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CONTENTS	
Editorial :—	PAGE
Birth Control—Continence or Contraception; which is Healthier (c) Contraceptives (Contd. from p. 155, vol. IX No. 8)	173
An Acknowledgment	175
"The Great Disease"—A Drama—By Dr. G. Raghunatha Rao, D.T.M., B. & O. Govt. Research Worker in Leprosy at Purulia (Contd. from p. 158, Vol. IX No. 8)	176
The Hygiene of Pregnancy—By Dr. L. A. Ramaswamy Iyer, Medical Officer Badagara	178
Physical Culture and Folk Dance—By Mr. E. Krishna Iyer, B.A., B.L. Advocate, High Court Madras and The Secretary, Music Academy, Madras	181
'Malaria'—How Caused—With a few Hints on its Prevention and Cure—By Dr. K. G. Menon, M.O.L.F. Hospital, Vythiri Wynad	185
First Aid to the Injured Treatment of Poisoning—By Nurse Clifford, S.R.N. C.M.B.	187
Here's Health	189
'Sitisit'	189
Health News and Notes	190

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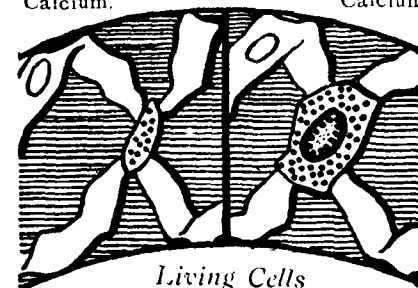
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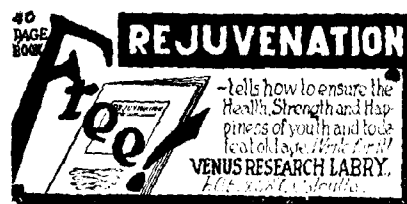
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Vol. IX]

SEPTEMBER, 1931

[No. 9

BIRTH-CONTROL.

CONTINENCE OR CONTRACEPTION; WHICH IS HEALTHIER?

(C) CONTRACEPTIVES.

(Continued from P. 155, Vol. IX No. 8.)

What are contraceptives? They are artificial and mechanical devices to control births, thereby offering an easy solution to the many pressing social and economic problems of the day. The main points to be considered in this connection are (1) whether they are natural (2) whether they are moral and (3) whether they are conducive to economy and general health and well-being of the population. Let us discuss each of the above three items seriatim.

That the use of contraceptive methods is *unnatural*, none can deny. The trend of modern medicine is prevention and people are directed to live in Nature's way and thus prevent the many

diseases which human flesh is heir to. To invite diseases by unnatural methods of living and then drug the system to cure them, are, as far as possible discountenanced. In God's creation, man alone has transgressed and is still transgressing the laws of Nature and paying a heavy penalty for his sins. The animal kingdom have definite seasons for sexual intercourse and are able by God-given instinct to space-out their progeny. If only men and women can utilize their God-given intellect for their own benefit and for the benefit of humanity and space-out their progeny likewise, by natural means at their disposal, namely, continence, there would

be no room for all this anxiety and misery in the land. It may be argued that in the case of animals the food problem does not arise and therefore the comparison cannot hold water. In the case of human beings as well, the food problem cannot and need not arise, if only there was no hoarding up and uneven distribution of wealth and luxurious living. We do not want to enter into this thorny subject here but we shall, however, show presently that the danger of shortage of food supply, on which premises alone, the whole birth control movement is based, is not so imminent or serious as it is imagined to be. To substantiate our statement that contraceptive methods are unnatural, we cannot do better than quote the following paragraph from Johnsen's 'Birth Control'—"Dealing first with the natural phase of the problem, Nature appears to have definite and irrevocable laws with regard to generation and any violation of such laws are rigorously punished even to the annihilation of a species. Naturalists are aware that all lower animals are to a certain extent protected by Nature in so far as their habits are regulated by instinct or by the presence or absence of desire, and in no other function is this more clearly manifested than in their sexual habits. With most species the procreative instinct asserts itself at a certain age but when the female has conceived, desire ceases and she remains absolutely continent during the whole period necessary for gestation and lactation. Here an interesting question naturally arises as to what extent man is amenable to this same natural law. Evolution teaches us that man has passed through animal stages to his present exalted condition, so I think it may be safely assumed that he is more or less subject to the

same law and that any departure from such must be to his own detriment."

Then comes the *moral aspect* of the question. This aspect becomes all the more complicated in India, on account of the peculiar social conditions of the country. The first and foremost crime which contraceptive method will lead one to commit is adultery and the unfortunate victims will mostly be the virgin widows of whom there are a very large number in this country, who are not permitted to re-marry and who have been in consequence leading a life of absolute continence and religious piety and purity, doing domestic service in their parent's homes and of their kith and kin and attending to household religious duties. The fear of pregnancy, the futility of attempted criminal abortion, the birth of an illegitimate child, the public odium and social ostracism involved in this process, have all swayed their thoughts and helped them in their determination to lead a virtuous life. The idea of the existence of contraceptives and the immunity from conception conferred on them, by the use of these contraceptives will dispel all fears and suspicions lurking in their minds and goad them to vicious habits with all the attendant evils, such as, infanticides, murders, suicides &c. The advocates of contraceptives may say that these methods are unfailing and can be safely relied on. One cannot be too dogmatic about this and we have evidences to show that several methods at one time stated to be very reliable, have been given up as hopeless failures afterwards. There is no doubt that the large amount of propaganda that is now being carried on about contraceptive methods both by the press and in the platform and the importation and sale of contraceptive medicines and materials in the open market have a most de-

moralizing effect on our youngsters of both sexes.

Lastly, there is the economic and health aspect of the movement to be considered. The Birth control movement is said to be one of the most effective means of solving the food problem. The movement is based on the assumption that if the population of the world should go on increasing at the present rate, there would be no food at all for them after a century or two. But this contention has been refuted by Dr. Herr Hindhede, the wellknown Danish Food Expert who says:—"Europe has 452 million inhabitants, though it can nourish 1700 millions, the U. S. of America has 120 millions but has space and nourishment for 1200 millions; in short the white races are not nearly so bad as is imagined" and adds that there is no room for anxiety if only the Europeans adopt simplicity in diet and living. India's economic condition stands on a different plane altogether. The food problem of India is easily solved when once the economic independence of the country is secured. Rice and wheat are the staple foods of the country. But their indiscreet and indiscriminate exportation to foreign countries, coupled with the lack of transport facilities and high railway freight for internal movement of these commodities has resulted in the prevalence of chronic famine prices and conditions. We in India

live in penury in the midst of plenty. If only the root-causes of our poverty are removed, we have no need to think of over-population and Birth Control for all time to come.

