

A D V A N C E D T R A I N I N G
C U R R I C U L U M

F O R

V I L L A G E T E A C H E R S

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PREPARED
BY

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CONTENTS

	<u>PAGE</u>
GENERAL CHARACTERISTICS OF PREGNANT WOMAN AT RISK	2
ANTE NATAL CARE	3
EXAMINATION BY THE DOCTOR	4
PREGNANT MOTHER NORMAL WEIGHT GAIN	5
ADVICE FOR THE EXPECTANT MOTHER	10
DANGER SIGNS IN PREGNANCY	15
LABOR	16
CARE OF THE NEW BORN	19
THE DEVELOPMENT OF THE CHILD	27
COMMON CHILDHOOD DISEASES	31
INFANT SAFETY MEASURES	40

GENERAL CHARACTERISTICS
OF
PREGNANT WOMAN AT RISK

Age	Less than 17 years
Large Family	Over 9 members
Birth Interval	Less than 24 months between each delivery
Medical Condition	Diabetes, Hypertention, Severe Ancoemia
Previous Problems With Delivery	Woman with previous Still Births, Micarriage or Ceasarian considered at risk for all subsequent pregnancies.
Dead Infant	Especially in the early stages 0-29 days. Children who die before 0 - 29 days.

All risk cases of pregnancy should be dealt only in the hospital. Home delivery is not advised.

All pregnant women should be considered at risk and all should be treated as such. All pregnancies should be monitered periodically by a doctor. The characteristics of risk cases listed here are those which for one reason or another increase the probability of problems. The nurse should know that all pregnant women are at risk. Some are low risk cases others are moderate and some are at high risk.

ANTE NATAL CARE

The aim of the Ante Natal Care is to ensure to maintain the health of the expecting mother and child.

High risk pregnancies can be identified early and dealt with effectively in most situations.

Infant and maternal mortality can be reduced significantly by improved maternal care.

Most girls who marry wish to have children. This is normal. Therefore, every pregnant woman and her husband should be healthy and free from diseases that may affect the fetus.

It is advisable not to marry close relatives in order to reduce the probability of abnormalities in the newborn such as blindness, deafness and retardation.

If one starts a garden or a farm he usually looks for the best quality of trees and animals. What about the human? We also should look for quality care so that all babies are born healthy and normal.

Every pregnant woman should recognize the common symptoms and signs of early pregnancy :-

- Amenorrhea (Absence of menstruation)
- Nausea and Vomiting
- Breast Sensitivity
- Fatigue
- Abdominal Enlargement
- Frequency of urination
- Listlessness
- Quickening (movement of the Fetus)
- Skin Changes

When the pregnant woman recognizes such symptoms, the nurse or the health worker should advise her to report to her Doctor or Ante Natal clinic.

EXAMINATION BY THE DOCTOR

A complete physical examination:-

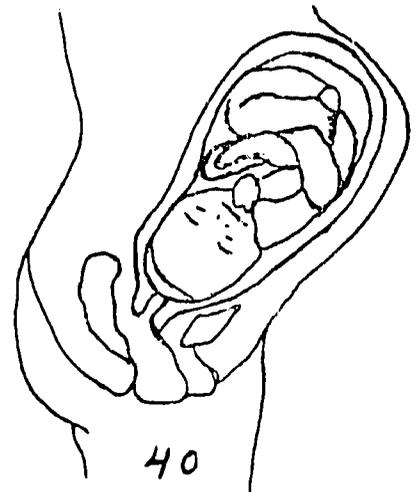
- Blood test for RH., check the compatibility of blood between mother and father.
- Blood Grouping: Blood grouping is important in case of hemorrhaging before or after birth in a case requiring blood transfusion. It should be of the same group.
- Test for Hoemoglobin: carries oxygen to the body tissues. This is necessary for the cells of the body to survive. Hoemoglobin: 12-15 gr. is normal 9gr. and below indicates Anoemia. Iron is prescribed.
- Blood pressure: The Blood Pressure is high if it is above 130/90 or 140/80. Normal blood pressure sistolic/diastolic reading is 130/70. If either sistolic or diastolic readings are over the normal reading of 130/70 it is too high and should be referred to the doctor. If readings are below 110/60 it is too low and also should be referred. The mother might faint.
Pregnancy does not cause complication for a healthy woman. It is important to keep calm and to enjoy the pregnancy as a healthy process. This will help to keep the mother in good emotional state which will help the development of the baby. Any change in blood pressure will be due to emotional or other problem unrelated to the pregnancy.
- Urine testing for suzar and albumin.(protien)
If albumin is present, a salt free diet is prescribed.
- Weight of the pregnant woman
The average weight of the pregnant woman during pregnancy should increase from 10-12 kg. during the 9 months. If it increases more, the doctor should be seen.
The pregnant woman should report regularly to the ante Natal clinic or the doctor.

PREGNANT MOTHER NORMAL WEIGHT GAIN

WEIGHT GAIN

A gain of about 12 kg. (25 lbs.) is to be expected in the pregnant woman of average build. This is due to the following:

Fetus	7	lbs.	3.3	kg.
Placenta	1.25	"	0.6	"
Amniotic Fluid	2	"	0.9	"
Increase in Weight of Uterus	2	"	0.9	"
Increase in Weight of Breasts	1	"	0.45	"
Increase in Blood Volume	4	"	1.9	"
Extra-Cellular Fluid	4	"	1.9	"
Stored Proteins	4	"	1.9	"
	-----		-----	
TOTAL	25.25	lbs.	11.8	kg.
	=====		=====	



WEIGHT

In order to determine the woman's normal weight she should be weighed early in pregnancy (at her first visit), and the procedure repeated on each subsequent occasion. The woman should be undressed and given a washable dressing-gown to wear, because the difference in the weight of clothing may be considerable during the three seasons over which pregnancy extends. Recording the weight in the reverse side of the child weight chart under "Notes". As on a temperature chart, draws attention to any marked increase or decrease. A gain of 12 kg. can be accounted for physiologically during pregnancy. Women who are apparently healthy have gained as little as 10 lbs. (4.5 kg.) and as much as 35 lbs. (15.5 kg.) and subsequently given birth to normal sized babies.

WEIGHT CHARTS IN PREGNANCY

Adequate weight gain in pregnancy is one of the best assurances that the baby will be healthy. If the mother is not gaining properly she should make an effort to eat more or better food. Just as the child's weight chart helps us be sure our children are growing well after birth. The weight chart for the mother gives us a good idea if the fetus is growing well before birth. It tells us in time to do something if there is a problem.

How To Use It

The curved line on the chart is the mothers Road to Health. Her weight gain should follow this line if she is healthy. She should gain at least 11 kilos regardless of her size.

