

A DAY AT THE BABY CLINIC AND WHAT IT DID FOR ONE CHILD

Showing That Tests Are Not Made Merely to Determine the Number of Perfect Babies in Marion County—Follow-Up Committee Does Efficient Work

By Molly Brunk.

It was clinic day for the Marion County Children's Bureau. The big doors opening into the Commercial Club auditorium swung backwads and forwards incessantly. Every time they opened a mother came through (they were mostly young mothers) and in her arms she carried a baby. Sometimes she led a smaller child, and sometimes there accompanied them an elderly woman, whom one felt instinctively, to be a grandmother.

As they entered they were met by an energetic group of women, who directed them to seats around the big room. Another group of women, equally energetic, with a packet of score cards in hand were making a systematic effort to fill in the blank spaces. It was a bit difficult for them to concentrate upon the business to be done, so great was the din of coughing, gurgling and infantile Esperanto. Frequently a youngster, determined to gain audience at any cost, lifted his voice in stentorian tones, and for a moment exulted in the general attention that was directed his way. His supremacy was short-lived, however, another deep-lunged, full-throated individual usurping his place in the public eye. The small folk, generally, seemed to have a perfect understanding between them. Eyes spoke love to eyes that spoke again, flirtations being carried merrily on, right under the very noses of mothers and grandmothers.

The women filling in the cards finished their task, and counted the slips. There were 33. Two more were due. Suddenly the big doors opened again. Through them came the two remaining babies and their mothers. The babies were about the same age and so were the mothers. There the similarity ended. The one mother was very pretty, and her clothes were very smart. The baby's cherub face was framed beneath a cunning silken cap, and its little coat was of the same material. Both mother and baby looked out of wide blue eyes that took in the roomful of big and little folk with friendly, smiling interest.

The slight figure just behind them hesitated timidly. The hot color flooded her face as she stood waiting to be seated. She seemed aware of the marked contrast between her shabby clothes and the other girls'—aware of the painful contrast between her pale little baby and the other rosy, healthy one.

One of the women in charge was quick to note the situation, and hastened to relieve the young mother's embarrassment. A seat was found in an inconspicuous corner, the girl's timidity vanishing in a moment beneath the kindly, inquiring interest. The woman wanted to know the father's name, age, occupation; the mother's maiden name; the baby's age, the method of feeding since birth; how many windows were open in the room where it slept, and many other similar things.

The doctors and nurses began arriving. They went immediately to the booths where they were to examine the children in the different tests. In one place a thorough examination was made of the children's eyes, ears, nose and throat. In another a dentist was doing his best to be very gentle yet thorough. In another, mental tests to determine whether the children were normal, sub-normal, or above normal were being conducted. Blocks, pictures, counting and answering various questions comprised these tests, the grading varying according to years. The last tests in which the children were weighed and measured, and then given a thorough physical criticism, consumed the most time. The children were undressed for these, the physicians determining through the resultant figures whether or not the child was being properly nourished.

There was a vast difference in the manner in which the babies accepted the ministrations of the doctors and dentists. Some seemed to consider the procedure very funny or very entertaining, or very curious, and some there were who did not approve of it at all. The two babies that entered last displayed two distinct emotional attitudes. The little lass with the wide blue eyes, and rose-leaf cheeks went through her courses as though she thoroughly enjoyed their every detail. It was to her but another Great Adventure in a new and wonderful world. She smiled at everybody and everything, and everybody smiled back at her. It would indeed, have been a smileless individual who did not.

The other baby rebelled at every stage of the testing procedure—rebelled with every ounce of her frail strength. She drew her little pinched face into still more piteous lines and sobbed out her frightened little heart at every new advancement on the part of nurse or specialist. She particularly resented the effort of the big doctor who showed an insistent curiosity concerning her throat. It was almost impossible for him to make the test. He was very patient, very gentle, and very persistent, and finally succeeded in accomplishing the seemingly impossible. The young mother, her eyes wistful and troubled, bent to see the resultant figures that the big doctor placed at the right-hand side of her card. His pencil dropped down the column, hesitated a moment, discovered the word "adenoids," and wrote opposite—"very bad." The young mother's hand went up quickly in a convulsive movement to her breast. The big doctor

talked to her very kindly, frankly, explaining the baby's case, and giving advice concerning its care.

