

“THE CHILDREN’S SCOURGE.”

BY A FAMILY DOCTOR.



THE ailment that I wish to draw the attention of our readers to this month is very well designated “whooping cough”—the very name itself has an ugly sound. In some parts of Scotland the disease is termed “chin cough,” and in others the “kinkhost.”

It is well that all parents and guardians of children should know that whooping cough is highly infectious, far more so than many other complaints that are considered more dangerous. It is well to know also that the disease is or might be called a blood disease, and that it affects not only the lungs and air-passages, but the general

system, and this fact makes us very cautious and considerate in our treatment of it.

Can this be whooping cough? This question must often and often be asked, and answered to the best of one’s ability. Can the disease exist without what has been called the distinctive whoop? It can, and often does. And in different cases the whoop has different sounds and characters. It is caused by a half-convulsive, half-suffocating effort to draw in breath again after a fit of coughing, and is often very loud, a kind of crowing or piping sound, very distressing to listen to, and most distressful for the little sufferer. I have said “little sufferer,” because the complaint is one of childhood proper, but it is by no means rare in grown-up people.

Bearing in mind then the very serious nature of this disease, and its extreme infectiousness, to say nothing of the dangerous complications which it may give rise to, we cannot, I think, be too careful to prevent its spread among the other members of a family, or among children generally.

It is astonishing how little care is taken to prevent the spread of dangerous ailments in a family, by the parents. What a lessening of acute suffering there would be, and what a diminution in doctors’ bills, were this otherwise! A sick child is one person’s work by night and by day; a family of ailing ones means a strain upon the nerves and a drain upon the system of the mother or nurse, that may seriously affect her health for life. Therefore, I preach sanitation, and the isolation of the little patient in all cases of whooping cough, or even of distressing coughs, when the real ailment is about. This isolation is easily enough carried out in most families. I think I have before recommended the setting apart of a sick or hospital room in all houses where this can be done.

The room should be up-stairs, as high as possible, it ought to have a cheerful outlook, and be quiet. A plain bedstead without curtains, a little wardrobe, a

table, a cupboard, and a chair or two constitute all the furniture that is permissible. If there be curtains at all about the windows, they should be of light gauze or lace. The windows themselves should be large, and have crimson or green blinds, but these should not be kept drawn down, as is too often the custom, for sunlight is a great and powerful factor in the cure of disease of almost every kind. Ventilation of this hospital room should be well secured, and with safety; a gauze screen to fit the lower half of a window, permits it to be widely opened without the danger that might accrue from a draught.

The floor of the sick-room should not be covered with carpet; it ought to be well scoured, and always perfectly clean, and little bits of any thin kind of druggot, or straw mats, put down to drown the sound of the attendant’s feet.

Disinfectants should be used in the room. The most pleasant are Condry’s fluid, placed in saucers, and Sanitas fluid sprinkled here and there. If the smell of the latter is objected to, it can be had as a perfume. But I myself think it very pleasant.

To make assurance doubly sure, a sheet sprinkled now and then with a solution of pure carbolic acid in water should be hung outside the door.

In a room like this, if carefully nursed and attended, a young patient has every chance of speedy and complete recovery. But in a case such as whooping cough he should be confined to the apartment till all chance of spreading the infection is over; the attending physician would, of course, be the judge.

Well, now, a word or two regarding the symptoms and treatment of whooping cough. Unfortunately, the former are too well known.

The disease is usually ushered in like an attack of bad cold or bronchitis. The child is hot and feverish, and the temperature may be high. This latter should always be noted in cases of severe illness. If the temperature rises much above the normal 96° , there is danger brewing, or already hovering over the child. A clinical thermometer is, therefore, the handiest little instrument that a nursery cupboard can contain.

There is wheezing in the chest, and some slight difficulty in breathing, and attacks of coughing are very frequent.

Not till perhaps eight, ten, or twelve days have elapsed, will the distinctive spasmodic fits of whooping cough come on. These vary in severity: sometimes only coughing, followed by the long-drawn whooping sound; at others, the distress becomes extreme. The eyes become blood-shot, and seem starting from the sockets, the face suffused, blood may even come from the nose, and fits of vomiting ensue. This last would be a diagnostic symptom. The attacks vary in severity and frequency with circumstances, but the first signs of improvement are their becoming less frequent and less severe. Any sudden excitement, or anything that affects the mind or nervous system, will

bring on a spasm of coughing, so the sufferer cannot be kept too quiet.