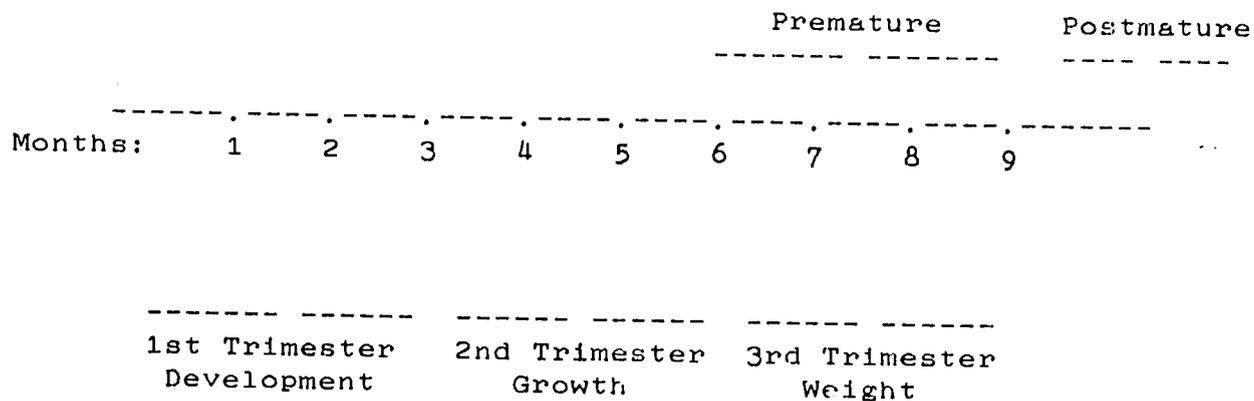
1. The first time the mother is weighed, find out how many weeks she is pregnant. If she doesn't know, help her figure from her last period. Her pregnancy can be dated from about one week after her last period began.
2. If she knows what she weighed before being pregnant, write this figure on the dark horizontal line. Her gain is measured from that weight.
3. If she does not know, enter her weight when you weigh her on the curved line and write it beside the mark. Future gain will be measured from this weight.
4. She should be weighed at least once a month if gaining properly. If not, the teacher should advise her about eating nutritious foods and weigh her every two weeks until her gain is normal.

5. If her gain does not increase in two weeks, or does not stay on the Road to Health despite a better diet, advise her to see a doctor. She should take her weight chart with her.

Before birth a baby is totally dependent on his mother. He lives inside her and receives all his nourishment and stimulation from her. He is also in his mother's thoughts and dreams. She is getting ready to become a mother. Whether she has other children or not, the mother still dreams about this baby. She may wonder whether this baby will be a boy or a girl. She may wonder if it will be all right. She may want a baby, or she may be afraid of having a baby and the added responsibility. All of these thoughts will influence the way she will handle the baby.

She should know that it is the father, and not the mother, that determines the sex of the baby. This is something she cannot change. Other qualities come from both the mother and the father.

The nine months of pregnancy are divided into 3 parts. Each part is 3 months. These groups of 3 months are called trimesters. The first 3 months is the first trimester. The second 3 months is the second trimester. The third 3 months is the third trimester.



Three Trimesters of Pregnancy

During each trimester certain important things happen. During the first three months the main development of the fetus occurs. His internal organs, nervous system, arms, legs, eyes ears and sex organs develop. The heart begins its first small beats by the end of the third week.

By six weeks the arms and legs are beginning to form. By seven weeks, the embryo is floating in a sac of fluid which is sometimes called the "Bag of water". The fluid keeps the embryo warm and also acts as a shock absorber. Sometimes the mother's movements can bump the fetus, but the fluid protects it. The internal organs continue to develop very quickly. It is during these first two months that the embryo is especially sensitive to the exposure of the mother to external disorders such as, x-rays, drugs and diseases in the mother.

During the second trimester (months 4,5,6) the fetus grows very quickly. The internal organs are already developed except for the lungs which are slower in developing. The size of the fetus is such that the mother is aware of it and also feels the baby's movements. The doctor can hear his heart's beat too. The fetus can be awake or asleep. He can sleep, cry, suck his thumb and hiccup. He lies on one side, sometimes on the other, sometimes with his head down, sometimes with head up. These movements give him exercise and help him grow normally.

During this trimester the fetus grows much bigger, almost a finger width longer each day, the uterus continues also to grow and enlarge the abdomen. All of this growth must come from the food the mother eats so she must be sure to get enough of the right foods.

During the third trimester (months 7,8,9) the fetus grows faster, and gains more weight. When he is about seven months old, he will take one position and not change it until after his born.

During the eighth and ninth months the fetus becomes more and more like the normal new-born child, the bones of his head become harder. He has a soft spot on the top of his head that varies in size, but it will close in twelve to eighteen months after he is born. The hair on his head grows longer. Because the fetus is getting bigger he does not have as much space to move in. However he continues to kick with his feet and move his arms and hands; if a mother stops feeling movement she should see a doctor.

The fetus puts on a layer of fat during this trimester that will help him move through the birth canal and protect his skin from infection. After delivery, much of the development of his brain and lungs occurs in his first weeks of life. The nutrients for this must come from the mother's diet. She should be especially careful to eat foods such as meat, liver, legumes, eggs, milk, milk products, rice and bread.