As regards the effect of contraceptives on the health of the people we have no doubt they are extremely injurious. Decency forbids us to discuss this subject in greater detail, but let us take the solitary instance of quinine which is used as contraceptive. We know that an overdose of quinine on a malarial patient administered either through the inexperience of the Doctor or the indiscretion of the patient himself, has resulted in permanent deafness and other disorders. It is for our readers to conjecture what harmful effects an overdose of it would produce as a contraceptive agent, apart from sterilization. It is not always that the physician's aid is sought for, in delicate matters of this kind and the numerous pamphlets and advertisements on Birth Control alone act as self instructors to the people. These pamphlets do not even make mention of continence or restraint as a Birth Control measure. The solution of the problem lies therefore only in the education of the masses on continence and this, the State and other public welfare organisations ought to take into their hands sooner or later, the sooner the better, to check the pernicious propaganda of the enthusiastic advocates of contraceptive methods.

AN ACKNOWLEDGMENT

In our April and May 1931 issues of 'HEALTH', we dealt with the subject of 'Oral Hygiene—The Teeth'. The editorial in April 1931 issue, was a review of the book entitled "Those teeth of Yours", by Dr. J. Menzies Campbell,

L. D. S., D. D. S., F. R. S. E., sent to us for the purpose, by the publishers Messrs. William Heinemann, (Medical Books) Ltd., London, While making a reference to that book in the penultimate para of our editorial, in the April

1931 issue we have accidentally omitted the insertion of the words "of which we have given some extracts above" at the end of the para and failed also to put those extracts within inverted commas. In the May issue also, a similar omission of inverted commas, for extracts made, has occurred. We regret very much these omissions.

The book deals exhaustively on the subject of teeth, which play a prominent part in the causation of several diseases, and affords interesting reading. The style is elegant and the get-up nice and we strongly commend it to our readers.

"THE GREAT DISEASE"

A DRAMA

BY

Dr. G. RAGHUNATHA RAO, D. T. M.,

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(Continued from p. 158, Vol. IX No. 8).

Dr. Ramnath (Continuing): "As I told you just now that by the time the ears and the face become swollen and studded with eruptions, the disease has reached the topmost stage and the sufferer has become the most infectious leper and consequently a positive source of danger to other healthy people, who happen to come into close contact with him. Certainly it is highly objectionable that such highly infectious lepers should promiscuously mix with other healthy people in hotels and restaurants. Further, such sufferers, should specially avoid the use of public conveyances. When moving amongst the public, such infectious cases should be careful not to cough or sneeze, without a handkerchief over their faces, so as to prevent droplets of their highly infectious oral and nasal discharges, from falling on other healthy people."

"But, Gentlemen, let me caution you here, these highly advanced cases alone are not responsible for much of the

spreading of the disease. In fact, such cases, by virtue of their very conspicuous manifestations of the disease, are apt to be shunned by their friends and such others as use their eyes. But it is the sufferers from still less advanced stages of the disease who are moving freely in society, ignorant of the fact that they are suffering from an infectious type of leprosy, that are responsible for much of the spreading."

One from the audience: "Doctor, just a doubt to be cleared."

Dr. Ramnath: "Yes. What is it about?"

Questioner: "How are we to know which sufferer is infectious and which not? Please explain it clearly so that we may take proper precautions."

Dr. Ramnath: "Yes, that is the subject I am coming to. Listen please."

(Continuing his lecture.) "Gentlemen, you can take it for granted that any person showing swelling of the ears, or face or both, or who

has raised, red or brownish or reddish brown patches on his body, is an infectious case; and try to avoid contact with him; at any rate, a prolonged contact. But, mind you, never ill-treat him, or show him any kind of disrespect. Highly respectable persons, have sometimes been the victims of this disease. Leprosy, unfortunately, is no respecter of person, age, sex, social status or culture. You are therefore not justified in ill-treating a leper. You should always remember that highly chaste and virtuous people sometimes fall a victim to this disease. You are not right therefore, in thinking that simply because, a man has got leprosy, he must be a very bad or wicked individual. Your slogan in dealing with lepers, should be:—"Get rid of Leprosy;" and not "Get rid of lepers."

"Some of you, Gentlemen, might have probably heard of the inhuman and cruel methods of treatment, meted out to lepers, throughout Europe, in the middle ages and in the pre-Christian era. What happened you know? This kind of social ostracism and inhuman treatment to which, the lepers, and possibly others suffering from other harmless types of skin disease that closely resemble leprosy at any of its numerous stages, were subjected, led to the concealment of the disease, by sufferers, as long as they could do so. And thereby they very stealthily contributed to a further spread of the disease. This kind of ostracising lepers of all types irrespective of their infectivity or not, led to a great spreading of the disease by concealment. So, if we have to get rid of such a stubborn and chronic disease, we should encourage the sufferers, to come forward and get themselves treated. And this, the sufferers, would gladly consent to do, if they know that they would have the sym-

thy of the public, and they would not be treated as demons and devils. It is only the deplorable lack of sympathy for lepers, shown by the public, and the lamentable ignorance,—concerning the different signs of the disease, in its different stages, and its comparatively non-infectious nature in the early stages, and want of a knowledge of the earliest signs of the disease are mainly responsible for much of the spreading of the disease."

One of the audience: "Just a little interruption,—Doctor,—if you don't mind it."

Dr. Ramnath: "Yes, my friend can say what he wants to say."

Questioner: "I see several beggar lepers, with hideous looking deformities, such as crooked fingers and toes, big wounds in their feet and hands, wandering throughout the bazaars and station platforms. Are they not spreading the disease? Should they not be sent up to jail?"

