

## THE COMMON DEFORMITIES OF CHILDREN:

THEIR CAUSES AND TREATMENT. BY A FAMILY DOCTOR.



MANY children are afflicted by chronic ailments and deformities, which require the most constant attention, if the sufferer would have any chance of being restored to health or the perfection of bodily strength. Some of these are congenital, or date from the time of birth, others are the result of accident, or exhibit them-

selves by degrees while the child is still young. Some of them can be cured, some are incurable, but nearly all can be in some way ameliorated.

Now, as in all cases of chronic disease in children, whether of the bones, or muscles, or internal organs, the greatest care should be taken that the condition of the little patient is kept up to, or as near to health mark as possible.

Particular care should be taken with regard to diet. This ought to be suitable for the age of the child, and the meals should be given with the greatest regularity. Children should never be permitted to fast too long, nor should they be allowed to eat too much at a time. They ought to be taught at a very early age the benefits of eating slowly and masticating well. The clothing should be light, but warm, comfortable, and moderately loose. Flannel, the softest that can be procured and well shrunk, should be worn next the skin, and there ought to be no tightness of the dress anywhere, neither in feet, legs, waist, arms, nor neck. Garters and corsets are injurious to the health. An over-amount of coddling is most injudicious. Plenty of exercise in the open air is imperative if health is to be maintained. Many a poor child is positively starved for want of fresh air. Close stuffy nurseries and badly ventilated bed-rooms have to account for a deal of infantile mortality, and a vast deal of the unhealthiness that renders life to many at best but a burden and a weariness.

The value of personal cleanliness in children cannot be over-rated. I know there are many people who think it is quite enough if the little ones are "bath"ed once a week. This is a great mistake; face and hands and feet should be kept constantly clean, and the bath, cold or tepid, used *every* night at bed-time. This, if the supper has not been a late one, will conduce to sound sleep, without which a child can never be well. Seven o' clock should be bed-time with young children; the bed itself should be a moderately hard mattress, never feathers or down, and the bed-clothes ought to be light, for perspiration is most weakening, especially if the child be at all delicate.

*Rickets* is a disease of children, which is unfortunately too well known to need a very minute description, and one which is accountable for not a few of the non-congenital deformities of childhood. It usually attacks children of a scrofulous tendency in preference to others. There may be said to be three distinct stages of this terrible disorder. The first is called by M. Guérin the stage of incubation, the second the stage of deformity, and the third that of transition of the organs to a healthy condition. Of 346 cases described by this gentleman, three had arisen before birth, ninety-eight in the first year, one hundred and seventy-six in the second, thirty-five in the third, and thirty-four between the ages of three and six.

Although almost any one can tell a rickety child at a glance, it is well to be able to descry the very earliest symptoms of the disease, so as to be able to combat them in time.

The child then, to begin with, is a weakly one, and probably the parents are not over-strong. The former is languid and sickly-looking, peevish, sad, and tender about the body and limbs, which at first may be normal enough, though slight and soft. Gradually, however, comes on debility and wasting, occasional attacks of diarrhoea, and perhaps some swelling of the joints. The progress of dentition is not satisfactory, the head not shapely—it may be large and protruding as to brow.

With the appearance of the bones in the more advanced stage of rickets all are familiar; the bending of the thigh-bones outwards, to which the name *bow-legs* is given; the inbending of the knees, called *knock-knees*; and the deformity of the chest. This last is often very marked; the chest is wide at the lower part and narrow at the shoulders, and the stomach is generally much tumified. This state is, expressively enough, called *pigeon-breast*. Along with these visible symptoms are general ill-health and dyspepsia. The appetite is variable; there are attacks of feverishness; the face is sallow, and the muscles soft and flabby. There are many secondary symptoms, which I need not call attention to, further than to say that a rickety child is more liable to be attacked by ordinary infantile troubles than any other, not to mention several special complaints. And indeed it is these last which increase the dangers of the disease, and so often carry the patient off. Now, as the disorder is due to an impoverished condition of the blood, which causes a deficiency in the earthy matter of the bones, it is plain that all treatment must be directed to improving the child's health and constitution.

Rickets in children ought to be anticipated, and during the first year of its life, if an infant be puny, puling, and weakly, the greatest care ought to be taken of it. If the mother is apparently not strong enough to nurse the child well, a healthy young nurse should be procured, and in addition to the milk

a little farinaceous food should be given as early as the eighth month, and gradually stronger food, such as egg-yolk, broth, beef-tea, very tender meat minced, &c.

The room in which the patient sleeps should be warm, but at the same time most judiciously ventilated, and the clothing he wears by day should be soft and warm.

