On the anatomy of the breast - On lactation

Sir Astley Paston Cooper, Bart.

Follow this and additional works at: https://jdc.jefferson.edu/cooper

Part of the History of Science, Technology, and Medicine Commons

Let us know how access to this document benefits you

Recommended Citation

https://jdc.jefferson.edu/cooper/24

This Article is brought to you for free and open access by the Jefferson Digital Commons. The Jefferson Digital Commons is a service of Thomas Jefferson University's Center for Teaching and Learning (CTL). The Commons is a showcase for Jefferson books and journals, peer-reviewed scholarly publications, unique historical collections from the University archives, and teaching tools. The Jefferson Digital Commons allows researchers and interested readers anywhere in the world to learn about and keep up to date with Jefferson scholarship. This article has been accepted for inclusion in On the anatomy of the breast, by Sir Astley Paston Cooper, 1840 by an authorized administrator of the Jefferson Digital Commons. For more information, please contact: JeffersonDigitalCommons@jefferson.edu.
ON LACTATION.

This is the function by which milk is secreted in the mammary gland and conveyed to the offspring for its nourishment and support.

The secretion of milk commences on the third or fourth day after the birth of the child, but there is a fluid produced during the latter part of gestation, which is not true milk. The milk will continue to be secreted for many years.

Soon after the birth of the child, the blood which had been abundantly conveyed to the uterus during the period of gestation being no longer there required, is directed to the breasts for the secretion of milk.

But both a constitutional and local excitement are required for its production.

The constitutional increased action, is marked by the usual symptoms of irritative fever, by a white tongue, a dry hot skin, a quick and hard pulse, and a disposition to a costive state of the bowels.

The local effects are hardness, pain, and tension of the breasts, and the excitement is generally greater with the first parturition than with subsequent children.

This assemblage of symptoms constitutes what is deno-
minated the milk fever, and its accession is on the third and fourth day after delivery, sometimes earlier, particularly with the first child, and at others much later. Its degree depends upon the irritability of the person's constitution, and is, consequently, the greatest in nervous, irritable, and delicate persons. It is succeeded by a calm and tranquil state of the constitution, and by the commencement of the secretion of milk.

Some preparation is made for the changes in the uterus and breast by the suspension of the monthly sexual secretion soon after gestation commences, when the breasts increase in their bulk, become tender to pressure, and they often previously to the birth of the child secrete a fluid, by which the gland is prepared for the secretion of milk and the lactiferous tubes to convey it.

The natural and most effectual mode of relieving the loaded state of the breast, and of producing the secretion of milk, consists in the application of the child to the nipples, which encourages the secretion, and this should be done so soon as the fatigue of delivery is passed. It has the additional advantage of drawing out and elongating the nipple, and of fitting it for its future office, an attention which is frequently required after a first delivery.

If the child be too weak to perform this office, the nurse
supplies its place, and sucks the mother, or uses a pump to draw off the secretion. But if the breast continues swollen and inflamed, and the milk does not appear, purgatives and leeches will be required to lessen the inflammation and excitement of the constitution, and fomentations and poultices will be necessary upon the breasts to encourage and assist in the production of the secretion.

The secretion of milk may be said to be constant or occasional; by the first, the milk tubes and reservoirs are constantly supplied by means of a slow and continued production of the fluid, so that the milk is thus, in some degree, prepared for the child.

By the occasional, is to be understood that secretion which is called by mothers and nurses, the draught of the breast, by which is meant a sudden rush of blood to the gland, during which the milk is so abundantly secreted, that if the nipple be not immediately caught by the child, the milk escapes from it, and the child when it receives the nipple is almost choked by the rapid and abundant flow of the fluid; if it lets go its hold, the milk spirts into the infant’s eyes.

Even the sight of the child will produce this draught, or sudden rush of blood and copious supply of milk, as the thought or sight of food occasions an abundant secretion of the saliva.
The draught is also greatly increased by the child pressing the breast with its little hands, by its drawing out the nipple by its tongue, lips, and gums, and by the pressure of its head against the breast.