Dr. Ramnath: "Yes, my friend has put forth a very pertinent question. I thought of dealing with it, some time later. Anyhow, as my friend seems to be anxious to know of it now, I shall deal with it."

Continuing: "A few minutes back, I told you, Gentlemen, that, by the time swellings of the ear and face, have become very marked, the sufferer has passed to the topmost stage of the disease and there are numerous, or rather, billions and billions of germs present in the body, which may escape through the nasal or oral discharges or through the sores that result from the breaking down of large sized eruptions which may be present not only on the face and ears, as previously mentioned by me, but also, on the whole body. But, the disease remains at this stage

for some variable time, and then owing to some reason or other, which has not yet been ascertained, the germs begin to die out in large numbers. Mild or sometimes severe attacks of fever occur and all the eruptions begin to get absorbed. At this stage, the sufferer begins to show deformities, alluded to, by my friend. But, Gentlemen, even earlier than that, one may show deformities. In fact, even sufferers from the non-infectious earlier types and stages, of the disease, may begin to show deformities, when their natural resistance, subsequent to the appearance of the first manifestations of the disease, rises to such an extent, as just to prevent the further advance of the disease, but not to entirely check or cure the disease. In these cases, the deformities are not produced by the active participation of the germs, which might have all died out, but by the loss of delicate nerves and muscles, which are essential for proper functioning of the affected parts. These deformities are just like the charred remains of a burnt house. The active fire is burnt out and so these charred remains, are not a source of danger at all. Now, you will understand, I believe, that those beggars, who have only deformities, and no swelling of the face or ears, or any thick reddish

patches on their bodies, are not infectious. They are the so-called "Burnt-outs." They expose their sores and deformities, in the hope of eliciting sympathy and for soliciting alms."

The audience with one voice: "Very many thanks, Doctor!!! We all feel very much indebted to you, for this illuminating lecture. We have learnt a lot about leprosy. Surely, lepers, whether actual or potent, in Madras, are highly indebted to you, as they cannot find a more sympathetic champion of their cause. But we are very anxious to know something about the treatment, which will cure this dread disease."

Dr. Ramnath (Modestly): "Thank you, Gentlemen, I wish I had deserved the compliment you paid me. I have only done my duty to the public. And expect the public to take an intelligent interest, in the problem of leprosy and try to solve the problem, by co-operating closely with the medical and public health authorities."

Looks at his watch and exclaims: "1 o'clock!! Gentlemen I have kept you rather late, and I must thank you all for giving me a patient hearing. To-morrow, I propose to deal with the modern treatment of this disease. Meanwhile, Good-bye to all."

Exit all the visitors and the Doctor.

THE HYGIENE OF PREGNANCY

BY

DR. L. A. RAMASWAMY IYER,

Medical Officer, Badagara.

The period of pregnancy is the most delicate one in a woman's life and requires careful attention to the principles of health in general and to the changes arising therefrom in particular. Pregnancy is the term applied to a

woman's containing in her internal generative organs the produce of conception for a period normally of nine calendar months and a week or roughly 280 days. This period is a purely physiological one, pathological changes

taking place only in abnormal conditions so much so that attention has only to be given to the changes taking place in an amplified form of the general principles of health, i.e., help nature in a natural way and avoid meddlesome interference. Apart from the principal changes produced in the organs of generation during pregnancy, secondary changes also take place in other systems of the body which require to be considered. These are the circulatory, respiratory, urinary, digestive and nervous systems. The quantity and quality of blood are increased and altered respectively to allow for the greater demand by the generative organs concerned and the white corpuscles of the blood which are supposed to fight against any pathogenic organisms in case of necessity are also relatively increased. Respirations are increased throwing out a larger quantity of carbonic acid. Urine is increased in frequency due to the pressure of the growing uterus and in quantity due to the increase in the water. The digestive system also undergoes certain changes due perhaps to the enlargement of the uterus and pressing upon the other internal organs as evidenced by the morning sickness, constipation and want of appetite. The nervous mechanism is also affected in that the nerve centres and the sympathetic nervous system are in an exalted condition of over irritability—perhaps, a nature's gift for an increased output of nervous energy during labour and puerperium. That pregnancy and its attendant changes taking place are purely physiological necessitated by nature is also evidenced by the fact that a large majority of nulliparous women are troubled by dysmenorrhea, menorrhagia etc., and tumors of the uterus and ovaries. Thus it is clear

that an amplified attention to general principles of health is necessary to meet the exalted condition of her body during pregnancy. It is also evident that any drugging during this period is, besides being unwarranted, decidedly harmful. Her diet should be simple, appetising, nutritious and liberal. A simple lacto-vegetarian diet is mostly to be taken to avoid constipation, supply the necessary vitamins and avoid nervous stimulation or irritability. Due attention to the above principle will avoid several complicated troubles—the so-called toxæmias. All stimulants such as alcohol, excessive tea or coffee should be carefully withheld and plenty of fluids in the shape of good water and milk should be taken to flush out the system of any toxic products by the excretory organs. It should be borne in mind that a pregnant woman has to supply within her another growing body besides herself. Thus it goes without saying that her food and drink should be wholesome and liberal. Majority of women are often troubled by nausea, salivation and vomiting in the early part of pregnancy, but pass off after the fourth month. These require no special treatment except that the bowels should be kept regular by judicious administration of mild laxatives and farinaceous diet. Variety in the articles of diet is advocated to satisfy the so-called "Longings or cravings" peculiar to this period. Early morning rise, careful cleaning of the teeth and mouth with a small drink of mild coffee or tea will greatly minimise the above troubles. When they persist and cause physical trouble to the woman medical advice should be resorted to. The skin should be kept clean by tepid baths daily and the external genitals which at this period are congested and full of their secretions should be washed twice a day