Complications should be watched for, and the assistance of a medical man procured at once if anything like a bad cold should come, or diarrhoea, or child-crowding. If aperient medicine should be required, it must be of the mildest kind, such as a little castor-oil, a tea-spoonful or two of senna syrup, or rhubarb. Parrish's chemical food—dose according to age—does a deal of good in cases of rickets, especially when taken in conjunction with cod-liver oil.

The patient should not be taught the use of his legs too soon, and if there be signs of malformation coming on, properly adjusted splints should be worn for a few hours every day.

Sea-air and sea-bathing are of much service in this complaint, and so is goat's milk, when it can be taken. Sometimes a course of quinine and iron tonics does good, but this must be at the bidding of a medical man only.

It will be seen that, to give a child suffering from rickets a chance of recovery, *great* care and *constant* attention are needed, and continued obedience to the orders of the physician who has been called in to see the case. Any neglect may be fatal to life, or at all events to the future well-being of the little patient.

There are a variety of deformities of the feet, usually classed under the generic name of *club-foot*. Some of these are the result of malformation before birth, but in a large number of cases, weakness in the bones, muscles, or ligaments that bind the joints is the cause. All cases of club-foot require surgical treatment, and the sooner this is had recourse to the better it will be for the child himself, and for all interested in him.

*Weakness of the ankle-joint* in children is very common, and may ultimately lead to distressing deformity. The child is observed to have a tendency to turn the foot either out or in at the ankle-joint, which appears somewhat swollen and deformed. The heels of the boots are not worn on an even keel, and the very wearing of boots or shoes down at the heel at either side tends to increase the deformity. This should therefore be guarded against; they ought to be protected with steel at the sides where they are most worn. Meanwhile, attention to the general health is imperative. Iron tonics should be given, with cod-liver oil, and the syrup of the phosphates. Further than the wearing of an elastic bandage and boots that fit pretty tightly, and daily salt water douching to strengthen the ligaments, no other local treatment will be needed.

Children that are in the slightest degree weakly, flabby in muscle, pale-faced, and small in bone, should never be permitted to walk too much, nor to learn to walk too soon.

There is an affection of the hip-joint usually called

*hip disease*, which takes a variety of forms, and can only be conducted to a successful termination by a skilful surgeon or physician. It comes on slowly and insidiously; some pain about the knee may perhaps be complained about, a slight degree of limping is observed, and the patient while in bed prefers lying on the opposite side. When anything of the kind is noticed, aid should be procured immediately; all a parent can do is to obey the orders of the family physician, see that no undue strain is ever put on the painful limb, and attend to the general health of the child.

The diet should be most nutritious, but at the same time capable of easy digestion, and the state of the bowels regulated. The use of a tepid bath with sea-salt in it does much good if taken regularly, and supplemented by rubbing of the skin with the rough towel or flesh-brush. Tonics will be needed also, and cod-liver oil. During the progress of the case feverishness may often supervene, when a medical man must be called in. Change of air and residence at the sea-side are very beneficial during the stage of convalescence.

*Curvature of the spine* is a very distressing affection. Too much stooping, whether in school or at work, may give rise to it. But whatever be the cause, or at whatever age the disease—for disease it is—comes on, medical aid should be resorted to. In young children it is important that the spine should have complete rest. For this purpose the little patient is placed upon cushions, or has a couch especially adapted for his complaint, while everything possible must be done to strengthen his constitution, and much can be accomplished in this way by nutritious diet, tonics, pure air, well-ventilated sleeping apartments, the gentlest carriage exercise, and sea-air. If there be any strumous or scrofulous taint, cod-liver oil and Parrish's chemical food will do good, and counter-irritation along the side of the spine may be required. Older children must be kept reclining; walking or anything to cause a strain on the spinal column must be forbidden.

Some children are very subject to *swellings about the throat and neck*, and these cases are too often treated at home, to the child's detriment. At all events, a medical man's advice should be taken; the home treatment will then consist in strict obedience to his orders, and in being careful to feed and treat the child according to the principles of hygiene.

What are commonly called *ruptures* are very common among children. They must be seen to by a surgeon, and if he advises it, a properly adjusted truss must be worn.

Most cases of *hare-lip* can now be remedied by proper surgical treatment. They ought, however, to be seen to in time.

What is called *tongue-tying* I merely mention in order to warn the reader against allowing a non-professional person to interfere in the slightest with it.

Let me also in conclusion warn my readers never to be led away by the pretensions of unqualified quacks, or mischief may result that never can be remedied.