In other mammalia, so far as we can judge, a similar process occurs, and the same effect is produced by the animal striking the udder with its head, and forcibly drawing out the teat.

Observe the foal playing with the teat, drawing it out forcibly and striking the udder of the mare with its head; and the lamb sucking for a short time to empty the large reservoir of the gland of the accumulated milk, and then beating the udder of the ewe with its head as if to put it in mind of secreting more to supply its still pressing wants.

In the human subject the milk is often so abundant, that a limpet shell is obliged to be worn to catch it, and to prevent the mother’s dress from being constantly wet and uncomfortable.

The mother is quite sensible of the draught, as the feeling it produces is very strong, but she is also informed of it by the sudden escape of milk even when the child is not applied to the breast; if a thought, or irritation of the nipple, excites the sudden secretion.

The quantity of milk which can be usually squeezed
from the mother is about two ounces from one breast, but necessary varies with the state of the health and mode of nutrition; as to the quantity produced by the draught I know of no means of accurately ascertaining it.

A woman who milked her right breast for my information, and whose child was four months and a fortnight old, produced:

<table>
<thead>
<tr>
<th>Date</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Saturday Morning</td>
<td>2 oz.</td>
</tr>
<tr>
<td>Sunday Morning</td>
<td>2 dr.</td>
</tr>
<tr>
<td>Monday Morning</td>
<td>2</td>
</tr>
<tr>
<td>Tuesday Morning</td>
<td>2 ” 6 ”</td>
</tr>
<tr>
<td>Tuesday Evening</td>
<td>1 ” 3 ”</td>
</tr>
</tbody>
</table>

At seventeen months after delivery, a woman milked out 2 oz. when the child had been seven hours absent from the breast.

I have often had this experiment made, and have almost constantly found that the morning's milk is greater in quantity than that of the evening, and the same observation generally applies to the cow.

As to the quality of the milk, judged of by the quantity of cream, it varies with the health and mode of nutrition of the mother.

The secretion of milk will continue for many years in an healthy mother, if it be encouraged by the application of the child to the breast; and many women continue to
suckle in a belief that it lessens the tendency to pregnancy, and others from the better motive of believing it to be the best food for their child.

A woman had abundance of milk at eighteen months after delivery; another suckled her child for twenty-one months, and the child had no other food. Mr. Wakefield, of Battle Bridge, Pentonville, told me that he knew a woman who had suckled her two successive children, at the same time, and I have heard of an instance in which a wet nurse suckled two consecutive children.

In general, women give up suckling when they become again pregnant, because gestation generally diminishes the quantity and impairs the quality of the milk.

Mr. King informed me that when travelling in the Arctic circle (?) he had seen an Esquimaux boy play out of doors with his bow and arrow, and come into a hut, to receive the milk of his mother’s breast; and many children in our own country play about a room, and then run to their mother’s breast, and sometimes fetch a stool to stand upon, whilst they pursue the process of sucking.

Nine or ten months is, however, a good general time for weaning the child, when it is provided with teeth, and can take other food for its nourishment; but this depends upon so many circumstances of health and convenience, that it
must be left to the feelings of the mother and the judgment of the medical attendant to determine upon its propriety.

If the mother wishes to wean her child, and she still secretes abundance of milk, the best mode of removing it is by giving an active purgative in the morning, and she should apply evaporating lotions of Liq. Plumb. Diacetat. dilutus, unciam, cum Alcohol, uncia; this lessens the local action, and prevents inflammation by the diminished temperature which its evaporation produces.

When inflammation in the breast is generally diffused through the gland, it stops its secretion; but if it attack only a part of the breast, the other continues to secrete.

If an abscess forms in a part of the breast, the secretion will still proceed in other parts; and when the abscess is opened, and the inflammation is subdued, milk often escapes at the opening by which the matter was discharged.

If one breast be inflamed, and ceases to secrete, the other gland will continue its secretion.

If a woman be the subject of a severe fever, her milk will generally cease to be secreted.