AREA _____

H/C _____

PRENATAL WEIGHT GAIN

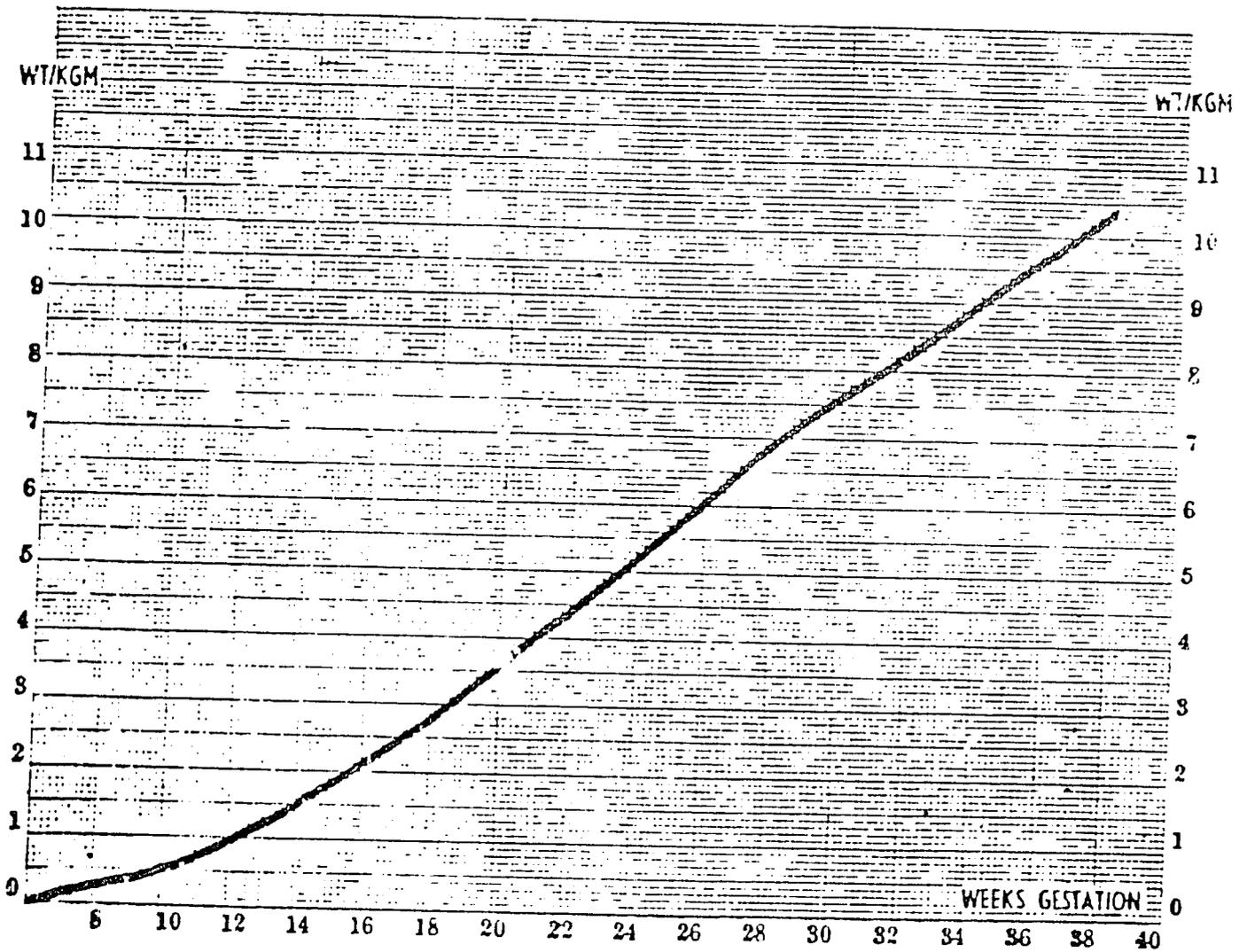
MOTHERS NAME _____

AGE _____

A/N _____

R/C _____

Date of Registration _____



ADVICE FOR THE EXPECTANT MOTHER

The expectant mother should be advised the following:

HYGIENE

Rest and sleep

This is important. The pregnant woman should try to have 8 hours of sleep at night and also rest during the day.

Fresh air

The house should be clean and well ventilated.

Bathing

A daily bath is advisable (if clean water is available).

Work

Encourage the pregnant woman to continue her usual work but not to carry heavy loads.

Infection

If the woman is sick for any reason, she should seek treatment immediately. No aspirin or accamol or other medicine should be taken without doctor's permission.

Rubella (German Measles)

Pregnant women who have never had rubella and who come into contact with it during the first 3 months of pregnancy should report to the doctor within 5 days of contact. She can be given Gama Globulin. If an expectant mother contracts the disease in the first 3 to 4 months, it may cause heart trouble, cataracs or deafness in the new born. Some pregnant women are immunized against Tetanus, after the first 3 months (to protect the new born from lock Jaw).

Dental care

The pregnant mother should brush her teeth regularly. If there are cavaties, in her teeth, she should report to the dentist. The mother needs more calcium than normal during pregnancy because of the growth of the bones of the fetus and this is reflected in her own bones and teeth, so extra care should be taken at this time. (drink milk)

The General Metabolism

During pregnancy the body is functioning at its maximum efficiency, for nature endeavours to provide an ideal environment for the nutrition and development of the fetus.

It is well known that once a woman becomes physically and emotionally adjusted to the impact of pregnancy she enjoys a feeling of well being. Her appetite is good, she looks and feels well, but this can only be experienced if she is healthy, well nourished and not overworked.

The basal metabolic rate increases 15-25 per cent during the latter half of pregnancy in response to the demands of the growing fetus and maternal tissues. The thyroid gland is more active, so the woman's fuel requirements are higher and a diet providing 2,500 calories will be necessary.

NUTRITION IN PREGNANCY

It has been proved that when the level of nutrition of the population is high, the number of abortions, stillbirths and neonatal deaths is low.

It is important that the pregnant woman have a balanced diet and should be advised to eat different kinds of food at each meal.

Food consists of 5 main parts:-

- Protein
- Fat
- Carbohydrate
- Mineral
- Vitamins

It is necessary for all people to have these food components in their diet each day, but the pregnant or lactating woman needs to eat more protein, minerals and vitamins than normal. Water is important for life and is needed by all the cells in the body, for regulating body temperature and getting rid of waste products from the body.

Protein

Protein is a body building food, without Protein growth cannot take place.

Sources of Protein are: Meat, chicken, fish, eggs, milk, cheese, laban, labneh, all nuts.

Fat

Provide fuel and warmth for the body.

Fat is found in : Meatfat, butter, margarine, egg yolk, oil and nuts.

Carbohydrates

Carbohydrates provides fuel and energy for the body.

Some food containing carbohydrates are: Rice, bread, sugar, cake, potatoes, jam, honey, dibbs (contains iron and is good during pregnancy -breakfast-).

Minerals

Minerals are important for healthy growth.

- Iron is very important for the manufacture of red blood cells for the mother and fetus and prevents Anemia.
- Calcium is necessary for the growth of bones and teeth and for the normal clotting of blood.

Calcium deficiency in the expectant and/or nursing mother; diet will cause defects in the calcification of the teeth forming in the gums of the baby. This calcification of teeth commences as early as the 17th week of pregnancy and continues throughout pregnancy, lactation, and early childhood.

The mother may suffer from restlessness, sleeplessness, pain in the back and legs due to insufficient calcium.

Minerals are found in: Green vegetables, milk, fish, coconut, meat, egg yolk.

Vitamins

These are substances that are necessary so that the food that is taken into the body and digested can be used by the various parts of the body (The muscles, brain, liver etc.) The 4 most important Vitamins are: A, B, C and D.

Vitamin A - Helps keep the skin clean and eyes bright.

Sources include: Fish oil, egg yolk, milk, vegetables, fruits.

Vitamin B - This group of Vitamins is important to many body processes, particularly in muscles and nerves.

Sources include: Peas, beans, some green vegetables, meat, nuts.

Vitamin C - Necessary for clean and healthy skin and gums and helps healing of wounds.

Sources include: All fruits, especially citrus. (Sunshine)

Vitamin D - Makes bones strong. Without Vitamin D bones become soft and bend easily.

Sources include: Sun shine on the skin, milk, egg yolk, fish oil.

Varicose Vains of Legs

Caused by extra weight on the legs.
Plenty of rest with feet elevated above the waist. Try to avoid standing and working upright too much.

Backache

This is generally muscular and should be relieved by rest. If pain continues or becomes more severe, refer to Doctor as it may be due to threatened miscarriage or kidney trouble.

DANGER SIGNS IN PREGNANCY

The expectant mother should be advised to report if any of the following occurs:

1. Hoemorrhoge (bleeding)
2. Fits - (convulsions) (could be due to albumin in the urine and blood poisoning).
3. Fever - (above 38 degrees centugrade for prolonged periods)
4. Abdominal pain - (Ectopic pregnancy)
5. Continual headache.
6. Swelling of hands face or feet.
7. Less urine being passed.
8. Any trouble with eye sight.
9. Great weight gain (above 12 kilos/total)
10. Discharge from the Vagina
11. Movements stop after quickening has been felt or if no movements are felt after 5 months.
12. Shortness of breath.

