MIDWIVES' UNION SECTION

Mothercraft—(continued)

Notes of a lecture given at Government Hobart School, Royapettah, Madras

The clothing of an infant should be light and warm but without any restricting bonds—so giving it freedom of movement.

A baby should be given no food except milk, fruit juice and plenty of water, until it is 9 months old; when weaning is begun, that is to say, its diet is increased and solid food is given. Needless to say, this change must be brought about very gradually—about 6 weeks is the average time it takes to stop breast or bottle feeds. The child requires much patience and care during the weaning process; patience because it does not take kindly to change of habit, and care, because a greater work is being put upon the digestive system of the baby and indigestion may result. We must avoid overstrain of a very delicate mechanism.

Sleep.—A newly-born baby should sleep most of the time—only waking up for feeds. During this time its brain and nervous system is developing.

A baby of 6 to 12 months should sleep about 18 out of 24 hours and it is a great mistake on the part of parents and friends to try to “make a baby notice things”.

When the child’s brain is sufficiently strong and ready to receive impressions, Nature herself will awaken the child, to watch and take notice of people and things and until then, we should be content to wait. To make a child notice before its brain is ready is to make a child “nervous and irritable” and we all know how difficult and trying to deal with is a highly strung, sensitive and frightened child.

We are apt in our love for babies to try to awaken their interest too soon and it is harmful to the child.

The same thing applies to its body also.

Do not try to make a baby sit up or walk. When its bones are strong enough the child will begin to use them. Mother Nature knows much better than we do; so always let her guide us; let us watch and care for the child, but never try to hurry its development either in body or brain power.

Teeth.—A baby begins to cut its teeth about 6 months old, and when 1 year old should have 8 teeth. At 2 years its set of 20 teeth will be nearing completion, usually 16.

A child keeps its milk teeth until 6 years old when they are pushed out by the permanent teeth growing up behind them. This second period of dentition is a slow process—as the wisdom teeth may be cut as late as from the 17th to 25th years of age. They number 32 in all.

It should be known that a child’s brain grows as much in the first year of its life as during all the rest of life, and for its stability and strength, requires rest and peaceful surroundings. Infants showing signs of nervousness should see few people and should be played with judiciously. There
is a custom of regarding a baby as a plaything for the entertainment of the rest of the family, but such amusement is exceedingly expensive as the majority of "mental wrecks" are caused by injudicious stimulation during infancy.

The so-called "smartness" and cleverness of young children should be regarded as danger signals and repressed rather than encouraged.

In dealing with children old enough to reason for themselves, we must always bear in mind that a child is full of trust and we must endeavour not to betray that trust. It instinctively turns to the one who feeds it and clothes it, for protection.

A child has no idea of time, if a thing is promised it must be given. This particularly applies to a sick child who asks for something. Ten minutes is an eternity to a waiting child.

If anything needs to be done for a child which we know will hurt it we ought to prepare that child for the hurt. Do not on any account, say a thing will not hurt for the child will afterwards fear you as you have betrayed its trust in you.

The character of a child is moulded for good or ill during the first years of life, and habits good or bad, are firmly ingrained before school age.

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**Placenta Accreta**

BY V. B. GREEN ARMYTAGE, M.D., F.R.C.P. (LOND.), LT.-COL., I.M.S.

Nathanson draws attention to the fact that there is a condition of placenta accreta where the placenta is so attached to the myometrium that no spongy layer exists as an intervening space between the chorionic villi and the muscle of the uterus. This pathological anomaly occurs about once in twenty thousand cases, and if not recognised with the hand in the uterus, may be the cause of disastrous rupture of the organ when attempting to remove the placenta. He is of the opinion that placenta accreta can occur any time after the first month, and is most usually found—according to the literature on the subject—at the tubal angle and over the site of a submucous fibromyoma. The condition should be suspected if in any case of adherent placenta (1) there is no uterine bleeding, (2) there is no descent of the umbilical cord, and (3) there is no characteristic ball-like condition of the fundus. Should these three conditions be present, no attempt at Credo delivery should be made. With every aseptic precaution, the uterus should be explored and if no line of cleavage is found to exist between the placenta and uterus, hysterectomy is the only rational procedure, for by this means alone can rupture of the uterus be avoided and the patient saved from death, which usually follows this catastrophe as the result of haemorrhage or sepsis.

As a proof against the futility of attempting to separate the placenta Polak and Frankl have demonstrated post-mortem in two cases, that in this pathological and anatomical type of placenta accreta it is absolutely impossible to separate the placenta from the uterine wall.—From "The Indian Medical Gazette."