In general, the secretion of milk ceases soon after the child is weaned; but it sometimes continues to a subsequent delivery.

Some women are prevented from suckling by want of
milk; some by want of strength; some from a deficiency of the nipple; but too frequently it is the result of caprice, the fear of trouble, the dread of spoiling the figure, and from anxiety to avoid the confinement which it enforces; and in some from the contrary desire of having many children.

However, it is quite true that there are women who are too feeble to continue to be nurses, after giving suckling a fair trial. It injures their digestive powers; they feel a sinking sensation in the stomach; loss of appetite; pain in the chest, back, and head; violent spasms from its influence upon the nervous system, and becoming emaciated, they are compelled to give up a duty which they have been most anxious to fulfil.

In general, when a woman is a nurse, and she becomes again pregnant, she is obliged to give up suckling, as the milk is deteriorated in its quality, often disagrees with the child, making it vomit, and it is so disagreeable to the infant that it refuses the breast.

The quantity of milk which a woman is capable of secreting, cannot be estimated by the size of her breast, as it often is large and hard rather than secretory, or it is loaded with adeps, and produces but little milk. The same remark applies to quadrupeds, as the cow with the largest udder does not always give the most milk. I know a lady, who,
before pregnancy, has scarcely any breast; but it evolves largely in lactation, disappears in a great degree when the child is weaned, and again evolves with the next child. Now that she has ceased to have children, her breast is as small as that of a man, so that the chest in that respect resembles that of the male.

If a child sucks one breast more than the other, it becomes much larger than the other.

After the first few weeks of lactation, there is little difference in the milk of three, six, or nine months, as is proved by the children of wet nurses being older or younger than those they suckle, yet still the children they nurse are well nourished. The same thing is proved by nurses suckling consecutive children. Dr. Walshman and Dr. Key, two of the most experienced accoucheurs I have known, informed me that they did not believe that the age of the milk made any essential difference. However, there is a feeling upon this subject on the part of the mother, which may be indulged, as she and the nurse are better satisfied, if the children be nearly of the same age; and Dr. Merriman thinks that the child of the wet nurse should be about two months older than the new-born child.

Women who labour hard, if they are well nourished, have abundance of milk; but if their food be scanty in
quantity, or poor in quality, they soon sink under fatigue, and lose their milk.

A child may be deprived of its mother's milk, and pine for her breast, and if returned to it after several weeks, the secretion of the gland will return, and the child be supported by it.

If a woman be healthy and she has milk in her breast, there can be no question of the propriety of her giving suck. If such a question be put, the answer should be, that all animals, even those of the most ferocious character, show affection for their young, do not forsake them, but yield them their milk, do not neglect, but nurse and watch over them; and shall woman, the loveliest of nature's creatures, possessed of reason as well as of instinct, refuse that nourishment to her offspring which no other animal withholds, and hesitate to perform that duty which all animals of the Mammalia class invariably discharge?

Besides it may be truly said that nursing the infant is most beneficial both to the mother and the child, and that women who have been previously delicate, become strong and healthy whilst they suckle. If a woman suffers much from milk fever, the application of the child to the breast is the best mode of relief.

The giving suck may be the means of preventing or of
lessening the tendency to puerperal fever, by determining the blood to the breast for the secretion of milk, and withdrawing it from the uterus, peritoneum and iliac vessels; when it has commenced, fomentations to the breast should be employed.

Suckling also diminishes the disposition to malignant diseases of the breast, for although women who have had children are still liable to cancerous and fungoid diseases, yet it is undoubtedly true, that breasts which have been unemployed in suckling, in women who have been married, but are childless, and in those who have remained single, are more prone to malignant diseases than those of women who have nursed large families; and if it were only to lessen the probability of the occurrence of such horrible complaints and causes of dissolution, women ought not to refuse to suckle their offspring.

A woman who has children and suckles them, is undoubtedly a better insurable life than a married woman who has no children, or one who has remained single.

A female of luxury and refinement is often in this respect a worse mother than the inhabitant of the meanest hovel, who nurses her children, and brings them up healthy under privations and bodily exertions to obtain subsistence, which might almost excuse her refusal.

