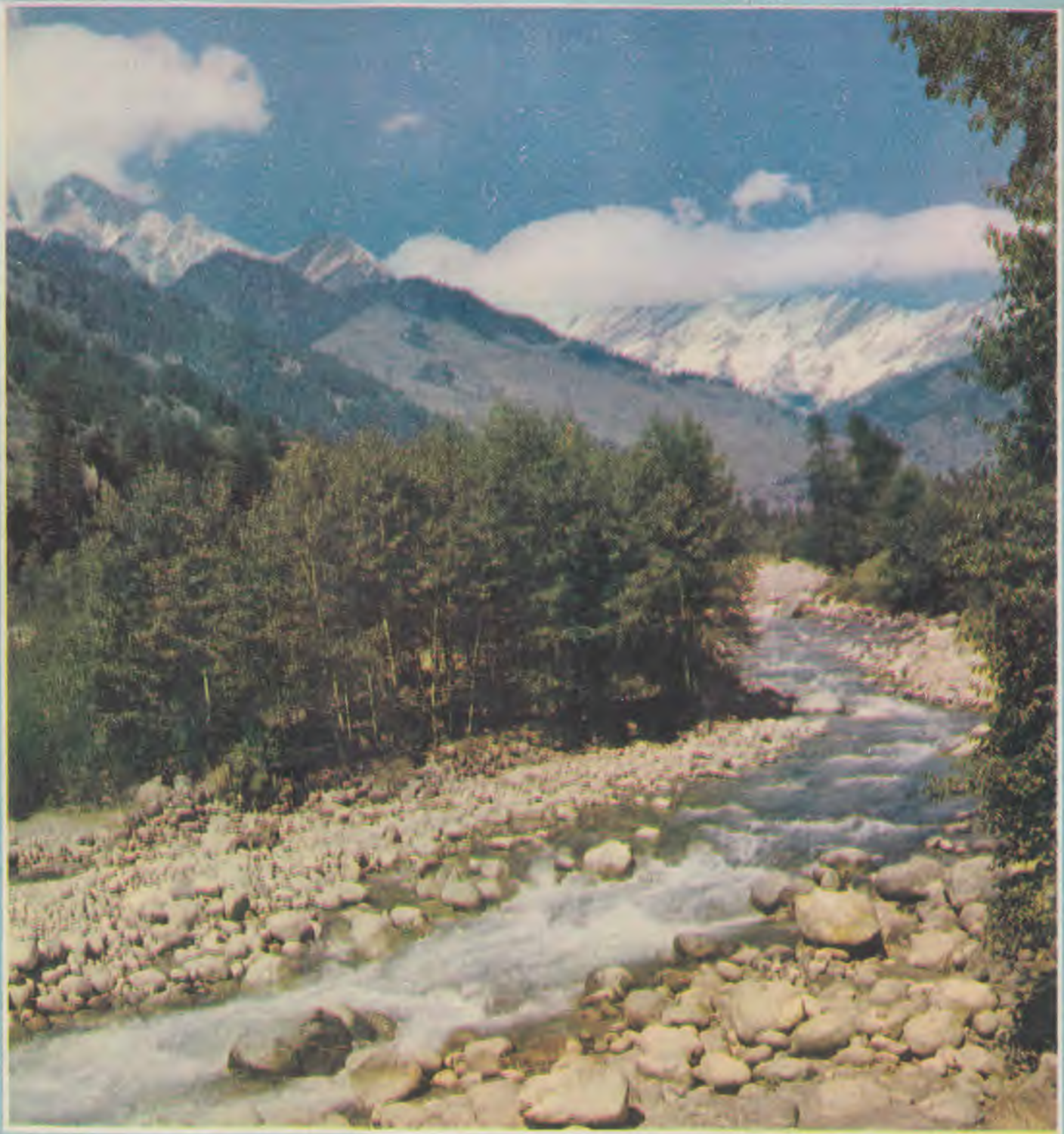


Pacific Union College Library MAR 2 1975

Vol. 52

herald of health

JANUARY 1975





OUR NEW YEAR'S RESOLUTION

Resolutions have a habit of coming in bunches. Certain times or seasons seem more conducive to change. January 1 is such a time.

Some resolutions may sound like this: "I am going to quit smoking," or "I am going to slow down and enjoy life," or "I am going to devote more time to my family." Other such resolutions may also be made, all, no doubt, very good.

Unfortunately, New Year's resolutions are often "easy come, easy go,"—going usually with quite a guilty twinge of the conscience. Good intentions often last firmly until the first crisis comes along and then rationalization sets in. Rationalization such as, "My nerves are so frazzled that if I don't have a smoke I'll chew someone's head off!" or "Things are going badly right now in business so I will have to work harder to make a profit," or "My family will have to get along until I can secure their future."

We are not advocating that our readers should not make any New Year's resolutions. In fact, your editor has also made a resolution that he *will* keep. That resolution is to **SERVE OUR READERS BETTER!** This issue, we trust, already begins to effect that resolve.

If you glance through the magazine, you will note that we have made some additions to this journal. Adding something for the sake of addition is of little value. We realize that this addition will not improve our magazine unless it serves you better.

Starting with January, two new features start. One is a homemakers page called "Around the Home." This column, slanted especially to our lady readers, will discuss the many interests to the homemakers—food, children, the home and family health.

The editor for this feature is a woman, wife and mother of two boys, as well as a nurse

with a B.Sc. in nursing education. We think she is qualified to give suggestions on how to make your home a healthier, happier place.

The other feature is called "Guide to Healthful living." Focused on this page will be a wide range of subject matter dealing with health in the home—accidents, diseases, preventive techniques and symptoms. It is designed to emphasize important medical information in a more condensed form.

It is not intended that the readers of this journal start practising medicine on themselves or their family members with the introduction of this feature, nor with the "Doctor Advises" column. Our purpose is to inform so that you will be on the alert for disease, and to be able to carry out simple home treatments. But above all—we want you to have a knowledge of how to *prevent* disease.

The "Doctor Advises" column receives quite a number of questions in the course of a year. Many of these questions go unanswered for the lack of a return address or a self-addressed, stamp-affixed envelope. We have taken note of the letters and have seen what health problems are on the minds of many people. We plan to have full length articles during the coming year that will cover some of these unanswered medical complaints. For example, we have been getting many letters from young people asking questions about venereal disease. Our February issue will have an article telling plainly some facts on V.D.

Features that we feel are pertinent to you will still continue. "Medicine Today" elicits a number of responses. Even the interesting little column "Clippings and Comments" will still appear.

We also invite the readers to take part in helping us make a better magazine. If you have some constructive suggestions to give us, we will be happy to hear from you. Our sincere wish for you in 1975 is that you all will abound in good health and prosper enough to keep you happy for the whole year.

Sincerely—E.A.H.

Vol. 52. No. 1
January 1975

EDITOR:

E. A. Hetke, M.A.

MEDICAL CONSULTANTS:

R. M. Meher-Homji, B.D.S.

I. R. Bazliel, Ex-Maj., I.M.S.

Elizabeth J. Hiscox, M.D.

G. T. Werner, M.D.

C. A. Ninan, F.I.C.S.

A SEVENTH-DAY ADVENTIST PUBLICATION issued monthly by the ORIENTAL WATCHMAN PUBLISHING HOUSE, P. O. Box 35, Poona 411001, India.

SUBSCRIPTION RATES: 1 yr. Rs. 15.25; 2 yrs. Rs. 29.85; 3 yrs. Rs. 44.00; 5 yrs. Rs. 73.00; Foreign postage, Rs. 4.20 per year.

Foreign: Malaysia, 1 yr. \$19.00; Sri Lanka, 1 yr. Rs. 24.00.

SUBSCRIPTION PAYMENTS: Our representatives are authorized to receive cash or cheques and to issue official receipts for same. For orders sent to publishers, make cheque or money order payable to Oriental Watchman Publishing House, Salisbury Park, Poona 411001.

REGIONAL OFFICES: Goa, Kerala, Karnataka, Pondicherry, Tamil Nadu—13 Cunningham Road, Bangalore 560052; Andhra, Gujarat, Maharashtra, Orissa—16 Maratha Mandir Marg, Bombay 400008; Bihar, Jammu & Kashmir, Delhi, Harayana, Himachal Pradesh, Madhya Pradesh, Punjab, Rajasthan, Uttar Pradesh, West Bengal—11 Hailey Road, New Delhi 110001; Assam and adjacent states—Nongthymmai, Shillong; Bangladesh—P.O. Box 80, Dacca 2; Sri Lanka—7 Alfred House Gardens, Colpetty, Colombo 3; Pakistan—Oriental Watchman Publishing House, 57 Multan Road, Lahore; Burma—Book & Bible House, 68 U Wisara Road, Rangoon.

CHANGE OF ADDRESS: Send new address with wrapper from magazine, or reference number on wrapper to indicate old address.

NON-RECEIPT OF MAGAZINE: Inquire at local post office before informing us. If possible, send magazine wrapper when writing regarding non-receipt.

EXPIRY NOTICE: X on wrapper of magazine indicates subscription has expired.

Owned by the Oriental Watchman Publishing House, Post Box 35, Poona 411001, and printed and published by V. Raju at one for the Oriental Watchman Publishing House Post Box 35, Poona 411001.—3519-74.

PICTURE CREDITS

Cover: Colour Transparency by Vishnu Punjabi 5, 6, 7, 10—V. S. Powar; 14, 22—J. S. Moses; 8—Vidyavrat; 15—N. Ramakrishna; 21—Ellis Rich.

HERALD OF health

ARTICLES

Happily Ever After	Nadina R. Kavynoky, M.D.	4
Smile	W. L. Sharalaya	6
Allergy and Misbehaviour	Harry Swartz, M.D.	8
Postures on Parade		10
Is Your Home Safe?	C. R. Anderson, M.D.	11
Animal or Vegetable—Part I	H. Habenicht, M.D.	14
Hot or Cold!	Alan A. Brown	20
Exploring the Human Brain	Shargia Kasumova	22

FEATURES

Viewpoint	2	Clippings and Comments ...	4
Around the Home	18	Guide to Healthful Living	19
The Doctor Advises	23	For Juniors	25
Medicine Today	27		

Best Wishes For
A Happy
And Prosperous
New Year
to All Our Readers



Want a suit that's both tropical and heavyweight? It isn't here yet, but an American firm has been awarded a patent for "temperature-adaptable fabrics," which automatically increase in thickness and heat retention as the temperature goes down, and becomes thinner and cooler as the mercury goes up.

