this is not the case; the opinion is erroneous, and the practice therefore improper: the flow is increased, and the habit rendered feverish by such treatment, and an amendment cannot take place, until the whole plan is altered. Let this important remark lead women to be cautious.

A few observations in this place on the Fluor Albus, or Whites, may with propriety be introduced. This troublesome complaint of the region of the womb, in like manner as the preceding condition, is too often considered by the sex, as the effect of general weakness in their habit. They are therefore again led to the use of bark, and port wine, and also the application of astringent washes, and injections, when such remedies become very improper; they

they increase the complaint itself, as well as bring on an evident feverish irritability of the system; and when so great an error of management happens at the change of life, or final cessation of the menses, it has too frequently disposed the womb to those dreadful diseases, which are most commonly subsequent to that period of the woman's life. It is probable, that such an improper treatment has laid the foundation for the opinion, that scirrhus and cancerous affections of the womb happen most frequently about the age of forty-five, and sooner or later put on the appearances of cancerous ulcerations. It is, however, proper to observe, that a morbid action only of the surface of the womb sometimes takes place, which has often been mistaken for a cancerous affection.

Let women therefore be either guided by some judicious advice, or do nothing.

nothing. In the hands of nature they would be safer, than under any medical treatment of their own, especially founded on such mistaken principles. These hints are of the greater importance to them, because they are too apt to conceal their situations, even from their domestic physician, and will only seek advice under circumstances of emergency, after some family practice of their own has either failed, or made them worse.

Local complaints of the chronic kind are commonly unconnected with constitutional causes; but, by the mismanagement of them, women either infect the constitution itself with them, or they increase them, through having injured the general condition of the habit. It is under chronic local complaints, of all kinds, even in both sexes, that so much more good may be done, by doing but little cautiously, and truit-
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ing much to time, under the secret and salutary agency of nature. A sick person should not therefore deem the physician's prescription trifling, as to the end desired, because it may appear in itself of little importance.

Some physicians have recommended a surprising number of medicines to promote the menstrual discharge. Let women be cautious of their application, and rather believe, that nature is not so defective in her own judgment, and operations, as to require a general use of such auxiliaries. Some have also been of opinion, that the cold bath, or sea bathing, is no way injurious to a woman at the time of menstruation; and that they will rather make it more free. It may be the case; but they cannot be wanted medicinally. Their harmless effects in any one such case might be an exception, to what would be their general mode of acting in many.

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I would therefore have women prudent and cautious, when they venture into the cold, or briny, element.

In respect to the final cessation of the menses, I believe it to be brought about by a particular change in the condition of the womb itself, and not through any material alteration in the constitution. The apparent connection between the two is not specific, but from sympathy. This can be anatomically proved. But all I have here to do is, to impress the female sex with the idea, that, owing to the said principle of sympathy, they may hurt their constitutions by their family practice, if they build it on the supposition of a direct, and absolute, connection, between menstruation, and the constitution at large.

On the principle menstruation commenced, so it ceases, that is to say, it began with a slow evolution of the womb, and its appendages, at first, and
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it is discontinued on the same principle, by a gradual constriction of the same organs, at the turn of life. How absurd is it, to set up any power to act in opposition to this established law of the animal œconomy. With these important changes the constitution may sympathise, and be discomposed, if improperly treated; but by the laws of nature, the general health, both before and after these local alterations, may be better, than when under the influence of menstruation, which was solely ordained for one most important function of the woman's life.

Those women therefore, who are least prone to have children, generally pass through life most serenely, with fewest of the complaints arising from morbid irritability, and they grow fat through the quietude of their system. When a woman, who has borne one, two, or more children, begins to grow lusty, it generally

rally forebodes the cessation of having any more. If menstruation so much depended upon the constitution, there could be no reason, from appearances, why women at fifty, who have thirty years of their lives to come, should not be as likely to be regular some years longer, and have children, as at the age of forty: for they are often at the latter age more generally healthy, than at the former, and the ordinary tenor of their habits equally perfect. Cases of an opposite character to this statement will occasionally occur; but they may, in my opinion, be with propriety considered, as exceptions to the general rule, in respect to female health.

It has been very properly observed by some teachers of the medical science, that women bear bleeding well, after the final cessation of the menses. This should, however, be considered,
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as owing to their general temperament; but, though true, I would have the sex cautious, how they believe it may be particularly called for, merely because they have reached that advanced period of their life.

I shall conclude this introductory chapter, with what I, perhaps, need hardly say to the sex, in this age of reason, and philosophical improvement; namely, that the superstitious opinions of the ancients, respecting the quality of the menstrual evacuation, were founded in ignorance, and want of correct observation. Women may, at all the varied periods of their lives, feel confident, that, when obstructed in their menses, from whatever cause, there is nothing, injurious to their health, thrown back into the system, to occasion a morbid state of the general mass of blood. The idea has too often had bad effects upon the female mind, and
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has led many to have recourse, most improperly, to the operation of forcing remedies, particularly about the change of life, and to bleedings after that period. Against this error of judgment the female sex has been some time guarded, by the writings of several long experienced physicians of the present century: but from the customs still prevailing, not with those general good effects, which ought to have attended them.

CHAP. II.—*On the Incipient State, or
first Four Months, of Pregnancy.*

WOMEN in the married state have duties to perform, which affect even the health, and interest, of both their children, and grand-children, independent of the ease and happiness, thereby afforded to themselves, as well as the partners of their domestic cares.

The first months of the married life often pass, without properly considering the cautions, which are needful in the early stage of pregnancy, when a new creature is formed, who is, in due season, to bring to the mother the most cheering solaces of her life, and to strengthen the ties of reciprocal affection existing between man and wife. This often arises from an uncertainty in the woman's mind, at first accompanying

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the married state, owing to her supposing, that either some irregularity, or the occurrence of some menstrual period, has happened in the first months, because something, like unto it, will occasionally take place in the first, or second, month of pregnancy. If, however, this circumstance be accurately inquired into, it will be found to vary, in some way or other, from the former regular times, which any woman may have been accustomed to, either as to degree, duration, or period. It will either not have exactly occurred at the usual monthly period, or, if it has, it will have been either more scanty, though continuing the usual time, or more free for the time it lasted, but then of shorter duration, perhaps only for one day. Being therefore not truly regular, or monthly, it ought not to be considered as menstrual.

Either

Either of these deviations will justly lead a woman to suspect, that it has happened in the first month of pregnancy; and it is better that she should so deem it, that, if soon after she should, from other circumstances, clearly appear to be pregnant, she may reckon early enough, and not be taken in labour a month sooner, than she would otherwise have expected. But when a woman shall have had two such periods of this dubious kind happen in the incipient state of pregnancy, she will, under these circumstances, be more correctly guided in her reckoning, by paying strict attention to the time of her quickening.

The great varieties of the female constitution occasion pregnancy to be, to some of the sex, of no trouble or distress, through the whole period of child-bearing; but it is to others often a continual disease, they being, per-

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haps, from the very first week to the last of their pregnancy, more or less disturbed in their frame, from the peculiar irritability of their habits. The usual period, however, that its troublesome sympathies and antipathies prevail, is during the first months, until the time of quickening is past.

Fullness of habit, and irritability, mark the distinguishing characteristics of the different constitutions. The first naturally calls for the use of the lancet; but it is, in general, in my opinion, more frequently had recourse to, than it should be, upon very erroneous principles. Because a pregnant woman, though by one of the established laws of nature, is now obstructed, they conceive it proper to draw blood, that the constitution may be freed of an imaginary redundancy, not recollecting, that the process of pregnancy is going on, to employ the interrupted menstrual

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al fluid, to the now essential purpose of affording growth, and support, to the increasing womb itself, as well as to its contents.

I therefore esteem the universal practice of bleeding, in the first months of pregnancy, as founded on wrong principles, and such, as are inconsistent with the improved state of medical science. It should only be admitted, when, in the opinion of a professional man, it cannot properly be dispensed with, being necessary, either to reduce a too plethoric state of the general habit, or to alleviate some morbid affection. They will both, perhaps, have wholly arisen from want of attention to diet, which should be always so regulated, as to prevent a feverish disposition, and to palliate some of the troublesome affections of the stomach, which often depend so much on the sanguineous state of the system. For this purpose a

bleeding has sometimes been found useful: but it is too much the practice to give with it loads of stomatic medicines, which only excite a disposition to fever, and counteract the good, which the loss of a few ounces of blood might afford.

Much of what has been recommended by authors, seems to have been, either the fruit of a strong imagination, or the result of some single, and unusual, case, to justify the particular treatment they point out; and such have been generally found in the works of young practitioners. Some will say, that the vomitings so troublesome to pregnant women, may, by rupturing some uterine vessels, bring on miscarriage, which a bleeding in time might have prevented. This would only be endangered in the very plethoric habit, and then I have said, that a bleeding has been found useful. But
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the vomiting may depend upon some peculiar irritability of stomach; I have therefore generally observed, that those women, of even the sanguineous constitution, who have been most troubled with occasional rejections of their food from the stomach, have been least liable to miscarriage.

When the vomiting is confined to the fasting hours of the morning, it may be probably then accounted for, from some additional bilious, or viscid irritation. Spontaneous vomitings seem therefore intended by nature to relieve the system, on some hidden principle in the constitution of the pregnant woman, and may be an inherent healthy sympathy in their habits, for some very wise purpose: and yet, when vomitings occur in the time of labour, they promote the dilatation of the mouth of the womb. This shews, that nature may have different views, by what is, apparently

apparently to us, the same mode of action.

Habitual bleeding is, I think, in general, wholly improper; because a constitution, familiarized to it, is thereby disposed to an increased exertion of the powers, concerned in making the blood, with the view of counteracting the danger, which nature feels, or thinks, herself in, under such a practice, and by which those very powers, in the end, become considerably weakened. All the temporary benefits to be derived from it, may be most safely, and permanently, attained, by a due attention to the diet, and to the state of the bowels.

It will be found, on attentive examination, that most of the indispositions, which attend the first stage of pregnancy, arise as often from an acquired, as from a natural, fullness of habit, and for which I have cautioned women

women to observe, that bleeding is much too often recommended, because it has been erroneously supposed to be occasioned, by the cessation of the ordinary monthly evacuations. Such are head-achs, heaviness to sleep, aching pains of the limbs, and sometimes back, &c.

The occasional causes, disposing to this situation of the system, are too generally overlooked, namely, either the too free indulgence of the appetite, against which I have already cautioned the sex, or a too sedentary life, each probably encouraged under the mistaken notion, that both an increased quantity of nourishment, as well as quiet or rest, are essential to the early pregnant state. I am of opinion, that the contrary conduct is more rational, and more agreeable to the laws of the animal economy; that abstinence and exercise, will rather prevent many of the troublesome

blesome corporeal sufferings of early pregnancy, and render bleeding, and other medical treatment, altogether needless.

The misfortune is, that, when the female sex think it prudent, or when they have been advised to lose blood, the temporary good is all they acquire: the evil day is only postponed: they soon return to the same state they were in before bleeding, because their indulgence in animal food, with, perhaps, porter and wine, is still allowed, and then the same complaints, for which they had been bled, because they had depended before upon a feverish heat, soon rage again, with, perhaps, additional irritations, and after all they will most probably miscarry.

Women, though pregnant, may have periodical returns of those uneasinesses, which were wont to attend them, both before, and during, their times of menstruation.

situation. When they occur, the cautions I have given, respecting diet and exercise, will tend to relieve them, and particularly the guarding against the costive state of the habit. If they should therefore take some aperient medicine, let it not contain any preparation of aloes; and fruit may often be of service to them: but of this I shall have occasion to speak hereafter.

In the young and healthy constitution, one of the most early symptoms of the incipient state of pregnancy, is an uneasiness in the breasts, somewhat differing from what she may have been accustomed to, on the eve of menstruation, and soon attended with some sensible addition to their natural fullness and weight, as well as with a particular change in the appearance of the areola, or dark circle round each nipple. The nipples also soon become more prominent, some bulbous, or glandular, eminences
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around them enlarge, and a milky fluid will stain the linen, which had not been at all, or so much, observed before. These occurrences may justly excite in the mind, the first apprehension of pregnancy, after which, the interrupted course of menstruation generally establishes the certainty of the situation.

Nature would seem, by these early notices, to put the mother immediately upon her guard, that she may not, by imprudencies, and too much freedom, disturb the tender embryo. These changes may serve also, in some cases, as a balance to the constitution, for the effects, which might be produced, by the first interruption of the menses: for I have known the milky fluid, discharged at such a crisis, from the breasts incessant, and even free for many days together; and not entirely ceasing for the several first months; and it has been, in some constitutions, more or less

less troublesome, through the whole state of pregnancy. It is generally most noticed during the first and second, rather than in the later, months of gestation. I think this secretion should not be checked by letting blood, or by any external applications, though both have been recommended.

The most important circumstance to be attended to, in the incipient months of pregnancy, is the costive habit of the bowels. This will, more or less, accompany the whole period of pregnancy. Its prevention, in the first months, may do away the necessity of bleeding; will subdue, if not wholly keep off, some of the troublesome complaints of the stomach; and will often guard, most securely, against some of the exciting causes of early abortion.

I believe the lower classes of women miscarry more frequently, in the first
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months, from this cause, than those of any other rank of life, owing to a particular prejudice among them, against opening medicines of any kind; and they also suffer much, from the neglect arising from it, both during the latter months of their pregnancy, as well as in their lying-in. The injection of a clyster is often equally disliked; but, I believe, that it has been sometimes principally objected to, from the apprehension, that the nurse, or even midwife, has not been duly skilled in the safe, and successful, administration of it. Many are too apt to suppose, that in the first months, it would of itself occasion miscarriage; but the apprehension is entirely groundless. It is therefore fortunate, when any have the courage, as well as the opportunity, of relieving themselves, by the convenient application of the instrument, which

which has been constructed for that particular purpose.

Vegetables, and fruit, are exceedingly proper for the pregnant woman, subject to a costive habit. Let me, however, caution the sex against eating them par-boiled, or unripe: but, above all, let them not indulge in filberts, and walnuts, unless they masticate the kernel very completely, before they swallow it; and if they eat of cherries, plums, or olives, let them throw away the stones. Too many have been rash enough to swallow them, and have deemed them harmless; nay, have even expected benefit from them, as an aperient; and for which reason some have, designedly, swallowed them. But women should know, that if they do escape through the stomach, without much disturbing digestion, and the appetite, they might yet do them considerable harm, at all times of their lives,

but particularly in the state of pregnancy, by lodging somewhere in the course of the intestinal canal, and producing, in the end, the most destructive consequences.

I will add a few more words in favor of abstinence. The diet of a woman under the state of pregnancy, and particularly during the first months, need not differ from her ordinary way of living, provided it is temperate, and in general, and still does, agree with her. It need not be more generous than usual, on account of pregnancy alone; perhaps, if less so than usual, it would be better; especially at the return of those periods, when menstruation would have been otherwise expected, particularly, if it had been generally attended with the uneasinesses, before taken notice of.

Women, who are thoughtful, and yet naturally active, will often relax
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in their ordinary exercise, when they first think themselves pregnant; and it may be prudent to do so; therefore, a less portion of food, than before was usual, may then prevent that fullness of habit, which cannot take place without inconvenience. By caution in this particular, bleeding, and saline draughts, become the less necessary to those, who are naturally plethoric, or feverish. Mankind, in general, live too freely to enjoy an uninterrupted state of health; and it is excess, which more frequently produces nervous irritation, and debility, by its extraordinary, and wearying, calls on the various functions of the animal system, than abstinence, which, if duly attended to, would often guard us all, against the effects of constitutional indispositions.

The floodings, to which women are liable, at any time of pregnancy, occur most frequently in the first months, and

vary much in their character, and tendency. They are, more or less, attended with danger, according to their frequency, and to the time of pregnancy. If, at the full time, they are least dangerous; and when accompanied with proper uterine pains, there is, comparatively speaking, little or no cause for alarm. In the early months they will sometimes put on the appearance of a copious flow of the menses, and, as I have observed before, render the sex sometimes doubtful of their situation. This will happen most frequently in the first and second months, and may be connected with the monthly paroxysm of the womb, aggravated by the existing state of pregnancy. When such a hæmorrhage has occurred, some injury has been most likely done to the embryo, whereby it is blighted, and about the third month of pregnancy the patient will miscarry, if she
does

does not at the time, that the flooding first happens. By prudent management, on the first alarm, such as observing abstinence, and proper medical treatment, together with indulging much in the horizontal posture, by lying on a couch, this has often been prevented.

I cannot entertain an opinion, which every one occasionally hears advanced, that a woman may sometimes continue to menstruate through the whole period of pregnancy. I have generally been right, when I have declared a woman, under such circumstances, not to be in a state of pregnancy. The discharge of blood from the pregnant womb, which most frequently happens, generally takes place about the third month, and if there has been a complete interruption of the menses, during the preceding three months, we have

have every reason to apprehend, that a miscarriage will follow.

Women are most prone to miscarry about this period, not from any sudden injury received at that time, but from some blight of the fruit of the womb, when they have been about a month, or five weeks, pregnant; for when the abortion comes away whole, and unmutilated, its appearance proves, that the embryo, or fœtus, is not of a more advanced growth, than naturally pertains to that early period. The fact is as follows :

The conception becomes, from, perhaps, some constitutional organic cause, blighted about the period above mentioned; but nature does not take the alarm, till about the third month; then, at length, becoming conscious of the futility of attempting to proceed with the pregnant state, she sets about the process of throwing off the placental
part,

part, (which all this time has continued to grow), containing the blighted embryo, if not already totally destroyed. So that, although the placenta is of three months magnitude, the embryo within it, if it has remained perfect, will be found as small, as it was at the fourth, or fifth, week, and is what professors have denominated, from its size and appearance, the kidney-bean abortion. On this curious fact I would build a caution to those, who would wish to escape the repetition of these early miscarriages, or rather blights, by the consequences of which so many constitutions have been permanently injured.

The irritable, as well as the plethoric, woman should take heed in time, and guard herself against disturbing the process of conception, in its early stage, by avoiding the occasions of either sudden alarm, fatigue, fever, or whatever

whatever might derange the equable state of her health, and by attending to those means for its preservation, which are best suited to her particular constitution. If this caution were well observed, numbers of women would escape miscarrying. But if symptoms have already come on, which threaten a miscarriage, bleeding, though so frequently resorted to, may be highly improper. It should be employed rather to prevent these symptoms, than to remove them. If the discharge, threatening abortion in the former, or premature labour in the latter, months, should be attended with pain in the back, it will be proper to have immediate recourse to anodyne remedies. They may put a speedy stop to the threatened danger. When the fruit of the womb survives the end of the third month, the period, principally exposed to the danger of abortion, is past,

past, and when the full sensation of having quicken'd shall have taken place, that danger is still proportionably less, as few women miscarry after the fourth month.

I cannot at all agree with those, who have asserted, that a menstrual period, as they have been pleased to call it, may happen at the third month, without any preceding appearance of the same kind, during the pregnancy. They say also, that they only call it such, because it is unattended with pain. I believe such an occurrence will always be found to arise, from a disposition to abort, and though rest, and proper medicinal treatment, may for a while defer the danger, or now and then totally remove it, yet most women will certainly abort, who have then, for the first time after conception, an uterine flux, whether with or without pain. The great, and evil, consequence, arising from

from a woman's being taught to believe, that such an occurrence is only menstrual, is, that she will of course be more careless of herself, and not act with that caution, which she would feel to be necessary, on the supposition of its being the proper symptom of abortion.

In these cases, women should also be cautioned, against adopting the idea, that this symptom arises from debility. Many, from this mistaken notion, have occasioned themselves to miscarry, by having recourse to the use of port wine, and bark, by which they have also generally impaired their constitution, and have brought on a disposition to flooding, which has continued many months.

I will now offer a few directions, how women should manage themselves, when abortion has been actually completed. If every thing has been left to nature,
a great

a great alteration speedily takes place, in the uterine evacuation. Let me recommend to them, on these occasions, proper confinement and quiet; and as this accident generally happens from an irritable sanguineous habit, I would advise them to be abstemious in their diet, for a few days, and to consider themselves under the circumstances of child-bed confinement, for a week at least. In fact, it so much resembles it on some occasions, when the habit is full and robust, and it has unexpectedly happened, from sudden causes, in or about the fourth month, that the breasts have enlarged in the same manner, as after a lying-in, and the patient has required the ordinary attentions to rest, and regimen, on that account.