with warm water to avoid itchy affections such as pruritus etc. Any decrease in the quantity of and any cloudiness or burning while passing urine should be brought to the notice of the medical attendant. The clothing should be light and clean and guard against chills. They should not be too tight, pressing on any part of the body, but a little support to the growing abdomen is comfortable. Regular exercises short of fatigue, such as walking in open air is a great necessity. Indian women of the middle and poor classes do not require much of this as they have enough to do in their houses such as drawing water from wells, cleaning houses cooking and sometimes going out for work. Violent and sudden movements should be avoided especially in the case of weak women and those multiparous women who have a tendency to abort. The breasts should be bathed frequently with soap and water as they are likely to be itchy and the nipples which discharge a glairy fluid called colostrum should be similarly cleaned and if they are depressed should be shaped with clean fingers. Swelling of legs and feet and sometimes anæmia or jaundice are seen in some women. Any such condition should engage the attention of the medical adviser. The question of coitus during pregnancy is one of much controversy—the less resorted to, the better. Absolute continence should be enforced in the case of women who are ill or have a tendency to abortion. Coitus should be avoided in the fourth month lest abortion should occur and in the advanced months due to discomfort and possible pains to the woman. For the first few months a certain amount of rest is essential during the expected dates of menses as abortions are more likely to occur during those times. It is very essential that the guardians of

the pregnant women should have in view a nurse and a doctor in whom the woman has confidence. The nurse should visit the woman occasionally, watch her condition and any abnormality brought to the notice of the medical attendant promptly to avoid difficulties during labour. On no account should the nurse give any vaginal douching or do any vaginal examinations without the knowledge of the medical attendant as they are sometimes productive of intricate complications. Apart from all these it is the nervous system that appears to be affected most. Any sudden shock or emotions upset a pregnant woman easily causing her to swoon and abort and hence such causes should be avoided. It is believed and there is every reason to think such as correct that the mental and physical conditions of the woman in her pregnancy have a great influence on the product of conception within her. The custom in vogue among the Hindus appears to be good and exemplary. The Hindu girl, as soon as her pregnancy is established, is taken to her parents' house where she has more freedom with her own kith and kin, free to satisfy her cravings with fancy articles of food and dress, free to tell her own mother of any uneasiness or discomfort and in short, a free will to satisfy all her wants without any fear or shyness. All chances of meeting her husband are avoided till about the seventh month when she goes to her husband's house for a few days for *Seemantham*—a change in environments—a change to enlighten her mind and body—and she goes back to her parents for delivery. Then there is a custom in Malabar of taking the pregnant girl daily to her village temple after her bath and taking an ounce or two of fresh butter suppos-

ed to have a divine influence on the child within her. This is done for a few days—evidently to make her take a wholesome article full of vitamins, to keep her bowels free and to engage her mind in divine thoughts.

It is high time, in the circumstances set forth above that people should realise the absurdity—nay the dangers of unnecessarily giving a host of medicines during pregnancy to effect an easy labour and during puerperium to prevent complications. Look at the labouring cooly classes in country parts having to work from morn to eve for

their food with none to help them in pregnancy or delivery, and yet how well they pull on. It is here where preventive medicine has one of its greatest opportunities unhappily but too often neglected in the upcountry parts of India. Prematurity centres, ante-natal clinics, schools for mothers and the multiplication of well trained midwives throughout the poorer districts will have a decidedly benign influence in safe-guarding the health both of the mother and her prospective child. India then with all her endless resources will have a more enviable place among the civilised countries.

PHYSICAL CULTURE AND FOLK DANCE

BY

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In speaking of physical culture, the average mind is apt to connect it ordinarily with the paraphernalia of the common gymnasium and may feel curious as to how a piece of Art like Dancing can be brought in to fit into a subject dealing with health and strength. But a clear conception of the aims of physical culture and the methods of achieving the same would leave little room for any such doubt.

For the present purpose, the various forms of physical culture may be grouped into three or four classes.

1. *The heavy exercises of the gymnasium* that are ordinarily conceived of as exercises proper and that aim consciously at the building up of strong muscles in general and in particular. e.g. exercises in the parallel and horizontal bars, Dumb-bells, Dundalls, Busky clubs etc.

2. *Recreative exercises*, which are primarily conceived of as play and recreation but which in their effect involve the exercise of the whole body, though without the consciousness of the laborious exercise of the first group. e.g. Various kinds of sports like Football, Tennis, Hockey, etc.

3. *Artistic exercises*, which are not ordinarily thought of as exercises but solely as pleasant pastimes, but which give recreation and form some of the finest modes of physical culture. It is under this category that Dancing comes.

I may also add a fourth, namely spiritual or mental exercises which are mainly intended to aid some spiritual purposes and mental control, but which at the same time give a kind of exercise to certain organs of the body as well. e.g. Pranayamam or breath control and the like.

In this connection I have heard two theories about the health and build of the body by physical culture. One is that when a man is taking exercise, say, Dumb-bells or Dundalls, he must concentrate his mind on particular muscles of the body and constantly imagine to himself that he is growing strong and developing particular muscles.

The effects of the bodily exertion and the psychology of the mind are said to have the desired effect on the muscles

and the build of the body. Another view is, that the best effects of physical exercise are produced when one is not heavily conscious that he is taking it but takes it in the form of a pleasant recreation. The natural bodily exertion involved therein combined with the joyous spirit of the recreation gives natural health and build to the body.

Those who hold the latter view also say, that in the former, though parti-



Girls preparing themselves for Kolattum.

cular muscles are developed and brought under control the athlete of the heavily equipped gymnasium does not necessarily get a natural and proportional growth or build of the body and not always an attractive personality. Though he may show extraordinary strength, the object of physical exercise is not to make every one a Sandow; it is also said, that in the former class of cases, the keeping of the form and build of the body and control of muscles depend very much on constant exercise and any break in the continuity of the exercise—particularly in the case of Dumb-bells—is appreciably detrimental to the build and even to the ordinary health of the body. No physical culture can have the desired

effect if it does not take into account the element of free and spontaneous recreation and pleasure.

Whatever might be the view taken about these things, it cannot be gainsaid, that the purpose of physical culture is to keep the body in the best possible health, to help its natural growth and produce what is called a personality. Such a view ought to take into account not only muscles proper, but also proper proportion, contour and graces and above all—that appearance called 'Theyas'—which is perhaps the outward manifestation or index of the inner mental spirits.