Worldwide alcohol consumption has increased 20 per cent in the last 10 years, according to H. David Archibald, executive Director of the Addiction Research Foundation of Ontario, Canada.

"It has become evident that governments should take health consequences into account when deciding policy with respect to the sale of this dependence-producing drug," Mr. Archibald says.

He cites mounting evidence that in some countries, where the drinking age has been lowered from 21 to 18, consumption by this age group has risen sharply.

"Alcohol is not only accepted in our culture, it is embedded," he said, "and wherever there is a high level of cultural acceptance there is a relatively low emphasis on enforcement."

Under terms of a proposal by the United States Food and Drug Administration, bakers would be required to double the content of iron in white bread and remove all vitamin D. The FDA has said that there is a widespread iron deficiency anemia in the United States, while Americans are receiving enough vitamin D from milk, baby formulas, cereals, and diet supplements. The American Bakers Association is supporting the changes.

To live happily ever after takes more than "doing what comes naturally." You are on the threshold of a new life, the best life there is—if you make it so. Well-meaning friends have told you that in a good marriage you must give and take; that you must never let the sun go down on your anger; you must be willing to go more than halfway. These observations may be cliché, but they are nevertheless true. They have served a great many couples well for a great many years.

You and your husband-to-be are preparing to create a marriage in which you will give each other deep happiness and satisfaction. Your engagement period is one of great idealism and romantic dreams. Each of you has your best foot forward, and this is as it should be. Each of you wears a rosy halo in the eyes of the other. But remember that both of you are real people, with weaknesses and faults as well as wonderful qualities of loyalty, kindness, and devotion. As you mature and gain strength and wisdom you can become great in the best sense of the word. Even when the pink halo begins to slip a little, be glad that you are a real woman married to a real man, and not a dream princess gazing everlastingly at a prince charming. Life is filled with problems that can be solved only by real people who can work as well as dream.

Actually understanding ourselves

HAPPILY EVER AFTER

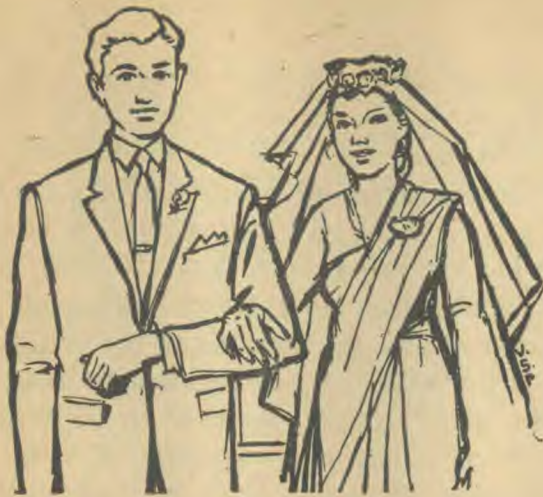
by NADINA R. KAVINOKY, M. D.

and each other includes the role sex plays in a nappy marriage. Love is the prime factor in sexual, personal, and family relationships. Not only is it the deepest need of the human heart but the one thing that will make a marriage succeed and enable you to cope with the difficulties of life.

Men and women differ not only physically but also emotionally. They have different sexual needs and capacity, owing to their different hormones, which work ceaselessly to produce a potential mother and father. It is as hard for a man to understand why a woman needs much affection and caressing in order to respond sexually as it is for a woman to comprehend her husband's natural and physical approach to sex. It is important that you and your husband understand these differences and learn from each other how to fulfil and satisfy your individual needs.

On an average, men are direct and simple souls. They may have difficulty in saying, "I love you," or in making the little complimentary remarks a woman loves to hear, and yet be willing to give their lives for you without question. Their actions, even in unromantic endeavours, express their devotion and loyalty. Try to remember that your husband still loves you even when he is irritable and anxious about the economic situation, or suffering from nervous tension and frustration in his work.

HERALD OF HEALTH, JANUARY 1975



As in all things worth having, a deeply happy love life takes time to perfect.

Any one of these will kill his romantic mood for the moment. Any one of them may make vigorous physical activity more necessary to him than listening to music or even making love to you.

Women are much more complex, more adaptable, more considerate, and more tactful than men are. They are so intuitively aware of undercurrents, that to men they often appear devious. These qualities are all necessary to motherhood. Women's emotions as well as their hormones are geared to their maternal function. As a physical result, their sex interest, desire, and capacity to respond vary with the time of their menstrual cycle.

In a happy marriage the process of adapting to each other and of mutually adjusting will amalgamate these varying qualities of man and woman. The wife will develop more strength and stability, the husband more sensitivity and consideration, and they will tend to react and respond in a more similar fashion in mind, spirit, and body. This can only come as a result of sincere attempts to understand each other and a willingness to talk things over. When you have both learned to discuss, not argue; to bring things out into the open, not shut doubts or misunderstandings deep inside—you are over the hump! Your reward will be devoted love; a most happy companionship, and a feeling of

complete sexual, emotional, and spiritual fulfilment.

As short a time as fifty years ago it was considered not quite nice for a bride to know anything whatever of the intimate marriage relation. If a wife admitted to enjoying physical relations with her husband, she was considered immodest and hardly a lady! Although now a man may still want his wife to be innocent, he certainly does not want her ignorant, and therefore frightened and unresponsive.

Qualified gynaecologists are readily available, and with their help and instruction the bride of today can easily learn to create an original pattern of a happy marriage. Fumbling along by the old trial-and-error method is certainly inappropriate as a means of perfecting the most important relationship in life.

In addition to consulting your physician, take time to read together some of the new books on suggestions that will help you. Many of them are published in the small, inexpensive editions. When you are going into unfamiliar territory a dependable map is a handy thing to have, it will save you unnecessary detours and disappointments.

People who love each other can make satisfactory adjustments to differences arising from early conditioning and individual attitudes regarding sex, children, in-laws,

money, work, play, and friends. It is simply a matter of working things out **together**, neither one demanding too much. No two people see a situation in exactly the same way. There is usually a good reason for the attitude expressed, and each of you should make a sincere attempt to understand the other's point of view. Discuss the point at issue in a friendly way, and you will learn that a common ground can be found.

To every inexperienced bride the thought of sex is both exciting and frightening. She is afraid of pain, afraid of immediate pregnancy, afraid of her own inadequacy, and afraid her husband will demand more of her than she can give. All these fears are actually groundless. Given the will, the desire, and the understanding, she can work out everything with a minimum of difficulty.

Your way of thinking must be changed, as is your way of life. Modesty and a certain amount of reserve are charming in a young girl, but a happy, natural response to love-making is the reward and crown of the emotionally adult wife. A happy sex relationship is not gained by reading a book or a hundred books. Remember that books are only charts to guide you, and that every married couple will use the suggestions in them in a slightly different way.

Even though men and women are different physically, each is properly prepared to fulfil his function. Each sex is equally important; neither man nor woman is complete without the other. In your sex life as in all other phases of your close personal relationship with the man you love, time is your greatest ally. As Rome was not built in a day, so a perfect sex relationship can hardly emerge from your wedding night. In all things worth having, a deeply happy love life takes time to perfect. Time, patience, understanding, and, above all, love will work wonders. With them you can build your house upon a rock, the house that will shelter you for the rest of your lives. ***

No one needs a smile so much as he who has none left.

British psychiatrist, the way a person smiles reveals much about his emotions.

Doctor Ewan Grant of Birmingham University's department of psychiatry has been studying how humans communicate without words. He has listed more than 100 "face to face" signals, such as a twitch of the eyebrows, a frown, or the lowering of the eyelids. But it is the smile, he believes, that probably tells the most. It may be easy to lie with words, he says, but it is very difficult to disguise the true emotions that come through in non-verbal signals such as smiles. For example, he emphasizes that the mouth is frequently used to express emotions—no matter what words are coming out—and it is very difficult to disguise them. Doctor Grant expects that his research will help psychiatrists see how their patients react to certain questions about their lives—not just in what they say, which might be disguised, but through their non-verbal signals. But you don't have to be a psychiatrist to benefit from these studies, he says. Husbands and boyfriends should also find his work useful, Doctor Grant believes. He puts it this way: "To find out if she really means it when she says, 'Yes, dar-



SMILE

by WILLIAM L. SHARALAYA

"Someone gave me a smile one day,
I tried my best to give it away
To anyone I chanced to meet,
As I was walking down the street.
When I got home with that one smile,
I had enough to reach a mile.
The more I smiled at people
The more they smiled at me;
Now I collect bright smiles each day
From everyone I see."

—Anon.

Your face is truly a mirror of your emotions. Slight changes here and there, around the eyes, around the mouth, and a look of anger is replaced by a look of happiness; a glare changes to a smile. And there are many different kinds of smiles. According to a



ling, that would be lovely,' don't listen to the words—watch her lips. That is where the truth will lie.”

The psychiatrist has listed five basic types of smiles. One is the upper, or “How do you do?” smile, which is seen briefly in formal meetings and when family members greet one another. Only the upper teeth are uncovered and the mouth is generally just slightly open.

The second type is the simple or non-social smile, which occurs when a person is happy by himself. The lips curve back and up and remain together so there is no display of teeth. Another is the lip-in smile, a coy version of the upper smile, in which the lower lip is drawn in between the teeth. This one, Doctor Grant says, implies that the smiler in some way feels subordinate to the person he or she is meeting.

A fourth version is the broad smile, and this is the one you really want to see, he explains. That is the smile which occurs in situations of pleasurable excitement. The mouth is open, the lips curled back, and both upper and lower teeth can be seen.

But beware of the fifth type, which he terms the oblong smile. This one occurs when the smiler pretends he or she is enjoying something when the opposite is true.

Imagine a society of people where everyone smiled. The smile would be the best testimonial of the good work of the society. What mighty things are accomplished by a bright, sincere smile. It is a lifter and may be a pretty good indicator of a person's character. Preach the gospel of smiling; be a messenger of good cheer; scatter sunshine.

Smile awhile and rest yourself; the pause for a smile is truly the “pause that refreshes.” It has been said that it takes sixty-four muscles to frown and only thirteen to smile. Why overwork yourself?