The frequent sight of the child, watching it at the
breast, the repeated calls for attention, the dawn of each attack of disease and the cause of its little cries, are constantly begetting feelings of affection, which a mother who does not suckle seldom feels in an equal degree, when she allows the care of her child to devolve upon another, and suffers her maternal feelings to give place to indolence or caprice, or the empty calls of a fashionable and luxurious life.

It is, however, melancholy to reflect, that a life of high civilization and refinement renders the female less able to bear the shocks of parturition: it has a tendency to lessen her attention to her offspring, and really diminishes her power of affording it nourishment; so that she is often a worse mother in these respects than the female of the middle ranks of life, or even the meanest cottager.

Having thus stated the advantages of nursing to the mother, it is equally true that the child derives from it a multitude of advantages and comforts.

First. It may be observed that the first milk after parturition, and which is called the colostrum, and is the immediate production of the milk fever, is of a purgative nature, and has, therefore, when received into the child, a tendency to remove the quantity of meconium with which its bowels are loaded at the time of its birth.
Secondly. That medical man must be very presumptuous, who can believe that he can discover a food equally favourable to a child’s digestive organs as a healthy mother’s milk, or as well fitted to be acted upon by the gastric juice which is provided in the child, to digest the mother’s milk.

Dr. Merriman informed me, that he tried to ascertain the average mortality of children brought up by hand, but found it difficult, for want of accurate data. The result was a conviction, taking the whole population of rich, the poor, and the middle classes, that not more than two in ten children so nourished, survived eighteen or twenty months, and the mortality of the children of those who go out as wet nurses is frightful.

Thirdly. The mother’s bosom is the child’s greatest comfort in sickness, and hence its sweetest repose. In the irritation attending the process of dentition, the child’s only rest is upon the mother’s bosom, and even the mother’s anxiety contributes to the relief of the child; for it renders her milk a purgative, and thus acts usefully as an aperient, when the system is in a feverish state, and operates as its best medicine. In many other infantile diseases, the same principle may be observed to apply.

So soon, then, as the mother recovers from the fatigues
of parturition, the child should be applied to the breast, for the advantage both of the infant and of the parent.

It must, however, be acknowledged, that there are many examples of women who are unable to perform this important duty, from weakness of constitution, and deficiency in the supply of milk; and when from any cause the mother is incapable of nourishing her offspring, the procuring a wet nurse is infinitely better for the child than bringing it up by hand, as is the common expression, as the food is so much more natural and congenial.

Of the Food of the Mother or Nurse.

It appears that the quantity and quality of the food taken by mothers and nurses is often greater than is absolutely necessary; indeed, absurdly and unnecessarily abundant. A mother who reared ten very healthy children, and never failed in her milk, adopted the following plan of diet:—

Her breakfast was café au lait with bread and butter. At one o'clock P.M., she took hot meat, and drank half a pint of porter. At six o'clock, she dined plainly upon meat, but drank half a pint of porter and two glasses of Port wine. At ten o'clock P.M., she took a slight supper of meat, and drank half a pint of porter. She suckled early in the morning, frequently in the day, and the last thing at night. During
the night, the child was fed upon barley-jelly, gruel, flour and milk, milk and arrow-root if the bowels were relaxed. Her general food for the child was flour tied in a cloth boiled in water, dried and grated into milk with sugar.

It appears, however, that this diet for the mother is unnecessarily abundant and stimulating.

The Welsh women live, whilst they suckle their children, upon barley-bread, oat-cake, cheese, and oatmeal, and bacon with leeks, and other vegetables boiled together, into what they call cowl. No beer nor wine, but milk and water, or butter-milk, are their drinks. The woman is often moving about her house in the fourth or fifth day after parturition. They are affectionate mothers, and their infants are generally very healthy.

In Ireland, Dr. Woodroffe of Cork informed me, in reply to some questions I put to him:—

**QUESTIONS.**

What is the diet of the *poor* women in Ireland, whilst they are *suckling*?