Viewed from these aspects, it may not be very difficult to perceive the value of Dancing, not only as a variety

of Art but also as a factor that helps the beautiful building up of the body and health of human beings and particularly of women. Whether it is the highly developed art of the stage and the music hall or the simple or crude form of the village folk far away from civilisation, dancing involves a type of playful but all the same concentrated exertion of the body as a whole and as such one of the finest forms of natural and healthy exercise, though the dancer or those who witness the art may not for the time being wholly conscious of that aspect of the performance. Further as

we have shown in a previous article,* the art in the higher forms wherein abhinaya is important, involves high mental exercise in addition to physical exertion, as it requires an extreme concentration of the mind which has to plan out the gestures, portray emotions and feelings and control the rhythm.

The question of rhythm in the elaborate as well as the simple forms of the art is of no mean importance from the point of view of art and exercise. The whole cosmos is subject to rhythm. The sun and the other planets are rhythmic in their movements. In a sense the

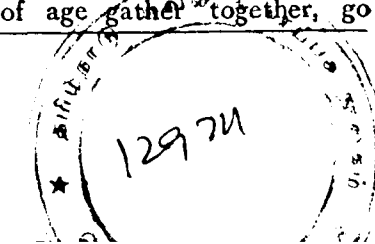


Girls actually performing Kolattum.

movements of some of the organs of the body within are rhythmic, eg. the beating of the heart and the breathing of the lungs. In short, nature is rhythmic in all its aspects. Rhythmic movements are said by medical men to exercise a particularly healthy effect on the nerves of the human body. It is no wonder that in some of the western countries what are called rhythmic exercises are taking the place of the older heavier exercises. While they avoid the laboriousness or heavy exertion of the average athlete of the gymnasium they give at the same time all the benefits of healthy and necessary exercise.

In this country, besides the higher forms involving much technical and artistic training, we must take into account lighter and simpler forms practised by the common folk with varying degrees of refinement; and which perhaps are more useful from the point of view of physical culture for the average man and woman. They are what are commonly known as the Kolattam, the Kummi, the Deepa Pradakshinam, the Thandava of religious devotees and the various types of crude dances of the lower classes. In the Kolattum, young girls generally below 12 years of age gather together, go

* September 1929.



round the various streets and sometimes neighbouring villages as well singing songs, playing the kolattum and collecting funds for the festival. On the festival day, they bathe early in the morning, offer puja to Lord Krishna, partake of a common feast at noon and go round the important streets of the village in the evening with the image of Lord Krishna in a palanquin. They sing and dance all through the way to the accompaniment of Naga-swaram music. The idea is beautiful. It is a spring festival and a manifestation of exuberance of youthful spirits. From the point of view of physical culture, the occasion is one of simple rhythmic movement or exercise of the young, involving the physical exertion of all the tender limbs in playful mood without being conscious of getting one of the finest forms of physical exercise. In the act of hopping round and round, bending the bodies forward and backward, stretching out and drawing back their hands and making such other rhythmic movements the young folk, get the best benefit of natural exercise—and particularly for their legs, hips and hands. As they sing while dancing the lungs are also exercised.

After the young girls return to the temple or house of their festivities, the elderly girls and young women also join together and dance around a lamp singing to a simple rhythm. The importance of these especially for women will be appreciated, when we remember that in our country; women's freedom for open air exercises and enjoyment is very limited and these are the few occasions when they get the maximum benefit of the exercise

and that with the sanction of the surrounding social opinion. It is a pity that even some of these beautiful customs are falling into disuse in villages partly on account of wrong notions about things.

The Kummi and the deepam dances are practised not only during the kolattum festival but also on various other occasions in domestic festivities. eg. the festivities connected with the attainment of age of a girl in the village. It is a curious thing that in this country, dancing in the higher forms of the art is the monopoly of women particularly in the south. Even in the simpler forms the men in the higher castes and classes are not found to take part except religious devotees and bhajana parties.

In the lower classes, both men and women take to the simpler forms of dancing and perhaps they are the healthier for it. Among the low castes and particularly Adi-Dravidas, it is frequently indulged in and there is hardly a festival of their diety without an all-night dance. On occasions of marriage as well as of death they dance.

At a time when ideas and customs are being reshuffled for the betterment of society and improvement of the health of human beings there is no reason why the idea of dancing both as an art and as a course of physical exercise should not be taken up seriously in the education of the young. Though the art of the technical type may not be taken up some form of graded rhythmic exercise with simple rhythm and a few graceful poses may form a course of healthy physical culture at least for girls for the present.

"MALARIA"—HOW CAUSED—WITH A FEW HINTS ON ITS PREVENTION AND CURE

BY

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Among the many scourges to which mankind is subjected to and the various illnesses to which flesh is heir to, 'malaria' stands in no small measure as one of supreme importance; being one of the most easily recognised fevers in our country, it has been variously termed as "Ague", Kulir-Katchil", "Virapani", "Thullapani", and so on.

The man in the street is ignorant of its parasitic origin and even among the educated laity there are very many who are unaware of its true cause. But the fact remains, and that is, that it is due to the 'malarial parasite' infecting the blood. The disease is not a 'contagious' one though, in that it is not spread through air, food or water or even by 'contact'. It is a certain kind of mosquito that is responsible for the spread of this disease and so far as is known at present, it is the Anopheleine variety of mosquito that is recognised as the real 'carrier' of the 'germs' from man to man and thus spreading the disease so widely.

Now so many insects and flies bite us but they all don't produce diseases; and even among the Anopheleine mosquito it is only certain varieties of them that act as true carriers of the disease. Hence, it will not be out of place, here to consider how the parasite gets into our system and produces the fever. To understand this, a knowledge of the physical composition of our blood is essential. Blood is primarily made up of certain small round cells, known as the 'Red Blood Cells'—R.B.C's—, and

a little larger, but active bodies, known as 'White Cells'—W.B.C's—suspended in the liquid 'plasma'. Now one drop of blood is estimated to contain about 3,00,000 R.B.C's—and about 600 W.B.C's. It is these R.B.C's that give the healthy colour of our blood and act as harbouring agents of the malarial parasites, getting themselves destroyed more and more as the disease advances.

When the mosquito carrying the 'germs' 'bites' one, it injects into the blood a large number of these parasites, which, being very active bodies, move about in the plasma, each one (and in some cases two or more) trying to get into an R.B.C's. When once a parasite succeeds in getting securely into an R.B.C., it begins to grow steadily within it, feeding on the R.B.C. itself, until, when fully developed it divides itself into many more, each being a parasite in itself. Thus, in some varieties, they divide into 8, 10, or 12, while in others as many as 20 have been borne out of one. As it reaches this stage, the R.B.C., becomes so fragile and weak, to hold them within its walls, any longer, and hence it gives way shunting off into the plasma all the active young ones. These, in their turn seek fresh R.B.C's to live and propagate their species, as before.