When you dress for the day, remember to put on a smile. It is the most inexpensive thing that you can wear, yet the most rewarding, and without it you are not properly attired.

A smile costs nothing, but it creates much. It enriches those who receive it without taking from those who give it. It happens in a flash, but sometimes the memory of it lasts a long time. No one is so rich that he can get along without a smile; no one so poor that he cannot give smiles.

A smile creates happiness in the home, fosters good will in business, and is a counter-sign of friends. A smile gives rest to the weary, light to the discouraged, sunshine to the sad, and is one of nature's best antidotes for trouble. Yet a smile cannot be bought, begged, borrowed, or stolen. It is something that is of no earthly good unless it is given away. If one of your friends seems too tired to give you a smile, then give him one of yours.

Fame came overnight to a doctor who gave a radio address. Here are some of the things he said. “In the textbooks there are a thousand different diseases this human clay is heir to. There is one disease that is as common as the other nine hundred and ninety-nine put together. At least fifty per cent of all people going to doctors are sick from this one disease. Many doctors put the figure even higher—seventy-six per cent. The name is psychosomatic illness. The things that bring on psychosomatic illness are cares, difficulties, and troubles.”

This doctor further states that cares, difficulties, and troubles come from uncontrolled and undisciplined thoughts and emotions. He then suggests a statement which will prevent this kind of illness. We are advised to dwell on this statement and to say it over and over to ourselves. It is this: “I am going to make my attitude and my thinking as cheerful and as pleasant as possible.”

Implement your every thought with a smile. Smile, smile, and keep on smiling! You will be pleasantly surprised to find that your thinking will drop its heaviness and become uplifted and positive. The world is like a mirror reflecting what you do. If your face is smiling, the world smiles right back at you.***

ALLERGY AND MISBEHAVIOUR

by HARRY SWARTZ, M.D.



Is your child a thumb-sucker, a bed-wetter, a whiner, a crier? Does he stammer, stutter, go into violent temper tantrums? Is he unmanageable in school, noisy, defiant, unable to learn? Does he withdraw from his group, play the lone wolf, dislike others of his own age? If so, his problem may be an allergy.

Parents are often accused to being the primary cause of behaviour problems in their children. And, largely, parents have been willing to accept this judgment. For many, parenthood has become a state of apprehension in which spontaneity has been replaced by caution and anxiety, a tightrope walk with a baby-care book in one hand and a child-development guide in the other.

There is no question that the total development of a child is greatly influenced by the emotional atmosphere generated in the home by the parents. Love, security, tenderness, affection, and the feeling of togetherness between parents are positive in-

fluences that foster his well-being. Lack of these may hamper his development. But this emotional atmosphere does not constitute the entire world in which the child lives and grows. There are obvious, yet often over-looked, factors of environment, such as things eaten, inhaled, touched, and worn, and the climatic factors of heat, cold, light, and even atmospheric pressure—to all of these the child is physically reacting every moment of his life. These physical factors also act upon his maturing personality, and allergic reactions to them may sometimes result in behaviour problems.

A "problem child" reclaimed

Take David, for instance. He was a bright child, but had fits and starts and could not learn to read. He was, in turn, wild and unmanageable or withdrawn and unresponsive. When David was eight the school informed the parents that it could no longer handle him. A child analyst was con-

sulted, and subsequently the whole family underwent counselling for several years, but no significant change occurred. Incidentally, during this period David developed hives. For this reason he was seen by an allergist, who found the boy was allergic to a number of foods, pollens, and dust. With proper treatment the hives disappeared. But much to the surprise and happiness of all, David's behaviour dramatically changed. It wasn't long before he was acting in quite an acceptable manner. To prove this was not simply coincidence, for brief periods he was exposed to the foods and inhalents to which he was allergic. During these times his former behaviour resurfaced; back on a regimen free of these allergenic materials his behaviour returned to normal. Today he is a top student, an athlete, and is on his way to a happy and useful life.

Mary had a similar problem. She was inattentive in the schoolroom and frequently disturbed her group with whispering. Reprimands only made the situation worse. At home she was withdrawn, spending most of her time alone in her room. She had nightmares and wet her bed. After a year of analysis, the family was advised that Mary should go to a boarding school where she would receive a great deal of individual attention. Since her preschool physical examination revealed that Mary had frequent colds, an investigation was made, and Mary was found to be allergic to many foods, dust, and bacteria. Treatment was started and continued for several months before the fall term. She improved remarkably. Not only did her "colds" disappear but she became outgoing and cheerful, she could concentrate on her studies, and the nightmares and bedwetting disappeared. She remained with her family and became a perfectly normal girl in all respects.

John had been a typical boy in every way until he was 12 years old. Then he began to have periods of uncontrollable rage and excitement, during which he ran about the house smashing whatever was in his way. Stuporous sleep resembling coma followed these outbursts. Gradually the episodes increased in frequency, severity, and duration, until the family could no longer cope with them. When he was 15 John was sent to a psychiatrist with the express purpose of his being hospitalized in a mental institution, but complete physical and neurological examination could not account for his unusual be-

haviour. It was learned, however, that in babyhood he had eczema and at 11 he had developed long-lasting hay fever and asthma.

Because of these allergies and his epileptic-like behaviour, John was referred by his psychiatrist to an allergist who had done a good deal of work on the relationship between epilepsy and allergy. The allergist found that John was very sensitive to oats and wheat and less sensitive to cat dander, dust, feathers, and pollen. With proper treatment, including a diet without oats and wheat and with injections against the offending inhalants, the attacks of rage, agitation, and uncontrollable violence disappeared. He became cooperative and integrated with family, friends, and his school group. The attacks would recur, however, if he ate the offending grains again. Today John is not a mental patient, but a useful citizen.

Family relationship may suffer

Allergy may be one of the direct or indirect causes of behaviour problems. Indirectly it may harm interpersonal relationships. For example, the child who suffers from typical allergic symptoms such as eczema or asthma is a chronically ill child. The chronic or recurrent nature of the disease has a profound effect on the relationship between him and his parents, and often on the relationship between his parents. His dependence upon his parents is much greater than ordinary. And the over-all concern and attention given him by his parents are highly concentrated. Out of such an intense relationship, existing problems such as anxiety, rejection, and competitiveness may be exaggerated and build toward problem behaviour in the child.

Two-year-old Rose developed a case of eczema that spread all over her body, and itching during the night became intolerable. Her skin was covered with a rash running, bleeding, and scabbing. Her parents were greatly concerned, and throughout the night Rose was bathed, powdered, and spread with lotions, creams, and ointments. Her hands were tied to prevent scratching. Medicines were forced down her throat. But the skin condition did not improve. The parents finally arranged a nightly vigil—father one night, mother, the next. Incredible as this may seem, this routine continued for several years. The wearying anxiety, physical

To page 26

Listen, my children, and let me talk
 Of the dreadful ways that ladies walk;
 Look, while we show you a style parade
 Of ladies doing a promenade.
 Just to illustrate, all in fun
 How your wauking should NOT be done
 Horrible samples will soon appear
 Who by posture will make it clear
 Just what happens to women fair
 Who do not know or who do not care
 How they look when they take the air.

Stop. Look. Listen, and tremble, too.
 Do these walkers resemble YOU?



SAMANTHA STOOP

DOWN the street with a sort of droop,
 Here comes trotting Samantha Stoop.
 (Oh, how study can ruin looks!)
 Shoulders stooping and head out-thrust.
 Laugh if you will and weep if you must,
 Wherever she goes, in thought immersed,
 Her legs go last and her nose goes first!



POSTURES ON PARADE



SYLVIA SLOUCH

FIRST with a slinky backward crouch
 Enters Debutante Sylvia Slouch.
 Up with hips and down with seat,
 Here is Sylvia, all complete,
 Saggy shoulders and sunken chest,
 Poor old diaphragm quite depressed,
 Who is Sylvia—she's a sight!

SALLY STIFF

PARADES, of course, are lots of fun
 But what girl wishes to walk like one?
 Yet Sallie Stiff, the crazy nut,
 Has got a military strut.
 With shoulders stiff and backbone rigid,
 She has a gait that's simple frigid,
 If the army saw her, they'd enlist her.

HORTENSE HUMP

HERE'S a dowager, sleek and plump,
 Cursed with a dowager's famous hump.
 Lots of dowagers get like that
 When they're lazy, and rich and fat,
 Is it something that she ate
 Or because she won't stand straight?
 Humps belong on camels, madam.
 Ladies never should have had 'em!



CONCLUSION

NOW that we've tactfully put on the spot,
 Ladies who walk as they plainly should not,
 If our review is to do any good, we'll now
 Show someone who walks as she SHOULD!
 So in conclusion we're pleased to present,
 Miss Polly Posture, a maid heaven-sent,
 Easy and graceful, natural and fine,
 Showing respect for her chest and her spine.
 All of her inwards in perfect alignment,
 Here is the essence of grace and refinement.
 Do you observe, as she comes into view,
 She walks exactly, precisely like you?
 Then let us add, according to plan,
 "Not as you Do, dearies,"—"just as you CAN!"



SUSIE SWAYBACK

NEXT we beg to introduce
 Susie Swayback, on the loose.
 Sue is full of curves and graces,
 But she curves in frightful places.
 See the hollow in her spine.
 Note the most distressing line
 From her chin down to her shoesies,
 Ah, the streets are full of Susies!

IS YOUR HOME SAFE?

by CLIFFORD R. ANDERSON, M.D.

Most of us like to think of our home as our castle, where all outside dangers can be forgotten. But the enemy is not always outside the walls, by any means. Even in your own home danger may be lurking in some unsuspected corner or doorway. It is a startling fact that more serious accidents happen in and around the home than in any other place. And yet, most of these accidents could easily be prevented by a little forethought and ordinary common sense. Just a moment of carelessness, and some loved one may be injured for life. It is well for us to stop and think about this frequently.

Dangerous Floors

Probably the most dangerous place in your home is the floor. Misplaced toys, furniture out of place, slippery floors, small mats and throw rugs—these are all common causes of trouble, especially to those in the old age group. Mrs. Singh was a fine looking woman of fifty-eight years. She took great pride in her home. Her floors were always highly polished, and every room constantly reflected her good taste. But she did not know there was danger lurking on that highly polished floor with its pretty mats and furnishings.

