to 15·0 in. (28-38 cm.) as birth weight increased (Table I and Fig.). The Figure also compares our findings with those of O'Neill (1961) who surveyed 901 white babies born in two maternity hospitals in Sheffield and Barnsley, Yorkshire. Her data are based on the maximum head circumference at age 7 ± 1 days.

Discussion

It is of interest to compare the mean head circumference of Ceylonese newborn babies—boys 13·3, girls 13·1 in. (33·7, 33·2 cm.), with values from elsewhere. The mean head circumference of the newborn English boy is 13·6 in. (34·5 cm.) and of the girl 13·2 in. (33·5 cm.) (Norman, 1963). Measurement of newborn babies of North European ancestry living in Boston, U.S.A., mostly from families in the lower socio-economic brackets, showed a head circumference for males and females of 13·9 (35·2 cm.) and 13·7 in. (34·7 cm.), respectively (Nelson, 1964). These contrasting figures are stimulating anthropometric revelations.

Summary

The mean head circumference measurements of 813 Ceylonese newborn children was 13·2 in. (33·5 cm.). The head circumference was related to birth weight. The mean head circumference of Ceylonese newborn babies is less than that of babies of European ancestry.

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REFERENCES


Erratum

G. W. Chance and B. D. Bower 'Hypoglycaemia and Temporary Hyperglycaemia in Infants of Low Birth Weight for Maturity' (June 1966).

The sentence beginning on page 282, column 1, line 36, should read 'Moreover, the oral route of glucose administration was reported by Creery (1963) as unsatisfactory in raising blood sugar, unless combined with hydrocortisone.'