

DIET FOR TODDLERS

THE normally healthy Indian child of 12-18 months of age, will usually thrive well on an ordinary Indian menu consisting of dal, rice, vegetable soup, softly boiled eggs, fresh fruit and small portion of chapatie and cereal puddings as sago, suji, etc. The stools are less frequent and more formed when only 3 or 4 meals daily are given—the Indians are very prone to give toddlers very frequent small feeds of milk, etc., which is disastrous, especially in the hot season.

A menu which I have found work well is as follows:—

- 7 A.M.—Dal, chapatie, milk and egg.
- 12 NOON—Rice, curry gravy, dal, chapatie, a fresh fruit and vegetables
- 4 P.M.—Milk, cereal pudding, bread and cream.
- 7 P.M.—Soup (vegetable and bone), crusts for the toddlers, bread or chapatie with dal or vegetables for those over 3 years of age.

Sometimes I interchange oranges or other seasonable fruit, with raw tomatoes, and cooked vegetables with raw carrot, turnip and lettuce.

The stools need daily supervision and I have found the best plan for an undigested stool is to cut down food for 24 hours giving only milk, or even water for a day. So much of the indigestion of this country is malarious, so generally small doses of Quinine and Sod. Bicarb. are also given if symptoms indicate it.

The small infant who is left motherless on one's hands presents the biggest problem and it is very difficult to decide which kind of food produces the best results—the baby here as elsewhere is an individual, what is meat to one is poison to another, however I have always tried to get the best results from the simplest methods. The Calorie system of feeding, I think it safe to say produced the best results—out of 7 infants fed by this method 6 survived infancy and 5 are now healthy toddlers of 2½ to 3 years of age; of the two who died one was tubercular and lived for 6 months; the other a most normal infant died of influenza at 18 months, so the feeding could not be blamed for either deaths.

50 calories for each pound of body weight was allowed and Cod-liver oil m. III-V was added to increase the fat, but this had to be discontinued during the hot weather. Even here we had set-backs, one infant had a decided fat intolerance and only survived on first, Mellin's Food and water, then gradually peptonised skim milk was given and as the weight increased the degree of peptonisation was decreased; this child, is now a very healthy mite of 2½ years, but we still limit her fats. Another needed more than his prescribed amount, some needed less.

The calorie system is not satisfactory for the small baby of 3-4 lbs. as the proportion of milk works out more than the child can digest and it is better to under-feed rather than over-feed these infants; cow's milk, diluted, after boiling, with the addition of Sod. Citras gr. V—to each pint of milk; this should be added before the milk is boiled—it makes a finer curd and less Sod. Citras is required. Mellin's Food in small quantities—one or two tea-spoonfuls in the whole day's feed

gives very good results due, I think, to the malt which it contains—the proportions can be increased as the child gets older.

Barley water, boiled for 20 minutes to half an hour and added to the milk instead of water when the child is 3 or 4 months old helps to increase the weight. Indian babies seem to tolerate and thrive on Carbohydrates much earlier than European infants. Lactic acid milk is a great stand-by during the hot weather, the stools are less frequent, one is able to use a stronger milk mixture and it also helps to preserve the milk when ice is scarce. Suji—well browned, and cooked till thick and added to each milk feed at 6 months of age seems to be well digested. I usually start with one tea-spoonful daily, then gradually increase till the child is having this amount in each feed. For the normal infant, weighing from 5 lbs. and over, 5 feeds in the 24 hours is the most satisfactory, with water and orange or tomatoe juice between feeds. For the undersized or marasmic child, 3-hourly feeding by day and 4-hourly by night is better, but a weaker mixture should be given.

We are at present testing the Truby-King method of infant feeding and so far it has proved satisfactory, but it is a very expensive method, and one which the rich only could carry out. Ideal milk and New Zealand cream is used; its merits will be proved during the hot months which always take such a big toll of babies under 9 months old.

I have found that for weaning, lightly boiled or poached egg is easily digested and liked, a spoonful or two of well cooked dal each day, also vegetable soup and crusts of bread.

You will think these very simple methods, but I have always felt that in training Indian girls to care for babies and children it is best to use the simplest methods and the materials which are likely to be met with in the Indian homes—a large percentage of their patients will be poor and even Mission Hospitals cannot afford to be too lavish when called upon to undertake the whole care of motherless infants and children.

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Tell Them So

“When the cares of life are many,
And its burdens heavy grow
For the ones that walk beside you,
If you love them tell them so.
What you count of little value
Has an almost magic power,
And beneath the cheering sunshine
Hearts will blossom like a flower.”