What work are they called upon to do whilst they are nurses?

How long do they generally *suckle*, and do you know of any individual cases of the child continuing to be suckled for a long period?

**ANSWERS.**

Potatoes, milk, stirabout, and occasionally a little fish.

They work in their fields and gardens, and are engaged in their domestic concerns.

Never less than *twelve*, but more generally for *sixteen* or *eighteen* months. I have known many instances of children being suckled for *two* years, much to
QUESTIONS.

Amongst the lower classes, there is a strong prejudice in favour of weaning the child on particular days; and to accomplish this object, they often continue to nurse their child five or six months longer than they otherwise would.

Do they carry the child with them whilst at work, or do they go home to suckle?

In Scotland and in the north of England, where the women work hard, in a few days after parturition they occupy themselves with the business of the house, and even very soon go out into the fields to work. The child is also carried out by another child, and is placed under a hedge or wall, and if the mother hears the child cry, she suckles it, or does so, from her belief of its wants. The food of the mother is ground oatmeal and milk, flour and milk, potatoes sliced and fried in fat.

A lady who was much in the habit of visiting the poor for charitable purposes, states, however, that she observed that nurses who work hard, and are indifferently fed, are weak and exhausted, and appear old at an early period of life.

Dr. Merriman, to whose judgment, experience, and
authority, every one would defer, informs me that a patient of his engaged a nurse who suckled her two following children, and altogether she was a nurse for nearly, if not quite, three years. The children were strong and healthy, but the nurse was reduced to such a state of weakness and ill health, as to be incapacitated from any useful labour. The family felt that she had ruined her health in their service, and they kept her, but no longer as an efficient servant.

Some kinds of food, in the better ranks of life, disagree with the mother and the child, by affecting the milk; as salads, pickles, sour fruit, cucumbers, melons, and acids. The lady to whom I alluded, who had nursed ten healthy children, had her own bowels irritated as well as those of the child she nursed, by drinking a glass of Champagne, or of any acid or fermenting wines or liquids.

In general the menstrual or sexual secretion ceases soon after gestation begins, and it does not reappear until after lactation has been nearly completed; the woman then finds that the quantity of milk lessens, and that which is secreted disagrees with the child, and is often refused by it from being disagreeable, and therefore the infant frequently weans itself.

But it sometimes happens that the sexual secretion continues during lactation, and women have assured me, that
they and their children have been healthy. A woman who suckled sixteen months had the menstrual secretion during the last seven, yet her milk was abundant and the child healthy. These, however, must be considered as exceptions to general rules, for usually, if menstruation occurs during lactation, such a change is produced in the child's health and bowels, that a medical man is led to ask if the secretion has not returned; the woman also suffers from the great call upon her constitution which this double secretion produces, from the difficulty of supporting both at the same time.

**On the Effects of the Mind upon the Secretion.**

The influence of the mind upon the body generally affects the natural functions, and in this circumstance the human subject remarkably differs from other animals. A hurried circulation from over-exercise, or a deficiency of natural food and water, will affect the secretion of milk in all Mammalia, but mental and moral causes influence the production of milk in the human female; and it is this influence of the mind upon the body which operates to produce the fatal effects of injuries in man which other animals suffer with comparative impunity.

Lactation is one of those functions which are subject to great changes from mental impressions, for the milk becomes
reduced in quantity, altered in quality, and sometimes suddenly arrested from mental agitation; but it generally suffers more in its quality than its quantity.

The secretion of milk proceeds best in a tranquil state of mind and with a cheerful temper; then the milk is regularly abundant and agrees well with the child. On the contrary, a fretful temper lessens the quantity of milk, makes it thin and serous, and it disturbs the child’s bowels, producing intestinal fever and much griping, and a woman of a nervous, irritable, temperament, makes an indifferent nurse.

*Fits of anger* produce a very irritating milk followed by griping sensations in the infant, and green stools are produced, which are often indications of considerable nervous irritation on the part of the child.