The effect of adenoids upon the baby's system was revealed in a deplorable way. Mal-nutrition was the most outstanding result. The specialist who made the final test displayed the most sincere interest, adding further advice and information. Official score cards came back from headquarters of the Parent-Teacher Association of the state, reaching the two young mothers simultaneously. There was much rejoicing in one household, and swift spreading of the good news—the weal of the wide blue eyes, and rose-leaf cheeks had scored 99 1/2 per cent.

There was no cause for rejoicing in the other household—the score was very low, so low indeed, that we will not mention it here. The work of the Children's Bureau was not over, however, with the mere testing of the babies. The follow-up committee had been advised of the baby's condition, and as a part of their duty, a personal call was made to the home. They found that all that was being done to relieve the little, half-sick baby were only the things that the young mother had learned at the clinic, and which could be put into practice because they did not call for money.

The case was reported to the Bureau in detail, and the energetic women who compose it raised the money somehow, somehow, and soon the baby was receiving the proper medical care and attention. Time passed quickly, weeks merging into months. Another clinic date was announced. The secretary in registering the names came across one that seemed in some way familiar. She thought a moment, and then there came to her mind the memory of the poorly-clad young mother and the tiny, sickly baby.

No one who saw the baby at the next clinic would have known it had it not been for the same shabbily-dressed mother. It was no longer an object to arouse pity and sympathy—its eyes had become very wide and very blue, and its cheeks had taken on a rose-leaf hue and texture, and its little lips had learned to smile. When the score cards came back from headquarters this time they told a different story. This baby's name, like Abou Ben Adhem's, led all the rest—for after it were the figures—100 per cent!

Good Health Lessons Taught by Dentist

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Believing that you could analyze foods by chemical methods and determine their value. For years some of the deepest students of the subject felt that the chemists were at fault and in 1910 Funk announced his theory of vitamins. About this time, too, the University of Wisconsin, through McCollum and his co-workers, brought forth scientific proof of the accuracy of this theory.

Have you heard the story of McCollum's calves? In 1906 three groups of heifer calves were selected and placed on diets chemically equal. The fat, protein and carbohydrate contents were the same. One group was fed on corn, another on wheat, and the other on oats—stalks, leaves and all being used. The calves grew and thrived and no great difference was noted until they were grown, and produced young. The cows that were fed on a wheat diet from babyhood had calves that were born dead and weighed 40-50 pounds. A calf at birth usually weighs 75 to 80 pounds. The oat-fed cows had calves that were normal in every way and were on their feet in a few days.

These calves opened the eyes of the world and started a new epoch. Every book on diets written before 1910, and some written since, are of historic or chemical interest only. McCollum might well be called the Columbus of Nutrition. Let us turn to health education to see what that has done for us. For two generations America has taught physiology and hygiene in the best organized system of public schools in the world. Undoubtedly it has helped to lengthen the human life and we are justly proud. We were congratulating ourselves that our people were as near physical perfection as a health education system could make them. Our pride was rudely shattered, however, when our draft law revealed the fact that one-third of our adult male population were physical failures. Many of the defects have been traced to infancy. It, therefore, behooves us to begin with the new-born babe and in the light of our latest biologic knowledge try to eliminate the faulty factors.

During the chemical age commercial companies did their best to persuade mothers and even professional men that an artificial food was almost more scientific than breast milk. The picture of the over-fat Mellin's food or Denny's food baby is a familiar sight in our drug store windows. They do not tell you that when a contagion comes along like measles, pneumonia, or influenza many more of these babies die than the babies that are breast-fed. Some European statistics show the death rate to be ten times as great among the bottle fed. In the United States careful estimates place the difference at six times. In other words it is six times as safe to be breast fed as bottle fed.