Abortion is not near so frequent in the lower orders of society, as in the middling, and superior ranks, in proportion to the difference of their numbers.

bers. This can only be accounted for, by the difference of their several constitutions, and their habits of life. Those sumptuous indulgences, which tend to relax, are apt to enervate the frame, and produce all the bad consequences of intestinal irritations, with which those, who are thrown into the way of using them, are more or less afflicted, and by which abortion is often occasioned. During the period we have been considering, a slight alarm will sometimes bring it on, in many persons, while the severest affliction of mind, in other instances, has not effected it.

The most frequent cause of miscarriage, among the lower ranks, I have already mentioned to be costiveness.

CHAP. III.—*On the advanced State, or last five Months, of Pregnancy.*

THAT advanced period of gestation, which we are now about to consider, usually commences with the circumstances of quickening. It occurs generally, either about the termination of the fourth, or the beginning of the fifth, month. Many persons suppose this to be the time, when life first enters into the foetus, and that the pregnant woman is immediately made sensible of this, by its motion. But the principle of life must always have existed in it, from the first moment of conception; the mother only becomes conscious of it, at that period, from the fluttering motion, which its strength then enables it to perform, and which is

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sometimes,

sometimes, at the first, painful or unpleasant, from the natural sensibility of the internal surface of the womb.

We occasionally hear of some women, who always swoon away, or become sick, or hysterical, when the sensation of quickening commences. But these symptoms only take place in very irritable habits, and probably arise from another, and peculiar, change, which occurs about the same period in some women, and which they are apt to confound with the true sensation of quickening. This I will explain.

In the first months the impregnated womb lies in the lowest, or inferior, division of the abdomen, or what is called the region of the pelvis: as it increases in bulk, it necessarily occupies more space, and sometimes becomes unfavourably situated, its fundus, or great end, lodging somewhere about the hollow of the sacrum,
or

or lowest part of the back bone. At the period when this happens, which is generally about the fourth month, and sometimes later, according to the form and dimensions of the pelvis, its daily increase at length proves the mean of releasing it from its confinement, out of which it sometimes will so suddenly escape, that the shock it gives will occasion the mother to faint, or grow sick. This sensation she supposes to arise from the act of quickening; and, as this accords tolerably well, with the period of the child's real motion being sufficiently advanced, for her to become sensible of it, the coincidence of the two circumstances occasions her, to attribute these symptoms, entirely, to the entrance of life into the child:—The minds of some women are often so strongly prepossessed with the idea, that something of this kind is to happen, that they keep

on the watch expecting it, and can, with difficulty, be prevailed upon to go into company, though fear of being thus taken ill.

I have been the more particular, in thus stating what commonly happens about the fourth month of pregnancy, and how it is to be explained, that women may not disturb their minds by unfavourable apprehensions, and groundless conjectures. Mystery always magnifies the afflictions of life.

Two very necessary cautions must here be added. In the first place; that a costive habit should not be permitted to prevail, as it would, at this time, expose to some peculiar inconveniences: and, secondly, carefully to avoid a long retention of the urine. This might of itself occasion a very considerable affliction, by impeding the regular elevation of the womb, above spoken of, and causing it to fall backwards

backwards into the pelvis, in a direction the reverse of that, which it should take. This troublesome occurrence, which has been named *the retroversion of the womb*, has not been well understood, till of very late years. The symptoms, which attend it, were formerly supposed to arise from a prolapsus, or simple falling down of the womb, which the increasing bulk of it was thought at last to remove; while its natural ascent was favoured, by keeping the bladder empty, with the daily use of the catheter.

When quickening has decidedly taken place, especially if it has been complicated with the above unfavorable situation of the womb, most of the preceding affections generally abate, and, in some, altogether cease. There are, however, a few indispositions, arising from increase of bulk, which require a different treatment, because they

they depend rather on mechanical pressure, than on an irritability of the constitution.

The first uneasiness, produced by increase of bulk, is felt about the time of quickening, at the neck of the bladder, where the pressure of the womb occasions a frequent inclination to void the urine, which is not unfrequently followed by a considerable difficulty, and even a total impossibility, of passing it. When this is felt about the fourth month, there is great reason to suspect, that it arises from that unfavourable position of the womb, of which I have already spoken. In this case, the following directions should be observed.

Let the patient place herself much in the horizontal posture; and particularly on the face: every call to void the urine should be immediately regarded: costiveness should be carefully prevented, or speedily removed.

If,

If, notwithstanding these precautions, an uneasy fullness is felt at the bottom of the belly, it most probably will be found to arise from a retention of urine in the bladder, although a small quantity may be constantly, or very frequently, coming away. Under these circumstances, it will be necessary to apply for assistance, to your surgeon, or accoucheur, without loss of time. Diuretic, and nephritic, medicines, though frequently employed, are highly improper, and serve only to increase the affliction, as well as the pains attending it.

The true cause of this complaint would not have remained so long unknown, if it had not been naturally attended with very contradictory symptoms. A woman may have, as was just now intimated, an incessant dribbling of the urine from her, and yet the bladder be all the while full. This overflowing

ing occasioned the real situation to be so long unsuspected, and medicines were therefore prescribed; and, as time, and the increasing bulk of the womb, released it, at length, from its confinement in the pelvis, a natural cure was performed, while the medicines gained a credit, to which they were by no means entitled.

Nothing can shorten this inconvenience so much, as attending properly to the horizontal posture, and an occasional use of the catheter, at proper intervals, to draw off the urine. If early attention be paid to the complaint, it may be completely cured in a few days, without its having impaired the general health, or proving afterwards any obstacle to a safe delivery. All medicines, but those of the aperient, and cooling, kind, should be avoided. This accident is most likely to occur in the well-formed pelvis, which should afford

ford some comfort to the patient, as far as it regards the labour itself.

There is no instance on record, of a woman reaching the full period of gestation, with a retroverted uterus. Such a case, however, I had an opportunity of seeing about two years ago, in company with doctors Bland, Denman, Thynne, Merriman, and Croft. The situation of the patient, at the first, appeared inexplicable, and she continued several days in labour; but the gradual efforts of nature at length completed her delivery, by restoring the womb nearly to its natural situation. With great care she perfectly recovered; but the child, from the peculiarity of the case, as well as length of the labour, was still-born.

Till within a very few years, great injury was often done to the pregnant woman, by the detrimental tendency of the female dress, which is now prevented,

vented, by the custom, almost universally established, of dressing, so as to avoid pressure upon the breasts, as well as the body. The rising generation will, therefore, not so frequently experience an inability to suckle, from the sinking-in of the nipples, which formerly was so often occasioned, by the pressure of the stays. If, however, from original conformation, one or both nipples are short, or drawn in, this inconvenience may be lessened, by the occasional use of the elastic nipple machine, during the latter months of pregnancy, provided they be not sore, or inflamed. When the nipples are tender, or but slightly inflamed, nothing will be more usefull, than occasionally wetting them with brandy, or port wine, according to the degree of astringency required. Some are partial to the use of rum, for this purpose.

Women

Women were, in former times, much troubled with the pressure, and weight, of the womb upon the bladder, at the more advanced period of pregnancy, occasioned wholly by the unfavourable custom, at that day, of wearing long stays, which, notwithstanding all the care they could take, pressed the womb more forward, than it naturally places itself. Any directions on this subject are therefore now less necessary. But the same circumstance may happen to women, who have borne many children, from relaxation of the external parts of the belly, and it is often accompanied with a troublesome pain of the back, sides, and loins. It may, in some instances, require a suspensory bandage, or waistcoat, but is most of all relieved by the recumbent posture, with due attention to abstinence, and an open state of the bowels. This will also, in a

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great measure, prevent, or relieve, the piles, a complaint, to which most pregnant women are liable, and which often becomes extremely distressing. They sometimes bleed. When this is the case, the evacuation should not be suppressed by astringent injections. The hæmorrhage is, probably, oftener critical, than morbid. When it becomes excessive, it will be most prudent to apply for medical assistance.

Women are frequently liable, from some unusual exertion, or other accident, to strains of the back and loins. Sometimes a sudden twist of the body may affect the limbs, producing lameness, especially in those, who are far advanced in their pregnancy. The pain and uneasiness are generally confined to one hip, but will sometimes extend from the groin, to the knee. Rest and abstinence will, in time, greatly relieve these misfortunes. The external

ternal applications, in common use, are seldom of much service. If any thing further be requisite, it should be under the direction of a medical practitioner. By caution, and good management, these occurrences seldom prove any bar to a safe delivery, or a favourable getting-up.

The cramp is often troublesome in the latter months, particularly on the sides of the belly. Many things have been recommended to relieve it; but, attention to the general health, by observing a cautious diet, and avoiding costiveness, is of more consequence, than any local application. It is generally produced by fullness of vessels. This therefore should be guarded against. If they should rupture, there is no cause for alarm. The marks, which this will occasion, are of no material consequence, and will not be relieved by any local applications.

Great bulk from pregnancy, joined to a full habit of body, on the one hand, or lax fibres on the other, will often give rise to œdematous swellings, especially of the lower extremities. They are generally occasioned, independent of the habit, by some internal pressure, owing to the situation of the womb. They are most apt to happen in the heat of summer, and will be moderated in some by rest, in others by exercise, according to the constitution; and cautious conduct in diet will always be proper.

Great relief may be sometimes obtained, by the judicious application of a roller, and by washing the parts affected with brandy. If the feet, and legs should be, from habit of body, farther afflicted with ulcers, it will be proper to have recourse to the advice of the surgeon. There are also other swellings, more immediately connected with

with labour, which are frequently very troublesome, until confinement has taken place. These also may be relieved by the application of brandy, diluted with water; but in this case it, generally, will be proper, to consult a professional gentleman.

The irritations of the stomach, which so commonly take place in the early months of pregnancy, have already been noticed; but women are liable, in the last month or two of gestation, to have the stomach again affected. This has been supposed to arise, from the direct pressure of the enlarged womb on that organ, producing heart-burn, and a sense of weight at the chest, as from an indigestion of food. We shall be nearer the truth, I believe, if we suppose them to arise, from either pressure against the inside of the liver, and gall-bladder, or on the great vessels belonging to the heart. This pressure is most likely

to occur in persons of small stature, and is not unfrequently accompanied with some degree of jaundice. It is, however, proper to observe, that there is a sallowness of complexion, often attendant on stomachic and nervous indispositions, which must not be mistaken for an icterical tinge. The appearance of the whites of the eyes sufficiently point out the distinction. If, however, the jaundice should entirely depend upon pregnancy, it will be ultimately removed by delivery, and the succeeding confinement.

From the same cause, (pressure), respiration may be disturbed, or rendered difficult, and some degree of cough excited, the free circulation of blood through the lungs being impeded. When pregnancy occurs in the consumptive habit, the complaint, though apparently relieved, is generally only suspended. A woman, so
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circumstanced, may reach the full period of gestation, or, if she should not, she may, nevertheless, have an easy labour, and bring forth a living child, who may even do well, though the mother had laboured a considerable time under the disease; and it will be always proper, notwithstanding all the prejudices to the contrary, that she should suckle her offspring, as long as her constitution can support it. The mother will be almost certainly benefited by so doing, and no disadvantage can ultimately arise from it to the child.

The remaining observations, on some circumstances particularly connected with child-bearing, may be considered as pertaining to the early, as well as the advanced, period of the situation, but are most frequently met with in the latter.

Nothing

Nothing can be of greater importance to a pregnant woman, than cheerfulness. They should not therefore be depressed, by the relation of any unpleasant intelligence. Some women are often greatly disturbed by the account of misfortunes, which have happened to others, in the same situation. The impression, made on a timid mind, may remain during the whole state of pregnancy. The general health may be thus impaired, and the approach of labor too much dreaded, so that both body and mind are in a less favourable state, than they would otherwise have been. It should be considered, that though difficult, and dangerous, cases now and then occur, they most commonly terminate well, if properly treated, and their number is exceedingly small, when compared to the multitude of women, who are delivered;
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and it is probable, that it would be still smaller, if the cautions, above laid down, were properly observed.

I would further caution women against having recourse to cordials, to raise their spirits, when low. Their good effects are, at best, but temporary, while they are ultimately banefull to the constitution; and the use of a small quantity, too frequently produces the necessity of a larger, until both the mother, and the unborn infant, are injured, by this pernicious practice. The best cordials, for lowness of spirits in pregnancy, are air, moderate exercise, and a light and cautious diet. These will benefit the general health, and may, in a short time, remove the complaint.

There is another affection of the mind; of a different character, from which lowness, and hysterical indispositions, often arise; namely, the force of
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a pregnant woman's imagination. This is often supposed to reach the infant in the womb, and to occasion marks, and other deformities. But every mother may feel confident, that Providence has better guarded the unborn innocent, than to have exposed it to injury, from every variation in the feelings of the parent. Even admitting the possibility of such an influence, it could only take place at a very early period after conception, while the embryo is in its most tender state; and even then, it seems, in a manner, secured by nature, against the above accidents, by the peculiar provisions, made for its defence in the womb. But it soon attains a sufficient degree of firmness, to overcome any sudden, or irregular, impulse of the blood, from which alone such deformities, or other blemishes, could happen. The mother should, as much as possible, avoid every occasion,

occasion of terror, on her own account, when any thing alarming occurs; but, let her not fear, that her child will be marked from thence, or, still less, from some hidden operation of a disappointed longing, which, most generally, does not take place, until the above mentioned period is past.

This leads me to notice, that inordinate humour of the appetite, which occasionally happens during pregnancy. It is, in all degrees, very troublesome, but it sometimes amounts to the strangest desires after some things, and aversions to others. The mind is, however, so much concerned, that, too often, very little influence can be gained over it, by reasoning, or medicine. I can only therefore caution the sex, against indulging in the use of aliment, naturally noxious, or substances, strictly indigestible, and giving the least encouragement to those, who will tell them, that,

that, because it is a longing, it should therefore be gratified, and that it may be indulged with impunity. How far the child in the womb may, or may not, suffer, by the indulgence of these inordinate desires, I will not take upon me to determine.

The *cardialgia*, or heart-burn, which is so troublesome a companion to the pregnant woman, commonly attends the healthiest of the sex, whose appetites are generally eager, and often too freely indulged. Many things have been tried for the removal of it, with but little success. I believe this has been owing, to its having been too often treated by remedies, more properly suited to the complaint, when unconnected with gestation, and solely dependent on that debility of stomach, under which any one may labour. I think the medicines, which are in such a case proper, and so generally prescribed,

ed, are detrimental to women in a state of pregnancy. If they are merely tonic, as the chalybeates and bark, they heat the system: if they are absorbent, and correctors of acidity, they often prove hurtfull, by their astringent effects on the bowels. Magnesia, especially if calcined, is not liable to this objection: but the greatest relief may be expected from proper attention to regimen, and exercise.

Women, labouring under the *ascites*, or dropfy of the belly, sometimes become pregnant, and go through the whole period of gestation, with tolerable health, as well as complacency of mind. In this case, the disease commonly takes its own course; but, when it is capable of receiving relief from medicine, it will require the same treatment, as on other occasions.—It will generally produce a debility of the lower extremities, for which, how-

ever, time and rest are the only remedies. The operation of tapping has been sometimes thought of, for this disease, during the incipient state of pregnancy; but, with the extremest caution should it be determined on, as cases have occurred, which have afterwards proved to have been only an unusual increase of bulk from pregnancy itself, and which the sense of fluctuation, accompanying it, had led to its being considered as dropsy, until the situation was clearly ascertained by time, and minute examination.

If the motions of the child, in the latter months of pregnancy, are so strongly felt, as to be troublesome, and even sometimes painfull, which generally takes place, in proportion to the distension of the containing parts of the abdomen, relief will be principally afforded, by discovering the most favourable position for rest.

CHAP. IV.—*On the Progress of a
Natural Labour.*

I SHALL introduce the subject of a natural labour, with the preparatory steps every woman should take, for her accommodation at that time. The smaller articles, which should be in readiness, for her own convenience, will be made known to her, by the nurse she has engaged, whose province it is to point them out, if she should perchance have no female acquaintance, with whom she can consult. There are, however, two articles, which, because they are only occasionally wanted, and generally not till after the birth of the child, are seldom thought of: I mean *vinegar*, and *grit-gruel*. I would recommend, that every lying-in apartment be furnished with, at least, a

quart of the former, and that the latter be always prepared, as soon as the woman is convinced, that her labour has commenced. These articles will be of considerable service, if there should be any tendency to a flooding. The want of them has often placed the practitioner, in a most painful dilemma, and has been sometimes attended with unpleasant consequences.

I may further, with propriety, recommend, that the lying-in room be also furnished, in due time, with some brandy, and pepper; articles, which may very frequently be wanted, in order to rouse the embers of foetal life in an infant, apparently still-born; and which are commonly required, when the mother has been prematurely put to bed.

Few women are able to ascertain the precise time, when their labour is to come on. Some erroneously suppose, that

that the full period of gestation is nine lunar months, or months of four weeks. Whereas, it is nine calendar months, forming a period of about thirty-nine weeks. To this established law of nature, there may be a few, but very rare, exceptions. These are supposed to be sometimes occasioned, by the smallness of the new-born child; and, at other times, by its largeness.

Those, who have most correctly reckoned, have been able to observe some personal changes, and feelings about them, indicative of its near approach; but those, who are dubious of their situation, as to its commencement, are necessarily less on the watch, and therefore with them, the same circumstances may happen, but escape their notice at the time, and these will, all on a sudden, find themselves taken ill. Many become quite at a loss, in this respect, from having been totally inattentive,

to the first leading circumstances of pregnancy. I would advise all breeding women, not to expose themselves to the inconveniences, which may attend this neglect, at any period, but particularly at the close of gestation. It is to this inattention to themselves, that, in the beginning, they frequently miscarry, without having thought themselves pregnant; and that sometimes their confinement unexpectedly, and as they imagine prematurely, happens, when they are not properly prepared for it. They should always keep *memorandums* by them, of the first interruption to menstruation, and of the period of their quickening.

The situation, now to be described, I will presume to be that of a healthy young woman, on the eve of a first lying-in; because, from the length of time, generally taken up by a first labour, and the new sensations it produces in
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the system, it embraces all the circumstances, which pertain to its approach, progress, and completion. With such a woman, at such a time, I have in general found the mind more firm, and prepared for the approach of labour, than with those, who have already borne children, even though they may not have had more to endure, than the ordinary pangs, and contingences, of the situation. I attribute this, partly to their increasing knowledge of life, and its cares, but more especially, to some false and extravagant relations, which they have heard, respecting others.

There are often spurious pains, during the last month, which excite, in the minds of some, the alarm of approaching labour. These are produced by various causes, and are often truly uterine; but they are less likely to happen to those, who are, for the first time,

time, expecting labour. They more frequently distress women, who have had children before, and in whom, from the want of proper advice, and sometimes from bad management, they lead to premature delivery.

When a woman, after a preceding day of ease, and unusual activity, about the full period of her reckoning, begins to feel some restlessness about her, with occasional pains in her loins, and sides; if she further perceive, that the bulk of the belly has fallen, that the motion of the child has not been, for some time, so sensibly and frequently felt, and that she has a nervous hurry of the spirits upon her, with a feverish glow of heat, she may then conclude, that nature feels an inclination, to prepare her, for the termination of her pregnancy. Let her not follow the advice, which has sometimes been given at this time, of taking exercise in a carriage,

carriage, for the purpose of hastening, or assisting, labour. Such exercise is wholly needless, and may be detrimental. A woman should, at this time, rather avoid fatigue, than wantonly expose herself to any extraordinary agitation of the body. Those she, but little knowledge of nature, who can advise any one to be guilty of so great a folly.

Some persons are disposed, at this time, to laxity of the bowels, which is by no means an unfavourable symptom; and, in very costive habits, if nature should not relieve herself, it will be adviseable to take some gentle aperient medicine, to bring about that, which is unquestionably favorable, on the eve of every, but particularly the first, labour.

Premature labour is sometimes threatened by pains, which produce, for a while, some real change in the womb, sufficient

sufficient even to give the practitioner just reason to expect, that they will terminate in delivery. But things again recover their pristine state; the alarm of nature subsides, and the woman proceeds in her pregnancy, for several days longer, and sometimes for several weeks. These occurrences take place too frequently, to allow one to suppose, that they are always instances, in which the ordinary period of pregnancy is exceeded, and that what we have considered, as a premature alarm, took place at the full time of nine calendar months, because of the smallness of the child. This conjecture, however, appears more admissible, when a child is afterwards born of much larger dimensions than usual. Certain it is, that women have sometimes very much exceeded their reckoning, or expected termination of their pregnancy; so that, I believe, instances of gestation, extending

extending beyond the nine calendar months, more frequently happen, than are in general suspected.