In about 10 to 12 days, after a set of parasites are thus introduced into one's system by the mosquito, the blood becomes so much saturated with these germs and the poisonous products evolved out of them, that definite symptoms such as shivering, headache, fever etc. a

train of symptoms so typical of a 'malarial attack' are seen to be produced in the individual. And when once these symptoms are made manifest, it does not take long for the 'fever' to show itself at more rapid intervals; for, these parasites become multiplied in 12, 24 and 36 hours, so that at the end of 12, 24 and 36 hours, the fever and other symptoms are repeated,

True, it is, that whenever the multiplied germs get out of the R.B.C's into the plasma, some of them get killed by the W.B.C's which by the way, form the 'Policemen' and 'protective battalion' of our system. In spite of this barrier, however, many of the germs skulk away, to enter into fresh R.B.C's, there growing and multiplying, ultimately producing the train of symptoms already detailed above. Negligence, starvation and low states of life favour the growth and manifestation of the symptoms in more virulent forms; and when the disease goes on untreated, other symptoms such as those due to anaemia (bloodlessness) begin to show themselves. It will not be difficult to understand how the symptoms of anaemia are produced, when one realises the very large number of R.B.C's that get destroyed during the growth and multiplication of the "Parasite", with consequent impoverishment in the quality and quantity of the blood.

Besides the W.B.C's of blood there are other protective agents in our system and one such is the 'spleen'. It is a common thing to find many a child and even elderly person in a "malarial area" having big spleens--their protuberant abdomen carrying "big loads". The spleen acts as a "filter bed" of our blood; and the blood of a malarial patient, containing as it is, innumerable dead R.B.C's and the excretions of the germs, is filtered in

the spleen and as far as possible made fresh for its further sojourn in the system. The whole of the blood is thus filtered in the spleen as it traverses that organ; but the parasites *within* the R.B.C's are left perfectly intact, the spleen being powerless to strain them. The continuous filtering of the blood with the enhanced work it has to do naturally, enlarges the spleen. This, is, in short the "sum and substance" of the causation of malaria and the malarial spleen.

Having thus understood the true cause of 'malaria' let us now consider the ways and means of preventing the disease. Now, we know, that without the mosquito, malaria cannot exist and hence the first and foremost consideration in the prevention of the disease will be for the destruction of the mosquito. This therefore brings us to the study of the habits and lives of the 'mosquito'. Mosquitoes generally breed in marshy places where there are still pools or slow running water. If therefore, marshy places can be made arable or drained properly, the breeding of mosquitoes can be minimised; continuous and zealous watch for small pools of water in and around dwelling houses and the prompt removal of such, are therefore essential, and we should be helping ourselves, as well as our neighbours, if each one of us in our individual capacity, keep a vigilant eye on this aspect of the question. The early lives of the mosquito are first in the 'egg' and then in the 'Worm' stage, in such pools of water; since the 'worm' requires air to live, prevention to the access of air for these, will kill them, and for this oiling of such pools with kerosine or crude coal tar oil is advocated. The greater the number of 'worms' killed the less the number of mosquitoes, and hence the less the chances of malaria.

spreading. In districts and villages which are especially malarial, such waste lands and marshy places, having stagnant perpetual pools of water, breeding mosquitoes, should be thoroughly drained or oiled and even the Government are now helping local boards and municipalities to get this done satisfactorily. This procedure, judiciously applied, is seen to keep down the percentage of incidence of malaria in such places.

The next step in the prevention of the disease is to guard ourselves as far as possible from the bite of the offending mosquito and thus from the chances of being infected. Here again a knowledge of the habit of mosquito will help us. Mosquitoes do not fly about during day time, when there is much light and air. They prefer to stick on to unfrequented corners and dark places. During dusk and night time they come out, and begin to fly about for their 'food'. In order to effectively keep away the mosquito, therefore, one must lie within the four 'walls' of the mosquito curtain; and this curtain to be useful, must be lowered well before dusk, the bed being spread early and the fringes of the curtain well tucked under the mattress. Then, during night when one goes to bed, one can do so quite securely getting under the curtain, with the minimum disturbance to it.

Lastly comes the consideration of the 'cure' of the affected'. In curing the malarial patient, his system will have to be thoroughly sterilised of the 'germs' and when once this is achieved, it indirectly helps the eradication of the disease as it deprives the biting mosquito from ingesting itself with the 'germs' from the patient. To the sufferer, however, there is nothing like quinine. It is the one great reliever and curer of the disease. Quinine is a direct poison to the parasite and as long as there is free quinine in the blood, when the parasites are set free in the plasma from the R.B.C's they get killed and in due course the malarial germ is completely eradicated from the system. To ensure the presence of the drug in the plasma, so as to counteract and kill the parasites that emerge from the R.B.C's at regular intervals there is nothing like getting the quinine injected intravenously an hour or two before an expected attack of 'fever'; any way a constant and continuous use of the drug in sufficient quantity is quite essential to the sufferer, to cure him of the ailment and to get his system sterilised of the 'germ'. Besides quinine, the other rules of health such as fresh air, good living in well ventilated rooms etc., are of course quite essential.

FIRST AID TO THE INJURED-TREATMENT OF POISONING.

BY

NURSE CLIFFORD, S.R.N., C.M.B.

Almost any substance may cause poisoning if misused. Even cold water if swallowed in large quantities when a person is very hot may cause serious or fatal results.

That one man's meat is another man's poison is shown by the fact that out of a number of people taking a meal in common, some may become very ill and show signs of poisoning while others escape.

Poisoning is not only caused by decomposed food, but also through food being attacked by a certain group of germs. Outbreaks of food poisoning usually occur in summer when the temperature is conducive to the growth of these germs. Much can be done by the housewife to reduce the frequency of these outbreaks by strict cleanliness and by the elimination of rats and mice. Made-up foods should not be kept long before being eaten, and any cooked food should be well cooked. Meat is especially susceptible to attack by these germs and should be avoided. Such things as fish, mussels, mushrooms, lobster, or even a simple fruit such as gooseberries may also cause poisoning.