Artificial foods are dead foods. They contain calories as do also coal

and coal oil, but they lack the vitamins or accessory food factors to be found in breast milk and it is these accessory factors that promote growth and increase resistance to disease. Other disadvantages of artificial foods due to their lack of accessory factors are that they cause physical defects of bone, muscle, and nervous tissue. E. Truby King, of London, says that more insanity can be prevented by breast feeding than can be cured by all the insane asylums in the world.

A short time ago I met a very busy surgeon who had three little daughters, 5, 7, and 9 years of age, two of whom had been raised on the bottle. They were expecting another baby in a few months and he said that he expected to raise this one on the bottle as it was so much easier on his wife and more scientific. His very words gave me a pang as I realized that he was a typical of some of our best surgeons, knowing his own line perfectly but not knowing the value of breast milk. I asked him if there was any difference between the breast fed child and the two raised on the bottle. He said, "No, they are all perfect physically and have always been healthy." I realized that I must give that surgeon a shock. For the sake of the coming baby I said I would wager \$25 that I could tell by a physical examination which one of his three girls was breast fed even though it was years before. He took the bet and we went to his home. A glance at the teeth of the three girls showed me that the seven year old was probably the one breast fed although before saying so I waited for a complete examination. When the three girls were addressed I asked the father to compare the chests of the three. He said that he had never compared them carefully before and he saw at once that the seven year old had the only perfect chest. The other two showed prominent Harrison's grooves and rosaries. The five and nine year olds also had abnormally large abdomens. I then asked the girls to stand erect and place their feet together and before I could say anything their father said, "Well, I never noticed that Jane was the only one who didn't have knock knees." I then called his attention to the fact that the bones in the wrists and ankles were abnormally large in the artificially fed children. We next compared the teeth of the three and he said, "We will certainly nurse our next baby if possible." Although I had won the bet I told him that I did not want his money because I was betting on a sure thing.

I assured him that every mother can nurse her baby and if she apparently cannot it is not her fault but the baby's. Of course, if a mother dies or has active tuberculosis then a baby must be raised on a bottle. I spent 16 months with the children's bureau of the Red Cross on the other side and the most satisfactory work that I did in England, France and Italy was to teach doctors and nurses the American method (as I termed it) of developing breast milk by simply milking the breasts by hand after each nursing. The doctors would not believe it possible to reestablish a flow of breast milk after a baby had been weaned. But after we proved that it was possible they were not slow in adopting the method.

In London I found Dr. E. Truby King developing breast milk by electrical and manual massage of the breasts and by hot and cold applications followed by the use of the breast pump. Dr. King had visited my clinic in Paris and he asked me to speak before a meeting of London doctors and nurses and there explain and demonstrate the new method. Their enthusiastic interest assured me of their future success in this important work.

In Chicago last January I had a similar experience and was told that as a result of my visit more babies would be breast fed in that city than ever before. When I arrived in Portland one of the members of your society brought me his six weeks old baby that had been weaned for three weeks. When asked why the baby was weaned he said that there was not enough milk and that what little there was made the baby vomit. Their first baby had been breast fed only fifteen minutes, so of course they did not expect to be able to nurse the second child. But the mother did her part faithfully, expressing the milk by hand after each nursing and feeding this to the baby. After some weeks the breast milk returned and increased in amount until the baby got one quart of its mother's milk in a single day as shown by weighing the baby before and after each nursing. The doctor says that this baby has a better color than the first baby and it seems more intelligent for its age.

Sometimes I feel that, in the biologic study of diets, we are on the verge of learning things marvelous and far reaching. Osburn and Mendel at Yale have fed half grown rats on diets lacking certain amino-acids (lysin and tryptophan) and have kept them half grown for periods of eighty days. Full grown rats on a faulty diet have been unable to produce young. It may be that some of our childless American homes are due to faulty diets on the part of our would-be parents. When a baby is six months old cereals should be added to its diet. The preferable ones are whole wheat or whole oat cereals as the hull of the kernel (usually fed to stock) is the part that contains more of the growth promoting amino-acids, lysin and tryptophan. At nine months a properly fed, normal baby should have vegetables in its diet for two reasons—vitamins and minerals. The vitamins aid in growth and resistance to disease. The minerals make for perfect bone formation.