One day while entertaining friends at dinner she tripped on a harmless looking throw rug. She fell to the floor with a crash. Then she tried to get

up again, she found she could not stand. She was in very severe pain, and fell to the floor again. Her left foot was turned outward, and her leg was two inches shorter than the other. She had fractured her hip. Someone called an ambulance, and she was taken straight to hospital. The X rays showed that she had a bad fracture through the neck of the femur, the large bone in the thigh. She was placed on a special fracture bed, and traction was applied to her leg for several days. When she had recovered from the shock of the fall, she was prepared for surgery. The anaesthetist passed a needle into one of her arm veins, and she was put to sleep by a simple intravenous anaesthetic. While she was asleep on the operating table the orthopaedic surgeon brought the bone fragments together and fastened them with a special kind of metal nail.

Within a few weeks she was able to hobble around again, and all seemed to be going well. But unfortunately the bone fragments did not grow back and unite properly. The surgeon had to remove the pin and make a false joint. Now she has a shortened leg, and she suffers from frequent pain in the thigh—all of which could easily have been avoided. *Small mats and throw rugs are dangerous, especially to those who are older in years. A fractured hip is a costly accident, and no small rug is worth such a risk. Better hang such decorations up on the wall, where people cannot trip over them!*

But small mats are not the only cause of bad fractures. Another common cause of trouble results from climbing up on rickety chairs and tables and wobbly boxes to fit curtains and replace electric light bulbs. Every home should have a sturdy step-ladder for such purpose. Mr. Gandhi was one of those men who liked to fix things around the home. He was very capable with tools and he loved to make his own repairs. This was his hobby. But, unfortunately, he was always in such a hurry that he never took time to be sure that his ladder was well placed. Once while he was climbing up to fix a drainpipe his ladder suddenly gave way, and he fell to the ground with a thud. There was a sharp cracking sound as his foot hit the ground.

For a moment he lay there in a daze. When he came to, he noticed that his leg was bleeding profusely, and he was suffering from intense pain. The bones of his right leg were fractured in several

places, and the fragments of bone were sticking through the skin. He had what doctors speak of as a "compound comminuted fracture" of the leg. This is a very serious condition, for when this occurs it means that the broken ends of the bones have now been infected with germs from the surface of the skin and also from the person's clothing. The infection interferes with proper healing, and the patient is likely to be an invalid for a long time.

In Mr. Gandhi's case the doctors did their best to sterilize the broken ends of the bones before pulling them back into alignment. But the damage was done. The poor man had to spend a long time in hospital, trying to recover not only from the fracture, but also from the bone infection as well. He now had what is called osteomyelitis. This meant that he had an open wound in his leg that continued to drain for over a year. And all that from one moment of carelessness! He did not take time to see that his ladder was placed on a firm foundation. Carelessness can bring so much disease and unhappiness to us all.

HELP FOR UNEMPLOYED ANTIBODIES

Of the estimated 20 million people in the world who have leprosy—an infectious disease that can create painful lesions in the skin, nerves, and eyes—some 8 million are afflicted with a type that often responds poorly to chemotherapy. For these victims of lepromatous leprosy, doctors are monitoring an interesting response of the body's immune system: Although the white blood cells in these patients are quick to produce antibodies to fight the infection, the attacks are not effective because the leprosy bacteria have learned to "hide" in certain cells. The result of this hide-and-seek internal guerrilla warfare is that the body is left with a large number of inactive antibodies searching for bacteria to do in, but with no way of getting to them. Now, however, a way may have been found to get the bacteria out of hiding. Soo Duk Lim, M.D., working at the University of Seoul, noticed that in resistant leprosy patients there is a surplus of one type of white blood cell, B lymphocytes, and a deficit of another type, T lymphocytes. By repeatedly injecting these patients with T lymphocytes, Dr. Lim found that the leprosy bacteria could be induced out of their protective cells to be destroyed by the antibodies. Dr. Lim, who is now at New York's Memorial Sloan-Kettering Hospital, has treated 14 patients with the T-cell method, and in every case the leprosy lesions disappeared.

—Today's Health

Beware of the Kitchen Stove!

The kitchen is another place in which accidents all too frequently occur. It is so easy to slip on a wet or greasy floor. The results of such carelessness may often be tragic, especially to those who are older in years. If anything is spilled on the kitchen or bathroom floor, it is best to wipe it up immediately, before someone has broken a hip or dislocated a shoulder. And here's another tip from a doctor who has seen the awful results of another type of carelessness: *Don't allow pot handles to stick out over the front or side of the stove.* This is a very common cause of scalds and burns. Make it a habit to turn all pot handles *away* from the edge of the stove. This will help to prevent them from being accidentally knocked over by careless adults or pulled down by inquisitive children.

Nirmala was a lovely looking girl of eighteen. She had an intelligent face, but she could not turn her head. When she wanted to look to one side, she was forced to turn her whole body. Her neck and lower face were bound down to her chest by thick scar tissue, a horrible mark that she had carried since babyhood.

She was only a toddler when it happened. Her mother was busy cooking, and little Nirmala, like any child, reached up and pulled down a pan of boiling water over herself. It was a miracle that

she even managed to survive. Many a time she had wished she could die. Other children called her ugly names. How heartless some children and also some adults can be! Poor Nirmala felt she was utterly alone in the world. Her disability was crushing her. For many years she had felt angry and frustrated with life. Her whole personality was distorted by that ugly burn. Why did this have to happen to her?

Plastic Surgery Removes the Burn Scar

Fortunately, some good friend advised her to go to the surgical clinic to see whether anything could be done to help her. Yes, she could be helped. She was placed under the care of a good plastic surgeon. After several operations the horrible scar was completely removed, and the ugly spot was covered with new skin which the surgeon had taken from other parts of her body. Her neck was no longer bound down. She could now turn her head freely from side to side. With the change in her appearance her whole personality began to improve. Thanks to modern surgery and the sensible advice of her friend, she should now look forward to a completely normal life. But suffering and expense could have been avoided, if only that mother had taken care to keep the handle of that saucepan out of her poor baby's reach!

Burns are a very frequent cause of serious injury among children. Far too many of these cases die. And yet almost all of these accidents can be prevented, if only we adults would take a little more time and care.

Teach Your Child to Swim!

Drowning is another cause of death among young children. *Older children should be taught to swim* by some good swimming instructor as early as possible. But swimming does not come naturally to human babies like it does to ducks. We must *learn* to swim. For this reason young children should be carefully supervised while at play, especially when they are near rivers, pools and ponds. Canals should be properly fenced for the protection of young children.

Several years ago the three-year-old son of a doctor friend of mine was drowned in a large open ditch at the foot of his father's garden. Apparently the little lad had slipped in and could not get out again. Recently I read a heart-breaking letter from a father, pleading with the state authorities to put

a fence around a state owned canal. "Do it for the sake of my boy Joe," he pleaded. Twenty-three other children had already been drowned in that same canal. Poor little Joe was the twenty-fourth victim. There ought to be a law that would force all city and state authorities to fence in deep canals. The life of one child is far too important, especially when that child is your own.

Here are a few suggestions about safety in your home. Keep all passageways clear of furniture and unwanted objects. Don't leave boxes and buckets on stairs. Remember that the floor is the most dangerous place in your home. Keep it clean and clear of grease and water. Don't forget that small mats and rugs are dangerous, especially to older folks.

Babies and young children instinctively put everything into their mouths. Then make sure that their toys are kept as clean as possible. Take care that there is no *lead* in the paint that is used on the baby's furniture and toys, or on anything else that he may want to put into his mouth. Keep small objects such as pins out of his reach.

Children are always eager to examine the world around them. They will poke their fingers into everything they see. For this reason it is wise to keep all electric sockets well covered. Some children have died from electric shock after putting their fingers into an unused socket. Others have lost their fingers and hands by coming into contact with electric fans, sewing machines, razor blades, carving knives and various tools. Any of these can become a danger spot in your home. Electric fans and sharp knives should be placed well out of reach. Cupboards that contain medicines and poisons should be kept securely locked. It does not pay to take any chances.

Children are naturally inquisitive. They love to climb. They want to see the world as we adults view it. For this reason it is well to encourage them to climb in places where it is safe for them to do so. Lift up young children and hold them high enough to see what is going on. This will build up their confidence in you and in the world around them. It will help to make their home an agreeable place in which to grow up. They will be less tempted to pull things down on themselves, if you show them what is up above.

Such good precautions will help to remove the worry and anxiety from your own mind. You will be doing all you can to make your home a safe and happy place, where all the family can live together in peace, and enjoy real health and happiness. ***



ANIMAL OR VEGETA

The Vege

by HAROLD HABENICHT, M.D.

Frequently at professional and scientific lunches or banquets, colleagues and friends will ask, "Why don't you eat meat? Shoppers at the market compare the high cost of food as they wait in line to buy, and in these days of high meat prices, not infrequently one is questioned, "What's the reason you don't eat meat?"

Today, more than ever before, we can reply with scientific reasons. As you keep several of these facts and figures in mind, you will find opportunity to share them with others.

Meat and Cardiovascular Disease

In America, more than a million people suffer heart attacks each year. Six hundred thousand of them die. Twenty-five per cent of these succumb within three hours of the onset of symptoms.

Medical authorities are finding more and more scientific evidence linking heart attacks to diet, especially diets high in saturated fats and cholesterol.

The Farmingham (Massachusetts) studies on more than five thousand persons showed that a person with blood cholesterol of greater than 260 mg. per cent had four times the probability of a

heart attack as the person whose blood cholesterol stayed below 200 mg. per cent.

Dr. Ancel Keyes (University of Minnesota) travelled to many geographic areas doing research on dietary-fat intake and the incidence of heart disease. He found that in Japan 10 per cent of total calories in the diet came from fat. Examination of death certificates and autopsy material showed virtually no arteriosclerotic heart disease. A study of the Bantu tribe in Africa showed essentially the same findings, with 15 per cent of their calories coming from fat.

One of the most interesting aspects of Dr. Keyes's studies was a comparison study of Japanese families who had moved to Hawaii and Los Angeles. While in Japan, these families had blood cholesterols of 120 mg. per cent with 13 per cent of their calories coming from fat. In Hawaii, their average cholesterol was 183 mg. per cent, and the fat consumption had risen to 32 per cent of the total calories. The Los Angeles members of these Japanese families had blood cholesterols averaging 213 mg. per cent, and the fat intake provided 45 per cent of their total calories (the typical American figure). The study group found that heart attacks and cardio-

LE

an Advantage



Part I

vascular deaths increased proportionately to the cholesterol increase.