LABOR

Labor is the series of events leading up to the birth of the baby. True labor begins with the first uterine contractions felt by the mother which begin to cause progressive effacement and dilatation of the cervix.

This is often a retrospective diagnosis, true labor sometimes being difficult to tell from contractions which do not cause dilatation or effacement.

Labor can be divided into three stages. Stage one is the dilatation stage and begins with the first true labor contraction. The first stage ends when the cervix has become fully dilated (i.e. to 10 cm)

At full dilatation the second stage begins. This is the expulsion stage. Stage two ends with the birth of the baby. Stage three begins immediately after the birth of the baby and ends with the expulsion of the placenta. This is also called the placental stage.

Although the length of each stage may vary widely in different women, stage one usually lasts about 10-14 hours, stage two about 30-90 minutes, and stage three 5-15 minutes.

During the process of labor the infant moves progressively down through the birth canal. Since the canal varies in width and depth as one descends, it becomes necessary that the fetus change its attitude or posture to accommodate to the shape of the canal as labor progresses. These postural changes are known as the cardinal movements of labor and these are seven in number.

The first movement is engagement which occurs when the fetus enters the pelvis head down.

Secondly descent occurs. This describes the movement of the fetal head into the pelvic canal.

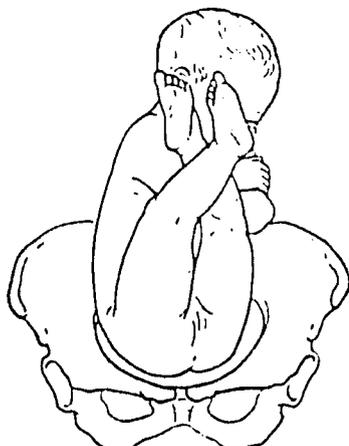
This third movement is flexion of the head which places the chin against the chest. This is caused by the resistance of maternal soft tissues to the downward movement of the fetus.

Internal rotation, the fourth movement, is the rotation of the fetal head into a position necessary for passing through the the pelvis.

Presentation of
Baby



COMPLETE BREECH



FRANK BREECH

Varieties of breech presentation.

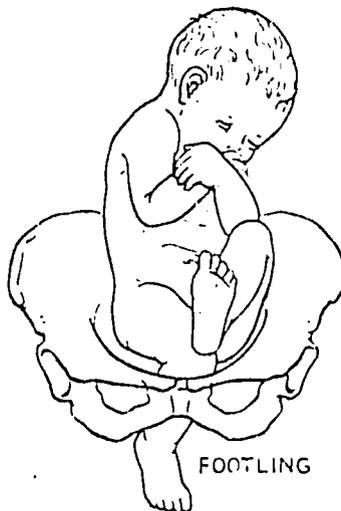
Transverse - (Shoulder presentation)

This will be caused by any condition which prevents the baby's head from coming down into its proper position or which allows the baby to move around inside the uterus after coming into position.

This is a very rare condition and can only be dealt with by well-equipped medical personnel.

Breech

- A breech or pelvis presentation, the fetus lies with its buttox in the lower pole of the uterus. Breech presentation occurs in about 3 per cent of cases after the 34th week of pregnancy. In the majority of cases there is no obvious reason why the fetus presents by the breech at term since the uterus is shaped in such a way as to promote proper presentation (head down).



FOOTLING



KNEE

The fifth movement is extension of the head which causes the head to emerge from the vaginal opening.

External rotation occurs after the entire head has emerged. During this time the shoulders assume a shape necessary to exit from the pelvic outlet.

The seventh and last movement is expulsion during which the remainder of the baby quickly emerges.

DELAY LABOUR

If the first stage lasts 24 hours and cervix is not dilated, the midwife should call a doctor or send the patient to hospital.

Second stage, normal duration is 1-1.5 hours in primogavida (one baby) 10-30 minutes in a multigravida (more than one baby). The midwife should send for the doctor if these hours are exceeded.

Third stage normal labor duration is 10-20 minutes. The danger of a prolonged third stage is that hemmorrhaging may occur at any time and may prove difficult to control. If in the absence of hemmorage, the third stage lasts for an hour, the midwife should call the doctor.

MIDWIFE'S (DAYA) BAG (KIT)

The midwife should be sure to have the following items in her bag:

- 2 sheets
- 1 rubber sheet, 2 metres to cover the mattress
- 2 towels
- 1 soap
- 1 scissor sharp to cut the cord.
- 1 sterile gauze to cover the cord.
- 1 basin to put the placenta because she has to examine the placenta if complete and normal.
- 2 small bowls for sterile water one to clean the eyes, the second one to boil her thread to tie the cord.
- Some dettol to put in the water so she can wash her hand.
- Thermometer

CARE OF THE NEW BORN

When the baby has rested after delivery a full examination beginning at the head and working down the body, should be made. This is to detect abnormalities early for correction.

Things to look for in a new born baby:

Movements	Strong or weak
Cry	Strong or weak
Skin	Should be clear
Colour	Pink and look for cyanosis-blue or jaundice-yellow. (see box on jaundice)
Head	Shape
Fontanelles	Sunken (depressed) or swollen (bulging)
Eyes	Any discharge
Mouth	Cleft palate or hare lip
Chest	Respirations (breaths well)
Jaundice	<p>Jaundice means that the skin and sometimes the whites of the eyes, look yellow. Jaundice can be a sign of serious illness, but in the newly-born child it is sometimes caused by changes in the blood which occur during the first few days of life. The blood of the fetus contains many more red blood cells than are needed after birth; the unwanted cells are destroyed in the blood leaving traces of a yellow colouring. This colouring may be absorbed into the skin for a few days.</p> <p>In these quite normal cases jaundice appears on about the third day after birth. The baby is well, but is sometimes sleepy and slow in feeding. It is kept warm and, if necessary, has drinks of boiled water between feeds, but otherwise needs no treatment.</p>

A serious type of jaundice may develop when the blood of the mother is of a particular group, called rhesus negative, and that of the baby is another-rhesus positive. In these cases substances pass from the mother's blood into the blood of the fetus and destroys its red blood cells.

The condition is called haemolytic disease, which means destruction of the blood.

Jaundice is seen early, often within a few hours of birth, or even at birth, and it rapidly becomes worse. The treatment is to give the baby transfusions of rhesus negative blood to replace its own blood which contains the foreign substances from the mother's blood. As the baby's blood is drawn away gradually it is replaced by the rhesus negative blood. This is known as exchange transfusion.

Jaundice in the newly-born baby may occur, rarely, in other serious illnesses, but the midwife need not be concerned with them because she will have called a doctor or have taken the baby into hospital.

Treatment is rarely necessary for physiological jaundice. Mother can give water and sugar (mix 1 cup of water to one tea spoon of sugar) boil well, cool and give by spoon continuous and each day till the yellow colour disappear.

Infection in Babies

We have said that newly-born babies, and particularly premature babies are easily infected. Harmful bacteria may enter the skin, the eyes, the cord stump, the air tubes in the lungs, or the stomach and intestines. Perhaps the most common infections which the midwife will see in babies are those of the skin, the eyes, the cord, and the stomach and bowels.