*Grief* has great influence on lactation, and consequently upon the child. The loss of a near and dear relation, or a change of fortune, will so much diminish the secretion of milk, that a wet nurse often will be required to perform the office of suckling, or it will be necessary to give the child such food as is best adapted to its age and powers of digestion,

*Anxiety of mind* diminishes the quantity and alters the quality of the milk. The reception of a letter which leaves the
mind in anxious suspense, lessens the draught, and the breast becomes empty, the lactiferous tubes and reservoirs ceasing to contain milk in the usual manner.

If the child be ill and the mother is anxious respecting it, she complains to her medical attendant that she has little milk, and that her infant is griped and has frequent green and frothy motions.

*Fear* has a powerful influence on the secretion of milk; I am informed by a medical man who practises much amongst the poor, that the apprehension of the brutal conduct of a drunken husband, will put a stop for the time to the secretion of milk. When this happens the breast feels knotted and hard, flaccid from the absence of milk, and that which is secreted is highly irritating, and some time elapses before a healthy secretion returns.

*Terror*, which is sudden and great fear, instantly stops this secretion.

A nurse was hired, and in the morning she had abundance of milk, but having to go fifty miles to the place at which the parents of the child resided, in a common diligence, the horses proved restive and the passengers were in much danger. When the nurse, who had been greatly terrified, arrived at her place at the end of the journey, the milk had entirely disappeared, and the secretion could not
be reproduced, although she was stimulated by spirits, medicine, and by the best local applications a medical man could suggest. A lady in excellent health, and a good nurse, was overturned in her pony chaise, and when she returned home, pale, and greatly alarmed, she had no milk, nor did it return, and she was obliged to wean her child.

Those passions which are generally sources of pleasure, and which, when moderately indulged, are conducive to health, will, when carried to excess, alter, and even entirely arrest the secretion of milk.

On the Effects of Medicine on Lactation.

Medicine has great influence in changing the qualities of the milk. This is proved by those numerous cases with which our Hospitals teem, of mothers suffering under eruptions and other forms of disease supposed to be syphilitic, and their infants having eruptions upon the head, the feet, and the nates, with inflammation upon the tunica conjunctiva, and desquamation of the cuticle upon different parts of the body. The mother has mercury given to her by the stomach, or mercury is rubbed upon a good absorbent surface; no medicine is given to the child, but it continues to suck its diseased mother; both mother and child soon improve, and both com-
pletely recover, but the child through the influence of the milk alone. Such a number of instances have I seen of these diseases so cured, that there can be no doubt of the fact, and many children perish if the mother be not so treated.

**Purgative remedies**, if they be easily absorbed, when given to the mother, produce a similar effect upon the child, but sometimes it would seem that any disturbance of the mother's bowels will produce irritation in those of the child.

The medicines which affect the child the least, are olive oil, castor oil, confection sennae, and extractum colocynthidis compositum. The saline purges are apt to influence the child's bowels, or, as the nurses express it, to go to the milk. The best medicines to give to the child itself, are manna, magnesia, castor oil; injections are also very useful.

Iodine has been found in the milk by many persons. Dr. Rees writes:—"A woman in Guy's Hospital had been taking iodine for a fortnight three times per diem, with five grains of hydriodate of potash; her milk was tested with sulphuric acid and starch, and the strongest indications of iodine were obtained."

From the researches of Chevallier, Henry, and Peligot, on the milk of asses, to whom various medicines were administered, it appears that distinct traces of many remedial agents were readily detected in the lacteal secretion. Of these,—
Common salt was detected in abundance.
Sesqui-carbonate of soda passed in great quantity into the milk, rendering it alkaline.
Traces of sulphate of soda, when administered in doses of about two ounces, were readily detected.
Sulphate of quinine, although administered in large doses, did not appear to pass into the milk.
Iodide of potassium was readily detected, when administered in doses of a drachm and a half.
Oxide of zinc, tris-nitrate of bismuth, and sesqui-oxide of iron, were readily detected in the milk, when these substances were administered to the animal; but no traces of alkaline sulphurets, salts of mercury, or nitrate of potass, could be detected even after the ingestion of these drugs in considerable doses.