During the Korean war some interesting observations were made by studying Korean soldiers when these men were fed by the Korean mess kitchens. Seven per cent of their calories came from fat, and their blood cholesterols were very low. Within a few weeks after the American Army began to feed them (with almost 50 per cent of calories coming from fat) a marked rise in cholesterol was observed.

These and numerous other studies caused leading scientists to issue statements such as the following: "With few exceptions (Trappist monks, Seventh-day Adventists, low-income Negroes), virtually all strata of our population . . . ingest a habitual diet that is potentially atherogenic, i.e., a diet high in total fats, total calories, saturated fats and cholesterol. The prevention of coronary heart disease is not a vaccine but chiefly a change in living habits."

"The saturated fat content of the diet must be reduced. The principle reaction of fat in the diet must come from two main food groups that contribute most of the saturated fat, i.e., dairy products

and meats."

The American Heart Association states: "Studies have indicated that many people who show no evidence of heart disease are increasing their risk of heart attack by following a diet that is high in saturated fat and cholesterol. The typical American diet is rich in eggs, which are high in cholesterol, and meats, butter, cream and whole milk, which are high in animal (saturated) fats. These foods tend to raise the level of cholesterol in the blood, and a high blood cholesterol level contributes to the development of arteriosclerosis."

The U.S. Government has now created the Inter-Society Commission for Heart Disease Resources. This group suggests that:

1. Caloric intake from saturated fat be less than 10 per cent of total calories.
2. Egg yolk, bacon, lard, and suet be avoided.
3. Cholesterol intake be less than 300 mg. a day.
4. High-quality vegetable-protein product development be encouraged.

It is never too late to make a change for the better. Studies on human volunteers at Loma Linda

University showed that blood cholesterol could be lowered 25 per cent in just seventeen days by eliminating meat and animal products.

The Risk of Cancer

Consider the following facts:

344,000 Americans died of cancer in 1972 (about 950 a day, or one every 1.6 minutes)

665,000 new cases diagnosed

1,025,000 under medical treatment

53,000,000 Americans now living will develop cancer.

In 1930 there were 200 cancer deaths per 100,000 population. By 1985 there will be 400 deaths per 100,000 population. Leukaemia has increased 15 per cent since 1950, to more than 40,000 deaths per year.

One hundred million chickens die of lymphomatosis and leukaemia per year. Approximately 71,500 cattle in 1967 had malignant eye tumours; when discovered, only the head was condemned; the carcass could be sold for food.

In 1910, Francis Rous published a report of his work in transmitting malignant chicken tumours



MALNUTRITION SENTENCES THE UNBORN

The malnutrition of the mother directly affects the brain development of the foetus, so that the child is sentenced in advance to a lifetime of considerably diminished intellectual level. There is no way the child can catch up, **even if properly nourished after birth.**

Such are the conclusions that are developing after years of research by many specialists in brain development, reports Albert Rosenfeld, in the March 23, 1974 issue of *Saturday Review*.

Careful studies with rats indicate an even more fearful consequence of malnutrition by the mother. "When an underfed female rat was mated with a well-fed male, the resulting newborns showed distinct signs of brain malnutrition—as expected—even though they were put on an adequate diet starting at birth. The surprise came when the offspring, the second generation of females, which had been well nourished throughout their lives and during their own pregnancies, nevertheless gave birth to newborns with brain growth likewise retarded. The mothers were apparently unable to develop a placenta adequate to the proper nutrition of the foetus." The results of maternal malnutrition reaches into the third generation!

—Review

to healthy chickens by cell-free extract obtained from the tumour. (For this he was given a Nobel Prize in 1966.)

Dr. J. J. Bittner in 1936 showed how mice with breast cancer transmitted cancer to their offspring through the milk.

In the May, 1967, *Cancer Bulletin*, researcher Leon Dmochowski reported finding viruslike particles in lymph nodes of twenty-eight patients with leukaemia and lymphomas. In the same issue, R. A. Dutcher reported finding viruslike particles in both the mammary glands and the milk of leukaemic cattle.

The gap between animal and human cancer continues to close. Dr. Frank Rauscher of the National Institute reported in *Medical World News* of April 19, 1968, that sixty viruses are now known to cause virtually all kinds of cancer in every major group of animals. Of the two viruses that can be detected in human cancer, one is identical with the virus that causes leukaemia in animals.

Dr. J. T. Grace injected human leukaemia blood into small animals and these developed not only leukaemia but other kinds of cancer as well. As far back as 1956, Dr. Wendell Stanley won a Nobel Prize for his work in human cancers. His research led him to believe that viruses cause most human cancers. The June 18, 1956, issue of *Newsweek* quoted him as saying: "It is known that viruses can lurk in the human body for years, even a lifetime; some cause trouble and some do not . . . in some cases the virus might become active, through circumstances such as aging, dietary indiscretions, hormonal imbalance, chemical radiation, or a combination of stresses, and malignancies may follow."

These viruses must enter the body in some manner. One of the most likely possibilities is through meat eating.

In 1964 Lijinsky and Shubik reported in *Science* that a charcoal-broiled T-bone steak (2.2 pounds) has eight microgramme/kg of benzopyrene. This is one of the carcinogenic (cancer-producing) substances also found in cigarette smoke. *Smoking and Health* reported that as little as two microgrammes cause cancer when injected under the skin of experimental animals.

Zoonoses

Zoonoses are diseases of animals that can be transmitted to man. Some 150 of these diseases are recognized in medical-veterinary circles. A partial list will suffice to illustrate the extent of the problem.

Bacterial Diseases

anthrax, brucellosis, salmonella, streptococcosis, tuberculosis, tularemia, leptospirosis, melioidosis.

Parasitic Diseases

Protozoa—toxoplasmosis

Metazoa—flukes (Trematodes), lung, liver, and intestinal flukes from eating raw fish and crayfish; tape worms (Cestodes), from raw pork, beef, or fish.

Round worms (Nematodes), trichinosis, best known from raw pork, but also giant kidney worm, Angiostrongyliasis and Gnathostomiasis from raw fish and shrimp. Rickettsial—viral and fungal diseases could also be included in a more complete list.

after removing infected organs and tissues, and 3,227,605 parts of swine were passed after removing the disease portions.

Pollution

DDT levels of four to five parts per million in fish and meat are allowed for interstate commerce. In Lake Michigan more than a million salmon (Coho) have perished from DDT contamination. Recently the Michigan Department of Agriculture seized more than 250 tons of canned salmon when inspection showed dangerously high DDT levels.

Mercury poisoning has become a real threat to fish and shellfish eaters. The tragedy of Minamata Bay, Japan, occurring between 1953 and 1970, is an extreme example. Here, forty-six died a horrible death and scores more were permanently crippled or handicapped physically, mentally, or emotionally as a result of eating large quantities of mercury-contaminated fish and shellfish containing an estimated 10 to 20 parts per million of methyl mercury chloride.

The U.S. Food and Drug Administration has established the safe mercury level for food products as below 0.5 parts per million (ppm). In 1970 fish in Lake Erie had mercury up to 10 ppm. Thirty-five to 50 per cent of fish caught in the Sacramento and San Joaquin rivers (California) had levels over 0.5 ppm. The State health department warned Californians to limit fish consumption to one meal per week.

In 1971, over 12 million cans of tuna were found to contain mercury above the 0.5 ppm level and were removed from the market. That same year about 4 million pounds of swordfish were taken off the market.

Other things to be considered are hormones, tranquilizers, and antibiotics, which are administered to animals by man; radioactive substances, which animals ingest with their food; and sodium nitrate, sodium nitrite, and sodium sulfite, which are used as antispoilage agents in many prepared meats. These agents, in addition to causing nausea and vomiting, headache and flushing, and even cardiovascular collapse, have been shown to be carcinogenic.

So far we have focused our attention exclusively on the diseases and hazards avoided by refraining from the use of flesh foods. In the future we will consider the positive benefits to be obtained from following a vegetarian dietary regimen. ***

Increase in Animal Disease

In 1968, in the U.S.A., 763 swine herds with 99,310 animals were destroyed (28,000 in Georgia alone) because of hog-cholera outbreaks. In 1967 in a two-month period, 280,000 cattle, sheep, and swine were destroyed in Great Britain because of an outbreak of hoof-and-mouth disease. Ten per cent of all farm animals die each year because of disease or parasitism. The most recent *Year Book of Agriculture* devoted to animal diseases (1956) gives figures for animals dying per year:

- 1.5 million cattle
- 2.5 million calves
- 7.5 million sheep and lambs
- 40.5 million hogs and pigs
- 235.0 million chickens
- 7.2 million turkeys.

Many, when found ill, are quickly sent to market, where overworked veterinary meat inspectors undoubtedly miss many, but where during the same years the following were rejected. (These figures represent only federally inspected meat.)

- 99,000 hogs and 1.6 million parts of hogs' carcasses
- 65,000 sheep
- 120,000 cattle
- 330,000 parts of cattle, 2.4 million beef livers

In 1967, 459,881 parts of cattle were passed



A

RESOLUTION

The new year has begun and I can just hear some of you making new year resolutions: "I resolve to: a) take myself in hand, quit eating so much, and lose some of that excess adipose tissue; b) quit nagging the children (or husband, or both); c) control myself and not buy another sari every time I go shopping"—or the such.

The beginning of a new year, or a new week, or even a new day is a good time to resolve good things. Since my burden is healthful living for the whole family, I would like to suggest this resolution: "I resolve to prepare my family a breakfast each morning that befits my interest in their health and welfare!"

Just recently, my friend was confessing to me that she was suffering from her "dieting." You see, she had concluded that since she never has an appetite in the morning, that breakfast would be the ideal meal to skip in order to cut down on the calorie intake. I, being a breakfast-eating advocate, was wondering how she could survive with no food in her stomach during those busy morn-

ing hours. Well, I soon found out how she survived. She almost didn't. She continued her confession by saying that she gets so weak and giddy that she doesn't dare drive the car before lunch. What better testimony from a non-breakfast-eater could you ask for?

There is no good excuse for not eating breakfast—whether it be no appetite or no time. If your household needs a change, there is no time like now. Start off the new year right—first thing in the morning.