The skin. Septic spots on the skin are fairly common and must be treated with sterile powder, a touch of gentian violet or an antiseptic lotion or ointment.

Blisters, or large spots which contain pus, must be reported at once because they may be a more serious infection. Blisters on the skin which become septic are known as pemphigus, a condition which spreads rapidly among babies. For this reason, if she has been attending a baby with pemphigus, the midwife must not attend another baby without permission. The doctor gives penicillin or similar drugs.

The mouth. Small white patches on the tongue and inside the cheeks are a sign of an infection called thrush. This infection lives in dirt and may reach the mouth on dirty fingers or teats. It may cause difficulty in feeding because the baby feels discomfort when sucking.

The condition must be reported, but the midwife should clean inside the mouth very gently with a swab and boiled water, and should touch the patches with gentian violet, applied with cotton wool on the tip of a pair of forceps.

The eyes. When the eyes are infected, the eyelids are swollen and red and a watery discharge oozes from below them. The discharge soon turns to pus.

The condition is known as ophthalmia neonatorum and, if untreated, may cause blindness.

Any discharge from the eyes, however slight, must be reported so that treatment can be started early.

Cord

Check if bleeding - retie if necessary

Abdomen

Hernia, the muscles of the abdominal wall are weak and parts of the bowel may come through under the skin making a soft lump in the groin or around the cord.

Limbs

Paralysis, extra fingers or toes, talipes note if same length.

Anus

May be closed, this is called imperforated Anus and requires surgery.

Back Spina bifida, the spinal cord comes out between the vertebrae, making a swelling on the back.

A healthy baby has clean, shiny skin, firm muscles, bright-eyes, good cry, he is active, takes food without any trouble, gain weight and sleep well.

After examination the baby is then weighed, and measured if the midwife knows to measure the head circumference, the height, and the temperature. Check when baby passes urine and stool (meconium). If there is any irregularity in these things the baby should be taken to the doctor immediately.

THE PREMATURE INFANT

A premature infant is one that is under developed at birth, regardless of height weight or size. Babies weighing less than 2,500 grams. (5.50 pounds) are usually classified as premature. Those weighing less than 1,000 grams. 2.25 pounds are classified as immature.

A premature baby looks like an old man because his early birth has deprived him of the benefits of intrauterine life. Such babies are weak and need special attention. Usually they cannot suck the nipple because of the weakness of jaw muscles. The health worker or the nurse must see that the baby is warm and kept away from any one with cold or infection, because he has no immunity to combat diseases. We have said that breast feeding is the best. The mother should be taught to express the milk from her breast into a coffee cup and give it to her baby with an eye dropper. If her milk is not enough, she can give water and milk in the same way. In few weeks the baby will be normal and will be able to suck again from his mother breasts. By using this method the mother will not lose her milk.

Four important things necessary for a baby are :
Nourishment, warmth, enough sleep and affection,
Cleanliness.

NOURISHMENT

Breast feeding is the best feeding for babies. The mother should be allowed to feed the baby as soon and as often as she wishes, she should be shown how to wash her nipples before and after each meal. If breasts too tight (engorged) express a few teaspoons then allow the baby to suck. After each side is finished the mother should be taught how to bring up the baby's wind correctly, by either, sitting the baby on her knee or holding against her shoulder, rubbing the back gently to bring up the wind. Breast feeding is life insurance against diseases.

Breast Feeding

Recent studies indicate that besides protecting from many diseases and offering the baby proper nourishment, breast milk protects from juvenile diabetes. This is just one of many reasons to encourage breast feeding.

WARMTH

It is important that the baby is warm especially in the first days of life. In the winter use a hot water bottle if there is no other heating available.

The Health Worker can teach mother how to prepare - layette (clothing) - plain, light cloth.- easy to wash and soft - easy to put on - no buttons.

Baby must be kept warm without causing undue perspiration irritating his skin or inhibiting movement.

Babies are usually grossly overclad in summer, and sun and air, with their health giving properties, never reach their skins. Excessive heat causes baby to lose his appetite, and constant profuse perspiration is weakening; the moist skin being prone to chafing and infection. Baby catches one cold after another. The garments worn should vary, just as with adults, according to the temperature of the room or, if out of doors, the weather.

Preparing And Applying A Hot Water Bottle

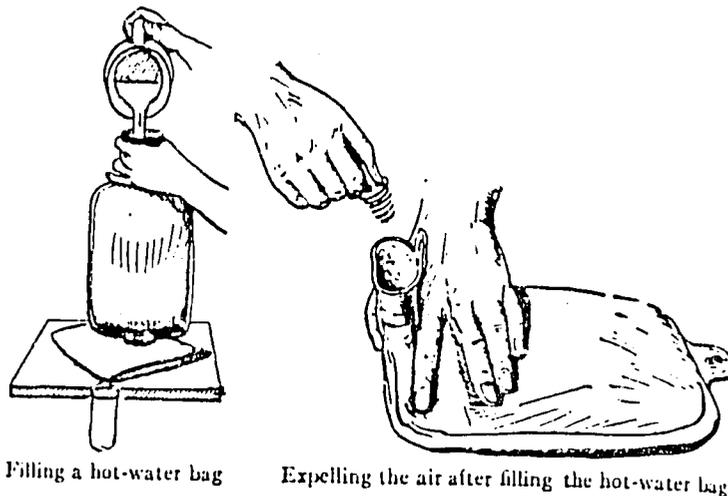
A hot water bottle is applied to keep the infant warm in cold weather. For adults it is used to relieve pains and aches and help old people keep warm.

Never put a hot water bottle directly against the skin or lie over it, it might burst and burn the infant or adult.

Never fill the hot water bottle more than two thirds. A safe temperature range for the infant under 2 years of age, is from 105 F. to 115 F. For children over 2 years and for adults 115 F. to 125 F. The water should not be boiling. It should be just be hot enough so that you can just put your finger in quickly or put a few drops on the surface of the inner arm.

Equipment Required

Hot water, cover, pitcher of hot water.



Procedure

1. Test the water temperature of the water in the pitcher with a thermometer if not available pour a few drops on the inner surface of the arm.
2. Pour the water into the bottle filling it about 2/3 full.

3. Expel air by placing bottle on table, when water appears in the neck, screw stopper in tightly. Wipe the bottle well. Turn it up-side-down to see if there is any leakage.
4. Never fill a bottle by hand with (see picture) boiling water from a kettle it might burn you.
5. Cover the bottle with a cloth cover or soft towel.
6. Apply as ordered at the end of the cot far from the infant's body.
7. Refill the hot water bottle when ever it gets cold, to keep the baby warm. Many babies die due to cold weather in this country.

Comfort

This is essential for sound sleep, and to avoid the irritation that leads to persistent crying. Fabrics ought to be soft, light in weight, and smooth in texture. Designs should be roomy, with no tight bands or other restrictions.

Style

Simplicity and comfort are the keynotes of good style. Clothing should not interfere with baby's natural desire to wriggle and kick. Movement stimulates the circulation of blood and the absorption of food, as well as developing the muscles in readiness for sitting, standing and walking. Absorbency.- Fabrics worn next to the skin should absorb perspiration, e.g. wool, to avoid subsequent chilling.