From infancy to puberty the American child is usually allowed to eat what he pleases and he never sees a doctor until he gets sick. The only professional attention that what he gets from his dentist. And the dentist's advice, sometimes a too thoughtlessly given, may make or mar the future physique and health of that child. For instance, the

mother tells you that her child eats nothing but milk and carbohydrates. It is easy to dismiss the case by telling her that milk is the God-made food for children; and the faulty diet is allowed to continue.

In the light of the most recent research we know that it is possible to have a diet over-balanced on the milk side just as such as on the candy side. Milk was made for calves but even calves do not live long upon it before vegetable food is added. The child that does not like vegetable is probably on an unbalanced diet. In our student days we were all taught that the three food elements we should keep in mind are fat, proteins, and carbohydrates. McCollum says that the three important ones are the two vitamins fat soluble A and water soluble B, and a hydrate.

Tuberculosis May Be Avoided in All Children

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lives in keeping "well babies well." She chose the inexperienced mother how to give her baby a bath, how to protect the child's eyes from injury and how to dress it simply and comfortably. She teaches the importance of feeding the baby regularly at stated times and if it needs a milk formula, she can instruct the mother in the preparation of the food as per the physician's orders. Even though the baby is well and strong and the mother well informed, it is quite probable that the nurse, trained in the business of infant welfare, will be able to offer some helpful suggestion for which the mother will be grateful.

In the prevention of contagious and infectious diseases, and in the correction of physical defects the nurse has a special field of usefulness. Professor Winslow says: "The public health nurse is the most important figure in the modern movement for protecting public health." Why should children have to run the whole "unnecessary gauntlet" of whooping-cough, measles, chicken pox, etc.? The prevention of these preventable diseases means the prevention of much more serious illness, tuberculosis included. The entrance of the nurse in the home for nursing and advisory visits, for prenatal care of mother and child, places her in a position to become invaluable to home school and community. Can money be better expended than in the conservation of the health of the people? The salary of a county nurse is an infinitesimal tax, bringing large returns.

Education in the prevention of disease must come to a large extent through the children. In our schools the laws of health should be taught. "Efficiency rests not alone on education and intelligence but is equally dependent on physical health and vigor and the state must broaden its interest and responsibility and if intellectual training is compulsory, physical soundness should be no less so. Children must be taught the measures necessary to avoid disease if our national health is to be preserved. The child is the citizen of tomorrow and health is fundamentally a moral as well as a physical question. We should see to it that proper emphasis is laid upon the care of the body."

This is a joint responsibility of teacher, parent and nurse. Teachers should realize the relation of the child's physical condition to its school efficiency, for it is clearly demonstrated that failures in studies, nervousness, apathy, dullness, and much viciousness on the part of children are the direct results of ailments that are easily curable. The best program that should be placed in the teachers' hands in the modern health crusade which is a practical way of teaching and forming health habits. Many states and large cities are incorporating the crusade in the regular school curriculum. A recent letter from Commissioner A. A. Slade, of Wyoming, states that the crusade has been placed in the state course and our sister state Idaho requires the crusade for the standardization of schools.

The school furnishes the visiting nurse a big field for her greatest mission in the teaching of people how to keep well and how to ward off diseases; and the education of the body, like the education of the mind should begin in the early childhood.

As parents, have you ever determined why complaints have been made by the teacher that your child is backward in his school work? Perhaps the child's eyes may need attention. This is one of the first things that the nurse would find out. If your child has become accustomed to stooping over his desk and his garden work until his shoulders are rounded and his chest is becoming narrow, do you realize that he will have less power to resist disease when it comes his way? The visiting nurse does and it is part of her duty to show teacher and child how this and other health-destroying tendencies can be overcome. If contagion breaks out in your district school the nurse is there to detect signs of danger and is well informed as to measures of precaution which must be taken to prevent the spread of the disease.

Care of the Child's Teeth

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of the teeth and this can be started as early as two years of age. The parents will most likely have to use a pleasant and tasteful dental paste or powder to help create the habit. This cleaning should be accomplished at least twice a day and after every meal is even more desirable. The manner of brushing is also essential. The brush should not be driven against the gums, but from the gums down with a rotary motion to the ends of the teeth in the upper teeth, or up from the gums to the cutting edge or surfaces of the teeth in the lowers, being careful to brush all exposed surfaces well and the use of silk dental floss between the teeth is indicated.