As the change in the womb, above mentioned, does certainly occur, even on a false alarm, it should put young, and female, practitioners on their guard, lest they promote labour too hastily, either by general treatment, or any manual operation; for these would only fruitlessly tease the patient, when the judicious exhibition of an anodyne would do every thing, that can be wished for.

When, in consequence of irregular, or premature, pains, the membranes containing the waters, with which the child is surrounded, have been broken, before labour has really commenced, it must be expected soon to take place; though, if the pains should have entirely ceased, on the discharge of the waters; it may be delayed for some days;

days; but it most frequently happens within twenty-four hours. There is nothing in this circumstance alarming. It may occasion the first part of labour to be more slow, but not, in any degree, less safe in the end. It arises wholly from the fineness of the membranes, which contain the waters, and which must rupture in every labour, at some period or other; and hence the waters are sometimes unexpectedly discharged, in a sudden manner, without the least preceding pain.

When the rupture of the membranes does not take place at all, or not completely, till the infant is partly born, which is occasioned by their being remarkably strong in their texture, it then comes into the world, with what has been usually named a child's *cawl*, which has been superstitiously considered, as the marine traveller's safe-guard. This is quite an innocent prejudice, and

and may be classed with that, which is entertained of the virtues of the anodyne necklace, &c. &c. &c. though the charm is not quite so easy to be purchased.

The laxity of the bowels, above noticed, arises, I believe, from something more than mere mechanical pressure, on the falling of the belly, at the approach of labour, which, however, occasions, by the altered position of the womb, at the time the change takes place, an irritation at the neck of the bladder, which produces that frequent inclination to void the urine, which so generally attends the beginning of labour, and is commonly accompanied by some occasional pains of the uterine kind. At this period, some women feel themselves chilly; e'er long, however, they grow warmer, and their pains increase. If, at this time, or shortly after, some *show* is seen,

it may be looked on, as a convincing proof of something more, than incipient labour, or that the first stage of it, is materially advanced, whether the waters have been discharged, or not. The patient should now retire to her apartment, and give notice of her situation to the person, who is engaged to attend her. This is sometimes deferred too long, after the waters have prematurely escaped, by those, who do not feel themselves alarmed by the circumstance having happened; but I would advise them to do it, before their labour is much farther advanced. There are oftentimes sufficient reasons, for this precaution, as regarding the subsequent management of the delivery.

The stomach, at that period of the labour, when the mouth of the womb is undergoing the necessary changes, of which the *show* is a declaratory symptom,

tom, will often suffer much irritation, and become disposed to vomitings. I believe this is often of service to the process of labour, and is intended to remove the contents of the stomach, on the same principle, that the laxity of the bowels takes place at its commencement. Sometimes only a nausea is at first excited, which does not terminate in vomiting, until a more advanced stage of the labour, and then it has been observed to promote it, if it has been hitherto tardy. It will be improper to attempt the removal of this sickness, by wine or brandy, even though mixed with water. The latter, indeed, I am convinced, has sometimes much increased the complaint, and it may, by its general effects, do harm, both at the time of labour, as well as after it. It is even detrimental to the robust, although they may have been accustomed to the use of it.

Nature, however, seems watchfull to guard against its bad effects, and, probably, for that very purpose, frequently stirs up the stomach to reject it, that it may not be either inimical to labour, or hazardous in its consequences, after a tedious, and perhaps difficult, delivery.

This leads me to observe, that a woman, during a slow labour, if she be in a tolerable good state of health, need not think it necessary, with the view of obtaining strength and spirits, to deviate from her ordinary habits of living, by having recourse to the indulgence of cordials. They can, in such constitutions, serve no good purpose, but, most unquestionably, will, more or less, derange the latter period of a tedious labour, by the febrile heat, and irritation, they produce, and which are the inevitable consequences of their unguarded use. Their bad effects will
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even extend beyond delivery, by aggravating that feverish disposition, which naturally accompanies the secretion of milk in women, especially on their first confinement.

I do not approve of the means, which have been occasionally recommended in slow labours, when they are supposed to depend wholly upon rigidity of parts: such as manual interference; a long continuance in the erect posture; much walking; and other exertions. The custom of this country has many advantages over that of others, in respect to the position, in which a woman is placed, prior to her delivery. Nature should be suffered to take her way, and time, and, with proper conduct in the lying-in apartment, she will better surmount any ordinary difficulty alone, than by any methods we can devise to assist her. We may misconceive the cause of a tedious labour, and do

harm by the misapplication of art. It is only on extraordinary occasions, that we need deviate from the general custom, of placing the patient on the left side, which the experience of our own country has proved to be the best, when it becomes necessary to have recourse to other means, to aid the hitherto unavailing efforts of nature.

In a slow labour, especially if it be the first, part of the time, commonly spent in the lying-in apartment, might with more propriety be passed, in the usual domestic habits. It would serve to lessen the too anxious expectation of a speedy delivery, as well as to prevent the impatience of the attendants, both of which are often improperly indulged. In the mean while, the apartment may be properly prepared, and the patient had better not go into it, until that necessary bustle is over. Some attention is also requisite, as to the manner

manner of preparing the bed. The mattress should always be placed uppermost, especially in summer, and the necessary *apparatus*, and covering, so arranged, that the patient may not require to be taken off the bed, after her delivery, which is often exceedingly improper, and, indeed, sometimes impracticable; not to mention the fatigue it always occasions, even when it may be done safely, as to other particulars. Little things are often of great importance, and are sometimes found to be so, when it is too late.

Women should so prepare their dress, against the time of labour, that it may not be necessary to disturb them, soon after delivery, by a change of apparel. When this is properly managed, they avoid an unseasonable fatigue, and the hazard arising from linen, which may not have been cautiously aired.

A sensible woman should always consider

sider, that, in a slow labour, she may be afflicted with many distressing, and what have been called false, or spurious, pains; but there are very few, I believe, by which nature does mean some good in the end. She must therefore give her mind to patience, as all unnecessary interference would rather retard, than assist the labour, and will only be employed by the designing, and unskilfull. Pain is no proof of labour: it may indeed be most distressing, when it is least profitable, and will sometimes require medical treatment, to suppress it, instead of calling for manual assistance, with the view of forwarding labour.

Labours vary considerably in respect to duration. The first, if at the full period of gestation, is generally much the slowest, for very evident reasons, which concur on that occasion only. But any subsequent labour may be tedious, from occasional circumstances, of

of a peculiar nature, but equally safe, with respect to the conclusion, as those of ordinary rapidity, provided no meddling interference be used, and nature be left to the secure, though slow, accomplishment of her object.

When a woman, in her first labour, is within an hour, or two, of her delivery, she ought, on no account, to be restless, or violent in her exertions, which many are very apt to be, when the conclusion of the labour draws near.

It is then, that the practitioner is to guard against the serious consequences, which have sometimes attended the violence, and hurry, of a patient. More good will be derived from prudently delaying, than from hastening, the birth of the child, especially if it be the first, and this, even though the powers of nature herself may seem more, than equal to the delivery. For this, and other reasons, which will presently be mentioned,

mentioned, it is also proper, that such means should be used, as will prevent any part of the child being born into the world, in too sudden a manner.

I will now suppose the woman is just safely delivered of her child, and that a complete cessation of the regular pains has followed. She must now endeavour to calm that disturbance of the whole frame, which, added to her anxiety of mind, before delivery, had excited a great degree of heat, and perspiration, especially if it should have been her first labour, or one attended with some unusual difficulty. In this state, she must not let herself chill, or cool too fast. It may, perhaps, have been necessary to throw off some of the bed cloaths, during the last hour or two: if so, they should, immediately on the birth of the child, be lightly placed over her again. She may now moisten her mouth, with a
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cup of tea, grit gruel, or barley water, for either of which she will feel desirous, if she has not been taking frequently of one or the other, during the latter part of her labour: but they must be given her without wine, or brandy. If she feels herself disposed to sleep, she should indulge it: at all events, she should keep herself quiet, and not encourage conversation. For it may be observed, that in general, the mind of a woman, newly delivered of her first child, is so occupied with the novelty, as well as the anxiety, of her situation, that her attention is too long kept alive, and therefore she can scarcely sleep, though exhausted by the fatigue of her labour.

Let her not be uneasy about the *placenta*, or after-burthen, but leave that to the practitioner, whose conduct, in regard to it, must be guided by existing circumstances. He will now be engaged

engaged in attending to the child, or ascertaining the peculiar state of the womb. He should, however, in order to prevent future trouble with the placenta, pay some early attention to its situation, before he leaves the bedside. Female practitioners, especially, are apt to neglect this, and immediately engage themselves, unnecessarily, about the child, by which they often miss the best opportunity of being of some service, in respect to the safety, as well as speedy delivery, of the after-burthen.

The accoucheur must now carefully attend to the degree, and force, of contraction, which the womb is disposed to take on, immediately, or soon, after the birth of the infant. The experienced practitioner will indeed have a *presentiment*, even while it is coming into the world, of what is likely to take place afterwards, from
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the manner, in which the expulsion of the infant is completed. This should be effected slowly, even after the head is born, because, such a practice favors that kind action of the womb, necessary to detach the placenta, which a contrary method will interrupt, and, I have no doubt, has often been the cause of its being, with difficulty, brought away. Premature, or active, endeavours to loosen it, must, however, be avoided, if its separation should not readily take place, by the seasonable contractions of the womb. Let the operations of nature be watched, and she will prove the surest guide, though, in this part of the delivery, she ought never to be wholly depended on. What the practitioner may have to do, should be proceeded in so slowly, that if his patient was asleep, his efforts need not awake her. This cautious conduct is in every respect best.

The loss of blood, naturally consequent to the birth of a child, varies exceedingly in different women, and even in the same woman, in different labours. On some occasions it is very trifling, and on others, considerable; and the variation may either depend upon constitutional prædisposition, or be occasioned by the peculiar attachment of the placenta to the womb. In some it will partly precede the descent of it, and in others, will wholly take place after it, though not immediately. It cannot happen to excess, before the delivery of the after burthen, but from some peculiarity of circumstances, provided proper attention be paid in time, to favor the first endeavours of nature, to throw it off. The skillfull practitioner, however, may know that it is safe, and yet not think it proper, to bring it away immediately. A woman should therefore avoid expressing any
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impatience about it, as this might induce some practitioners to use that dispatch, which is not altogether consistent with their opinion; as many, from want of firmness, in their own judgment, have done, that the patient, or her friends, might not have it afterwards to observe, that they were a long while in bringing away the after-burthen.

This kind of censure is, too frequently, passed upon the just conduct of the accoucheur, from the improper prejudice, so often indulged, in favor of a speedy delivery of the placenta. Women are too apt to deem that practitioner most skilfull, who is the shortest time in finishing that part of a labour. Fatal, therefore, have sometimes been the consequences of this ill-judged management, particularly among female practitioners. The placenta, when it is at the command of the accoucheur,

is sometimes a mean of preventing that flooding, which always excites a considerable degree of alarm, in the lying-in room, and is certainly increased by the terror of the patient.

It is a mistaken idea, that, in general, some *external* mechanical force is necessary, in order to expel the placenta.

I cannot, therefore, approve of the modes, occasionally recommended, of coughing, sneezing, blowing on the back of the hand, or making general pressure over the belly, with a view of helping its descent, by any kind of tight bandage applied to the abdomen, immediately after the birth of the child.

The tender uterus may suffer from this pressure; nor is it of moment, as to the effect it might have, either of disposing it to contract, or of supporting the viscera, which are not, as some suppose, relaxed, but only the particles of the abdomen containing them. I

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generally find, that the womb has of itself contracted, in a favourable manner, when there has not been any very sudden, or hurried, delivery of the infant. Neither can pressure be necessary, as some have lately asserted, to prevent the immoderate expansion of an elastic vapour in the intestines, from the sudden change in the bulk of the womb diminishing the volume of the contents of the abdomen. The position, to which a woman generally inclines, soon after her delivery, of itself supports the belly. If any thing further is wanted, a pillow placed before her will be sufficient, against which the patient may rest with that degree of pressure, which will feel agreeable to her.

There is also a gentle action of the hand on the abdomen, which the patient herself may perform, and by which the uterus is tenderly excited to contract, and the placenta of course

detached, in the most favourable manner, that will be found more usefull, than a bandage, or any extraordinary exertions of the patient, for this purpose. But as this may not be necessary in every case, it must be left to the judgment of the practitioner to direct, with the proper cautions to be observed in the application.

I would further observe, before I quit this subject, that there can hardly ever be occasion for a woman to bear down, during the delivery of the placenta. Indeed, on many occasions, it must carefully be avoided, lest it should produce, or increase, a disposition to the *prolapsus uteri*. The throes, which take place naturally, are caused by the contractions of the womb, and with them alone the practitioner can always, in due season, safely bring it away. They are most seasonable, when they quickly follow the birth of the child.

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I do not approve of a free, and indiscriminate, use of greasy applications, in the progress of a tedious labour. They are wholly unnecessary in the first stage of it, and in the latter part they interfere with the changes, which then take place naturally, and produce that mucous secretion, by which the parts are most favourably lubricated, for the easy termination of the labour. But, before the practitioner quits the bed-side, after the complete removal of the placenta; it will be proper to apply a small quantity of mild pomatum, or fresh lard, to defend the parts from the acrimony of the ensuing discharges; and I think some evil may occasionally be prevented, by his taking that opportunity of informing himself, by a slight examination, whether every thing be favourable, in respect to the condition of the womb.

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This attention I have always thought of importance, and I notice it here, that women may not be alarmed by it, or think it needless. It is merely intended to guard against an unfavourable situation, or position, of the womb continuing, which would dispose it either to immediate inversion, or future bearing down. It is a conduct, which has not usually been thought necessary, because it is but rarely, that the evil is to be apprehended; but, if it only occurs once in every hundred, nay, in every thousand, labour, it ought, in my opinion, to be practised in every one of them; and it must be peculiarly needfull, when more than ordinary exertions have been made use of by the *funis*, to finish the labour.

Women will sometimes be liable, from peculiar irritability of habit, to some degree of faintness after delivery, most

most commonly after the coming away of the placenta; but they may comfort themselves with knowing, that it is not always caused by too great a loss of blood. It is generally occasioned by uterine pains, and, though the patient may be faint, and even pale, the pulse will continue to be felt the whole time. On recovering from the swoon, they are able to recollect, that some degree of after-pain had immediately preceded the faintness. Under these circumstances, I would recommend them to take a cup of milk-warm gruel, with a little wine and nutmeg, unless they have taken a sufficient quantity of proper nourishment, since the birth of the child; for they should avoid overloading the stomach, as a nausea from fullness will sometimes occasion faintness.

When this circumstance has occurred, and has been removed by the above treatment,

treatment, it will be still prudent to indulge themselves longer than usual, before they undergo the buffle of being settled in bed; and if they have really had rather a free discharge of blood, it would be advisable, that they be as little as possible disturbed, for several hours, and not raised to an erect position of the body, until they feel sensible they are quite revived. I have observed, that this swooning is less frequently met with, after the birth of a first child, and therefore there is then less necessity for bandaging, or any manual pressure.

If hæmorrhage alone should cause the faintness, then cloths, wetted with vinegar, must be applied in room of the dry ones, and also laid over the surface of the belly. Air should be admitted into the chamber, even by an open window, if the syncope is very great; some cool light nourishment should be given;

given; and great quiet observed for a length of time: but it will be proper not to take cordials, or warm liquids, at first. The occasional return of uterine pains, under these distressing appearances, may afford consolation to the practitioner, and to the alarmed friends of the patient. If these general rules are observed, especially if a medical gentleman is not in attendance, they will probably prevent immediate danger, and in time recover the patient. The restoration of the circulation will be denoted, by the return of the pulsation at the wrist. But it will always be proper to call in medical assistance immediately, when the above alarming circumstances occur.

CHAP. V.—*On various Circumstances either immediately following Delivery, or connected with it, as well as with child-bed Fever, and Inflammation.*

THE first hours after delivery, provided some light nourishment has been taken, and the patient placed comfortably in her bed, should be dedicated to quiet and sleep. Quiet should be most seriously enjoined. Sleep is generally obtained with ease, after the fatigue of a first labour. Silence should therefore soon prevail in the chamber. If the noise and bustle of a town-residence, (which has, with much propriety, given rise to the custom of strewing straw before the house), should prevent it, in some measure, in the day time, it

it must be the more carefully secured the first night, by good chamber management, rather than by an opiate. With this view, it would be adviseable so to arrange the lying-in apartment, that the new-born infant may not, by its cries, disturb the mother. It will therefore be best, to have it accommodated in an adjoining room, or at least in a crib bedstead by itself. I do not approve of its sleeping with the mother, for very cogent reasons.

Let me advise every woman, even after the most speedy and favourable labour, to be cautious in her conduct, and put herself on her guard, against those early freedoms, which have exposed so many to the dangers of child-bed. Some have often, for the want of observing this caution, fared worse than those, who have had the most difficult, and dangerous, labours. The first indisposition to be guarded against

is fever: the second is, local inflammation; and both are most apt to occur, in the confinement of a first lying-in.

A child-bed woman, as soon as all the circumstances of her labour have been adjusted, may with propriety consider herself, as still in a state of health, and as requiring little more, than the common cautions, and good management, on all occasions necessary to preserve it. She need not too closely surround herself with curtains; but, by the admission of cool air, a temperate diet, and a moderate quantity of bed-clothes, so regulate the heat of her body, as well as the temperature of the room, that she may not feel herself oppressed in bed. The disposition to fever, implanted in the female constitution, when first called upon to nourish the infant at the breast, is to be considered, as a natural exertion of the powers

ers of life, and when it occurs, is to be prevented from rising to excess, by suitable means, as we endeavour to subdue the fever of the small-pox, before the eruption, and nearly on the very same principle.

This may serve as a caution, not to take nourishment too freely at first, with the sole intention of producing milk. The necessary change in the breasts, for this purpose, may be safely left to the efforts of nature. This advice is more particularly necessary to women, on their first puerperal confinement, even to the apparently weakly and delicate, who will sometimes have astonishing constitutional powers to suckle their children: indeed, they, on this account, are most prone to the *milk fever*, as it is called, and to the various inconveniences, occasionally afflicting the breasts.

It is of the utmost consequence, to guard against those local inflammations, which happen to women in child-bed. They attack either the womb, or the outer surface of the bowels, or both, and are too often caused by early freedoms, and inattentions to diet, &c. They commonly happen later, than the milk fever, and may be excited, by not duly moderating the natural disposition to that fever; by, unguardedly getting out of bed; or by some hurry of the spirits during the first days, which may have rendered the patient, and her friends, inattentive to the directions, which have been given. The intended evening visit of a friend, has sometimes prevented the exhibition of an aperient draught, ordered to be taken at noon, with the view to prevent that fever, and local inflammation, which, in consequence of the omission, take place a day or two after, and which were per-
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haps threatening, at the time the medicine was ordered.

It will, in this place, be proper to observe, that the prudent management of a lying-in apartment is too frequently deranged, by the unseasonable attention of friends, during the first three or four days; and I therefore do most earnestly recommend, as a general principle of conduct, not to admit even relations, during those days, but with the greatest circumspection. Such caution, as this, may occasionally save a life, and it will almost always lessen some of the sufferings, to which all women in child-bed are, more or less, exposed. It is far easier to do much harm, by a little indiscretion at this season, than to afterwards remove, even by the ablest skill, or most assiduous attention, the mischief, which has been thereby done in some habits. The great number of dangerous puerperal com-

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plaints, generally derive their origin from the most common and obvious causes, and therefore the minds of women should be strongly impressed with the persuasion, that what they may deem trivial inattentions, or slight errors of management, have too frequently deprived the innocent infant of its parent, in the hour of its greatest need.

No degree of fever in child-bed, should be passed over unattended to, or be thought lightly of. Even the most serious are often slight at their beginning. Neither should any local pain, or tenderness, or fullness of the bowels, be unobserved, or not noticed to the medical attendant, least they should arise from the incipient state of some inflammation, which, if not checked at first, by proper medicines, and suitable regimen, might, in a short space of time, put on some alarming appearance. Let it be remembered, that

that it is oftener much easier to prevent some diseases, than to cure them.

I do not mean to intimate, that patients will be able themselves to discriminate complaints, from the relation of any particular symptoms, so that they should be able to treat themselves, in such situations, where the symptoms are often so serious, that even professional men find it difficult to save life. It is sufficient, if they are made sensible of the hazard they run, by inattention, during the first days of their confinement. It will, however, be proper to notice one circumstance, which, if it should happen, may occasion their being alarmed, unnecessarily, with the idea of an approaching fever: I mean, the attack of a shivering fit, which is common about the second, or third day.