SLEEP AND AFFECTION

Put a new born baby to sleep on his front or on his side with his knees bent. Like this he breathes and sleeps easily, and cries less. If he vomits, fluid does not go into his lungs. Lay him on a cotton cloth, don't put him on plastic. Let him sleep near his mother.

CLEANLINESS (Bath)

Baby bath it should be demonstrated by the nurse you do not need to bathe a baby for the first week or more after he is born. Give him his first bath after his cord falls off. Wipe the blood and meconium off him and cover him with clean cloth. A new born baby is covered with vernix (grease). Vernix is useful, it helps to protect him from infection. Don't wash it off, it will soon go by itself. Later his mother can bath him every day. In the first few day of life, change the nappy often, and clean his buttocks, this is more important than his bath. It is a good idea to cut the baby's nails during bath time when the baby (or child) is occupied. This will keep the baby from scratching himself.

Diaper Rash

Diaper rash is caused by the acid in the urine. The more concentrated the urine, the worse the diaper rash will be. To treat diaper rash, change the diapers often and allow time for the baby without the diaper.

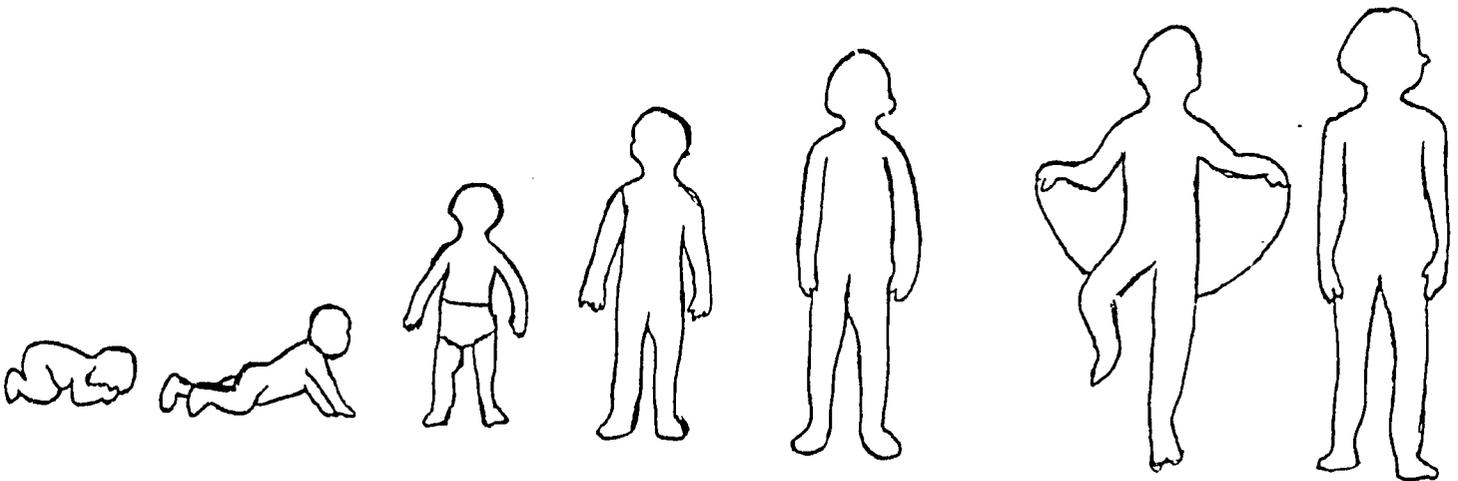
- Give the baby plenty of water to dilute the urine.
- (Milk will sometimes make it worse)>

THE DEVELOPMENT OF THE CHILD

A child grows in two ways:

Physically : As indicated by his body.

Emotionally: Shown by his ability to handle his problem. Some children develop more rapidly than others. We should know what is reasonable to expect of children at different ages. It is not fair to expect more from one child than another since all children develop at different rates and all are normal.



WEIGHT OF INFANTS

All infants should be weighed monthly

1. All infants lose weight during the first few days of life this is due to a low fluid intake and loss of excess fluid in the body.
2. The weight normally stabilizes by the 3rd or 4th day then begins to increase.
3. Approximately one half of full term babies weigh between 3000 and 3500 grms.

The normal weight gain of a well baby is as follow:

	<u>GMS.</u>	<u>DAYS</u>	<u>TOTAL</u>
The first 3 months of life he-gains 25 gms. daily	25	* 90	= 2250
3-6 months gains 20 gms. daily	20	* 90	= 1800
6-9 months gains 15 gms. daily	15	* 90	= 1350
9-12 months gains 10 gms. daily	10	* 90	= 900

TOTAL			6300
	=====		

9 Kilos 300 gms. a normal baby weight at 1 year (+ birth weight).

HEIGHT GROWTH

At birth	50	cms.
1 month	52.5	cms.
2 months	55	cms.
3 months	57.5	cms.
5 months	60	cms.
6.5 months	62.5	cms.
8 months	65	cms.
10 months	67.5	cms.
1 year	70	cms.

DEVELOPMENT

1 month	notices bright light
2 months	smiles and tears
3 months	holds up head
4 months	sits with support laughs aloud
5 months	uses hands and eyes together
6 months	2 teeth crows squeals
7 months	drink from cup
8 months	says Da Da Ta Ta sits erect
9 months	understand "NO" crawls
10 months	imitates sounds, stands
11 months	understand words
12 months	6 teeth, walks with help

Note: All children develop at their own rate and these are only approximation not to be held firmly.

AMOUNT OF SLEEP REQUIRE

1 month	21 hours daily
3 months	19 hours daily
6 months	18 hours daily
9 months	16 hours daily
1 year	15 hours daily

FEEDING OF INFANT

It was mentioned before for the new born the best food is breast feed.

1-3 months : An infant should only have his mothers milk with some water and add one tea spoon of sugar. Keep it cold and covered and give the baby 2 to 4 tea spoons after each breast feed.

3-6 months : Continue breast feeding you can start with some fruits, orange juice, banana, or apple mashed well and give the baby a small portion once a day. Some vegetable soup. Start at 4 month egg yolk, 1/4 hard boiled.

6-9 months : Continue breast feeding but increase the amount of food. Vegetable soup, mujadara, puddings, minced meat, chicken, eggs, but all without spices and soft.

9-12 months: The infant continue to breast feed twice or 3 times a day it is very good, and he should eat the family food with no spices, give him water to drink.

**CUP AND SPOON
FEEDING IS BETTER
THAN BOTTLE FEEDING**



Cup and spoon
feeding is
safer than
bottle
feeding

Cup-and-spoon feeding is better than bottle-feeding.

UNDER WEIGHT CHILDREN

If a child is under weight, the mother should see the doctor to detect the cause. If it is due to a disease or feeding incorrectly feed the child laban with one tea spoon of olive oil 3 times a day. This is very nourishing for the under weight child. If the baby does not like laban the mother can mix the olive oil with vegetable soup.

IMMUNIZATION-UMBRELLA

The aim of the immunization is the prevention of disease. It protects babies and children against some communicable diseases. If not immunized against them it will leave many children disabled or cause death.