The signs and symptoms are many and varied according as to whether the poison acts upon the respiratory, nervous, digestive, or circulatory system. There is usually pain in the stomach, vomiting, purging, weakness, cramp, dilated pupils, and drowsiness, which may go on to a collapse. To endeavour to remember the antidotes and all the special poisons is a hopeless task, but certain broad rules if once mastered will serve in emergencies.

The *general treatment* to be followed in cases of poisoning by food is as follows:

Administer an emetic to assist Nature to get rid of the poisoned contents of the stomach, and a large dose of castor oil to sweep the poison out of the intestines.

To produce vomiting, pass the forefinger well back to the root of the tongue and try to tickle it; this may be repeated two or three times. If this

measure is unsuccessful, add to a tumbler of lukewarm water a tablespoonful of salt or a dessertspoonful of mustard, and give it to the patient to drink. If a doctor cannot be obtained, some responsible person should be sent to the nearest chemist for an emetic, at the same time asking for precise instructions as to its administration.

For children a teaspoonful of ipecacuanha wine, followed after an interval of ten minutes by a second dose, and if necessary, by a third and fourth dose may be given as an emetic. During the intervals the finger should be passed to the back of the throat in order to induce vomiting.

It is safe to give emetics in all cases of poisoning except when the lips, the tongue, and the throat are charred or burned by strong acids or caustic alkalis.

Treatment when the poison is unknown.—There are certain substances which it is safe to use in all cases of poisoning. These are:

1. Milk.
2. Raw eggs beaten up in milk or water.
3. Olive, sweet, or salad oil (except in phosphorus poisoning),
4. Strong tea.

Treatment when the poison is unknown.—Milk, eggs, oils, or tea may be given in these cases and special steps taken and different remedies administered according to the action of the poison. A doctor should be sent for at once, whether the nature of the poison is known or unknown.

In a later article the treatment of special poisons will be considered.—*Good Health.*

HERE'S HEALTH

To be completely healthy is to live fully, body, mind, and spirit active, performing their tasks efficiently, working together as a harmonious whole. When we are healthy we labour with zest, enjoy our meals, sleep soundly, and tackle our difficulties with courage. Isn't this worth while?

In order to keep healthy we must eliminate waste matter, not only through the bowels and kidneys, but also through

the lungs and skin. All these organs must be kept clean. Fresh air both day and night, is needed for the lungs, and water is required both externally and internally for the other organs. A tumbler of water drunk night and morning will flush the inside of the body. Soap and water will remove the accumulation on the skin of the dirt that arises partly from the dust of the atmosphere and partly from the waste matter in the pores.—*Good Health.*

"SITITIS"

According to the Bulletin of the Milwaukee Health Department, sititis is appearing as a new disease. The title is derived from the *Wisconsin Medical Society Bulletin*. It is properly descriptive although philologically incorrect. There can be no question as to what it means. It is the penalty for too much sitting.

No one can deny that with the excitement of American living sitting has come to play a larger part in the daily experience than in by-gone years. Men and women and children sit more than they ever did. Some actually are employed as "sitters" to lure patrons to sight-seeing buses. They sit in school, in the theatre, at the movies, in the automobile, in row boats, at home to listen to the radio and the victrola, to play cards, to watch football and boxing, not to mention the time thus spent in eating and drinking. The restless machine age is carrying with it more rest and less exercise, whether one sits before a typewriter or a linotype, in the vestibule of a trolley car, or on the hard seat of a farm tractor.

This does not mean that we are a tired or idling nation, but it does suggest one reason why the American people tend to become slightly overweight; they are losing some of the exercises required for the development of fullest visceral activity. The old turn and squirm and wiggle in the older daily agricultural and industrial occupation did have their values and somehow they are being dissipated through relative inactivity in a mechanized standardized environment. There is an antidote, however, to part of this sitting at work, in that the hours of work are reduced. But even with the increased time available for leisure during a large part of the year men appear to prefer passive amusement to active self-enjoyment. Does the increase in morbidity rates at age forty-five and above have any relation to the all-too-prevalent sititis, which is diminishing the general invigorating character of daily life? Certainly the brief but active summer activity and recreation after a long and somewhat restrained winter routine does not add

to the strength or power of the ordinary physiologic systems upon which life depends. The heart and lungs, the liver and kidneys and even the gastrointestinal tract appear to thrive best when exercise is part of the daily scheme of living. And this holds true particularly during the middle age. On the other hand it is dubitable whether there is a necessity for those in sedentary occupations to indulge in the tremendous amount of exercise that some people endeavor to practise. From the stand-

point of reasonableness, however, there can be little question that the tendency to sit needs to be offset by some purposeful effort to be up and about, walking, running, riding, skating, swimming, playing ball, golfing, dancing or entering into other forms of activity that give one a sense of being alive, and participating in life.

To be or not to be is a question well bound up in the simpler one, to sit or not to sit.—*American Medicine*.

HEALTH NEWS AND NOTES

Cigarettes not harmful to women?

A strange experiment.—Male and female rats were tried out on nicotine by doctors at the University of Southern California, and it was found that the males lost in weight while the females were unaffected; and the United Press adds that rats injected with nicotine showed no retardation in growth or loss of appetite. If these experiments can finally prove anything regarding humans—cigarette sales will take another jump in feminine consumption.—*American Medicine*.

* * *

Soy Bean Milk Substitute.—It is generally recognised that human milk is the best food for infants and that in the absence of human milk, the best substitute is cow's milk in some form, modified usually by the addition of various ingredients, such as sugar, water, or egg. There are, however, some diseases in infancy in which cow's milk is not desirable, and there are some infants who react severely to milk, breaking out with eruptions and developing symptoms like those of asthma. It is believed that some cases of severe

eczema in infants are due to such sensitization.