This may entirely proceed from the crisis of that constitutional exertion, attending

attending the full preparation of the breasts, for the formation of the milk, and is often very properly treated by an experienced nurse. When it arises from this cause, it is commonly followed by a paroxysm of heat, and sweating, which generally go off in a few hours, and, if perfectly well managed, the fit never returns a second time. The sufferings of women, under these attacks, are often very considerable, and have, in some instances, equalled the paroxysm of an intermittent fever. The chills and shiverings, which happen from other puerperal causes, generally return, and, under some circumstances, frequently, through the progress of the disease.

It will be prudent for women, always to bear in mind, the necessity of having the bowels opened, on the third day, at farthest, after delivery. It is a security to them against fever, and inflammation,

inflammation, and even forms one principal mode of relief, when they are already affected, with either the one, or the other. Let therefore no ridiculous prejudice of their own, or of a nurse, or other attendant, stand in the way of following this advice, which the experience of professional men so amply justifies, and which regards their own immediate safety, as well as the future benefit of their infants. The importance of an open habit of body, in preventing child-bed diseases, shews the impropriety of checking a spontaneous diarrhæa, which will sometimes occur, and which, if incautiously suppressed, may be followed by fever, or some local inflammation. Under these circumstances, the milk may receive a check, but the full formation of it will return again, when nature has fulfilled her intentions by the diarrhæa.

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It will here be very necessary, to point out the difference between the pains, which may happen, to a woman under puerperal confinement. They may, with propriety, be divided into three kinds: first, the true, or uterine, after-pains: secondly, the pains which arise from nervous irritability of habit: and thirdly, those, which accompany the attack of any local inflammation.

The first take place immediately, or soon after, labour, affect principally the back and loins; are periodical; and generally unattended with fever. The second, or those from nervous causes, and sometimes flatulence, are more permanent; not strictly periodical; and seldom come on, till about twelve hours after delivery. They are to be considered as merely spasmodic, and are also not attended with feverish symptoms.

The third kind, or those which arise from local inflammation, are commonly

ly confined to the belly, and sides; are constant, with tenderness on pressure; and are, more or less, accompanied with fever. They happen at no fixed period of child-bed confinement. They are however generally later than the others, even than the second kind, and are more liable to occur at, or about the height of the milk, or a few days after. They cannot, therefore, be readily mistaken for true uterine after-pains, unless some very great mismanagement has produced them, within the first two or three days after labour.

Women should therefore be very explicit, at this time, with their professional attendant, in respect to any pain they may suffer. A slovenness in attending to these important distinctions, may often have been of serious consequence to the child-bed woman.

It is always a pleasant circumstance, when, with any local pain or fever, the breasts

breasts put on a proper, and favourable, appearance of affording the milk, as the full secretion of it may help to lessen those affections. I therefore would recommend all prudent means to be used, to promote it. It is also of much importance, in order to prevent the increase of local inflammation, or of fever, that a child-bed woman should continue to give suck to her infant, notwithstanding such circumstances, observing, however, that strict attention to the nature of her diet, which the disorder may require. There is not the smallest fear of the infant being injured, in any respect, by this practice. I will again repeat, that too early attention cannot be paid to any tenderness of the belly, especially, when accompanied with any of the symptoms of fever.

Women often make themselves uneasy, in respect to the uterine discharges
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consequent to labour, and the changes in their appearances; but these vary exceedingly, from difference of constitution, as well as from a difference in the circumstances, attendant on labour. I believe it is most natural, that there should not be a great loss of blood, at the time of delivery: for sometimes the placenta will be detached, by the favourable exertion of the contractile power in the uterus, scarcely soiled with blood. If the operations of nature were judiciously watched by the practitioner, I believe, that this would be often the case: but it must be subject to uncertainty, from the variations alone, in the attachment of the placenta.

The subsequent discharges, called the *lochia*, differ also in different women, both as to the quantity, duration, and appearance, being affected by the state of the general health, as well as

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by the peculiarities of the labour. They will vary also, in all these respects, when a woman does not suckle, and will then fluctuate so much, that a fresh appearance of the sanguineous discharge will take place, several days after the labour.

Women are also, not unfrequently, led to think, that, a day or two after their labour, they have passed some portion of the after-burthen, which had been left behind, through the neglect of the practitioner. But this insinuation can proceed only from ignorance, or evil design. It is generally no more than a clot of coagulated blood, which, from remaining in the womb, has, from compression, and the reparation of its watery particles, put on the appearance of a fleshy substance, which may easily deceive those, who are not well acquainted with matters of this kind:

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Sometimes, in like manner, they are told, they have parted with something, of the nature of a *mole*, or false conception. It may happen, that, at the beginning of pregnancy, there were two children, one of which may have early escaped, with some slight symptoms of miscarriage, leaving the placental part, belonging to it, in the womb, where it may remain, till after the birth of the other child, even though the latter should reach the full time of gestation. It is, at length, discharged with the lochia, and gives rise to the suspicion, just now mentioned. It is also possible, that the foetal portion might be destroyed, and yet not escape, as above described, from the circumstance, formerly mentioned, of a woman often miscarrying, in the third month, with the placental part only, in whom the embryo had been blighted, at a very early period.

It has been further known, that the placental part of a single conception only, will often remain in the womb, for a much longer time, (it has been said even for years,) and when it comes away, is always considered as a mole, or false conception. It may here be also observed, that, about the final cessation of the menses, women are often supposed to part with these moles, because they are then very liable to retain clots of blood, which form, during the menstrual period, from its irregularity, and copiousness, long enough to put on a regularity of shape, and appearance, resembling a fleshy substance.

On all these points, women would do well to suppress their own opinions, and leave the decision of their importance, to the discernment of the professional attendant.

CHAP. VI.—*On the Management of the Breast in Child-Bed.*

NATURE begins to prepare a woman for the office of suckling, as soon as she is pregnant; for the sense of enlargement in the breasts is one of the earliest symptoms of gestation. I believe a diversion is thereby intended to be made from the womb, which keeps up the balance of the circulation, and in this manner preserves the health, and indirectly secures the mother from readily aborting. Of this enlargement I have spoken before, as connected with the incipient state of pregnancy.

But little change takes place in the breasts, after the first months of pregnancy, until about the second day after delivery. Then it is usual to feel a

greater sensation of fullness in them, accompanied with a febrile irritation, which varies in different women, according to constitution and management, but in all is favoured by temperance, a cool regimen, and composure of mind. It is often from being too officious, and in too great a haste to produce the milk, that it afterwards proves troublesome, and that the whole frame is rendered feverish, and highly irritable.

The most natural means of forwarding the gentle proceedings of nature, will be the application of the new-born infant to the breast, at an early period, viz. within the first twenty-four hours at farthest. If the mother, during her pregnancy, has had an oozing of a milky fluid from the nipples, there is every reason to expect, that the child will readily succeed in obtaining the milk, if it be not kept too long from the breast.

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The silly objections, often made to the child's being put early to the breast, should have no weight with a sensible woman. It has been ignorantly supposed, that the milk, first secreted, is improper for the infant. There is no rational foundation for this opinion. All nature cries out against it. Independent of the injustice done to the child, it exposes the patient to the fancied necessity of some foreign assistance, in order to get rid of the milk. The tender breasts are therefore doomed to the torture of being roughly handled, either by a nurse, or a professed drawer of the breasts, and the patient is fortunate, if she escape only with sore nipples, or an inflammatory fullness of them. I have frequently been obliged to order the child to be kept away from its mother, and soft poultices to be applied to the breasts, for twenty-four hours, only because they had been made

made to endure the hazard of such treatment.

I would recommend all women to avoid covering the breasts with flannel, or too many and heavy clothes. The practice can serve no good purpose. It may occasion a too hasty accumulation of blood in them, and from the heat and perspiration they are thereby kept in, they are much more liable to receive cold, ~~from~~ the exposure of the chest in putting the child to suck, whatever precaution may be taken to avoid it.

The following observations, respecting the condition of the breasts, when in a proper state for nourishing the infant, will well explain, in my opinion, all the inconveniences arising, so frequently, from the above rough, and ill-judged treatment. I think it may be easily proved, that their fullness is occasioned more, by the flow of blood to them, than by the actual presence of
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any great quantity of milk, already secreted. It is by the action of sucking chiefly, that the breast is stimulated to form the blood into milk in the liberal quantity the child receives it, according to the established laws of animal secretion. This secretion continues to go on, if the child remains at the breast, until the fullness of the blood-vessels is removed. This would appear clearly to be the case, from the evident diminution of one breast, while the child is sucking at the other, and which can be explained by the connection of the sanguiferous vessels, and not by any communication between the tubes of each breast, containing, or conveying, milk.

This opinion is further confirmed, by the circumstance of blood being often drawn from the breast, instead of milk, through the unnatural and officious meddling of a nurse, or some other
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assistant, at the time that it is very heavy, and even much hardened by the turgid state of the vessels: This mischief has been often explained away to the mother, on her first lying in, in which it most frequently happens, by telling her, that the strings of the breast, or the nipple-strings, are to be broken, before she can give suck. The practice is, therefore, often had recourse to, before the child is suffered to be put to the breast, even when it is not very much distended, and with this professed design. The infant itself never produces such terrible appearances, and yet it procures the milk more readily, and with less pain to the mother, when applied to the breast with proper, and seasonable, management.

We see, that the breast of a healthy woman, during her first pregnancy, will often afford a milky fluid, and sometimes in pretty large quantity, by the
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natural action, or secreting power, of the breast alone, which shews the absurdity of supposing, that the rupture of any strings, or vessels, connected with the nipples, is necessary to fit them for the performance of their function, which nature afterwards calls upon the constitution to promote, for the nourishment of the infant.

I think this opinion, of the fullness of the blood-vessels of the breasts, is supported by the analogy of most other secreting glands. Blood is the source of all secreted fluids: glandular action the immediate cause of their production. Thus, the lachrymal, or tear, glands are regularly supplied, like all others, with blood, and their ordinary use is to moisten the surface of the eyeballs, with a fine fluid, that the lids may move freely over them. From nervous affections of the mind, or extraneous bodies, they are often so irritated,

ed, that they will suddenly pour forth a considerable quantity of this fluid, which we then call tears. No one has ever heard of a reservoir for them, or has ever supposed, that the lachrymal fluid previously existed, in that extraordinary quantity, in the glands. The redundancy is the temporary effect of increased secretion, from mental or extraneous irritation. On the very same principle, I believe the breasts of a lying-in woman, when prepared for their function, by a due determination of blood to them, afford the secretion of milk, at the time they are stimulated by the sucking of the child. If it were not so, but the milk formed, previous to its being wanted by the infant, it would soon be rendered unfit for the purposes of nourishment, by the heat of the part, in which it has been supposed to accumulate.

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I do not mean to assert, that milk is not sometimes present in the breasts of a suckling woman. This is demonstrated to be occasionally the case, by the spontaneous flow of milk from them. But the increased weight of the breast is principally caused, by the presence of blood in the smaller arteries; and that, which constitutes the difference between the suckling powers of different women, is the greater or less power in the system, to determine blood to the breasts. This will best explain the cause of that temporary fever, which accompanies the first entrance on the function of a wet-nurse; and also why the nipples are so much drawn in, when, in ordinary language, the milk is said to be at the height. It further explains, why the nipples become sore, and the breast so readily inflames and bleeds, from rough treatment; one, or the other, of which becomes the frequent cause

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of that too common affliction, both to the anxious mother, and her disappointed child, the formation of an abscess, improperly called the *milk abscess*, for milk itself is not the basis of the inflammation, which precedes it.

When, from the causes above enumerated, or from cold, any part of the breast inflames, and becomes hard, it will always be improper to allow the child to suck at the breast, so affected, until relief is in some way obtained. The prevailing opinion among mothers and nurses, that sucking the breast will relieve in these cases, is wholly unfounded, and has often given occasion to the increase of the disease. It can, on no account, ever be adviseable: on the contrary, it must assuredly do harm, by irritating a part already tender, and inflamed. Much more relief is to be expected, by suckling entirely
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at the other breast, by which the blood will be derived there, in greater quantity, and the impulse of the circulation at the inflamed part will be, in consequence, diminished.

With this precaution, a poultice, made with crumbs of bread, or lint-feed meal, and the saturnine water, and applied nearly cold upon the part affected, will often remove the complaint in a very short period. If this treatment should not succeed in twenty-four hours, the application of leeches, and the exhibition of an aperient medicine, will probably be attended with advantage. If, notwithstanding these, suppuration should advance, a plain bread and milk, or lint-feed meal poultice, must be kept over the inflamed part, and renewed three times a day. This should be continued till the abscess breaks, after which it may be applied twice a day, till the wound is healed. Care

should be taken, that the ulcerated part be always kept clean, by the matter being gently pressed from the wound, when the poultices are renewed. It is very seldom that these abscesses require opening with the lancet.

It may not be amiss here to observe, that these abscesses are entirely distinct from all cancerous affections, of which, therefore, no dread need be entertained, under such circumstances. Rough treatment, and the long continuance of irritating applications, might, indeed, contribute to lay the foundation of a schirrus, or a cancer; but it is not likely, that these *remedies* can ever be required in the simple milk abscess. It is further proper to observe, that whenever the breast is afflicted with a tumor, of whatever kind it may be, the earliest advice should be taken.

I wish I could lay down any certain method, of treating tender nipples with success.

success. As far as my observation goes, the less that is done for them the better. This state of them most commonly depends on some awkwardness in the manner of the child's sucking, either from an unfavourable formation of the tongue, or from a trick of nipping, or nibbling, them with its gums. I have already said, that the habitual application of brandy, or port-wine, during pregnancy, may harden their tender surface, and, in some degree, prevent this inconvenience; but when they become inflamed, or chapt, the use of them must be discontinued. Perhaps the best application under such circumstances is the *pomade divine*.

I cannot approve of any of the medicated applications, cups, and contrivances to suck through, which have been recommended, with a view of healing, and defending, the nipples in this state. Most of the former, except the saturnine

cerate, when judiciously applied, have rarely done any good, and, in respect to the latter, the cups, &c. I have observed, that whatever incloses them from the air, and keeps them constantly hot, or moist, generally renders them worse. I believe their soreness is best prevented, by putting the infant early to the breast, first removing any impediment, which the *frænum* under the tongue may happen to occasion, to its sucking with freedom. This can be removed without the least difficulty, or inconvenience at any time;—but of this more hereafter.

When women do not intend to suckle, they commonly inquire what is to be done, to repel or dry up the milk, because they are apt to imagine, that there will be a determinate, and regular, flow of it to the breasts, as thought it were to come from a reservoir. But as the secretion of milk depends upon
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a flow of blood to the breasts, this should not be excited by handling, or squeezing; and, still less, by drawing, the breast, or by any thing, which will give nature the idea, that there is a child to suckle. Such treatment will produce nearly the same effects upon the breast, as the sucking of the child. While, on the contrary, if nothing is done, nature will, with ease and safety, dispense with the function. She is soon made sensible, that the blood determined to them is not wanted, and there will therefore be very little further effort made, on her part, to continue it, and it will, in the course of a short time, a day or two at farthest, cease of itself.

There is the same objection against the use of fomentations, plaisters, and the various stimulating, and drying applications, so often had recourse to, such as brandy, spirits of wine with camphire, &c. They all, more or less, promote

promote an increased determination of blood to the breast, which defeats the very end they are proposed to answer. A gentle purgative, with suitable regimen, will entirely supercede the necessity of any local treatment, and is all that can be required, even when a mother has suckled before.

Some women, on the other hand, have to deplore a deficiency of power in the constitution, to produce milk. But let them not repine, as that would impede any favourable efforts, which might be excited by appropriate management. Medicine has no power to assist them. On a reasonable diet alone must they depend; I mean, a diet generous, but not carried to such excess, as to dispose the habit to a febrile irritability, which would certainly prevent its intended good effects. To what extent this plan may be carried, in every individual case, especially on the first

first days of confinement, must be determined by the judgment of the medical attendant. At all events, the child should be regularly put to the breast, when it is hungry, and while its natural eagerness for sucking is also undiminished by food. Nurses are apt to feed the infant too much, before they put it to the breast.

A woman, who has not, during her confinement, shewn much constitutional power to nourish her infant at the breast, will often improve extremely in the office, as soon as her strength will permit her to receive benefit, from air and exercise, which may, with propriety, be thought of at the expiration of three weeks, provided no particular indisposition should have occurred to prevent it. Some, even in the third week, have found it necessary to go abroad, for the restoration of their health, when it has suffered from much confinement.

confinement, previous to their delivery.

I cannot leave this part of my subject, without pointing out the propriety of ladies suckling their own offspring. So far from being injurious to their constitutions, it is much oftener beneficial, even when it had been before thought detrimental. The weakly even have grown strong; and the sickly have gained health, by the undertaking, when the trouble and inconveniences of it have been duely guarded against, by proper management.

A few observations will be met with in a following chapter, on the proper time and method of nursing and feeding the child. They particularly merit the consideration of the mother, whose constitution requires of her, that she should study her ease and comfort in the undertaking.

CHAP. VII. — *Additional Cautions,
necessary to be observed in Child-Bed.*

IT will now be proper to take notice of some circumstances, attendant on child-bed, which not unfrequently protract the period of perfect recovery. This generally depends much less upon the labour itself, than on the subsequent management; so that a lady may have a very favorable labour, and yet a bad *getting-up*; while another will experience little or no puerperal indisposition, after a very severe and tedious delivery. This is often to be attributed to imprudent freedoms, in the one case, because free of every indisposition, on the first and second days: and in the other, to caution, and the strict observance of every medical direction, which is given.

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If a woman unguardedly sits up in bed too soon after her labour, it may dispose the womb to fall lower, than it should, because the broad ligaments, which naturally suspend it, have not sufficiently returned to their former state of contraction. This may prove troublesome ever after, by continuing that relaxation of the ligaments, which would not otherwise have remained. This inconvenience may also lead to others; so that, for the first two or three days, she would do well not to quit the horizontal posture, without the greatest caution.

If any benefit can be justly supposed to be derived from sitting up during the first days after delivery, in respect to the more free escape of the *lochia*, I think it would wholly be acquired by the temporary change of posture alone, which *some occasions* must unavoidably lead to, during that period, if the patient,

tient is in the usually favourable state of health, under her confinement. But, that the sitting tip much is necessary, on the principle of preventing their retention, or any consequent fever from an absorption of them, is an opinion, which, from the result of my own experience, I cannot at all accord with.

That swelling of one or other of the lower extremities, which is peculiar to lying-in women, though it does not immediately follow the freedoms I have been speaking of, nevertheless, often originates in them. It generally takes place within the month, though rarely in the first, or even the second, week, and as it depends upon some obstruction of the lymphatic vessels, probably from some pressure, arising from an unfavourable position of the womb, nothing is more likely to be the immediate occasion of it, than an internal bearing-down, which may have first commenced

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from too early sitting up in, or getting out of, bed. It is generally a very troublesome complaint, and difficult to get rid of, and requires rest, strict regimen, and judicious medical treatment. I believe the peruvian bark is often employed in these cases improperly.

Somewomen are liable to a protrusion of the navel, which is the common effect of distension from pregnancy. This circumstance should be an additional inducement to such persons, though not suspected of being disposed to it, not to sit up too soon. The posture of sitting in bed, is more detrimental, in this complaint, than quitting it altogether. If they should be advised to apply a conical compress on the part, which is a very proper practice, I would recommend it to be used, without any bandage round the body, which, in my opinion, is rather injurious, than
beneficial,

beneficial, and counteracts the purpose, for which the compress is applied. It may be sufficiently confined, by strips, of common *diachylon*, or adhesive plaster, transversely laid over it to a proper extent.

These, as well as all other child-bed indispositions, are immediately, and very essentially, effected, either for the better, or for the worse, by the plan of diet, which is pursued. In general women, disposed to any of them, should observe a cooling diet, and keep the bowels open, and not let the nurse prepare their gruel with spice of any kind. I find this alone to be often the cause of some puerperal complaints. It is better to take plain gruel, for the first few days, and afterwards, if free of fever, with the addition of a little white wine.