I have received the following letter from my nephew, Dr. Young, upon the subject of lactation in the black population of the West Indies.

17, Woburn Place,
19th July, 1838.

My dear Uncle,
I have much pleasure in answering the questions you have put, regarding the parturient negress. I trust the answers will be sufficiently explicit for your purpose;
but I regret they have been delayed so long, having received your note on the eve of my leaving town for a few days.

"1. Twin cases amongst the black women are not so frequent as with the whites. They breed earlier, and when they live an indolent life, they have a numerous offspring, not exceeding, however, the poorer classes of this country.

"2. It is a mistaken opinion, that their children are not black when born. Some are jet black, and others shades lighter, which continue so, or become in the course of a month or two dark, according to the complexion of the parents; following that hereditary law of nature, by either taking the stamp of the father or mother, or by participating in the characters of both.

"3. Parturition in the black, after the first child, is generally easy, and Nature is abundantly kind and successful where she is not interrupted by the officious and injurious interference of the black midwives, who attend in all ordinary cases. It is, however, of frequent occurrence, to meet with difficult labours on the births of the first children, where the individual has conceived at the tender age of from thirteen to sixteen years, before the pelvis and external parts have arrived to their full and mature growth. But considering the relaxing effects of the climate, the nature of the occupations
which keep the women for hours every day in the erect posture, the vegetable diet on which they chiefly subsist, and their improper habits, lingering labours are more frequent than, à priori, you would have been led to believe, although very few cases prove of serious consequence.

"4. The second or third day after delivery, infusion of senna and Epsom salts are generally given; nor do these, or any other medicine, during the whole period of lactation, seem to affect the child more particularly than is sometimes observed amongst the whites. It not unfrequently happens, however, that the stomach and bowels of negro children are much disordered by the messes of greens and vegetables which the mothers take, cooked in a most savoury manner, but I would still maintain, not more so than would occur in the European under similar circumstances.

"5. Gruels and chocolate are allowed for the first week after parturition, and then the woman is permitted to enter on the diet she was accustomed to, composed chiefly of vegetables, containing large portions of pure secula and sugar, and some farinaceous and albuminous matter; animal substances being taken in such quantity as only to act as a condiment. On this food, therefore, she subsists during the whole period of lactation, and it seems quite sufficient, both for her own support, and that of the child, for in few
instances are finer and healthier children and mothers to be seen. To this simple and unexciting diet, in all probability, may be attributed the unfrequent occurrence of febrile disorders during the puerperal state, and the facility with which they are subdued, if they do occur. Puerperal fever and peritoneal inflammation seldom, if ever, happen, nor does inflammation of the uterus, except in cases where the labours have been difficult. Milk abscesses and sore nipples never occur except in the young and robust, and then very occasionally; and puerperal convulsions after delivery are almost an anomaly. These facts may afford a wholesome lesson to the European women, for how very frequently are they sufferers under these disorders, with which they are so often afflicted from a too nutritious diet and stimulating regimen, during the month of their confinement.

"6. The negro woman is enjoined to lie in the horizontal posture, and to be at permanent rest for three weeks after delivery. To insure this as much as possible, a nurse is exclusively allowed to attend upon her. The fourth week she is permitted to move about her cottage and garden; and on the fifth weeks he presents herself and child to her employer. She is then put to some light employment, from which, in the course of three months, she gradually passes on to the accustomed duties of her class, as labourer or
otherwise. These wise and humane measures are too often neglected by the individual herself, and connected with her other erroneous habits, she establishes that fluor albus, procidentia, and prolapsus uteri, which are so common amongst the blacks, distressing to them, and perplexing to the medical practitioner.