In case an infant is unable to take cow's milk, it is necessary to have another substitute for human milk. In an attempt to find such a mixture experiments were conducted with a preparation of the soy bean (as reported in *Scientific American*). This has been used in one form or another in China as a supplementary infant food for many years. Using a soy bean flour as the basis of a preparation, it has been found that infants sensitive to cow's milk can be kept in a good state of nutrition by a preparation containing soy bean, calcium carbonate, and salt. The soy bean flour already contains some magnesium, potassium, and phosphorus. In order to raise the amount of fat, olive oil was added to the mixture.—*Scientific Indian*.

* * *

Coloured Glass and the House Fly.—In a communication to *Nature* (5th April, 1930), Messrs Pilkington Bros. Ltd., of St. Helens report that some years ago, a big firm of jam manufacturers, glazed their storage ware-

houses with yellow glass. The Warehouses are connected by corridors which were glazed with ordinary glass. They noticed that whereas there were always plenty of flies in the corridors these never went into the Warehouses. They then glazed the corridors with yellow glass and found that they got rid of the flies from these also. Messrs. Pilkington continue: "We have heard of other instances where coloured glasses have been used as a deterrent for flies, and we understand that some abattoirs have been glazed with blue glass. As we were continually being asked for advice on this subject, we decided to carry out some experiments in an endeavour to ascertain whether the house fly was susceptible to coloured light, and if so, which colour was the best deterrent. We carried out a series of experiments last summer under advice from Professor R. Newstead, and found that, every thing else being equal, the house fly prefers white light to coloured light, and that red and yellow are the best deterrents. Blue and green are not nearly so effective. The loss in illumination with red glass being too great for general use, it appears that yellow is the best. Although it cannot be claimed that the use of yellow glass is an absolute preventive it is a very effective deterrent, and valuable for use in connexion with the storage of food. We do not suggest the use of yellow glass for any building in which people are continually employed, because it has been found that yellow light is bad for the eyes and general health. We cannot find a record of any work on this subject, and intend to continue our experiments during the coming summer." In the meantime, Messrs. Pilkington are anxious to learn whether others have noticed this peculiar atti-

tude of the house fly towards coloured light, and can offer any explanation.—*Medical officer*.

* * *

More Votaries for Aluminium:—

Food Factories, where cleanliness is of prime importance, and no metal contact must ever contaminate, find aluminium indispensable. Almost everywhere the world over the up-to-date kitchen has its shelf of bright silvery-white aluminium utensils. The *British Medical Journal* by way of confirming users in their choice of aluminium, says: "Next to Gold or Platinum, Aluminium is the best metal for food vessels, even better than silver." It is the precious metal of the kitchen. When our primitive ancestors first shaped a cooking pot in sunbaked clay, they made a utensil one-eighth of which was aluminium in some form or other, for aluminium compounds form one-eighth of the Earth's crust. Some soils are richer in these compounds than others, and the rich soils from which aluminium is extracted are called Bauxite and are found in many countries of the world. Aluminium being one-eighth of the soil, it is not surprising that fruits and vegetables, which grow and thrive on the soil, cannot avoid it, and perhaps even absorb it; for there are traces of aluminium in every ear of corn, and consequently in every loaf of bread: in milk, in port wine, and even in eggs. Aluminium compounds have always been present in the food man has eaten, and in the water he has drunk. From this metal, that is everywhere in Nature, chemists and manufacturers after years of careful research, now supply bright silverywhite, pure and wholesome aluminium ware.—*Indian and Eastern Druggist*.

* * *

Economic Advantages of Cremation:—The increasing difficulty of finding land for cemeteries in congested urban areas and their menace to public health was stressed by Sir P. Chalmers Mitchell, presiding at the annual meeting of the Cremation Society at Nottingham Place, W. 1. He said that the number of cremations in 1929 in Great Britain was 4,353 compared with 3,436 during the previous year, but pointed out that that was a very small percentage of the 532,525 deaths in England and Wales alone last year. "Just reflect," he added, "what the annual burial of over half a million bodies implies. If the burials were decent, each in a separate grave, 449 acres would be absorbed annually. The bulk of the population is becoming increasingly urban, and that means that the cemeteries must be in the centres of population or in their immediate neighbourhood, bringing the cities of the rotting dead in closer and closer contact with the dwellings of the living, and rapidly interfering with rational town planning schemes. You have only to look at recent maps of large scale of urban areas, or to pass over those areas in an aeroplane to see the appalling amount of land that has to be given up to the dead. Since the Armistice, according to the Tenth Annual Report of the Ministry of Health, loans sanctioned to local authorities for burial ground and cemetery authorities amount to £1,620,393. Apart from the interest on the capital expenditure, the figures of local authorities show that there is an average loss of 18s. 9d. on each interment, and in addition, the act of disposing of the dead by burial results in a huge annual loss to the community. We are not only destroying amenities, and endangering the health of the community, but we are paying a great price for our folly. On the other hand, the establishment of a crematorium not only avoids the expenditure of large sums of money in buying land and laying out cemeteries but it contributes directly to the rates. One crematorium,

for instance, actually pays over one thousand pounds per annum to the rating authority." —*The Medical Officer*.

When to use Honey.—Dr. John Campbell, one of the New Health Society's technical advisers, urges that in training for sport and athletics honey should form part of the sweetening agent of the daily diet and before athletic effort honey should be taken in moderate quantity.

Training—2 ounces daily spread over the day's diet.

Sprint— $\frac{1}{2}$ to 1 ounce, 20 minutes before the start. The same routine for the $\frac{1}{4}$ and $\frac{1}{2}$ mile.

Rowing—1 to 2 ounces, 30 minutes before the start.

Football—1 to 2 ounces, 30 minutes before the start, and honey and lemon at interval.

Boxing—1 to 2 ounces, 30 minutes before start. If muscular exhaustion shows, a tablespoonful at such intervals as may be deemed expedient.

Long distance cycling.—Honey whenever nutriment is taken and on the road. Protein is required in a digestible form as well as in longdistance events.

Walking.—Honey at regular intervals on the road.

Remarkable Results.—Dr. Campbell states that in his experience there is nothing like honey as a cardiac muscle stimulant and a source of energy.

He has seen remarkable results in boxing and racing over and over again while acting as scientific adviser to a famous football athletic association, and I am certain it is the one food that can be taken with certainty of results.

Sometimes honey disagrees—though this is very rare—then malt extract or brown cane sugar may be substituted.—*Burma Medical Times*.

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