CHAP. VIII.—*On the Mode of recovering a Still-born Infant.*

NATURE has, in general, so well secured the life of the unborn infant, that it is enabled to endure a considerable degree of pressure, without being destroyed. The state of ossification of the head, it being imperfect at the time of birth, permits it to be elongated, and sometimes disfigured, in a surprising manner, but without the least permanent injury. Hence children are generally born alive, though the labour should be tedious and difficult. But it sometimes happens, from a combination of circumstances, that the infant is still-born, even after labours of no long duration. The circumstance, which mostly occasions this, is some pressure
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on the *umbilical cord*, or navel string, at the latter part of the labour. When this continues long, it must always occasion the irrecoverable loss of the infant. I believe it is to be considered the principal circumstance, as the immediate cause of its death, when it happens in the early part of a labour, which particular appearances, in the progress of a slow labour, sometimes denote to have been the case.

The navel string is sometimes twisted round some part of the body of the child; or it may be compressed between the body, and one of the limbs. Its most frequent convolution is round the neck; and it may be more or less entangled, according to its length. This occurrence most commonly protracts the latter part of the delivery; but as it may happen to be the case in quick labours, which sometimes terminate, before proper

assistance is arrived, it may be useful to give some directions, for the necessary conduct under such circumstances, that the infant may not be irrecoverably lost by delay.

Immediately upon the birth of the child, it should be observed, whether or not the navel-string be free from entanglement. If it is round the neck, and the child shews no signs of life, it should be placed in such a position towards the mother, as will slacken the cord: it should then be passed over the head, in doing which, care must be taken, that the cord is not stretched tight from the infant's navel. If it is discovered, that the string is round the neck, when the head only is born, the delivery should then be forwarded, by encouraging the mother to bear gently down with the next pain. Some assistance may, at the same time, be

be given, by the attendant laying hold of the head, and gently acting with it, carefully observing at the time, the turn, which the superior shoulder makes. If it inclines forwards, the face of the infant will turn upwards: if backwards, it will then be born with the face downwards. The aid, which the person assisting may attempt to give, must accord with the natural inclination, in the one direction or the other. It will most commonly be found, that the superior shoulder inclines forwards, that is, to the arch of the pubis. Cautiously promoting the labour, in this way, becomes necessary, because the navel-string cannot be disengaged from the neck, until the child is completely born.

If it should be found very tight round the neck, and without any pulsation at all, it will be proper to attempt to slacken it, by drawing that portion of it lower, which leads to the placenta.

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If it does not yield by gently pulling, the attendant must desist, as she will then most probably have laid hold of that portion, which leads to the child's navel. Both parts are, however, within the reach of examination, and it is generally in our power, to distinguish that, which goes to the placenta, by the direction it takes. By these means, something may be done to favour the obstructed circulation in the cord, and at the same time to hasten the separation of the placenta, which is, on some occasions, absolutely necessary, to allow the infant to descend. At all events, the impediment to its respiration will be removed; for this often commences, when the head only is in the world. In some cases it has been found necessary to divide the cord, that the birth of the infant might not be too long delayed.

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I cannot conclude my observations on this point of practice, without observing, that I differ in opinion with a very respectable modern writer on this subject. He has said, "that an infant would not suffer for a considerable time, if it should happen, that the navel-string should be round the neck, when the head is born; nay, should it even be drawn tight." I would therefore have the practitioner considerately trust the completion of the delivery, under such circumstances, to nature's pains alone, as he has recommended; because it is so easily, and with safety, in our power, to promote, for the sake of the infant, the perfect birth; and should certainly be attended to, particularly in those tardy cases, which have proceeded, in the latter stage of labour, with very long intervals between the regular pains.

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When the child is completely born, if it does not immediately cry, after the navel-string is removed from round the neck, although there may be some pulsation in it, near the navel, or if it only sobs, with the eye-lids closed, the attendant should immediately pour a tea-spoonfull or two of brandy upon the chest, and wet the lips and gums with a little, and then apply a hot cloth to the breast, and another to the top of the head. I do not think it necessary, under this delay of respiration, to breathe into the lungs. The natural life of the child still depends on the circulation, and I therefore think our whole attention should be given, to the resuscitation  of the action of the heart.

When no pulsation is to be felt at the navel-string, and the lips and countenance of the infant are pale, the case is still more alarming. I would then recommend,

recommend, in addition to what has just been mentioned, that the body be agitated with the hand, placed upon the chest for that purpose; and the heated cloths should be changed for others, as fast as they grow cool. When the pulsation is restored to the navel-string, though it be only felt close to the body of the child, the continuance of these means, in an ordinary way, will generally be sufficient.

But when the infant has suffered more than usual, from long pressure, during a laborious delivery, it may have been so debilitated, that respiration will not be excited by its natural stimulus, the atmosphere, though the pulsation in the cord denotes, that the heart has not discontinued its action. In such a case, it may be adviseable to breathe, now and then, into the lungs, and to stimulate the mouth, and throat, with some pepper and brandy. I think, however,

however, that respiration is more readily excited, by only blowing on the face and chest, than by filling the lungs with air, when the infant is in that weak and languid condition.

When it is thought proper to breathe into the lungs, I am of opinion, the air, which is thrown in, should not be suffered to remain in them, but be drawn out again immediately, by the mouth of the attendant, not forced out by pressure on the chest or belly, which might disturb the feeble circulation, and, perhaps, defeat our endeavours.

When, besides this great debility, the action of the heart is not in the least discoverable, the danger is very great. I then think a tea-spoonfull or two of brandy may be poured into the child's stomach, in addition to the other stimulants we have recommended, with the view of rousing the circulation; and, between every time of changing the heated

heated cloths, let a table spoonfull of fresh brandy be poured on the chest, as it is a powerfull stimulant to the external respiratory muscles.

The importance of persevering in the use of these means, for a considerable length of time, even though they should appear unsuccessful, is greater than is generally conceived: and I would again repeat, that the first, and principal object in view is to excite, and continue, the action of the heart, and the circulation. It is by this the infant has already lived, and been prepared for respiration, and if this be preserved, respiration will take place naturally, and of course. The following case will shew the propriety of these observations.

About twenty years ago, I was sent for to a patient in Woodstock-street, who had been long ill with pectoral complaints, for which she had been

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for some time, under the care of the very respectable physician, Dr. Savage. She had been frequently relieved by him, but her disorder was too far advanced, to be removed. She expired in the act of lying down on her bed, soon after I entered her apartment, before I could have an opportunity of ascertaining the state of her labour. I nevertheless, thought it right, as soon as the hurry and confusion, occasioned by so alarming an event, would permit me, to examine, whether any thing could yet be done to save the child. Finding the labour had been far enough advanced, to admit of the delivery by instruments, I requested Mr. Boffey, the apothecary, who happened to be present, and who lived very near, to fetch me his *forceps*, with which I extracted the child much sooner than could have been expected. It was as white as paper, without even colour in the

the lips. I instantly divided the cord, without tying it, and, taking the infant to the fire side, began to apply the hot cloths, brandy, pepper, &c. which are above recommended. On the unremitted use of these I wholly depended, frequently, however, agitating the child with my hand. In about a quarter of an hour I observed the cord to bleed. (The mother had been dead full half an hour). I then put on the ligature. This appearance encouraged me to go on. I shortly after thought I saw the lips tremble, and they soon began to change colour. Presently it fished, and this was repeated several times at small intervals. I persevered, and at the expiration of an hour, from the death of the mother, it breathed so well, though it had not yet cried, that I pronounced it restored. It nearly recovered the full natural complexion of a healthy infant, in a few days, and

lived six weeks, and might have been still living, if it had not been attempted to be brought up by hand. The unfavorable circumstances attending its birth, had so debilitated its animal powers, that it had most peculiarly required the natural nourishment, breast milk, for the want of which, it apparently pined, and at last became emaciated, and died.

This case not only convinced me of the propriety, and importance, of persisting in the means, proper to be used on such an occasion, but it also led me to conceive what I have just asserted, that the first principle, on which the life of a still-born child is to be restored, is the revival of the circulation of the blood; for, it is to be considered, that there is a wide difference between the condition of a still-born infant, and that of a drowned, or suffocated, person. The life of the child, in

in the womb, having hitherto existed only by the circulation, if this can be supported, or restored, the atmosphere itself will excite the action of the respiratory organs, in due season.

I believe we have hitherto allowed ourselves to be deceived, when we have thought, that blowing air into the lungs, was the immediate cause of infantile resuscitation, from not having laid down our rule of practice, as to the time for its proper application, with sufficient distinctness and precision. We have therefore in general given it the whole credit, where it has seemed to succeed, though its success has depended, either on the circulation not having totally ceased, or on our having, by the previous application of stimulants, first excited it. The lungs themselves, for the most part, though not entirely, are passive in the function of respiration, whose power of action must

continue suspended, until the circulation be restored. If therefore, while the action of the heart, and the general circulation, are dormant, the lungs be filled with air, the distension of them may become an impediment, to the commencement of a free passage of blood through them. We should therefore wait, until the energy of the respiratory organs is excited, by the success of our stimulants, in restoring the circulation, and in producing the free, and natural, determination of blood, to the external surface of the body.

It is also worthy of remark, that if any external measures can avail to excite respiration, they must be such, as stimulate the respiratory muscles to act. Friction, and the other means, above recommended, are therefore to be chiefly relied on, for their good effects on this principle.

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I will here observe, that, as it can never with certainty be known, when the application of measures, for restoring the life of an infant, may be wanted, although circumstances, in many cases, do certainly forebode it, I think it would be prudent, that the means, immediately necessary on such an occasion, should always be provided, (which the reader will recollect was partly noticed in a former part of the work) namely, a good fire, in some part of the house, to heat the clothes, and also some brandy and pepper in the room. The instant application of these may prevent the embers of its hitherto simple life, from being totally extinguished; and with these alone we shall generally succeed, without swelling the catalogue of stimulants, by the various other artifices, which have been recommended, by authors in general.

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Above all, let it be remembered, that the use of a few well chosen stimulants, steadily persevered in, is more likely to succeed, than the employment of a greater number, which may often prevent the full effect of any. The means I have advised, are therefore simple, and tending directly to one object, namely, the excitement of the circulation. I think all others, immediately intended to promote respiration only, would fail, because we should lose time, and relax in our exertions with the hot cloths, and brandy, by employing them. For a similar reason, I object to clysters, the tepid bath of salt and water, &c.

Nothing can better prove the power of the atmosphere, in producing respiration at birth, than the success, which once attended the removing a still-born infant, into sudden and severe cold, in a case related by Dr. Underwood, after
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the life had been despaired of, because all other means had failed. It might therefore be proper, that an infant, apparently born dead, should be, on some occasions, exposed to fresh cool air, during the application of the hot cloths, and brandy, instead of being so treated at the fire-side.

As the opinion I have advanced, is somewhat new, I will offer a few further remarks, to shew, that the excitement of respiration, is a secondary consideration, in the resuscitation of infantile life; and, on what account, I question the propriety of breathing into the lungs of a child, until it is evidently living by the circulation: for if the true foetal life be extinct, by the perfect cessation of the circulation of the blood, I believe no means we can use, imitative of respiration, can ever cause it to pass freely through the lungs. The *sine qua non*, therefore, in recovering
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ing the life of the infant, is that, which tends primarily to excite the action of the heart, and to renew the energy of that function, by which the fœtus, before birth, had wholly existed.

As a proof of what I have advanced, it may be remarked, that the funis will always bleed some time, before a *truly* still born child begins to cry. This is the first effect of returning circulation. The next, is a glow of colour on the lips, and countenance, along with which the sensibility of all the respiratory organs is excited: and it is then, and not till then, that the power of the atmosphere begins to act, and to occasion sobbing. Some advantage, may, perhaps, then be obtained, from gently imitating respiration, by breathing once or twice into the mouth. But air, prematurely, and violently forced into the lungs, can do no good; on the contrary, it will certainly do harm, if the
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action of the heart has entirely ceased: so that heat and stimulants have the less chance, of promoting circulation, than when the lungs were empty. What good can their distension from air afford, when the expiratory muscles are unable to throw it out again?

It should also be observed, that the air, which an attendant has already breathed, and which, by the common practice, is breathed over and over again, at the mouth of the child, is the worst air, that can be put into it, and the most unlikely to answer the intended purpose. I therefore think it better, to leave the lungs to the operation of the atmosphere itself, on the *fauces*, and chest of the infant, to favor which, it is proper to extract any mucus or froth, which may impede its entrance at the nose, mouth, and throat. This will also be wonderfully assisted, if the operator fans, or blows, from a small.

small distance, upon the chest and face, at the same time, opening the mouth, that the agitated air may strike freely against the fauces. This simple operation has often appeared to me, to have a surprising sudden effect on the *glottis*, which is from thence communicated to the respiratory organs in general.

As I have never felt an inclination, to fill the lungs of a still-born infant with air, while they have yet wanted the natural respiratory powers to empty themselves, my mind has always revolted against the practice; and I cannot therefore approve of the common *manner* of doing it, on which, great stress has been laid by the above-mentioned respectable author, as *imitative of natural respiration*, namely, by *forcing out the air*, which has been thrown in by the mouth, by a strong pressure against the diaphragm, and breast; and this to be
alternately

alternately practised for a long time together.

This gentleman, differing totally from me, in his idea of the principle of resuscitating foetal life, has said, "The above-mentioned means, however, (meaning the different stimuli,) can do very little, until the child begins not only to gasp, and that with shorter intervals, but also to *breathe in a pretty uniform manner*:"* and he therefore rests his principal hopes of success, on *blowing forcibly into the trachea or wind-pipe, with the view of exciting a strong effort in the child, especially that of crying, to which, he thinks, all our attempts must principally and remotely tend.* On the contrary, I believe it is their application, which has done every thing, by first rousing the circulation, without

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which,

* Treatise on the Diseases of Children, 3d Edit:
Note, Page 68, of the 2d Part of the 2d Vol:

which, the infant could never even have gasped.

As a further proof, that the excitement of the circulation, is the grand requisite to respiration, I may state, that I have myself repeatedly restored still-born children, without any other means, than the application of the above simple external stimulants, namely, brandy, with the agitation of the body, and the use of very hot cloths to the chest, top of the head, feet, and legs, occasionally blowing on the face, and chest, but not into the lungs. A favorable change in the complexion is commonly first observed, when these means succeed, and that, in general, before the child sobs. By a continuance of these exertions, I have several times seen a child recovered, who had lain a quarter of an hour, without the least signs of life.

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I think it is best, not to remove the infant from the bed-side, at first, but to have the hot cloths, &c. brought to it, by which plan, tying the navel-string prematurely, is avoided. But, if the ordinary means fail, after a reasonable trial, it may then be removed to an open window, or door, that it may receive the advantage of a current of fresher air, continuing, however, the hot cloths, the agitation, and the brandy.

When an infant is so far restored, whether by the power of the atmospheric air, or by the stimulants which have been used, that it breathes in a pretty uniform manner, I believe there is little fear, but that it will, in a short time, cry, without doing more than continuing the same stimulants of brandy, pepper, and hot cloths. But, I cannot conceive, how the respiration of a still-born infant is to be excited, by

preventing, what has been deemed, a premature return of the air, by the fingers of the one hand, placed at the angles of the mouth, and those of the other, on each side of the nose. I should rather expect the introduction of air into the lungs, to do good; by the sudden impulse it might give, to the action of the respiratory organs, to expel it: so that the best chance of its doing good is prevented, by its being forcibly retained, by the application of the fingers. I cannot think its retention necessary, to excite the action of the foetal heart, and circulation, respiration not having been connected with it, as it has been in the case of a drowned, or suffocated person. Analogous treatment, in these situations, will neither anatomically, nor physiologically, hold good.

If my reasoning is just, there will hardly be occasion, to have recourse
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to the additional stimuli, of striking the *nates* and soles of the feet, much less to the extraordinary means of a tobacco, or other stimulating, clyster, or to the use of snuff, to provoke sneezing.. Whatever may have been the means, which have already enabled it to breathe, in an uniform manner, will surely be found sufficient to effect, without any additional stimuli, the action of crying, and also its perfect resuscitation.

It may be proper to say, that I think it doubtful, how far the use of tobacco is adviseable in such a case ; for though its first, and immediate effect may be, to stimulate the bowels, the debility it afterwards, and commonly very soon, induces over the whole nervous system, may be very prejudicial. Besides, it is not so much by exciting the action of the intestines, that it is capable of rousing the suspended energy of the

heart, and of thus secondarily producing inspiration, and expiration. This should therefore put us upon our guard, that we do not inadvertently relax in our exertions, with the more ordinary stimulants, for its hazardous application, and effects.

I cannot entertain the idea, that a child, still in a certain state, as it may be called, of insensibility, tho' breathing, will more readily sneeze from the irritation of snuff in the nostrils, than cry of itself, after arriving at the power of breathing with regularity, because crying is the most natural, and immediate consequence of the new life of the child, as soon as inspiration and expiration regularly succeed one another. The præ-disposition to crying, is always so strong, that I have found it readily excited by the stimulus of brandy to the chest, as soon as regular respiration has once taken place.

It

It is a pleasant thing to restore the pulsation of the umbilical cord, and it ought to encourage us to persevere in our exertions; but, in cases even of extreme danger, the child is sometimes recovered, without this being perceived.

I quite agree with Dr. Underwood, in his opinion of the insignificancy, of stroking the blood along the cord, or of immersing the after-burthen in warm water: first, because, in serious cases, there is commonly no blood in the cord; and, secondly, because the placenta is never in the world, till after its office has entirely ceased. Unless it was separated from the womb, with that principle of life in it, which it gave, when it connected *the infant* to its mother, and remained still attached to *it* by the cord, what purpose could immersing it in hot water answer?

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The modern author, however, whose opinion I lately noticed, respecting the convolution of the navel-string round the neck, has conceived, "that if a child was born *in a state of nature*, and the *secundines* wholly excluded, before the pulsation in the navel-string is stopped, the circulation would still be carried on betwixt the child and the placenta as perfectly, as if it were in the womb, till the child's lungs are fully expanded, and the other alterations have taken place." The relation of such a case would naturally excite the idea of immersing the after-burthen in warm water; but the singularity of the opinion, as well as certain rarity of the occurrence, have alone induced me to speak of it. I therefore consider any further commentary upon it, in this place, unnecessary, as *such a birth* could only happen when the child is in no danger,

danger; for the circulation then takes place naturally, by the infant's own powers, *wholly independent of the placenta*, while the influence of respiration serves to secure and continue it.

The cautious use of electricity, to rouse the suspended animation of a new-born infant, might with propriety be tried, if the other methods have failed. Care should, however, be taken, that no time is wasted, while the *apparatus* is preparing. Dr. Underwood has mentioned a remarkable case of its success, in restoring a child, who had been apparently dead for two hours, after having fallen out of a two pair of stairs window.

It is proper to make some remarks on the certain signs of death, in a still-born infant, that time may not be fruitlessly thrown away, in attempting to recover it. Of these, the unnatural, and discoloured, appearance of the navel-string.

string is one of the principal. This proves, that the circulation in it has some time ceased, especially if the child be, at the same time, universally pallid, and the limbs loose and flabby. But when the body of the infant is no way changed, or the bones of the head are not looser than natural, it will be right to use the means, before recommended, notwithstanding the unfavourable appearance of the cord; for it has not always an healthy look, or complexion, in children who are born alive especially if they have been weak, or sickly, in the womb. In these cases the *liquor amni*, or water surrounding the infant before birth, is sometimes of a brownish tinge, which may be communicated to the navel-string.

That discoloured, and sometimes very fetid and bloody, water, or *mucus*, which is frequently forced out from the nose and mouth of still-born infants, is

is not a mortal symptom, when the navel string appears fresh, or, as not having been long deprived of the circulation. I have observed it often in those, who have been recovered; nay, it has even sometimes appeared, after the child has been restored. I think it is principally forced from the stomach, and is formed of the mucous secretions both of the stomach and fauces, tinged with meconium. It probably becomes bloody from an exudation, which takes place in the nostrils and throat, owing to the turgid state of the vessels in those parts, occasioned by the pressure on the head of the child: for it commonly, in a greater or lesser degree, takes place in all very hard labours, when the infant, whether small or large, has been long compressed, by the strong action of the uterus. So that in labours, where the infant naturally presents, it will sometimes appear on the cloths, and

and excite an apprehension, that it is dead. The discharge has certainly no immediate connection with the lungs. Children, however, must be in great danger, from whom these morbid secretions have escaped before birth.

What benefit can, in any case, arise from the application of leeches, or suffering the cord to bleed, I shall not take upon me to conjecture. I should rather be inclined to think, from its not being intended by nature, that the infant should lose any blood, that either of them must rather tend to weaken it, and impede that glow of heat from the circulation, on the external surface of the body, upon which I so much rely, for the excitement of the *atmospheric life* of the child. The bleeding of the cord is a proof of the action of the heart, but it is equally proved, if the pulsation is felt in it, when tied; for it could not bleed, if there was not a pul-

a pulsation in some of the arteries, leading from the heart.

