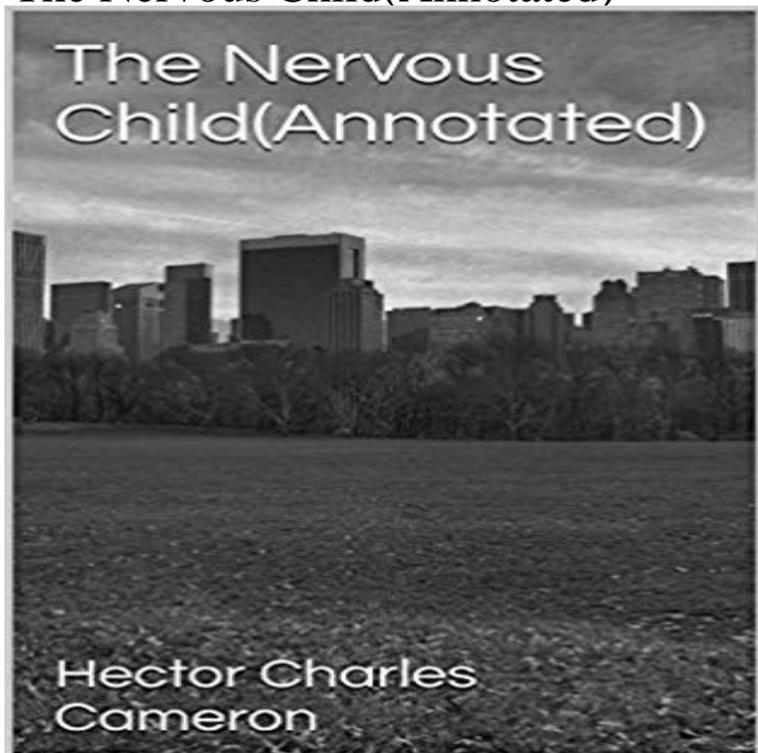


## The Nervous Child(Annotated)



CONTENTS CHAP. PAGE I. DOCTORS, MOTHERS, AND CHILDREN 1 II. OBSERVATIONS IN THE NURSERY 16 III. WANT OF APPETITE AND INDIGESTION 50 IV. WANT OF SLEEP 64 V. SOME OTHER SIGNS OF NERVOUSNESS 73 VI. ENURESIS 89 VII. TOYS, BOOKS, AND AMUSEMENTS 96 VIII. NERVOUSNESS IN EARLY INFANCY 104 IX. MANAGEMENT IN LATER CHILDHOOD 117 X. NERVOUSNESS IN OLDER CHILDREN 131 XI. NERVOUSNESS AND PHYSIQUE 145 XII. THE NERVOUS CHILD IN SICKNESS 160 XIII. NERVOUS CHILDREN AND EDUCATION ON SEXUAL MATTERS 169 XIV. THE NERVOUS CHILD AND SCHOOL 182 INDEX 191 THE NERVOUS CHILD CHAPTER I DOCTORS, MOTHERS, AND CHILDREN There is an old fairy story concerning a pea which a princess once slept upon--a little offending pea, a minute disturbance, a trifling departure from the normal which grew to the proportions of intolerable suffering because of the too sensitive and undisciplined nervous system of Her Royal Highness. The story, I think, does not tell us much else concerning the princess. It does not tell us, for instance, if she was an only child, the sole preoccupation of her parents and nurses, surrounded by the most anxious care, reared with some difficulty because of her extraordinary delicacy, suffering from a variety of illnesses which somehow always seemed to puzzle the doctors, though some of the symptoms--the vomiting, for example, and the high temperature--were very severe and persistent. Nor does it tell us if later in life, but before the suffering from the pea arose, she had been taken to consult two famous doctors, one of whom had removed the vermiform appendix, while the other a little later had performed an operation for adhesions. At any rate, the

story with these later additions, which are at least in keeping with what we know of her history, would serve to indicate the importance which attaches to the early training of childhood. Among the children even of the well-to-do often enough the hygiene of the mind is overlooked, and faulty management produces restlessness, instability, and hyper-sensitiveness, which pass insensibly into neuropathy in adult life. To prevent so distressing a result is our aim in the training of children. No doubt the matter concerns in the first place parents and nurses, school masters and mistresses, as well as medical men. Yet because of the certainty that physical disturbances of one sort or another will follow upon nervous unrest, it will seldom happen that medical advice will not be sought sooner or later; and if the physician is to intervene with success, he must be prepared with knowledge of many sorts. He must be prepared to make a thorough and complete physical examination, sufficient to exclude the presence of organic disease. If no organic disease is found, he must explore the whole environment of the child, and seek to determine whether the exciting cause is to be found in the reaction of the child to some form of faulty management. For example, a child of two or three years of age may be brought to the doctor with the complaint that defecation is painful, and that there has existed for some time a most distressing constipation which has resisted a large number of purgatives of increasing strength. Whenever the child is placed upon the stool, his crying at once begins, and no attempts to soothe or console him have been successful. It is not sufficient for the doctor in such a case to make an examination which convinces him that there is no fissure at the anus and no fistula or thrombosed pile, and to confine himself to saying that he can find nothing the matter. The crying and refusal to go to stool will continue after the visit as before, and the mother will be apt to conclude that her doctor, though she has the greatest confidence in him for the ailments of

grown-up persons, is unskilled in, or at least not interested in, the diseases of little children. If, on the other hand, the doctor pursues his inquiries into the management of the child in the home, and if, for e

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