If you are looking for something different, tasty and nutritious, try this recipe—your family will love it.

GRANOLA CEREAL

- 4½ cups oats
- ½ cup cornmeal
- 1 cup soy flour or suji
- 1 cup wheat flour
- 1 cup coconut
- 2 tablespoonsful sesame seeds
- ½ cup ground cashew nuts
- 1½ cup jagree
- ¾ teaspoonful salt

Combine the above ingredients. Add the following ingredients to make a moist, crumbly dough:

- 1/3 cup oil
- 1 cup cream (Condensed milk can be used, but then cut down on the jagree.)
- ½ cup melted jagree

Spread on a pan (not too thick) and bake in an oven about 15 minutes, stirring occasionally so that all sides brown. Bake until dry, but soft. Store in tight container. Serve with fruit and milk.

* * *

Here is another breakfast recipe that includes fruit. Dates are good because they give a sweetness to the cereal and sugar need not be added, which is an unhealthful practice anyway.

FRUITED OATMEAL

- 4 cups boiling water
- 1 teaspoonful salt
- 1 ¾ cups oats
- 10 dates, chopped
- 1 large banana

Sprinkle oats into rapidly boiling salt water. Let boil 10 minutes. Add chopped dates. Cover, and cook over low fire for 20 minutes. Peel banana, cut lengthwise in quarters, then slice into oatmeal. Stir carefully, let stand 2 or 3 minutes. Serve with milk. Serves 4.

* * *

If there were pits with the dates you used in the oatmeal, don't throw them away. Pop one into a tin with a small hole in it for water drainage, and soon you will have a date palm that can be transplanted to a bigger pot. These little palms are strong, vigorous growers and very attractive.

* * *

Winter months bring not only relief from the heat, but they often bring coughs and colds. If you have someone afflicted with either of these ailments, keep him or her at home. This helps to keep it from spreading to others.

Keeping a youngster occupied when not acutely ill is often very time consuming to a busy mother. It is so much easier to look the other way, so to speak, and send the child off to school. Here is a suggestion that will help the hours pass more quickly for the "shut-in" and give you some peace of mind.

Making a Scrapbook: This can be in the form of a diary of special things that happen while the child is at home, a collection of clippings from magazines or newspapers, or a story with pictures drawn by the "patient" to go with it.

* Use two sides of a soap box or two pieces of cardboard about the size of this page for covers. Paste pretty paper over the cardboard covers.

* Cut sheets of paper for the pages of the book. They should be the size of the cardboard covers.

* Punch holes along the sides

of the pages and the cardboard covers. Tie with a ribbon or yarn to hold the book together.

Guide to Healthful Living



SAFE GUARDING THE HOME AGAINST POISON



There is no time to waste when it comes to making your home safe for you and your family. What better way to start the New Year than by checking the list below to assure your home against accidental poisonings.

- Keep all drugs, poisonous substances, and household chemicals out of the reach of children. (Remember children can climb, so the ideal place for these substances is under lock and key.)
- Do not store nonedible products on shelves used for storing food.
- Keep all poisonous substances in their original containers; don't transfer to unlabeled containers.
- When medicines are discarded, destroy them. Don't throw them where they may be reached by children or pets. Flush them down the toilet.
- When giving flavoured or brightly coloured medicine to children, always refer to it as medicine—never as candy or sweets.
- Do not give or take medicine in the dark.
- Read labels before using chemical products.

BE PREPARED if an accidental

poisoning does occur. The life of the victim is at stake.

The First Step in aiding a victim who has swallowed poison is to try to determine the exact nature of the poison. Read the label on the container and save any remaining portion to be examined by the physician or poison specialist.

The Second Step: Induce the victim to vomit—EXCEPT (first-aid, please note):

- a. When the victim is unconscious,
- b. When a petroleum product has been swallowed (kerosene, gasoline, benzene, naphtha, etc.), or
- c. When the poisoning is of a corrosive nature (strong acids, caustic soda, lye, strong ammonia, phenol, or cresol) and has damaged the membranes of the mouth and the throat.

To Induce Vomiting: Give the victim three or four glasses of milk, then turn him face downward with his head a little lower than his hips and gag him by inserting the index finger past his tongue into his throat.

The Third Step: If hospital emergency room service is not readily available, or no trained help has arrived by the time the victim's stomach has been emptied, then the first-aid can ad-

minister the "universal antidote." (Check your chemist shop for availability.) It consists of two parts of activated charcoal (medicinal charcoal), one part of magnesium oxide, and one part of tannic acid. Six heaping teaspoonfuls of this are stirred into a glass of water to form a thin paste which is then given to the victim to drink. It should be removed from the stomach within a few minutes by causing the victim to vomit.

For Corrosive Poisons: (Strong acids, caustic soda, lye, strong ammonia, phenol, and cresol) The first-aid procedure depends upon whether the victim is still able to swallow. If not, all one can do is to combat the onset of shock by keeping the body warm until the doctor or the ambulance arrives. If the victim is able to swallow, give him something to drink which will neutralize the effect of the corrosive agent—just plain water if nothing else. If it is known that the victim has swallowed acid, give milk of magnesia (one tablespoonful to a cup of water) or just plain milk. If it is known that the victim has swallowed an alkali (such as lye), give milk, acid fruit juices (such as diluted lemon juice), or vinegar (diluted half-and-half with water).

Hot or Cold!

by ALAN A. BROWN

When you treat a sick person with hydrotherapy, how do you decide whether to use hot, cold, or both? Although in some cases physicians find hot or cold applications interchangeable, in many cases one or the other is indicated. Hot or cold applications are used under certain conditions to relieve pain, modify the blood supply to an affected area, give comfort, and promote healing.

Hot or cold applications from whatever source rarely attack the cause of a disorder. They are aimed at relieving symptoms and putting the body in a position to withstand the ailment.

Knowledge of the treatment value of heat and cold is almost as old as mankind itself. Our ancestors used cold water as a reviving procedure, and it still is the first thing used to revive a person in a faint. They did not know why cold had a general stimulating effect on the body, but they recognized its value.

Understanding the value of heat has been passed down from generation to generation. Hot rocks, hot water, and steam have been used since time immemorial for alleviating pain. Our grandfathers stood with their coats pulled up and backs turned toward pot-bellied stoves baking out their lumbago. Various pains actually have been eased out of body areas by hot irons.

A great many nerves end on the surface of the body, among them nerve endings for heat and for cold. The receptors for heat and the receptors for cold are separate. If you touch the nerve receptor for cold with a hot point you get a cold sensation; if you touch the nerve receptor for heat with a cold point you get a heat sensation.

What do we mean by hot and cold? Somewhat arbitrary standards are used in designating these two concepts because the human sensory system cannot be relied on to differentiate between them accurately. You can test this fact yourself.

Hold your right hand in cold water and your left hand in hot water for a moment. Then dip the hands together into a vessel of tepid water. You

find that the hand held in the cold water feels warm or hot in the tepid water, whereas the hand held in the hot water feels cold in the tepid water. This experiment points to the significance of temperature sensation.

In addition to this proved relativity of temperature sensation, various parts of the body have different sensitivity to changes in temperature. For example, the face and hands are less sensitive to temperature stimulation than the back is.

When we speak of hot applications we mean application of temperatures from 104° to 115° F. Cold applications generally are of a temperature less than 70° F. Applications beyond the limit of comfortable toleration should not be allowed. Exposure to extremes of temperature causes stress that affects most tissues of the body.

What happens when heat is applied externally to a body part? Smooth-muscle cells relax. Blood flow is slowed, because the amount of circulating blood is not varied from moment to moment. Slowing of the blood causes the amount of blood in the part exposed to heat to become larger. This increase of blood gives the same external appearance as inflammation does, because slowing of the blood stream is one of the cardinal features of inflammatory change. The net effect is that pain at the site of application is lessened and comfort is provided.

In so far as the body's reaction is concerned, it does not matter whether heat is furnished by a primitive device such as a hot brick wrapped in a towel or by a costly apparatus. Simple forms of heat such as hot water bottles, electric pads, hot compresses, infrared lamps, poultices of various kinds, and tub baths produce good results. The effect on the body is bound up with their heat-producing action.

Hot-water compresses have a strong action locally because of close contact with the skin. Their reflex action on internal organs is greater than that of any other local heat procedure. For a hot-water compress you may use a towel or a cloth dipped



in hot water and wrung out thoroughly. Because the temperature falls quickly during preparation, hot compresses must be changed frequently. When necessary a glass bottle filled with hot water may stand in for a hot-water bottle. Wrap it in a dry cloth to guard against burning and breakage.

When using infrared and visible rays, remember that the intensity of the heat depends on the character of the rays, wattage, and distance of the heat source from the bare skin. The lamp should be placed far enough away to avoid the possibility of a burn. Twelve inches or more should be safe, but let the patient tell you how hot it feels to him.

The poultice, although an old remedy, is still useful. The heat it produces does not penetrate deeply, and the poultice acts somewhat like a hot-water bottle. A hot bath of short duration (less than five minutes) has a strong stimulating effect. If it lasts more than five minutes, usually it is relaxing to the point of weakening. It is a strenuous procedure indeed for the heart muscle, because it greatly increases its work.

Local heat application is by no means a harmless procedure. Harm may be done by its indiscriminate use. For example, heat should not be used when there is a fresh hæmorrhage. Such applications may relieve the pain temporarily, but they relax the contracted vessels and increase the hæmorrhage.

Care must always be taken to protect against burns, scalds, and shock. If an electrical device is used to provide heat, it should have constant attention. The greatest benefit is derived if the heat is

applied intermittently— about twenty minutes on and forty minutes off for each hour of application.

When cold is applied, the skin becomes pale and usually shows goose flesh. Goose flesh is caused by constriction of the small blood vessels and contraction of the muscular and elastic tissues in and under the skin. If the application lasts only a short time, the constricted blood-vessels immediately dilate again, more blood flows through, and the skin becomes pink and warm. In normal people a sensation of well-being and general stimulation follows a good cold reaction.

With cold as with heat, it is the temperature rather than the type of application that is important. Cold may be applied in the form of compresses, ice bags, showers, or baths. Cold applications, particularly when combined with mechanical stimulation, produce marked strengthening, increase of efficiency, and resistance against fatigue. Cold applications should be on about the same intermittent basis as hot applications—twenty minutes on and forty minutes off for each hour of application.

