Nappy Rash - more and more often....!

by Wolfgang Podmirseg, Naturopath
Nappy rash is increasing at a terrifying rate, and has become almost an everyday occurrence in every new-born child.

I was consulted by a really desperate young mother with her three-month-old daughter. The child had been treated for the nappy rash both by a paediatrician and also at a hospital, with antibiotics and cortisone in the form of ointments, medicated powders, skin powder and creams, but all to no avail. In the course of these treatments, the condition had got so much worse that the child was just whining day and night, rejecting some of her meals, and had therefore lost weight.

On taking the case, the following picture emerged: erosive reddening of the skin, high-grade inflammation on the thighs, genitalia, anus, on the buttocks extending up to the kidney area, swollen tissues, some open lesions, and in several places, the skin was chafed. On top of all this, the little girl was suffering from frequent vomiting and diarrhoea.

The mother had stopped breast-feeding. Her milk was being collected with a breast-pump and thrown away. The young woman worked in a Chemistry laboratory and was afraid that her breast milk might be contaminated because of her daily contact with harmful substances. I was able to persuade her to resume breast-feeding since, in my view, possibly contaminated mother’s milk was still better than feeding the child at an early age with powdered milk substitute containing a high proportion of cow’s milk protein and fat. Symptoms of intolerance in the intestinal area had of course already appeared.

Apart from dietary errors, the development of nappy rash is particularly favoured by the wearing of modern disposable nappies. As this area of the body is hermetically sealed off, the skin is no longer able to breathe. In the resultant warm, humid milieu, irritant substances readily develop from the excretions, as well as infections with yeast, streptococci and staphylococci, which lead to skin lesions and painful irritations.

So, contrary to the assurances in the advertising material, anaerobic conditions are prevalent here. According to an old paediatric friend of mine, in earlier times, when children wore textile nappies, symptoms as these were practically unknown.

Thus, as the initial measure, the mother was instructed to go over to re-usable nappies of linen or cotton and to give up putting rubber pants on the child.

Before the SANUM treatment commenced, we undertook a measure involving compresses.

Wet compresses soaked in a highly diluted infusion of Cystus (Dr. Pandalis) were applied to all the affected areas. These were renewed if they dried out. Cystus is used, nowadays as in antiquity, because of its germicidal properties against bacteria, fungi and viruses. The plant’s healing action is due to its polyphenols. Phenolic compounds imitate vitamins, which is why they used to be referred to as Vitamin P, and they generally strengthen the body’s own defences. One positive side-effect is their action in regulating blood pressure and lowering blood-sugar levels.

After the „compress treatment” had been running for about three weeks, mother and child came for another consultation. The baby made a fresh, calm, contented impression. The skin was no longer red, but still rather rough, and scurfy in a few places. There were encouraging signs of healing, the condition was a good 75% improved.

In order to achieve a cleansing of the gut and a good regulation of the immune system, we now started treating according to the following SANUM treatment plan:

- FORTAKEHL 5X drops, in daily alternation with NOTAKEHL 5X drops, 3 times a day 1 drop orally and 1 drop massaged in around the navel, for 20 days.

Following this:

- SANKOMBI 5X drops, twice a day 1 drop orally and 1 drop massaged in around the navel, from Monday to Friday; on Saturdays and Sundays reverting to FORTAKEHL 5X drops.

- PEFRAKEHL 3X ointment, alternating with MUCOKEHL 3X ointment, applied to the genital area and on the affected skin areas.

- SANUKEHL Staph 6X drops, in daily alternation with SANUKEHL Strep 6X drops, 1 drop massaged into the hollow of the elbow twice a day.
Their next visit was four weeks later. In the meantime, the baby had grown somewhat, had a healthy complexion, was lively, cheerful with twinkling eyes and a friendly, smiling demeanour. The skin of the buttocks was as soft as velvet, supple, had good circulation and was smooth and firm. There was no scarring, and the skin had healed cleanly. The mother appeared happy and light-hearted. Since she had been breast-feeding fully, the baby had stopped vomiting and having diarrhoea, and there were no further digestive problems. She seemed totally happy, and yet at the same time, she was shocked to realise how easy it was to make mistakes in the feeding and care of an infant arising out of uncertainty and inexperience, and from failing to pay attention to its natural needs. It is particularly easy to overlook such matters because the mother-child domain in particular has been turned into a lucrative business area with advertising to match.