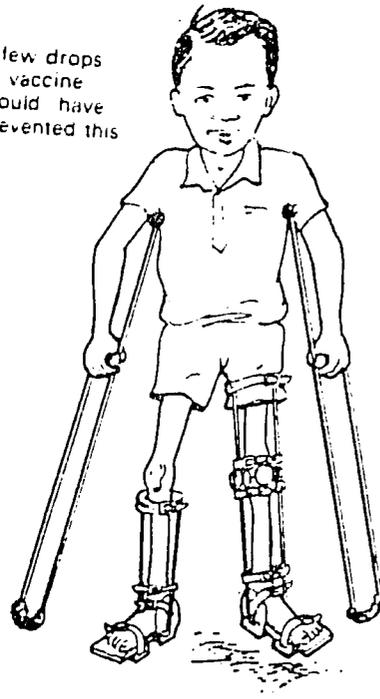
COMMON CHILDHOOD DISEASES

POLIOMYELITIS (POLIO)

Attacks children nervous system and leaves them paralysed for life, they may die.

Splints for polio

a few drops
of vaccine
would have
prevented this



A polio child in a splint.

TUBERCULOSIS

Millions of new cases are reported yearly and half million die. The more serious forms, includes; Tuberculosis Meningitis occur in infant under 5 .

DIPHTHERIA

Diphtheria is a highly infectious disease which attacks the throat of the baby and impairs breathing. A white film covers the tonsils and throat. Hundreds of thousands of children under six are attacked every year. Its effects are serious and can be fatal.

TETANUS

Tetanus is caused by bacteria. It effects the muscles of the jaw. This bacteria is found in the feces of animals and so children should not be exposed to animal feces. And mothers working with animals should always clean their hands before touching the child. An infant is exposed as soon as it is born, the umbilical wound is vulnerable (due to poor sanitation). The baby is protected when the mother is immunized against tetanus. But after 2-3 months he should be vaccinated to continue the protection.

MEASLES

Many children contract the disease. There are often serious nervous system complications involving hearing and sight. (This can cause deafness and blindness).
-Permanent-

WHOOPING COUGH

Can be fatal if contracted in the first few months. It is a disease which may persist for 10 or 12 weeks. The Toxin produced by the organism responsible causes paroxysms of cough which exhaust both patients and parents and can permanently damage lungs.

IMMUNIZATION TIME TABLE

Schedule differs from one county to another, but the guiding principles are the same;

<u>VACCINE</u>	<u>AGE</u>
D.P.T. 1st dose (Diphtheria, Polio, Tetanus)	3 months
B.C.G. 1st dose	
Polio 1st dose	
D.P.T. 2nd dose	6 months 2 or 3 months after first dose.
Polio 2nd dose	
D.P.T. 3rd dose	9 months D.P.T. and Polio can be given later.
Polio 3rd dose	
Measles	measles should be given at 9 months

The schedule of the immunization is the responsibility of the doctor.

Information to parents is essential for the success of any immunization programme. The following parts should help to encourage them to have their children immunized.

1. Remind them of the nature of the disease the programme is designed to prevent.
2. Tell them where and when their child can be immunized.
3. Tell them what effect the immunization can have.

Immunization is like an umbrella it protects children from rain and heat. Vaccine protects from diseases and death.

Note: Never immunize a child with a history of convulsion. Every time the child is given the immunization specially the tripple vaccine the nurse should ask the mother the second day about the reaction of the vaccine, ask her: " Did he have high fever 39 and over. If the site of the injection is red, use alcohol compress. If the temperature lasts more than 24 hours report to the doctor".

Note: Immunization should only be given by a trained nurse under the supervision of the doctor who prescribed the treatment. Injections should never be given by anyone except a trained nurse under the supervision of the doctor who prescribed the medicine. It is very dangerous to give injection without authorization.

DIARRHEA

This disease can kill more than half of the infant due the ignorance of the mothers and relatives.

Now there is no excuse for any mother to loose her infant from diarrhea because of the availability of good medical O.R.S oral Rehydration Salt. (Special packets from Pharmacy).

Diarrhea is common. Many children die from dehydration. It is especially dangerous in small babies. We can prevent diarrhea, if you treat children with diarrhea carefully, few of them will die.

Diarrhea has many causes, but infection and malnutrition are the most important causes. They often work together, breast fed babies rarely get diarrhea. Breast feeding protects babies against diseases.

Bottle fed babies where there is dirt and poor hygiene often get the disease and often die. The disease is caused by germs which reach the intestine through dirty food and dirty milk, or any kind of contamination.

Flies carry germs from rubbish or animal dung, (spread animal dung thinly to prevent flies from breeding) to food and feeding bottles.

Dirty hands carry germs to food and bottles. Always keep food clean and covered from flies.

Good personal hygiene and clean hands are essential to prevent gastro enteritis. Always wash your hands before and after handling any baby.

Signs And Symptoms of Diarrhea

- (a) The baby has diarrhea, the stools are watery green there may be many loose water stools or only few.
- (b) The baby is thirsty irritable and cries a lot, he has fever which some times become very high (39 degrees and above) and he may have convulsions.
- (c) If the diarrhea and vomiting are bad he will get dehydrated.

The Signs of Dehydration are:

- (a) There is a loss of weight.
- (b) The mouth lips and skin are dry and there is loss of skin elasticity, the skin when picked up does not return quickly to its normal position.
- (c) The fontanelle is depressed, and the eyes sunken.
- (d) The baby is thirsty and fretful.
- (e) The pulse is rapid and temperature is high.

Treatment of mild cases

If the child has any of these signs begin giving special drink.

Packets of Special Drink called Electro-Sol are available in pharmacies. Mothers should have several packets in her First Aid kit. However, the packets may not be available when you need them so it is very important to learn how to make your own. This is cheaper and works very well if you mix it correctly.

Remember: Start giving special drink immediately.

How to Make Special Drink

1. Wash hands well. two fingers)
 2. Put two glasses (1/2 liter) of clean water into a clean container. It is better if the water is boiled and cooled first.
 3. Add to the water one pinch of salt using the thumb and two fingers. Do not put in more or less.
- CAUTION: Before adding the sugar, taste it and be sure it is not more salty than tears. If it is, throw it out and start again.
4. Add as much sugar as can be scooped up by three fingers.
 5. Add the juice of one orange if you have it.
 6. Last add a pinch of bicarbonate soda using a thumb and one finger. If soda is not available it may be omitted.
 7. Stir well until all ingredients have dissolved in the water.
 8. Pour some of this drink for diarrhea into a clean glass.
 9. Feed it little by little to the child with a clean spoon.
 10. Give the child 4 glasses in the next 4 to 6 hours, or one glass for each watery stool or vomiting. Keep giving liquid until child is urinating normally and signs of dehydration are improved. If he is very dehydrated when you start special drink take him to the doctor now. Give special drink on the way.