Cold applications do not affect all people alike. Some people have a feeling of weakness after a short cold shower although it is followed by a good reaction. Reaction to cold showers depends on the temperature, water pressure, friction, and duration. The colder the water the stronger should be the pressure and the shorter the time spent in the shower to facilitate and increase blood-vessel reaction. No particular therapeutic value can be attributed to showers, but they undoubtedly have an invigorating influence on the body that enhances its healing powers.

A short cold bath is intensely stimulating, but unless the bather uses stimulation such as rubbing with a friction mitt it may be unpleasant for some people. It causes the blood pressure to rise.

When cold compresses are needed, they can be made by dipping cloth in ice water or by wrapping ice cubes in cloth. Often compresses are preferable to an ice bag because they are less heavy and they adjust better to the contour of the body.

Cold applications help in many medical problems. Severe sprain, bruising, and fresh injury where a blood vessel is broken are conditions helped by cold. It contracts the blood vessels and thus tends to reduce the inflow of blood. An ice collar is useful in tonsillitis and laryngitis. An ice cap or a cold compress to the forehead relieves headache of blood-vessel origin.

Hot and cold applications are as effective today as they ever have been. ***

Exploring the Human Brain



by SHARGIA KASUMOVA

The number of cells in the human brain exceeds the number of people living on our planet. Billions of these cells function like clockwork all together. What happens in this well-knit system if an error comes about?

Late last year, experimenting with gold electrodes, Natalya Bekhtereva succeeded in spotting the presence of a mechanism detecting and correcting errors and traced its origin in human brain.

Here is what Bekhtereva has to say about her experiments:

"While diagnosing and treating our patients, we use deepseated gold electrodes to obtain information from various 'centres' and even cells of the human brain, check the patient's condition and carry on different neuro-physiological experiments. Thanks to the finest gold electrodes which monitor various physiological processes, we have managed to learn rather accurately about the major 'centres' deep inside the human brain. We are con-

ducting a painstaking study of topography of neuronal activity which is inimitable in every person.

"It is interesting to note how we were able to locate the 'detector of errors.' A patient who had electrodes set in was asked to do simple tasks such as to remember and reproduce a number of figures or words. Thus we unexpectedly found that when there was a mistake in the answer, a certain group of cells which kept silent during correct answers began to show activity. An electrode which happened to be there carefully mentioned their condition. The zones of the human brain where the cells with such unusual properties have been discovered are called the 'error detector'.

"The mode of action of these cells is not specified as yet fully—experiments go on. However, there is every reason to believe that the 'error detector' may call up the brain to correct errors, sometimes without the apparent participation of consciousness. This mechanism

is also closely connected with the feeling of orientation in space. For example, the local population in South America do not make efforts to remember the way back home in the thick tropical jungle. All of a sudden the hunters declare that it is time to return home and they always hit the right path. They are endowed with a highly-developed sense of subconscious orientation. It is also possible that the feeling of apprehensiveness and of something incompletely or wrongly done is somehow linked up with the activity of the detector.

"The results of our experiments provide another proof that it is absolutely undesirable to take psychopharmacological drugs without the doctor's advice. Take, for instance, the well-known drug, seduxen. It brings down the level of a person's emotional tone and may affect the functioning of the 'error detector,' and even put out

To page 24

The Doctor Advises



This counselling service is open to regular subscribers only. In reply to questions, no attempt will be made to treat disease or to take the place of a regular physician. Questions to which personal answers are desired must be accompanied by self-addressed and stamped envelopes. Anonymous questions will not be attended to. Address all correspondence to: The Doctor Advises, Post Box 35, Poona 411001.

RAPID HEARTBEAT

Please advise the proper procedure for me to follow, as an electrocardiogram indicates my heart rate is rapid. I've been given tranquilizers to take three times a day, but family pressures keep aggravating the condition. I am 44 years old.

From your inquiry it sounds as if you have a condition called tachycardia. This simply means that the action of your heart is rapid. There are many reasons for having a rapid heart rate, such as an overactive thyroid, certain nutritional deficiencies, and a relatively rare condition called arteriovenous fistula (an abnormal connection between an artery and a vein). Other diagnoses could be mentioned. It is not possible for us to tell why your heart rate is rapid. Your personal physician knows best concerning the presence or absence of these conditions.

One of the commonest kinds of rapid heart action relates to the stresses and tensions of life. The medication you have been given would indicate that your physician feels that stress may be playing a role here. We would surely recommend that you work closely with your physician toward coming to grips with problems in your environment that tend to be upsetting and to rob you of tranquillity. Here at **Herald of Health** we believe that the greatest, most rewarding source of tranquillity is an abiding faith in God. This, coupled with ample quantities of outdoor exercise, relaxing recreational pursuits, a wholesome diet, ample quantities of water, and sunshine, is essential for health and happiness.

EFFECTS OF TEA, COFFEE, SOFT DRINKS, AND CANDY

Please list the effects of giving tea, coffee, soft drinks, plus gobs of candy to babies and small children. I baby-sit with two children who have these things given to them by their mother.

Tea and coffee both contain caffeine. It is a central nervous system stimulant and therefore tends to be habit forming. Here at **Herald of Health** we recommend to everyone, children and adults alike, that they eliminate the use of tea, coffee, and cola beverages. There is nothing to be said in favour of placing in the body a habit-forming, stimulating drug. This is especially true in the case of children.

Soft drinks and candy have little in their favour either, especially for children. Nutritionists agree that concentrated carbohydrates, usually refined sugars, use up the body's reserves of vitamins, particularly the B vitamins, which are necessary for the metabolism or burning of these foods. If we ate as we should we would get our sugars and starches from unrefined sources, which also provide the vitamins and minerals at the same time. Take for instance, sugar cane. The naturally occurring cane has ample vitamins and minerals to assist in the metabolism of the sugar it contains. If we take the sugar cane and refine and concentrate the sugars, we remove the vitamins and minerals. The children who are permitted to eat these nutritionally poor preparations are almost certain to end up with poor health, which would also affect their temperament.

THE CHANGE OF LIFE

At what age does a woman have the "change of life"? How long does it usually last? Is the prospect of becoming pregnant during the change of life greater than previously?

A woman's change of life (menopause) usually occurs sometime between the ages of forty and fifty-five. It lasts only a few months in some cases and a few years in others. The symptoms vary from person to person, being so mild in some cases that the only way the woman knows she has experienced the change of life is that her menstruations have ceased. Other persons experience hot flashes, nervousness, tiredness, sleeplessness, palpitation of the heart, and even depression—these in addition to irregularity of menstruation.

The fundamental cause of the change of life is a decline of the functions of the ovaries. The ovaries have two functions: to produce female hormones, and to produce ova (egg cells). It is the sudden reduction in the production of hormones that upsets the body's endocrine balance and accounts for the symptoms of the change of life. And, of course, it is the termination of the production of ova that makes pregnancy impossible. But the production of ova (as well as the occurrence of menstruation) may be intermittent and unpredictable for a while at this time of life. Only after there has been no menstrua-

tion for several months is it certain that pregnancy will no longer occur.

RINGWORM

What is the cause and treatment of ringworm?

Ringworm of the body (*tinea circinata*) is a mildly contagious disease caused by a fungus infection. It is frequently contracted through contact with infected domestic animals, especially cats. This fungus is treated successfully with half strength Whitefield's ointment or an undecylenic acid ointment. This is to be applied every evening for one week. Griseofulvin tablets taken under a physician's supervision is another effective remedy for ringworm of the body.

BATHS

Will taking a bath every night dry up the skin and take all the oil out of the body?

Probably not, most people can take one or two a day without the skin becoming dry and irritated. Some cannot do this. Such people may have to bathe less frequently. They can help themselves by using a little oil on the skin after bathing. There are natural oils, such as olive oil, which are very beneficial to dry and irritated skin. If there is any serious complaint, it is best to discuss the problem with a skin specialist.

EXPLORING THE HUMAN BRAIN

From page 22

of action this subconscious mechanism which is always ready to help. A person who has swallowed a tablet of seduxen should refrain from driving, and sometimes it is not safe for him even to cross streets with heavy traffic."

Natalya Bekhtereva continues the work which her famous grandfather, Academic Vladimir Bekhterev (1857-1927) began. Bekhterev became known as the pioneer of brain localisation of functions and the founder of the world's first neurosurgical hospital. He sponsored the society of neuropathologists and psychiatrists in Russia, and in St. Petersburg he set up the Institute of Brain and Psychoneurology which

has been named after him. Bekhterev's brilliant observation that the routine examination of the patient's answers should be combined with the studies of the corresponding objective changes in nervous tissue and the reflexes that are triggered by these changes is confirmed by the experiments carried out by his granddaughter.

"People often ask me whether it is possible to read one's mind," says Natalya Bekhtereva. "In terms of neurophysiology it means to decipher the electric activity of neuronal complexes when certain thoughts are conceived and words are pronounced. The first successful attempts in this direction have already been made. We know that

words and single letters pronounced evoke highly specific reconstruction in the impulse activity of brain nervous cells.

"Today we can see what the human brain does with words and notions and in time, I'm sure, we shall be able to read a thought by the electric activity of cells of its bearer and see how whole phrases look like in the material processes of human brain and decipher their electric code.

"The brain still conceals many secrets and holds vast resources of which we have but far from complete knowledge. Their study demands concerted efforts on the part of many scientific centres," Natalya concludes. ***



FOR JUNIORS

The Heavy Sack

by RUTH WILSON KELSEY

Sanju looked through all his pockets once more, but the money was gone. He looked all over the schoolyard where he had been playing. The money was not there. He didn't want to go home and tell his mother he had lost it. She had been disappointed at noon when he had forgotten to buy the oranges for his little sister Rani, who had a bad cold. How could he go home this evening without them? He had lost the money mother had given him for the oranges.

Sanju was thinking so hard that before he knew it he had reached the market. Why did he come here when he had no money?

As he stood staring at the bright oranges and other things displayed, a little old lady came by carrying two large bags. As she neared Sanju, a loaf of bread fell from one of the bags. Sanju hurried to pick it up for her.

"Thank you," she said with a smile. "Would you put it in the bag for me, please? My arms are so full I can't do it."