I shall merely mention the names of the complications that may arise, and this only in order to convince parents of the serious nature of a case of whooping cough:—1. Hæmorrhage or bleeding may take place; this is usually from the nose, but it may be from the eyes or ears, and sometimes even from the lungs; however, it is very debilitating. 2. Inflammation of the lining membranes of the air-passages, commonly called bronchitis. 3. Inflammation of the lungs themselves. 4. Emphysema. 5. Convulsions. There are several other complications, any and all of which need the skill of a medical practitioner to combat.

The Treatment.—Whooping cough has three distinct stages, and the treatment indicated varies in each:—1. The preliminary stage. 2. The acute stage. 3. The stage of convalescence.

At first then, as already said, the symptoms will be those of a common cold of more or less severity. This is the time to call in a doctor *if* there be whooping cough about, and *more especially if* the child has been exposed to infection.

Keep the patient in a quiet, clean, warm, well-ventilated room, and on a lower scale of diet than usual. Do not force food. There is far too much of this food-forcing going on in nurseries, under the impression that the strength must be kept up; but if there be no appetite, there will be no power of digesting what is swallowed, and matters are made worse, and oftentimes the door is thus opened for the most dangerous complications to walk in.

See that the child is warmly clothed, and kept warm at night, and the chest covered with a piece of cotton wool, with oiled silk over it. If there be wheezing, a stimulating liniment should be well rubbed in, and frequently, to both back and front of the chest, and front of the neck. A morsel of flannel should also be worn round the neck.

The diet should be low and easily digested, and sweating should be encouraged at night.

Some easily-taken aperient will also do good—salts and senna, castor oil, or syrup of senna; the first is the best.

Those who live far away from a medical man should know and remember in all cases of bad cough, when the chest is choked with phlegm, and there is thus much difficulty in breathing, a vomit of mustard in warm water.

Bathing the feet in hot water will also do good at this stage.

Get an ordinary cough mixture, but be certain to tell the chemist it is for a child, and must contain no opium. Avoid quack medicines and mixtures in every shape and form, and do not give sleeping draughts; they are highly dangerous at all times.

The second stage should be somewhat differently treated. The cough mixture may be continued unless it blunts the appetite; the diet must be more nourishing, but still easily digested. The child should be kept quiet, and perfectly free from annoyance or excitement of any kind, and from everything that tends to irritate. As regards medicine, it would be dangerous to suggest anything for this stage; the best plan is either to leave the disease to nature, or let your own family physician prescribe. If anything of the nature of a serious complication should arise, medical aid must be summoned as soon as possible.

Whether, when the distinctive whoop is no more heard, danger of infection to other children is over, is a question that medical opinions vary on. It is better to be sure than sorry, however, and I advise that the child who has had whooping cough be kept away from its former companions until it is once again well and strong. We may shorten the stage of convalescence by proper treatment.

The class of medicines called anti-spasmodics do good in this last stage. Belladonna has been recommended in persistent whooping, but it is a dangerous drug, and should only be prescribed by a medical man.

A little dose of bromide of potassium, from three to ten grains, according to the age of the patient, will often secure a more quiet night. It should be given—under medical advice—about an hour before sleeping-time, simply mixed in a little cold water.

Tonics do great good at this time. If the child is pale and anæmic-looking, iron in some form is good. From three to ten drops of the tincture of iron in half a wine-glassful of water three times a day is an excellent tonic. But quinine also acts as a charm, and it may be given in conjunction with the iron. Or the citrate of iron and quinine may be used instead. Dose: from two to four grains in water. Dose of quinine: from a quarter to half a grain thrice a day in a little drop of sherry. A bit of biscuit to be eaten at the same time. Cod-liver oil is very valuable in cases of convalescence from or in lingering whooping cough. Begin with a tea-spoonful of the brown oil three times a day after food, and gradually increase up to a dessert-spoonful or more, for cod-liver oil is more of the nature of food than medicine.

But cod-liver oil amalgamated with extract of malt is better far than anything else; it is pleasant to take too, and so the child will not object to it.

A change of air, as soon as the little patient is able to bear it, will do much good. The south coast, or Tunbridge Wells, or Isle of Wight would be the best place to go to at this season of the year.

After a severe attack of whooping cough, great care is needed, for the sufferer will be delicate for many a day, and more liable to trouble of all kinds.