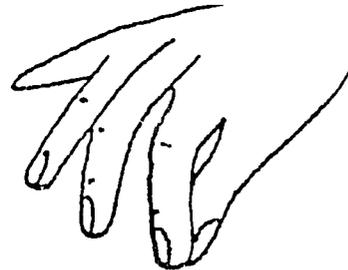
3. Salt



4. Sugar



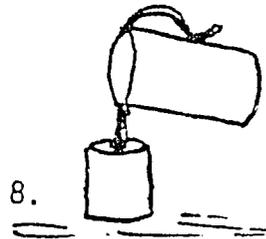
5.



6. Soda



7.



8.



9.



10.

An alternative method of preparing special solutions for diarrheal diseases could be the following:-

- One liter of water (size of a large coca cola glass bottle) boiled and cooled.
- Three level table spoonful of ordinary sugar = (40-45 gms)
- 1/2 tea spoonful of ordinary kitchen salt (2-2.50 gms)
- Less than 1/2 tea spoonful baking soda (1.50-2 gms)
- Few drops of lemon or orange juice if available.

How to Give Special Drink

1. - Give the special drink using a cup and spoon.
 - Give small amounts, at a time.
 - If the child vomits, wait 5-10 minutes then give him more special drink.
2. After 4-6 hours of giving Special Drink tell the mother to look for the signs of dehydration. If the signs of dehydration are not better take the child immediately to the doctor.

If the signs of dehydration are better but not gone - continue to give the child the special drink.

If the infant is breast-fed tell the mother to continue to breastfeed the baby between the special drink. Breast-milk will help the baby to get better faster.
3. If the child is not breast-fed the milk he receives should be mixed with an equal amount of water, until diarrhea stops. An older baby who is being given other kinds of food besides breast-milk should continue to be given these foods. It is very important that feeding be continued, even if it appears to increase the number and amount of stools. The child is retaining nourishment from the food and this helps him to recover. The benefit the child gets from the extra nourishment is very much greater than the harm that may seem to be done by the possible increase in the number and amount of stools. It is very important that children continue to be fed throughout an attack of diarrhea.

Do Not Give Fatty, Fried Or Spicy Foods, Raw Fruits Or Any Kind Of Laxative Or Purge.

RESPIRATORY INFECTIONS

Babies are readily infected from the mother or a member of the family who has a cold, if precautions are not taken. Nasopharyngitis (harsh voice) is recognized by sniffles. If the infection spreads towards the lungs the cry becomes coarse. The baby should be put in a room alone or in a corner if there are no other rooms. Keep him comfortable, warm, give plenty of fluids. Bronchopneumonia may develop and it is sometimes fatal.

PNEUMONIA

This condition is more common in premature babies and in asphyxiated babies who have inhaled much aminal fluid. They may inhale vomit. Respiration is rapid. Temperature is not high (below 37-38).

The baby should be put again far from the rest of the family members. The head of the cot or mattress is slightly raised, and the baby is turned from one side to the other side every hour or two (propped with a small head pillow). Clean his mouth with a piece of clean cloth and give fluids. If temperature is high report immediately to the doctor.

FEBRILE CONVULSIONS

(Due to Fever)

Incidence and Diagnosis

About 7 percent of all infants and children have febrile convulsions between six months and two or three years of age.

After seven years of age convulsions due to elevation of temperature are usually rare. Diagnosis of febrile convulsions involves diagnosis of the disease of which fever is a symptom.

Most convulsions occurring between six and 12 months of age and in early childhood are initial symptoms of an acute febrile disease. A convulsion in this situation is equivalent to a chill experienced by an adult under the same conditions.

Any child who has a febrile convulsion, however, should be examined to eliminate the possibility of other causative factors.

Note: Convulsions are spasmodic contraction of muscles. Never take the temperature by mouth - only rectally.

Treatment

Apply cold compress to the forehead cold bath is also usefull (of the temperature 40 centigrade or above), if the mother has an acamol suppository is very good to reduce high fever, usually mothers keep such medecine at home it should be kept in the refrigerator so it will not melt.

Send For The Doctor As Soon As Possible.

INFANT AT RISK

1. No gain in weight or loss of weight within 3 months.
2. Birth weight less than 2500 grams.
3. Age of mother less than 17 years.
4. Attacks of diseases like pneumonia twice or more within a month.
5. Continuous sickness of the child.
6. Malnutrition - marasmus, failure to
Malnutrition is caused by an inadequate dietary intake or an inability of the infant to use food he receives. The result is that reserve food elements in his body are used instead. Some of the more common specific causes for inadequate intake are severe poverty, femine, or child neglect which is in most cases in our country, or physical defects that interfere with intake such as cheft. Infection that produce (Anocexia) loss of appetite, or severe vomitting, worms, diarrhea. (Kwaskerkor) is a type of malnutrition that results from protein defeciency. Signs of Kwaskerkor are:
 - a- Hair becomes more fair
 - b- Face is puffed up
 - c- Legs are swollen
 - d- Belly distended

The infant should be fed with high protein diet according to the age of the infant.

- at 0-3 months: Give lots of milk, puddings, vitamin such as orange juice, casein, powder which the mother can mix it with milk. This powder is concentrated protein. It helps the growth of the infant and it does not need cooking.
- 3 - 6 months: Again give eggs minced meat, fish, lever, veegt. fruits, again cosein powder, milk, laban, olive oil.
- 6 - 9 months: Lots of milk products, cheese, laban, legumes, oil, nuts, fruits, all pulses well cooked.

The mother should be taught how to cook for her infant who is suffering from malnutrition. Such babies usually malnutrition is due to carelessness of mother. These cases need a proper follow up at home regularly. The mother should be in contact with someone (health worker, doctor, daya, or nurse) who can help her to maintain a proper diet for the baby.

INFANT SAFETY MEASURES

IMPORTANCE OF ACCIDENT PREVENTION

Prevention of accidents is important for children of all ages. Accidents are the principal cause of death among children and account for many permanent handicaps and disabilities. The majority of accidents occur in or near the home.

1. Keep all medicine out of the reach of children.
2. Keep all kerosine, chemicals, detergents, away from the reach of children.
3. Keep all cooking stoves in a separate area on a table where no children can touch them.
4. Heating stoves should be located in a safe place.
5. Containers of water should be always covered tightly so the child will not put his head in it to drink choke or drown. In the case of washing floors buckets should be watched carefully or put out of children's reach.
6. Matches are dangerous. They might cause serious burns. Matches should always be kept out of the reach of children.
7. Sharps instruments: Knives, scissors, metal, pieces like pencils, needles should be kept away from children. They might pierce their eyes, nose or mouth.
8. All candies, tablets of any sort, nuts, beads must be kept away from children. They might swallow them, and choke on them, or push them into their nose or ears.
9. Never keep a child in a cot without safety bars he may fall and fracture his head or arms and legs - Do not put a chair or table near a window.
10. Watch out that all electrical outlets or appliances are safely out of the reach of children.
11. Keep plastic bags away from children. They may put them over their heads and asphyxiate themselves.

PLAY

Toys

Toys should be made of a non-toxic substance such as plastic or cloth with no sharp edge and should be easily cleaned and large enough so that they won't choke on it. Babies naturally put everything in their mouth as a learning feature. For this reason all toys should be clean and safe.

The children should play on the floor on a clean, safe area where they cannot fall. Children should never be left alone in a high place. Play areas should be clean and safe.

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