"You have a heavy load," Sanju told her. "Let me help you carry those things."

"It would be most kind of you," the lady replied. "They are heavy, and I have a hill to climb."

Sanju took the larger sack, and they went up the hill together. When they reached her house they went into the kitchen with the bags.

"That was very kind of you to help a stranger," the lady said. "I think you are going to grow up to be a fine young man."

Sanju's cheeks felt hot as he thought of how careless he had been that day. "Thank you," he murmured as he turned to go.

"Wait a minute," said the woman.

She went into the pantry. When she returned she handed Sanju a small bag of something. It felt heavy.

"This is a little gift for your mother," the lady said. "A dozen fresh eggs. My hens are laying well now. Perhaps your mother can use them."

Sanju thanked her, but he wished her hens had laid oranges. What would mother say when he came home with eggs instead of oranges? He knew she had bought two dozen eggs the day before. How could he tell her about the lost money?

As he passed the market, Sanju tried to keep his eyes from the oranges. Then all at once he had an idea that made him stand still. He turned and went to the orange stall. At least his idea would be worth a try.

"What may I do for you, Sanju?" the man asked.

"Would you like a dozen fresh eggs?"

"Surely. I can always use fresh eggs. How much do you want for them?"

"Please, if it's all right, I would like to trade these eggs for some oranges."

"It's all right with me. I'm glad to do something for a boy who knows how to be kind. I saw you help grandma Pandit with her bags. Here are your oranges."

There was a big smile on Sanju's face as he left for home. He must hurry, for it was getting late. Now he didn't dread going home. He was anxious to tell his mother everything that had happened. Once again he had learned that kindness always pays. ***

ALLERGY AND MISBEHAVIOUR

From page 9

exhaustion, and mounting parental guilt took their toll. Raging arguments alternated with abysmal silences. Laughter and joy disappeared. And the child? Her demands for attention did not lessen; in fact they eventually exceeded her actual needs. And when she sensed impatience or growing rejection, her need for her parents increased. At six although the eczema had practically disappeared, Rose was dependent, clinging, secretive, withdrawn, unable to mix with a group, and unwilling to be separated from her mother to enter school. The parents' attitude toward the child remained inconsistent—at times overly protective; at others, rejecting. The relationship between her mother and father had become superficial and suspicious. At this point the whole household required professional help. Much of this could have been avoided if Rose had received treatment when the eczema first appeared.

An indirect role

Allergy may play another indirect role in affecting child behaviour. Even though allergy symptoms are minor or barely observable, they may interfere with normal physiologic functioning, resulting in the development of a behaviour problem. For example, a child who suffers from a very minor allergy affecting the bronchial tubes (air passages to the lungs) not sufficient to produce symptoms either of bronchitis or asthma will use an unusual amount of energy in breathing. This leaves a deficit of energy for his other physical, mental, and emotional processes. As a result, unusual behaviour may occur. As with Mary, such an early allergy may show up in the classroom as an inability to concentrate or in disruption of the group. These kinds of behaviour often result in reprimands, which in turn, make the child feel different from the rest of the class, and outright defiance or refusal to respond may result. A problem child is born.

The direct manner in which allergy acts to cause behaviour problem is more dramatic. Here the allergy actually involves the nervous system, or brain, as was the case with John. To understand how this can happen, it is necessary to understand just what an allergy is. A hive is a good illustration. A hive is simply a swelling. In the allergic reaction the tiniest of the blood vessels, the capillaries, widen in diameter, their walls become thin, and the fluid part of the blood seeps through them into the sur-

rounding tissue causing it to swell. It is this sequence of events that produces the hive. A similar swelling may occur in varying degrees anywhere in the body. When it occurs in the nose hay fever results. When it occurs in the air passages bronchial asthma results. When it occurs in the nervous system or brain any one or combination of a variety of symptoms may result, depending upon what functions are controlled by the nervous-tissue areas involved. Should such swelling occur in certain areas of the brain unusual actions may result. We now have a "behaviour problem."

Today the child with a behaviour problem is usually assumed to be suffering from severe emotional difficulties and ends up in a psychiatrist's office. Under the best circumstances, even if no other factors than emotional ones are present, the solution of the problem is long, difficult, and expensive. Certainly, before embarking on such a trying procedure it would seem reasonable to investigate the role of allergies in children with behaviour problems, especially those who have previously had an allergy or whose parents are allergic. Through such an examination some parents may find reprieve from a sentence of emotional trauma, and their children will return to normal behaviour. ***

The publishers of this magazine insure their motorcars
and property with

NATIONAL INSURANCE COMPANY LIMITED

(UNIT: N.E.M.)

Chief Administrative Office:

"Kamani Chambers"

32 Nicol Road

Ballard Estate

Bombay 400001

Telephone: 26-2823/24

Also branches at New Delhi, Calcutta and Madras, and
representatives and agents at all other important towns
in India.

They transact all kinds of fire, motor, marine and
miscellaneous insurances.

HERALD OF HEALTH, JANUARY 1975



BABOON'S LIVER SAVES GIRL'S LIFE

Ursula Ladage, 22, owes her life to Tom, a baboon from Cologne Zoo, Federal Republic of Germany. Ursula, an X-ray assistant, was rushed to Bonn University Hospital suffering from hepatitis. Her condition rapidly went from bad to worse and medical staff decided in favour of an emergency operation never before successfully carried out in this country. The sick woman's blood was rechanneled through an ape's liver because her own liver was no longer capable of cleansing the blood stream in the normal way and as a result of the malfunction of her inflamed organ she was already in a coma at death's door. After twelve hours her liver had had chance to regenerate and the worst was over. The fight against time had been won. Ursula Ladage is recuperating. Baboon Tom gave his life to save hers.

—German News

CIGARETTE SMOKING AND AGEING

In a study of lung function in smokers and nonsmokers of approximately the same ages, the nonsmokers "did better" than expected for their ages than did the smokers.

Forced expiratory volume is a measurement of the amount of air which can be exhaled as forcefully and rapidly as possible in one second compared to the total volume of air expired during the same breath. Smokers averaged 73.1 per cent in forced expiratory volume while nonsmokers averaged 77.3 per cent.

Nonsmokers showed a greater diffusion capacity—that is, the ability to transfer gas through the membranes lining the lungs' air sacs—than did smokers of the same age. In tests of air flow, the movement of air through the lungs' airways, the nonsmokers again did better.

"This study indicates," according to Donald C. Kent, M.D. medical director of National Tuberculosis and Respiratory Disease Association, "that smoking can adversely affect the lungs even if the smoker is fortunate enough not to develop one of the smoking-related illnesses."

—Life and Health

FŒTOSCOPE TO REVEAL PRE-BIRTH DEFECTS

The only method of examining a foetus now is indirect—by inserting a needle through the mother's abdomen to take a sample of the amniotic fluid that surrounds the baby in the womb. Since the fluid contains cells shed by the foetus, doctors can examine the chromosomes and make chemical tests to determine birth defects. This is called amniocentesis and is practised until now only in the larger medical centres. Michael M. Kaback, M.D., of the University of California at Los Angeles forecasts the development of a new instrument, the foetoscope, that within one year may enable physicians to look directly at a baby in its mother's uterus. Collaborating with engineers of the National Aeronautics and Space Administration's Jet Propulsion Laboratory in Pasadena, California, Dr. Kaback is using the experimental foetoscope to look at developing embryos in gravid sheep. He is working with animals until he can be sure of the device's safety for humans. "We can see the legs, the head, the genitals and all very clearly," he says.

—Today's Health

BIOELECTRIC ARTIFICIAL ARM

In the Central Research Institute for Prosthetic Appliances work is going on to perfect a bioelectric artificial arm. In a series of new artificial forearms feedback sensors are used to enable the wearer to judge the strength of his grip. This allows him to lift a heavy weight with his artificial limb and just as easily to pick up an egg without running the risk of crushing it. The multifunctional hand of the new appliance performs four types of grasping operations and can also turn. Appliances like this enable the wearer to perform the most varied movements in everyday life and when working, for example, at a lathe.

—Soviet Features



A monthly journal to keep you informed on how to live a healthier, happier life. Every family needs this magazine. Many doctors are subscribers; you should be one too!



संघम और परिश्रम मनुष्य के दुई बड़े चिकित्सक हैं। संघम और परिश्रम के पाठ सीखकर मानव जाति स्वस्थ और सुखी रह सकता है।



"நோயற்ற வாழ்வை குறைவற்ற செல்வம்" இதனைத் தருவது, "நல்வழி" மாத இதழ்.



బల్య విషయాల మామూలం ప్రాంతానికి సేకరించు అన్ని అభిమాన నిపుణుల వారు మాకు 'మాకు దర్శి'. ఇది చాలా అభిమాన పేరింది.



കാഞ്ഞ പൊവവിൽ അരോഗ പ്രവേശനത്തിന് ജീവിപ്പാൻ നിങ്ങളെ സഹായിക്കുന്ന ആരോഗ്യബോധിനിയിൽ ഇന്നത്തെ വരികളെന്താവും!



MAGAZINES WITH MAJOR DIMENSIONS

- HERALD OF HEALTH Rs. 15.25 per year.
- स्वास्थ्य और जीवन का वार्षिक-मूल्य रुपये १५.७५ पैसे।
- "நல்வழி" ஆண்டுச் சந்தா ரூ. 10.75
- మాకు దర్శి సాంఘిక రూ. 10.75
- ആരോഗ്യബോധിനി ഒരു വർഷത്തേക്ക് വരിസംഖ്യ: 10.75 രൂപ.

The cost to a patient visiting a doctor can be budget-crippling. Sickness usually comes when it can least be afforded, both in time and money. How to stay healthy is far more profitable and enjoyable than trying to get well from a miserable, lingering illness. It is cheaper too. A good way to stay healthy is to subscribe to one of the magazines found on this page. The material is similar in all the languages. Topics discussed every month may enable you to live so that you can keep from visiting an over-worked physician. Order today in the language of your choice. The price is the same for all the magazines excepting English which has 8 more pages. You need this HEALTH journal in your home!

CUT OUT THIS COUPON AND MAIL TO US TODAY.

Editor
Oriental Watchman Publishing House
Post Box 35, Poona 411001

Dear Sir,

I would like to subscribe to

I am sending Rs. by M.O./Cheque.

Please send the magazine to

Name

Address

Pin Code