When a child is still born, it is not unusual for the attendants to call for a candle, to see if it respires. This is only losing time. It is better to begin the immediate application of brandy and hot cloths. If the child faintly respires, it will then soon begin to breathe stronger; and if it does not, the applications, which have been advised, cannot be employed too soon.

Above all, let me again recommend diligence, and perseverance, in the necessary efforts for the attainment of so desirable an object, which, if crowned with success, but now and then, in the worst cases, should stimulate us to activity upon all these occasions. The spark of life may still remain, when little expected by us, to recompence our anxiety and our exertions.

CHAP. IX. — *On the first Management, and Dressing, of the New-born Infant.*

WHEN a child is born alive, and although it begins to cry, it is proper to pour a little brandy on the chest, and immediately to apply the flannel cap, the top of which may be also wetted with brandy; by this treatment it is prevented from so readily taking cold, and it is all that is necessary, until the navel-string is tied.

In general, there is more impatience shewn by the attendants, than is prudent, in respect to tying the navel-string, and removing the infant from the bed. It is always proper, to let the pulsation in the cord entirely cease, before this is done. By the circulation

tion alone the infant before birth had lived, and it therefore ought not now to be too soon interrupted, and the child suddenly entrusted to its new mode of existence by respiration, from our hastily applying the usual ligatures. If we observe our domestic animals, we shall find, that the division of the cord is not the first thing, which engages their attention; and the time we have to wait, for the natural cessation of the pulsation, is so short, seldom exceeding five or ten minutes, that the delay cannot be of any bad consequence. The time may be filled up with advantage, by paying the necessary attentions to the mother, which have been before laid down, in order to facilitate the favourable descent of the placenta.

There are some cautions necessary to be given, respecting the mode of applying the ligatures. Nurses, from the suddenness with which a labour some-

times terminates, are often induced to separate the child from the placenta, before the professional assistance arrives. It would be more safe for them to leave the child in bed, until proper help is at hand, taking care, however, that air be admitted to the face, by drawing the head forward without the bed-clothes, and applying over it the flannel cap, wetted at the top with a little brandy.

There are, unfortunately, some nurses, who affect a knowledge of the obstetric art, and who are too apt to make themselves over-officious, to the injury both of the mother and child. These too often neglect to send in time, that they may have an opportunity of shewing their usefulness. Usefull they certainly may be, in some unavoidable cases of hurry, and it cannot be but proper, to render them more so, than they generally are, on many ordinary occasions;

occasions; but they should not be suffered to presume too much upon their knowledge.

In order to tie the cord, as it ought to be, two ligatures will be necessary, which should be formed of such a number of threads, knotted together at each end, that in tying firmly with them, there may be no danger of dividing the navel-string. If this should happen, the cord will commonly bleed, which, not only alarms, but produces the additional inconvenience, of making it necessary to tie it again so near to the navel, as may afterwards occasion it to be sore. A nurse therefore would do right, on such an occasion, to apply the first ligature five or six inches from the navel, and the second about two inches from the first, on that side next the placenta, and then divide the cord between them. In general they do not draw the ligatures tight enough, from

an idea, that there is feeling in the cord, of which it is, however, wholly wanting. When the first ligature is applied too near the belly, the portion remaining at the navel does not separate so kindly; and when there has been more left, than the necessary quantity, the practitioner can at any time remedy it.

In respect to the first washing of the infant, nurses are sometimes at a loss how to proceed. It is most frequently born so clean, that much washing is not necessary. A little soap is recommended to be used with the first water, to which it is usual, and proper, to add a spoonful or two of brandy, or rum. The water need not be more than milk warm, and the head of the child should be washed first.

The infant is sometimes born with a *cheesy* mucus on its skin, which is not always equally diffused over it, but is most in quantity, generally, at the bendings

bendings of the limbs, and, particularly on the back, and about the hamms, arm-pits, and groins. The back very commonly is loaded. It will be more readily removed with the assistance of a little soft pomatum, or sweet lard. In the country it is very usual to wash it off the infant, with butter and ale. It is adviseable not to remove the whole of it, at the first washing. The remainder will be more easily taken off the next day, when the child may again be washed all over, with some warm water and brandy. But this is only to be used a second time, when this cheesy mucus has been in so great quantity, that it requires more time to get it off, than can with propriety be employed, at the first washing.

For the regular daily washing, only cold water should be used, with which the child should be washed all over, beginning with the head. It should be
finished

finished as expeditiously as possible. The infant should be afterwards well dried, and particularly at the bendings of all the extremities; and the whole body and limbs should be gently rubbed, until a glow of warmth appears upon the skin. It is the manner of washing a child, that secures it from suffering, from the application of cold water.

Some object to very cold water; but that cannot be too cold, even for the most delicate infant, which is kept in the bed-chamber, during the night, in the winter season. In the summer, it had better be drawn fresh from the cistern, when used. The more delicate and weakly an infant is born, the more will cold washing strengthen it, if well performed. Excoriations will be prevented, or removed, by the cleanliness, and bracing qualities, of this practice,

to

to secure which it will be proper to avoid the use of a *piltch*.

Pomatum, and often greasy applications, have been objected to, from an idea, that they tend to stop up the pores of the skin, and to prevent perspiration. This they cannot do; on the contrary, they serve most effectually to remove that, which already does it. I do not approve of these applications to the skin, on many occasions; but when they are used for such a particular purpose as this, they can speedily be removed, if it is thought necessary. I question whether the new-born child is so liable to a suppression of the insensible perspiration, as some are so much inclined to suspect, (and no profuse perspiration can it require), otherwise, I believe, we should lose more infants in the month, than we do. But cleanliness, and judicious washing with cold water, will very much tend to preserve the cutaneous

cutaneous exhalations, so necessary to health.

Many mothers, or rather their nurses, are afraid to allow new-born children to be washed over the head, for a few days, while the portion of the navel-string is still attached. There is, however, no just ground for their objections. Some women carry their prejudice against washing the infants' heads so far, that they will not have it done within the month, and many will never have it done at all. When it has been omitted during the month, it will be better to begin with the addition of some brandy to the water, lessening the quantity of it gradually, so as to leave it off entirely in a few days. Those, who will not allow their children's heads to be washed with cold water, at any age, are most apt to have them troubled with a scurfiness of the head, which in general lays the foundation
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For what has been called, the *Scall'd Head*, a complaint which I shall notice in a following chapter.

The scurfiness alluded to, and which is most generally contracted by infants with light-coloured hair, increases as they grow up, and, I am confident, mostly originates in uncleanness, which produces a diseased condition of the bulbs of the hair. This morbid state of the bulbs will always be liable to occur, when the head is neglected to be washed from the birth; and, I believe, that the enlargement of small glands behind the ears, and also about the nape of the neck, arises from the same causes.

Many parents satisfy themselves, with only wiping the heads of their infants with a wet towel, and will even avoid the *mole*, or top of the head, when they do it. They will also discontinue this partial management, when the

the child is a few months old, assigning the increased growth of the hair, as a reason for so doing. The hair is, however, rarely so thick, as to be any great inconvenience; but if it should happen to be so, (which is very seldom the case with light haired children), it may with great propriety be thinned.

It will always be proper, after washing the head, to comb, or, still better, to brush, it, in order to stimulate the cutaneous circulation, and prevent obstruction in the bulbs, at the roots of the hair, which arises from a languid action in the vessels surrounding them. Infants with light hair most particularly require this attention; but it will also favour the drying of the head quickly, when the hair happens to be thick.

When children are a few months old, cold-bathing may be substituted, in the room of washing with cold water. In families where I have seen the healthiest

iest children, it has been the practice to wash them with cold water, when they have been undressed at bed-time, as well as on rising in the morning; so justly sensible are some parents of the advantages of cleanliness, and of the bracing qualities of cold water.

It will here be proper to add some directions, respecting the mode of dipping a child in cold water. Of these, the principal is, carefully to watch for that moment, when it has taken in a full breath, and then to plunge it into the water, and take it out again instantly; so that no part of the action of respiration may be necessary, during the time of submersion. The child will then breathe freely, on being taken out of the water, and suffer little or none of that agitation, which often defeats the intention of the practice, and produces a terror, when it is to be repeated.

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BUT, if it has been plunged into the water at the end of an expiration, it will naturally make the effort to inspire, while it is under water, and thus draw some of the fluid into the *trachea*; or if this should not happen, it will not be able to inspire without considerable difficulty, for several seconds after it is taken out; in either case, it suffers a painfull anxiety about the *præcordia*, which is the cause of that terror so many children feel, on approaching the bath. Whereas, if the caution I have given be observed, the child will return into the air without pain; expiration will naturally and easily take place; and a quick glow of colour on the countenance, and skin in general, will testify the advantage it has received.

The next article to be noticed, in the management of the newly-born infant,

is its dress. Very improper methods are often taken, even from the birth, to strengthen the apparent weakness of a young child; such as the practice of tight-rolling. If it is wished to have them strong upon their limbs, and properly active, early in life, as by nature they are intended to be, they should have the perfect freedom of their limbs, and their bodies at ease, from the first day of their birth. Their clothes should therefore be reasonably loose upon them, and not too great in quantity, although properly proportioned to the nature, and variableness, of the weather.

There is one particular, in which, I think, nurses and parents greatly err. They generally cover the child's head too much. This part of the dress should also be regulated by the season of the year. But, I think, the piece of flannel, commonly laid on the top of the head,

head, is wholly unnecessary. When the head is properly washed with cold water, the flannel will rather tend to counteract the salutary effects of it. But, when it is made use of by those, who are prejudiced against the practice of washing the head, I believe it, at all times, proves unwholesome, by its warmth, and often uncleanly state, which together tend much to relax the *fontinel*, or opening at the top of the head, a circumstance, which is always considered, as a mark of backwardness, and of natural weakness.

Why should we apprehend, that the Creator has not furnished the new-born infant, with sufficient power to resist the cold of the atmosphere, at this part of the head? Does it not receive cold air into the lungs, immediately on its birth, without the least injury; and why should it be necessary to guard this part from cold, in so peculiar a manner,

ner, when we witness its exposure to all weathers, in some of the more perfect animals, without detriment to them? I believe, that the warmer the head of a child is kept, the more hazard it runs of being troubled with those complaints, which so frequently fall upon the infant and child, affecting either the head, the eyes, or the face; and I think also, that the disorders attendant on teething, are often aggravated by this unnatural warmth.

I think also, that the quantity of an infant's bed-covering should be appropriate to the season of the year. Children should not be used to too much. If this article is not judiciously managed, as they grow up, they will be apt to perspire in bed, the consequence of which is, that they either take cold, by throwing off the clothes, or they are weakened, spite of cold-bathing, by the relaxing effects of heat and moisture.

CHAP. X.—*On the proper Manner of
purging and feeding the new-born In-
fant.*

WITH respect to the proper manner of purging the new-born infant, the first thing commonly given by nurses, is either some butter and sugar mixt, or gruel well sweetened with it. If, after being completely dressed, it is apparently quite easy, I would recommend it to be laid to sleep, without taking any thing. But as it is often, from crying, as well as from the circumstances of labour, apparently loaded with phlegm in the throat, a little well-made plain grit-gruel is most likely to afford it relief, and is the best nourishment it can at first receive, before it is to be put to the breast.

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The practice of giving butter and sugar, which was formerly more prevalent than at present, is totally useless, and nasty, and, I believe, has often been detrimental to the bowels of the infant, by the acidity they promote in them. When the circumstances of the labour have rendered it necessary, to give a little brandy to the child, immediately after delivery, it should have two or three table spoonfulls of gruel, as soon as it is dressed.

From its having been a common opinion, that the infant's bowels require to be cleansed, before it receives nourishment, it has been usual to order some aperient medicine immediately. But, I believe, most children would have their first evacuations very well, without any thing of the kind, and that the best physic a child can at the first receive, is the mother's milk, not because it is particularly opening, but because

because it has the effect, which all food has, of promoting the natural action of the intestinal canal. It will therefore first empty itself, of what has been gradually collecting before birth:

Nevertheless, I generally order some aperient medicine to be in readiness, not because I think it necessary, that it should be taken, before the child is put to the breast, but because children are so often early indisposed, from the too prevailing custom of feeding them, during the first twenty-four hours, instead of letting them wait for their natural food, the milk. Infants will therefore often vomit, or have their bowels disturbed, more from too great a quantity of some over-sweetened, or otherwise improper, food, (for I have sometimes suspected, that spiced gruel has been incautiously given to them), than from the want of sufficient power to expell the *meconium*, or first black stools.

stools. It is only under such circumstances, that some aperient, or other, medicines, are needful.

I would say, as a general rule, that infants had better not receive any food for some hours after they are born. It might, perhaps, with propriety, be departed from, in the case of an infant, either prematurely born, or apparently very weakly, whose great languor, and probable state of emaciation, would seem to call for some nourishment, or the breast of a wet-nurse, soon after its birth. But healthy-born children may, with the greatest advantage, wait some hours. Let us draw such an inference, from nature's management of the chick, which does not pick up its food, until it is perhaps about twenty-four hours old. The well grown infant may have resources, similar to the yolk of the egg, in the belly of the chick, and may therefore wait for food, with equal safety.

safety, a reasonable time. This conduct seems authorized by nature, who has not immediately made ready its first, and proper nourishment, the mother's milk.

I have, however, never seen any inconvenience arise to the bowels, from a child being put to the breast of a wet-nurse, soon after it is born: but, if well-grown, I think it had better wait a few hours, because I have sometimes thought a child has, in a few days, become heated, from having had too great a quantity of the milk, from the readiness, with which it so soon obtains it from the wet-nurse, whose breast has been exerting the full powers of secretion, for some time before. This circumstance has also made it necessary to give the child some aperient, or other medicines.

When the infant can obtain the milk of the mother, it cannot be necessary
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to have it fed at the same time, at least for the first few days. If she be of a delicate constitution, she may, nevertheless, have a sufficiency for that short period, even though food may be afterwards requisite. When it becomes proper, I think it better to avoid giving bread food of any kind, especially in the form of pap. The best food, and what I have experienced to be fully sufficient, for several months at least, is the grit gruel, well boiled, added to an equal quantity of cows milk, either only warmed, or boiled, according to the state of the child's bowels. If it be prone to costiveness, the milk had better only be warmed.

When a child is to be brought up by hand, considerable judgment is necessary, to proportion the quantity of food to its age and strength. Weakly children will always require less food, than those who are stronger, for they are

are less able to digest it. These are frequently attacked with alarming, and even fatal, convulsions, from their bowels being over-loaded. Under all circumstances, if the food is too thick, or given in too great a quantity, the perfect digestion of it is prevented.

Human milk is esteemed more nutritive, than any other, and even more so than bread; and yet children are often absurdly fed with bread and water pap only. If they must have bread, either because they are brought up by hand, or do not seem satisfied with the breast, when they are several months old, I would recommend stale French roll, scalded, or boiled, with the crust to it, in preference to any other. This may be beat up into a pap, with the quantity of water it has sucked up, and some cowsmilk may be afterwards added to it. I do not think the tops and bottoms, in ordinary use, so proper.

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I am further of opinion, that it is not so well to feed a child with a spoon, or boat, from either of which it receives the food too fast. It is better to use either the feeding pot, which has of late been so much recommended, or the glass horn, through which an infant will suck milk, or any fluid nourishment, with great convenience, and generally with contentment to itself. The spout of the former, and the end of the latter, should be furnished properly with a piece of fine linen, or vellum, when used.

Some are of opinion, that children, in order that they may thrive, should not have much food at a time, that they may be more frequently hungry, and of course more frequently supplied. The stomach, by this means, being never over-distended, is supposed to digest the food more perfectly, and with less inconvenience. It would

also be further beneficial, if they were from the birth, accustomed to feed less in the night, that they might be habituated to take their greatest portion of sleep, during the natural hours of rest. Good habits may be early, and easily, acquired with infants.

A caution has been given by some authors, to parents and nurses, (and a very proper one it is,) not to lay a child on the back, when they feed it. In the posture of sitting, it swallows its food more easily, and more readily feels, when it has had enough.

After a few months, a variation in the food may now and then be necessary. Some harts-horn jelly may then be added to cows milk, and drank occasionally. Some indeed are of opinion, that it is preferable to gruel, or barley water, even in the month. The jelly and the milk should be warmed separately, and no more of either at a
time,

time, than is likely to be used. *Lisbon sugar* is generally employed to sweeten it; but if the infant is inclined to a purging, a little loaf-sugar is to be preferred: but I believe the bowels of infants are often disordered, from the too free use of the former.

If an infant, who is prematurely born, cannot have the breast, asses milk is preferable to any other food, particularly if it should be very weakly, and the bowels lax; but in this case it is probable, that nothing but the breast will preserve it.

I will add a few observations on the proper time and method of feeding, and nursing, a child, for the sake of both itself, and its mother. With kind, but very mistaken, intentions, children are too often gorged, so that most of the infantile indispositions, in healthy constitutions, arise from mere fullness of the bowels: and the weakly often

throw up their food, from the stomach having received it too fast. Many a child is fed frequently in the day, besides being suckled, and at night, lies with the mother, constantly at the breast, so that while it is draining her to excess, receives itself, sooner, or later, some serious injury. Without enumerating the ordinary accidents, which may happen from such a practice, or explaining the nature of the several permanent injuries it may receive, it seems to be proper to observe, that too often has the young infant been suddenly hurried from the world, by being suffocated in its nurses bed, or, in common language, *over-laid*.

The mother, who would do justice both to herself and her child, would do right to observe the following plan, with regard to feeding, and nursing it. In the day time it may be fed, either once or twice, according to the state of
her

her own constitution, and the quantity of her milk: but she will suckle it several times. She may also suckle it at her own bed time, and have it brought to her again, early in the morning, if the child sleeps in a separate apartment: which I have before recommended, as the best practice. She may entrust a careful nurse, (with whom however it must not sleep) to feed it once in the night. If therefore, the infant receives one or the other nourishment, about every four hours, it is sufficiently frequent. This plan of feeding may be continued for several months, after which, the nourishment in the night may be discontinued. Indeed, children generally sleep best, who are not loaded with food. Sometimes they will naturally rest, for six or eight hours together, but they should be awakened from so long a slumber in the day time,

when they are very young, but never in the night. . . .

The advantage of the preceding plan, of managing an infant at the breast, will be sensibly felt by those mothers, who have suffered much from having their nights rest disturbed, either by its cries, or by their own watchfulness over it.

It will be proper here to make an observation, respecting the time, when an infant should be regularly washed. This should, in my opinion, be done two or three hours after it has taken its nourishment, and therefore, during the month, about nine or ten o'clock in the morning, supposing it to have been put to the breast about six or seven. Though the injurious effects of a contrary practice, may not be immediately felt, I think some must ultimately arise from it. But though an infant should not be washed, soon after the stomach has received nourishment, it may be
fed,

fed, or put to the breast, very soon after it has been washed: and I think this is, for several reasons, the most proper and convenient time for it to be fed. When older, it may, with propriety, be taken into the air, before it receives its first full meal.

Such very different opinions prevail, respecting the degree of heat and cold, which very young children can endure, that I shall content myself with stating, what I have observed to be the effects of the different management of infants, and children, in the different ranks of life. In the superior classes, they are generally kept warm; in the inferior, they are more exposed to cold. In the latter class I have observed, that the children have been, on the whole, most healthy, as they have grown up, and have gone through the epidemic diseases of the climate better, unless they have been very much neglected, with regard

regard to the cleanliness of their persons. On the other hand, children of the superior ranks frequently suffer, what the others escape, because they are too much indulged with luxurious living, and are exposed to the relaxing effects of heated rooms, and beds surrounded with curtains.

It is therefore of the first importance, both to the population of the country, as well as the health of the inhabitants of this city in particular, that parents should attentively consider, that the more children are exposed to the open air, within prudent bounds, the hardier they grow, and the less they are subject to take cold. It should further be remembered, that many may have fallen a sacrifice to epidemic diseases, because the manner of nursing them in their infancy, had tended so much to weaken their natural constitution, when they would, in all probability, have escaped,

escaped, if they had been reared in a manner less delicate, and more consistent with the dictates of primitive nature.

It is with the view, of removing this debility, whether natural or acquired, that cold-bathing has been so strongly recommended, to take place of the cold washing, in the course of a few months from birth. On this subject it is very necessary to give this additional caution, that a child should only be plunged once into the water at each bathing, and should immediately be thoroughly dried with gentle friction.