If you would have your babies sound in body and mind, alert, and efficient when grown, then you must take notice of the laws of health and nature and impart these most important rules. A clean being is one of the

first requisites of health and there is not a person who can afford to neglect the cleanliness and hygiene of the mouth, for without a clean mouth had results and unhealthy children are sure to follow.

An English clergyman's wife was at supper with a farmer and his family who lived in the parish.

"Some more 'am father?" said the son, passing his plate.
"Don't say 'am, boy; it's 'am."
"I said 'am, father."
"You said 'am, and I tell you it's 'am."
Here the farmer's wife turned to her guest with an amused smile and said: "They both think they're saying 'am."

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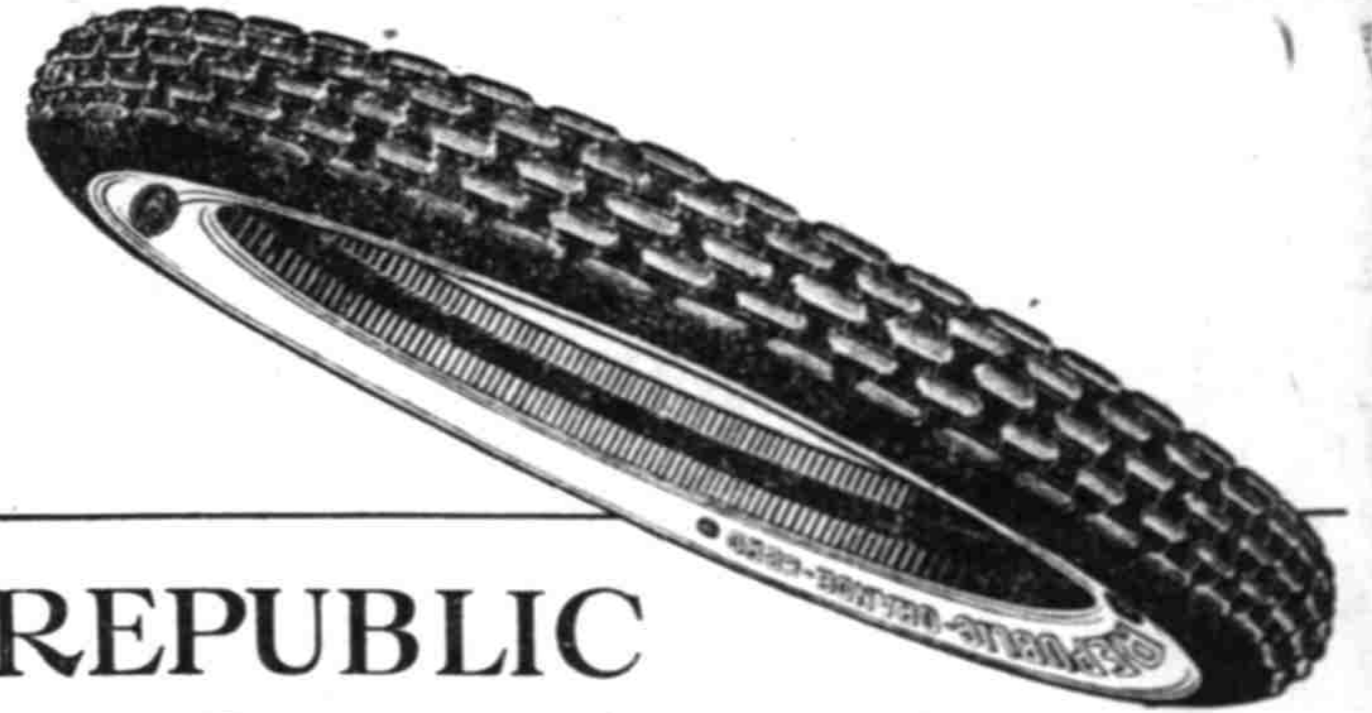
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