"7. The quality of her milk does not differ from that of the European's. Sugar is the predominating material. It nourishes and supports the white and black child equally well and the same. When the black woman is employed as nurse to the white child, which she will undertake, but never to the exclusion of her own, she is allowed a full share of animal food and fermented liquor, in cases where the employer is able to do so; but in no instance does this course seem to make any difference, except, perhaps, in prolonging the secretion in a full quantity, for a greater or more protracted period. This, however, is not altogether certain; for in the negress, when she is not employed in active labour, but is rather permitted to lead an indolent life, such as she does when she is engaged as a wet nurse, the milk is secreted as abundantly and as persistently under the one as the other course of diet. It is active bodily exertion which seems to shorten the period of abundant supply. Under a system of this kind, and with her ordinary habits of living, the secretion
is sufficient for the entire support of the child during six or eight months, when the mother is strong and healthy. At this time, the child becomes a feeder, and the mother is allowed to suckle for six or eight months longer, should she continue in health, or not conceive in the mean time. She, however, always evinces the greatest reluctance in terminating it; for enjoying many indulgences and perquisites as a suckler, she will frequently, to the detriment of herself and child, prolong the time as much as possible for such enjoyments, and often the measure can only be obtained by either abridging or discontinuing those indulgences. It is always a question of difficulty, and often a source of bickering, between the woman and her employer.

"8. The children cut their teeth at the same ages, in the same order, and under similar influences, as the children of white parents. But disorders that arise during dentition are universally, in this class of people, most difficult to manage, and prove a great source of mortality; so irregular are the mothers in their diet and other habits, and so disobedient to those rules which can alone lead to a successful treatment.

"Malignant diseases of the uterus and mammæ are of very rare occurrence, and even those cases which I have witnessed in this class of people, have been among the better
orders of them, whose habits of living have been assimilated to those of the European. These diseases show themselves in the hybrids of this people and the European, in proportion as there is more of the European blood. I would not, therefore, as seems to be the opinion of some, attribute the near exemption of the negro race from disorders of this kind to their simple habits of life; but rather look on the fact as one of those hidden and wise laws of the Ruler of the universe, who measures out our ills and enjoyments in such proportions and with that justice, which He alone can appreciate. Look to those diseases which seem almost peculiar to the African race, and which the European so seldom contracts, even under the influence of a tropical climate. Look into the universe of all living and animated nature, and you will find every class beautifully and fearfully created and fitted to fill and endure the situation in which the Maker of all things hath cast its lot, the individuals of each obeying the same laws, and governed by the same appetites which first stamped their classes, in whatever part of the world they shall, by art and the power of man, be transferred.

"I am,

"My dear Uncle,

"Very affectionately and sincerely yours,

"N. Lewis Young."
In another letter of reply from Dr. Young, he says:—

"Marchfield House, Bracknell, Berks,

"July 6, 1839.

"My dear Uncle,

"In every instance, in which the health of the mother and child will permit it, the negress is allowed to suckle for eighteen months, a period found best suited to the rearing of the child, and during which the secretion generally continues healthy. Many are the cases, however, in which the woman continues, in opposition to all control or advice, and to her own detriment and that of her child, to suckle for two, three, and sometimes even for four years. It is not uncommon to see an urchin trotting after and calling out to its mother for some bubbly, (meaning the breast, as it is vulgarly called amongst the negroes,) and the mother to kneel down, even in the public road, and to submit to the operation as one of the animal instincts. I have frequently seen the child tied on her back, take the breast from over her shoulder, and indulge as heartily as if comfortably pillowed in her lap.

"An instance came under my observation in which a nursery woman, about fifty-five years old, and many years after she had borne a child, clandestinely allowed an infant
which had been committed to her care to be weaned, to suck her for many months. A secretion was brought on, and it evidently afforded some nourishment to the child.

"I have seen some cases of enlarged and pendulous mammae in the negro, bearing many of the external characters of those of the negress who had never borne children. And although I never witnessed an instance in which the gland secreted milk, yet I have heard related a well-authenticated case which occurred at Barbadoes, in which the man was known to take the care of one of his grandchildren, to tend, nurse and suckle it as a mother, which it had lost soon after its birth. The account is, that the child obtained nourishment from his breasts, lived and did well, but I suppose with the assistance of other food.

"I am, my dear Uncle,
"Very respectfully and sincerely your's,
"N. Lewis Young."