In addition also to what I formerly recommended on this subject, the child may with advantage, while very young, be afterwards danced in the arms of the nurse, before it is quite dressed. But it is not necessary to do this by the fire-side; nor need the child be put to bed after it. It may with more propriety

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be taken abroad, into fresh air, in winter as well as summer, for a quarter of an hour, or longer.

There is great difference of opinion respecting the use of a cradle. I have had very sufficient opportunities of knowing, that it is best to rear an infant without one. I think it much oftener prevents, than promotes, a child's sleeping soundly. If it is once accustomed to be put to sleep by rocking, it will wake as soon as the sensation ceases, and it will then cry, and become uneasy, and fretfull. Whereas, if it be from the first habituated to be put to rest without it, it will go off into a sleep naturally, and it will generally be longer, more perfect, and of course more refreshing. Rocking in the lap is equally objectionable, with rocking in a cradle.

Some approve of the child's sleeping with the mother, conceiving that it then thrives

thrives best, from the warmth it receives; but this is raising an infant, as a plant is raised in a hot house, only to be afterwards checked in its growth, and otherwise injured, by the rude currents of air, to which, sooner or later, it must be exposed; perhaps to be so blighted, as never to recover a full state of health again. This is an important consideration, in addition to what has been before observed on this practice, in the present chapter.

I think also an objection, on the same principle, lies against the custom of so much exposing the limbs of a child to bleak air, when winter sets in, after they had been the preceding one, constantly kept warm by long clothes. It would therefore be safe and prudent, to put stockings on a child in arms, in the winter season, when it is taken abroad, though not yet accustomed to them in the house.

CHAP. XI.—*On the Diseases of Infants in the Month, requiring principally external Treatment.*

I SHALL now proceed to notice those diseases, to which the newly-born infant is liable, from the circumstances incidental to its birth; and also those, which arise from mal-conformation.

The head and face of a child, after a difficult labour, or from an unfavourable presentation of the face, will sometimes be very much swelled. It will commonly subside in a short time. But when the scalp alone is much affected, or particularly swelled in one part only, I would recommend gentle friction several times a day, and bathing the part with brandy; observing, at the same time, that the cap be not fastened round the head, by any thing tight,

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When a particular tumour remains for some time, on any part of the head, appearing inflamed, and feeling as if it contained a fluid, it will nevertheless be proper to persevere, in the use of spirituous applications. The power of absorption will do more, than is commonly supposed. I think these tumours should never be opened by the lancet; but, if they suppurate, left to burst of themselves. If any difficulty arises, it will be best to have the opinion of a surgeon.

The *scrotum* will also sometimes be remarkably tumid, and even discoloured, particularly when a child has been born by the breech presentation. In this case, it will be proper to suspend it by a cloth, after first covering it with a piece of linen, wetted with brandy, which should be frequently renewed.

The partial, and general, discoloration of new-born infants, arises from

a cause so very inexplicable, and is at the same time so rarely met with, that it will be sufficient to say, it is to be managed, according to its degree and concomitant circumstances. The treatment must therefore be decided upon, by the judgment of a professional gentleman. The application of a leech on the affected part, and gentle purging, have been recommended by Dr. Underwood.

When an infant is born with no other sign of animation, than a weak pulsation of the heart, and the arteries of the umbilical cord, it is in an apparent state of fainting. But a true *syncope*, or fainting, immediately or soon after birth, must be a very rare affection. It has, however, occurred in several instances. It may be relieved by volatile, nervous, and cordial remedies; and I think it would always be proper, to

to apply a blister to the nape of the neck.

A blister is also sometimes necessary for the new-born infant, on other accounts; for instance, where there is reason to suspect a predisposition to *hydro-cephalus*; and also when the child is attacked with convulsions, from the pressure its head has undergone in the labour. It is also advisable, in some of the tumours above mentioned. But I think it is most especially called for, when a child shews, several days after birth, a comatose disposition, from which it, for a length of time, refuses to take the breast.

I have never seen any inconvenience arise from the action of the cantharides, which would dispose me to recommend a piece of lawn, to be applied on the plaister; but I think it necessary, to have it always sprinkled

with powdered camphor, which, in my opinion, renders their action more favourable, and by securing the skin from needless irritation, counteracts, in a great degree, the disposition to strangury, which they are apt to produce. I think it also tends to quicken the vesicating power, or action of the cantharides. The blister raised requires sometimes to be cut, but it will generally heal, and do well, without the ordinary dressings. If any should be required, the most usefull, and convenient for the purpose, is the spermaceti ointment, spread on lint.

Infants are born with a thin membrane under their tongue, called the *frænum*, which is sometimes so broad, as to require dividing, in order to give freedom to the tip, and to allow the child to take proper hold of the nipple in sucking. Mothers, whose nipples are not very prominent, would feel great

great disadvantage, if it were not divided. It is an operation very easily performed, and can never be attended with any serious inconvenience, or hæmorrhage, if it be done with proper caution. The pain attending the operation is so trifling, and momentary, that it is not worth considering.

Sometimes the frænum, though it is very considerable, forms no impediment to the action of sucking; but it may, nevertheless, later in life, occasion the child to lisp, and pronounce the *liquid letters* with difficulty. I therefore think, that when this is the state of it, it should always be divided at first; but if this should not have been done soon after birth, it may be performed afterwards, if the defect in pronunciation just noticed should be observed. I have known the division made successfully for this purpose, in

several instances, at the ages of four, five, and six years.

The infant generally has an evacuation from the bowels, soon after birth. If, however, any length of time should have elapsed; without one, it will be proper to examine the fundament, which is sometimes imperforate, so that the *meconium* cannot be voided. This case can only be relieved by a surgical operation, by which the natural passage is opened, and afterwards secured from closing again, by the introduction of the bougee.

A similar defect sometimes occurs, where the *anus* is open; namely, a want of the lower part of the *rectum*, so that the gut terminates at some distance from it. This case calls for all the discrimination, and judgment, of the surgeon: nevertheless, the defect is sometimes so great, as to be beyond the reach of the most skilfull practitioner. But, in every
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case of the kind, a minute examination should take place, and something, perhaps, should be attempted, as it is the only chance the child has of living. In this melancholy situation, the belly becomes tumid, and the infant will linger on for a week, or, perhaps, ten days. Sometimes an obstruction of this kind arises from a division in the intestinal tube, at a great distance from the anus, in which case nothing can be done.

When a child suffers from a retention of urine, it should be immediately inquired into, whether the orifice of the *urethra* be pervious. This obstruction is more rarely met with in the female, than the male. If it be found closed, the skill of the surgeon is required. Sometimes an infant will be very long, perhaps a day or two, before it voids the urine, even where no defect, or obstruction, is to be seen. In this

this case, the retention, or want of urine, must arise from some deficiency of action, either in the bladder, or the kidneys. It will then be proper to rub the belly with some warm brandy, mixed with a little oil. Some have recommended it to be rubbed with an onion. Which ever be used, I would advise a bladder, half filled with scalded bran, to be afterwards laid on the lower part of the belly, and a plain clyster to be thrown up. Instead of bran, the bladder may be half filled with hot water; but this should then be securely enclosed in a second bladder, lest that, which contains the water, should by any accident burst. Care should be taken, in either method, that air be excluded from the bladder. A mixture of some neutral salt, with a little rhubarb, may also with propriety be given. The child may not, perhaps, appear to suffer much; but, if it should,

should, it will be proper to add a few drops of laudanum to the clyster.

The *vagina* of the female is also sometimes imperforate. Practitioners, and other attendants on labours, should therefore carefully examine the infant, that it may not grow up with a defect, which, at a certain period of life, must inevitably prove troublesome, and which, at last, will require an operation to relieve.

The breasts of infants will often enlarge considerably, within two or three days after they are born. The vulgar notion of nurses, respecting the cause of this appearance, is the occasion of much bad management. They become tumid, and appear to contain something like milk; and they have therefore often been rubbed, and squeezed, and covered with plaisters, with a roughness, amounting to cruelty. But their fullness is most likely to be occasioned

sioned in them, as well as in the mother, as formerly explained, viz. from a turgid state of the blood-vessels. I would, on this account, recommend nothing to be done, unless they are considerably hardened, and painful to the touch. In this state, very gentle frictions, with a little mild ointment, will be proper; but perhaps, a poultice of bread and milk only, or of lint-seed meal and water, constantly kept to them, will disperse the fullness in a few days.

The infants breast, in this state, will seldom inflame, but from some previous harsh, and improper, treatment, such as too rough frictions with brandy, &c. as above-mentioned. When this is the case, the inflammation may at first require the poultice to be made with the saturnine water. Sometimes bathing them with it answers very well. I have seen many of these cases very roughly treated, but yet I have only met

met with one, which suppurated. This suppuration can never be produced by the poultice alone, as it never takes place, but when the inflammation has already rose to such a height, from a long continuance of stimulants, and rough treatment, that the suppurating stage has already commenced, at some point of the tumour. Nevertheless, the poultice is still proper, as the inconvenience, and pain of the subsequent abscess, will be moderated, when it is not in due time to be prevented, by its application.

Many mothers will make themselves uneasy, about the falling off of the navel-string. This generally happens about the fourth or fifth day, but often earlier, and sometimes much later. When it separates, the nurse need only apply a piece of linen rag, scorched. It is customary with many, to apply a raisin, or piece of toasted fig. If there should
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be more than usual tenderness, it may be proper also, to sprinkle it with a little common powder. Sometimes the soreness continues for weeks, which has generally been the case; when it has been a long time, before the navel-string has dropped, and particularly, when it has been tied too short.

The bleeding, which sometimes happens at the navel, is so rare, and of such little consequence, that a light compress, with some gentle styptic, soon removes it. The soreness, when considerable, may require a bread and milk poultice; but this will not avail much, unless the bowels are kept open, and the child fed sparingly, and with caution. The saline mixture, with some rhubarb, is a very good medicine on such occasions. When the soreness has been considerable, it has, I believe, prevented the navel afterwards, from so readily starting.

Infants

Infants are sometimes very early troubled with hernial affections. The rupture of the navel is most readily, and safely, managed by comprefs, and should have great attention early paid to it in the female, because it may be of serious consequence to them, in future life, if they should have children. That, which happens at the groin, is frequently congenite, but is always most apt to descend in children, who cry much; particularly if they are overfed, and too much tightened with rollers. They will sometimes be considerable, even in the month. All that can be done in early infancy, in my opinion, is to bathe the groin with brandy, occasionally; to keep the body open; to feed the child moderately; and to prevent its crying, as much as possible. Keeping the bottom dry, and washing with cold water, will further contribute to its removal. As it is a

complaint, which extends beyond the month, I shall here add what Dr. Underwood has said upon the subject.

“ Ruptures at the groin are of most consequence, yet may be safely left without a bandage, especially as the cold bath alone generally cures them, when they happen to children, before they go alone. In early infancy, there is likewise some difficulty, in retaining the truss on the part, and it is continually liable to be wetted. Should a rupture however be very large, and the infant unusually fretful and crying, recourse may be had to a steel-truss, to which it will be necessary to pay some attention, lest it slip out of its place, or the rupture fall down, and be bruised by the pad. After two years of age, indeed, when children begin to take more exercise, the use of a truss seems to be absolutely necessary. Should the cure of either kind of rupture proceed slowly,

slowly, cold bathing will assist it, as well as be proper for some months, after leaving off the bandage or truss."

As parents are often very impatient to have a steel truss applied, I shall beg to add to the objections I have quoted, that the too early use of it may be detrimental, to the straight growth of the infant, by exposing the bones to the partial action of a strong spring, on one side, while they are yet pliant, from being formed so much of cartilage, and while the child is incapable of that muscular resistance, which is necessary to counteract, or balance, the pressure it must occasion. Indeed, this consideration alone shews the propriety, of delaying the application of a truss, until the child can go firmly alone, or till it is about two years old.

There will often appear, in the scrotum of infants, at birth, a turgescence, which has been called the *watery rupture*.

Of this it is proper, that parents and nurses should be aware, that it may not be mistaken for the true rupture. From this it will be readily distinguished, by its transparency, and by its not becoming larger, when the infant cries. It will generally be cured by embrocations of the astringent kind, and by cold washing. It may sometimes require puncturing, which is attended with very little pain, and generally effects a cure.

It is also proper to guard against mistaking another complaint, for a rupture, to which the male infant is liable, namely, the consequences of the retention of one, or both *testes*, in the abdomen. When the descent of it takes place after birth, it will gradually form a tumour at the groin, which it would be of serious consequence to treat, as a hernia. It would therefore be prudent in every parent to take the opinion

nion of a professional man, when tumours of this kind appear, before any treatment is determined on.

An inflammation will sometimes attack the eyes of children, soon after birth, which has been usual to attribute to cold. I believe, however, that is not the cause: for it will happen, when every precaution has been taken to guard against it. I think it may much oftener be considered, as an *ophthalmia congenita*. A slight case will do well, by only observing cleanliness, and washing with cold water. If the eye-lids should stick together, when the infant sleeps, it will be prudent to apply a very small quantity of lard, or fresh butter, to their edges.

This inflammation varies in degree, and will sometimes considerably affect the whites of the eyes. It may then be necessary to employ blisters, with some aperient, and other medicines.

All affections of the eyes should be cautiously treated; but there is one of a more alarming nature, which sometimes happens to the newly born infant, which is called the Purulent Ophthalmia. The case I mean is more frequently met with in the month, than later in life. I have generally treated it successfully, with doing little more, than bathing it with cold water, which I recommend to be done frequently, during the day; and it will be farther necessary, that a person constantly keep the eye-balls clean, or as free of the purulent matter as possible, by preventing the lodgment of it within the lids, for any length of time. They must also be carefully secured from sticking together, by some mild ointment, or the lard, &c. as above directed. If I have observed any thing particularly to do harm, in this case, it has been the warm, or emollient poultice. A blister

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at the pole of the neck is proper. I believe the inflammation is often of the chronic kind. But these observations wholly relate to the affection which happens to infants, and by which they have sometimes been deprived of sight.

The various deformities of the limbs, &c. occasionally met with, are to be managed according to their specific characters. The same may be said of marks. But it is foreign to the brief plan of the present work to do more, than observe, that early attention should be paid to the former, particularly to defects about the hands, and to the club, or distorted, foot. These can be, in most cases, remedied, by judicious and well-timed treatment.

CHAP. XII.—*On the Diseases of Infants in the Month, requiring only medicinal Treatment.*

IN this chapter, I intend to make a few observations on those disorders, affecting children in the month, which particularly require medical treatment, and on which I shall be as concise as possible,

Retention of the meconium is considered as the first disease, which affects the intestinal canal: but, if it be independent of organic obstruction; and unaccompanied with other disorders, it cannot be injurious from any peculiar quality, which it naturally possesses. A tea-spoonfull, or two, of castor oil will generally remove the complaint; so that, if the meconium be very long retained,

retained, it must be owing to some peculiar obstruction. Whether, under such circumstances, it will acquire any injurious property, I will not take upon me to determine; but I cannot entertain the idea, that it is rendered acrimonious, by an admixture of atmospheric air taken in with the food.

There must have been some singular debility in the intestinal canal, or strange neglect in the nurse, when a child is, for a whole month, disordered with the meconium, of which instances have been recorded. The castor oil should always be given, before the infant is fed, particularly if it is not to have the breast milk. The backwardness of nurses to give medicines, as they are directed, should induce the practitioner, who attends the labour, either to give it himself, or, at least, to see it given, to the new-born infant. A mixture of equal parts of castor-oil, and sirup
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of roses should be in readiness, that a dose of it may be given, if necessary, either by itself, or in the first gruel the child is to take, after it is dressed. I think rhubarb an improper purgative medicine on this occasion, even though joined with magnesia.

That yellow colour of the skin, which is observed in some infants a day or two after birth, is very often mistaken for the true jaundice, but with this they are seldom afflicted; in some countries less frequently than in this. I do not think the jaundice is ever communicated by the mother, or the nurse, from the breast milk. I had a proof of this some years ago in a jaundiced patient, who suckled her own child. Her milk was apparently but little affected, and her child was not in any respect disordered by it. The common yellowness generally increases for a day or two, but goes off in two or three more,

more, by only keeping the body open. This is necessary, because they are most commonly in some degree feverish. The medicine I most approve of is the saline mixture, with rhubarb. The astringency of the latter is counteracted, when it is given in this manner. Infants thus affected usually prove, within the month, the fairest and finest children. Accidental or partial tinges, of a yellow character, ought not to be considered as arising from jaundice, or the presence of too much bile. The meconium can never of itself produce jaundice.

An inflammation of the erysipelatous kind will sometimes, though very rarely, attack children in the month. This has been particularly spoken of, as a peculiar disease, by Dr. Underwood, under the term *erysipelas infantile*. It attacks both the delicate and the strong. The skin becomes tumid, hard, red, and

and at last purple. It is always dangerous, but most so, when it fails upon the belly and pubes. I should conceive, from its having been found, on dissection, accompanied with the appearances of peritonæal inflammation, that it is a disease, which ought not to be treated by external applications, particularly of the saturnine or repellant kind, not even when a lesser degree of it only attacks the extremities. In proportion to the degree of fever, with which it is attended, and the specific appearance of the inflammation itself, should the bark with the cordial confection be given.

In most cases of cutaneous inflammation, accompanied with fever, I have always succeeded best, when, at the commencement, I have had recourse to evacuations, and the antiphlogistic plan, (even in some cases, which were attended with a livid appearance);

pearance); and I have rarely trusted much to the bark alone. My observation of late years induces me strongly to believe, that, in such cases, whether they occur in children, or in adults, the preparations of the OAK-BARK form a safer, and at the same time as efficacious a medicine, as those of the *cinchona*, or peruvian bark.

In the first or second week of the month, an infant is sometimes attacked with a purulent, and acrimonious, discharge from the nostrils, at times impeding the free respiration through them. It will generally last several weeks, and will be found most difficult of cure, with children brought up by hand. As soon as it is observed, it will be proper to pay immediate attention to the state of the fauces, because I have seen the same symptom accompany a particular species of the *cynanche maligna*, in several instances, later in life,

life, which will be found in many cases to take place also in the infant. On this particular affection, Dr. Denman has communicated some important observations more at large. Which of the two affections first takes place, it will be always difficult to say, from the infancy of the patient.

The purulent discharge accompanying this disease, (or *ozæna infantilis*, as it has been called by Dr. Underwood), may irritate the fauces, as well as the external nostrils, at the same period, through the acrimonious quality of the secretion. But if there be, in the first instance, an *Angina maligna*, which we may reasonably suspect to be sometimes the case, from a fullness observed about the throat and neck externally, which takes place soon after the commencement of the complaint, I think the impediments to swallowing would be observed, before the discharge from the

the nostrils has become purulent and severe. I am most inclined to suspect, that the disease originates in the posterior, or internal nostrils, connected with the *basis* of the head, and the *palatum molle*.

The nice discrimination necessary in the treatment of the preceding complaint, renders it hazardous to point out any particular or decided plan, for the exhibition of medicines; and it is moreover unnecessary, because professional attendance must be requisite, to determine what are the best remedies for each individual case. The disease certainly varies, both in its symptoms and degree, according to the constitution of the patient. The established marks of the different temperaments are discernible, even in the infant.

Inward fits, as they are vulgarly called, though for the most part an imaginary affection, will often alarm the

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mother, and induce her to call for some medical assistance, which is more necessary to quiet her fears, than to remove a really existing disease. The alarm is commonly occasioned, by observing the mouth of the infant, in a manner slightly distorted, or convulsed, mostly with the appearance of a smile, which, I believe, is more likely to be caused by pleasurable sensations on the mind, in a state of dreaming, than by wind, or any real indisposition of the stomach. If women in general could be persuaded of this, many a parent would escape the needless fears of the nurse, and many a child the useless, and sometimes the detrimental, effects of a nauseous medicine; and, in particular, the pernicious use of *Dalby's* famed carminative. Sometimes a slight turning up of the eyes, and a blueness of the lips, have also been observed, and have been thought to forebode danger,

danger, as arising from some spasm of the stomach, which, whenever it really happens, may, I believe, be traced to cramming an infant with too much pap, or some other indigestible food.

Costiveness may be either constitutional or acquired: I believe it often arises from the improper use of rhubarb, to remove the first black stools, and therefore I would always have the nurse enjoined, never to give it in the month, even with magnesia, without medical direction, on account of the astringency which usually follows its purgative operation. Even magnesia itself is objectionable; for, unless it be calcined, it produces flatulence, and does not always effectually remove either costiveness, or acidity. But these complaints are most effectually prevented, by not giving to the infant, during the month, any bread-pap, or food prepared with flour, by the use

of which the bowels frequently get loaded, and are also disordered, by the acidity generated from them.

When costiveness is constitutional, it is better to do but little, particularly if the child appears in tolerable health, in every other respect. It may call for attention, but will rarely require medicine, if the child be kept on a proper plan of diet, and nursing. In the case of acquired costiveness, the prevention, as well as cure, will only be permanently found, by avoiding improper treatment and diet; but, from whichever cause it arises, the only medicine I think necessary to recommend, is a mixture of equal parts of castor-oil, and syrup of roses, of which a tea spoon-full or two may be given, as occasion requires.

Flatulence generally accompanies costiveness, and is sometimes attended with pains of the stomach and bowels, which
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are indicated by the drawing up of the infant's limbs, and by its agonizing manner of crying. Under such circumstances, I think it will be proper to apply warmth to the belly, by bran heated with hot water, and put into a bladder, which is only to be half filled with it, and then tied, and wrapped up in a flannel; or scalded camomile flowers, put into a flannel bag, may be used in its stead. But I prefer the former, as less exposing the child to be wetted, while it affords sufficient moisture, with the heat, in its application. At the same time, it will be proper to give the full dose of the above aperient mixture. If this should not operate speedily, or the child remain in much pain, a plain clyster of thin gruel should be administered.

The *suppository* will sometimes succeed very well. The best in common use is prepared, by scraping a candle until it is

is taper, and then introducing it into the anus, about an inch, or two inches at most. It will be better to dip it in oil, before it is used.

I think it proper here to caution, against the use of drastic purges, or clysters, prepared with jalap, aloes, &c. as likely to be pernicious in their consequences. Their operation is often much too irritating, even later in life.

It is a very common practice, to give carminative medicines to infants in the month, as well as when they are older, in order to remove flatulence; such as grated ginger, and nutmeg; pounded cardamom, and carraway seeds; one or other of which is mixed with their food, or added to their common aperient medicines. I believe they are too generally, and freely used, and then have often the same noxious effects, as *drams* with grown people. They very much dispose the habit to become feverish,

rish, and sometimes excite an inflammatory disposition, on the surface of the bowels, by which they become debilitated, and their power of absorbing the proper nutritious particles of food, may, at the same time, be impeded, while both costiveness and flatulence are ultimately increased.

Dill water, which is a remedy in common use, is perhaps the best carminative, that can be given to infants. It may be sweetened with about an eighth part of syrup of orange peel, and in some constitutions, may, with propriety, be employed, as a vehicle for a little calcined magnesia. I have experienced the advantage of this medicine in children, whose bowels have been prone to acidity, from weakness and delicacy of constitution.

If parents will not allow their infants to be reared without cramming, then some purgative medicine must frequent-

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ly be wanted. But, I believe, that it is the bad manner of feeding, as well as over-feeding them, in general, even when at the breast, that is the cause of almost all they suffer, from costiveness, flatulence, and acidity.

The diet of every woman, who is a wet nurse, should be temperate and regular, in order to prevent her being heated in her habit; but from the observations I have made, it is not of so much importance, as is commonly imagined, in preventing, or removing, the complaints of suckling children. Great benefit is, however, to be expected, from a proper attention to the state of the bowels in both. If a wet-nurse be heated, or feverish, the secretion of milk will be affected in common with the other secretions, and in all probability, it will be found less nutritious. It may, therefore, be sometimes necessary, to lessen the quantity of porter she may have been

been accustomed to take, and to use good table-beer in its stead; and also to allow a certain proportion of vegetables and fruit. Whatever keeps a wet-nurse in the best health, will make the secretion of milk most perfect, and most fit for the child.

Vomiting is not a complaint, with which infants in the month are so much troubled, as afterwards. It sometimes arises from costiveness, but is oftener occasioned by an over-loaded stomach, and then the milk will be commonly rejected uncurdled. But if it be returned in that state, some time after it has been taken, it then shews some defect in the powers of digestion. In this case, the vomiting may be looked upon, as nature's own remedy, and, by due abstinence alone, the digestive powers of the stomach will return. But this complaint much oftener attends the diarrhæa, or lax state of the bowels.

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When a purging repeatedly happens to an infant, it will be proper to consider, whether it may not be constitutional. It is, however, frequently attended in the month, with an unfavorable appearance in the stools, that generally denotes an acrimonious state of the intestinal secretions. This will require, at first, a judicious employment of some gentle aperient; but afterwards it may be requisite, to use absorbents, or anodynes, with the view of destroying acidity, or lessening irritability. When very frequent and watry stools are voided, for a considerable length of time, by an infant, who is brought up by hand, notwithstanding the use of medicines, and repeated changes of diet, the only resource is the breast milk, of which I do not think, it can ever be too late to make trial, though [the infant may be several months old, and

and emaciated in the extreme degree.

I experienced so remarkable a change within twenty-four hours, in such a case, in my own family, from having recourse to the breast, when the child was at the age of four months, that I should strongly advise it to be tried, under the most unfavourable appearances. My own child laboured under a diarrhæa from its birth, though suckled occasionally in the month; after which, his mother's ill state of health obliged her to discontinue the office. During the time it was without the breast, it had from eight to twelve motions daily, and, at the last watery evacuations poured from him, almost incessantly, notwithstanding every thing, which my medical friends could advise, or my own hourly opportunities of seeing him could suggest. As soon as he received the breast milk of a healthy

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woman,

woman, the diarrhœa ceased; he had only three evacuations within the next twenty-four hours, and was soon restored to perfect health, which he has continued to enjoy, with very little interruption, more than fourteen years.

Much attention has been paid of late years, to a singular affection of the skin, which is occasionally met with in the newly-born infant, or a short time after birth, and has been distinguished in this country by the name of *skin-bound*. A disorder of the same kind, is much more frequently met with on the continent. I cannot consider it, as an idiopathic complaint, but as an almost mortal symptom of others; for it has frequently appeared in the advanced stage of bowel disorders, and in France is generally accompanied with *erysipelas*. It seems to be founded in a morbid operation of that sympathy, which is so well known to take place, between the
skin

skin and intestinal canal, and would not perhaps of itself be fatal, if it did not denote the dangerous state of other disorders. We should have many active means in our power, to counteract its fatality, if it was an original disease.

A case of this kind occurred at Naples, in the year 1752, in a young woman seventeen years of age, which was successfully treated; as we learn from a paper published in the forty-eighth volume of the Philosophical Transactions. I have been indebted to my friend Mr. Chevalier, for the communication of this case, having been informed of it by him, some time ago, and I believe it is the only instance of the kind, to be met with on record.

As this very remarkable affection of the skin, has principally occurred in hospitals, and places where the air is foul, it is natural to suggest the propriety, of removing the infant into a

purser atmosphere, as a mean likely to be very conducive to its preservation. The warm bath, and blisters, seem to have been of most service, by the histories which are published of the disease; in addition to which, cordials and gentle aperient medicines, are strongly recommended. But the complaint is too serious to be, with the least propriety, committed to mere domestic management.

Watching, or the want of sleep, in infants, is very distressing in the lying-in apartment. It is generally an attendant upon some other indisposition, and not unfrequently accompanies their bowel complaints. It is most safely and effectually relieved, without opiates, by allaying the irritations of the first passages, which, from the whiteness of the tongue, appear to be generally accompanied with more or less of fever. I have almost always relieved such indispositions,

dispositions, whether they have been attended with costiveness, or a loose state of the bowels, with a scruple of the prepared *kali*, neutralized with lemon juice, in a two ounce mixture, with the addition of fifteen, or twenty, grains of rhubarb, and half a dram, or two scruples, of compound powder of crab's claws. Of this, the child has been directed to take two tea spoonsfull, every third or fourth hour, until it has been relieved.

When, with this inquietude in the child, flatulency has predominated, and the feverish symptoms have been slight, I have prescribed dill water, in the place of common water, in preparing the preceding mixture, and have now and then used a little syrup of ginger, or saffron, with it. The syrup of white poppy heads, is seldom necessary. The neutral salt assists the aperient powers of the rhubarb, and, at the same time,

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prevents

prevents its subsequent astringency on the bowels. This medicine equally relieves by its general operation, as by carrying off, and destroying, the acrimonious state of the intestinal secretions.

Infants will sometimes shriek, or cry, from casual causes, independent of particular indisposition. It therefore is proper to observe, that a child may sometimes be restless, and cry much, from hunger or thirst, as its liquid food, the milk, does not remain long in the stomach. It may also cry, from having sucked too much; or from lying too long on one side; or from being too hot in the cradle, or bed; or from being wet; or from having some part of its cloaths too tight. Sometimes pins have occasioned the shrieks of children, of which a remarkable instance is given by Dr. Underwood, where, from its not being timely discovered, it proved fatal.

to

to the infant. The force of habit, also has, sometimes so very soon, an influence over them, that they will cry, if the ordinary periods of feeding, &c. be varied, or departed from.

The *thrush*, or white tongue, is generally a symptom attendant on some degree of a febrile state of the habit, or disorder of the bowels, and is seldom to be considered as an idiopathic, or primary disease. It is too often thought to be such, and therefore engrosses the whole attention, both of the parent, and the practitioner. As a proof, that it may be occasioned by the indisposition of the habit, it may be observed, that it is often found to arise from errors in diet, either as to quantity or quality. It seldom attacks the whole of the intestinal canal, but when the child has been much exposed to a heating regimen, or the mother has pursued that mode of life, which may have altered

altered or destroyed, the principal nutritious properties of the milk.

I cannot agree in opinion with those writers, who have considered the thrush, as a disease of debility, because it happens to be so common an occurrence, in very early infancy, and sometimes in declining age. It is in fact to be met with at all ages, even in the prime of life, as it generally accompanies the latter stage of many disorders. But then it mostly attacks the tongue and fauces, rather than the cheeks and lips. I believe it wholly to depend in the infant, upon an inflammatory state of the first passages, producing an acrimony of the secretions. I have often found it much relieved by the saline mixture above-mentioned; which is a proof of its depending upon some general indisposition of the habit, affecting principally, on some occasions, the surface of the mouth and fauces, and

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in others, principally disordering the stomach and bowels.

The simple apthous affection of the mouth most readily takes place in those children, who are disposed to sleep much, in the course of the first and second week after birth, and is probably, in such cases, least accompanied with fever; and though a distinction may probably be made, between an original, and a symptomatic, affection of this kind, yet I believe the former is seldom violent, without being preceded by some appearance of fever: and when it follows the other severe complaints of infants, such as diarrhæa, erysipelas, &c. I think it then ought to be considered, as an additional symptom of a dangerous illness, and can hardly be looked upon as critical. I should view the affection of this kind, which occasionally appears about the anus, as a mark of the violence of the disease, depending

depending on the acrimonious secretions of the first passages. But, as it is not always preceded by the ordinary affections of the mouth, it shews, that the original cause of both diseases, is in the state of the secreting organs of the mouth, stomach, or intestines.

This is further proved by the little sloughs, about the mouth and cheeks, never falling off, nor the ulcered parts or tender orifices of the vessels, under them, being ever disposed to heal, until the secretions, in the first passages, have become bland and mild. The local applications, in common use, such as borax and honey; honey of roses, with either spirit of vitriol, or of sea salt, &c. will often have a very sudden good effect, in cleansing the mouth, especially when the milk adheres much to its surfaces: but this is not permanent, unless the proper internal medicines be given,

given, both before and after having used them.

On the whole, I am of opinion, that this erysipelatous inflammation of the mouth, and first passages, depends upon a constitutional indisposition, which is best prevented, or subdued, by not only avoiding all occasional causes, disposing to a plethora, and feverish state of the system, but also all those circumstances, calculated to excite an increased irritability of the secreting organs of the primæ viæ. Such are, too much covering from dress; lying too hot in bed, particularly with the face covered; breathing, therefore a confined air, especially in the mother's bed; food too thick, as well as too much in quantity; given too hot, or too much sweetened; &c. If these errors, in nursing the new-born infant, be duly avoided, it will not be much troubled with the thrush.

The black thrush is not to be considered, as a distinct disease, but merely as a putrid appearance, taking place in the ulcers of the common thrush. It rarely happens; but if it arises from the violence of the inflammatory diathesis, it should with caution be treated with bark and cordials.

It only remains, to offer some observations, on those affections of the skin, which trouble children within the month, and not much after it, and which are so frequently connected with their intestinal complaints.

These breakings-out are well known by the name of the *red gum*. They are of a florid and inflammatory appearance, generally distinct, and most numerous on the face, neck, and shoulders. The different species may wholly arise from difference of temperament, but they are all produced by the same causes, which expose the infant to the thrush,

thrush, and may therefore be continued beyond the month, but it is not usual to see them, after children have been accustomed to go abroad. In some, the red gum will appear in the form of blotches; in others, as a distinct pustular eruption; and in others, in such a small and pale rash, that it may be considered as of a *miliary* kind, and as arising merely from the child's lying hot, and sweating too much in bed, and in that state, being suddenly exposed to the cold air. There is generally a great want of caution, in the conduct of nurses, in this particular.

These cutaneous affections are more frequently met with in the stronger infants, than in the weakly, and are most readily excited in those of robust *stamina*, when they are either kept too hot, or too much fed. The milder kind seldom gives much trouble, and requires only attention to a better regi-

men, and an open state of the bowels, by which it is speedily removed. I think it will never become highly inflamed, or what has been called *rank*, but from some great neglect; or bad management, in nursing. These eruptions will sometimes fluctuate with bowel complaints, from that singular sympathy, which is inherent in the constitution, between the villose coat of the stomach and intestines, and the extreme vessels on the outward surface of the body.

There is, however, one complaint, which, though it attacks children at all ages, should be noticed in this place, because the foundation for it is frequently laid in the first two or three months: I mean, the *tinea capitis*, or scall'd head.

This complaint, I have observed, most frequently happens to children of fair complexion, and light hair, which
is

is generally very thin, and on some heads hardly to be seen, until they are a year or two old. They are generally, in other respects, sick and weakly, and require extraordinary care to rear them; and it is with these, that cold washing is most essentially called for, to enable them to go safely through the diseases of infancy. These also are the children, who are most apt to be attacked with the *hydrocephalus*, or, watery head.

The tinea, or, scall'd head, has been considered as infectious at school, but may, I believe, be generally traced to some neglects or mismanagement, when not directly received from infection. This surely might always be guarded against, by due attention to the children, when first admitted at the school, to prevent its being communicated to others. I have sometimes found it curable by cleanliness, and by whatever can be used safely, to detach and re-

move the scabs of the head gradually. I have seen many a bad case permanently cured, with no other outward application, than the mixture of an equal quantity of rum and sweet oil, with which the head was cleaned once or twice a day, removing the scabs as they loosened, and even loosening them by force, if they were very firmly attached.

But, there are very few cases, and those slight ones, in which external applications alone, are to be depended on. I have generally found some medicinal treatment, and attention to diet, necessary: not because the disease has been constitutional originally, or of the scorbutic, or scrophulous kind, but because it seldom rises to any height, without a habit of body favourable to its production, and unpropitious to the success of any local treatment, and which must therefore be corrected, by both diet and medicine.

CHAP. XIII.—*Concluding Observations,
respecting the Constitution of Children.*

THE term ACRIMONY is frequently made use of, to account for most of the constitutional affections of children; and to it is attributed the rise of eruption, on the skin. I am not much disposed to think, that the fluids of a newly born child, in which part alone, the acrimony must be supposed to exist, can be naturally morbid, or can be rendered so, with the general attention that is paid to cleanliness, and to the simplicity of its natural diet: For a healthy child, fed only at the breast, may nevertheless be troubled with the red gum. But, by improper management, in respect to heat and respiration, particularly when there is a redundancy of fluids in the habit, the minuter parts

of the vascular system may be either checked in their growth, or impaired in their natural action. By the weakness thus produced, the circulation in the smaller vessels is, in some measure, interrupted; the fluids are thus suffered to stagnate; and they then indirectly acquire a morbid appearance.

In this way is the morbid condition of the fluids, which is only the effect of a weakened action, or obstruction in the vessels, occasioning them to rupture, misconceived to be the primary cause of cutaneous disease.

The infant that is liable to the red-gum, seldom escapes being troubled with soreness in the bendings of the joints, and folds of the skin, particularly of the neck, and behind the ears. With more or less of this affection, they become afflicted in the latter part of, or after, the month. It indicates a plethoric habit of body, and points
out

out to us the propriety of a cooling regimen, with the use of cold washing to the parts affected. I have generally found the saline mixture, with rhubarb and testaceous powder, of use. When a discharge from behind the ears is imprudently dried up, a similar affection is very apt to fall on the eye-lids; or the cervical glands may enlarge. When this has been the case, I would recommend a very small blister to be applied behind each ear, or one a little larger at the nape of the neck.

I believe most of the cutaneous, and inflammatory affections of children, arise from too high an excitement in the action of the circulating system; and I have therefore generally found, that the antiphlogistic plan has succeeded better with them, than the use of peruvian bark, even in its lightest form. Parts will sometimes put on a gangrenous appearance, and cutaneous ulcerations

rations will creep over a great extent of surface, in a short space of time. Even in these situations, the bark has been often used, with aggravation of the complaints. Many practitioners seem aware of its bad effects, by so frequently giving nitre with it. It would be best, in my opinion, to trust to the use of some occasional alterative, and the antiphlogistic plan of medicine and diet, in many of these cases of violent acrimony and irritability.

I have thought it very proper to introduce these general observations, because the complaints of very early infancy will sometimes require this mode of practice, and will not give way to any other. The infant and child, as fast growing animals, are more liable to vascular diseases, from the efforts constantly making by the solids, to push forward the redundant fluids. On this account, they become liable to eruptive

tive disorders, and glandular diseases, of various kinds, and their fevers are generally of the violent and inflammatory kind.

I think it both just and humane, to guard that very usefull character to the fond parent, the wet-nurse, from the suspicions which sometimes fall upon her, when the infant is troubled with eruptions about the mouth, ears, and particularly the *pudenda*. Too often is it apprehended, that such affections have their origin, from venereal infection at the breast. Even children are, from such appearances, sometimes unjustly supposed to receive the complaint by inheritance. It will be sufficient therefore to say, that the majority of these cases have been mistaken, from its having been so much imagined, when the disease was new in this country, that every external eruptive appearance, which could not be readily
accounted

accounted for, was to be attributed to it. From this erroneous opinion, too many women and children have been subjected, unnecessarily, to mercurial treatment, to the injury of the health of both.

I do not know how to account for the immense mortality among children, but on the supposition, that the principle, on which they are so liable to violent diseases, is not rightly understood. They are supposed to be very irritable, but I do not think them peculiarly so, independent of disorders in the vascular system. They are certainly free from those mental, and *truly nervous*, irritations, which so much add to danger, in the advanced periods of life. I am therefore disposed to think, that their nervous affections are never, or but very rarely, *idiopathic*, but always dependent on some other morbid principle in their habit; and I do not think it

it can be frequently any other, than a redundancy of fluids, which prove too much for the calm and steady action of the circulating powers, by irritating the sentient extremities of the vascular system, as well as the heart itself. Hence fever is so commonly an attendant on all their complaints, which, when treated by opiates, to abate irritation, is generally aggravated. If we therefore, as a general rule, pursue the antiphlogistic plan alone, we shall oftener succeed. But it must be attended to, both in diet, as well as medicine.

The latitude given by some late writers, to the doses of medicines for children at different ages, for the convenience of domestic practice, is so great, that it shews the difficulty of executing such a task, without embarrassing the parent, as well as the inexperienced practitioner, either of whom, with no other guide, might as often do wrong, as do right. I shall not therefore

fore attempt to lay down any rules of this kind. I have also avoided inserting a variety of prescriptions, for the different diseases I have thought proper to notice, lest evil might arise from their misapplication. It would be safer to trust alone to a judicious alteration of the diet.

I cannot conclude without repeating, that the HUMAN BODY is a MICROCOSM, governed by *actions so complicated, affections so wonderfull, impressions so innumerable, daily improving, strengthening, varying, and increasing* *, that no one ought to trifle with it, or neglect the indications of NATURE to seek relief, even to the extremest age. But the infants affections demand our peculiar attention, from its marked inability, *for a season*, to declare its wants, and to explain its sufferings. In man, therefore, should NATURE find her BEST FRIEND.

* Treatise on Sympathy, 1781.

FINIS.

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