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AVOID THE DANGER

EPIDEMICS have the special knack of rearing their ugly head whenever there is a large congregation of people for a fair or a festival. It is for this reason that special precautions are always taken even at a very heavy cost in some places, to prevent epidemics from breaking out and to stop their spread if unfortunately they break out. If in a place where every precaution is taken and where people have not only well provided themselves but are also absolutely free to make their own choice in regard to their food and lodging—in many places people live in open air under the wide canopy of the sky for want of accommodation. This is certainly much better than staying indoors in places which are ill-ventilated and are insanitary—the chances of epidemics breaking out are great, how much more so should they be when people are fleeing to save their lives, leaving all their worldly belongings, movable and immovable, with nothing with them except the clothes they wear, using insanitary and unprotected water for drinking, and depending upon doles from a paternal government to keep their body and soul together, in the midst of the terrible prospect of attack by members of another community. This is the unfortunate position in which millions of people are placed in the north-western part of our country at present for reasons which are too well known by now to Health]

all. And, as if to prove the truth of the proverb, 'misfortunes never come single', they had to face torrential rains and heavy floods, which not only took a heavy toll of lives but also impeded their march to safety zones and prevented the regular supply of foodstuff to them. Is it any wonder that cholera has broken out in many refugees' camps, and a large number of people have succumbed to it? It is no easy task to rehabilitate millions of people who have sought shelter in the Dominion of India from Pakistan. It gives rise to many political, social and economic issues of very great difficulty and complexity, and we are glad that two highly experienced men of ability and integrity have been taken into the cabinet to devote themselves entirely to the task of reconstruction and rehabilitation. We have every confidence that in spite of the fact that the problem is so huge as to baffle even the most experienced and able administrators, the two new ministers would tackle the problem satisfactorily, and that in this effort they would receive the wholehearted and unstinted support of the other members of the cabinet and the public.

We are mainly concerned with the problem which affects the public health of the country. While we are immensely pleased with the vigorous steps taken to prevent the spread of epidemics, we very much doubt if results could be produced if the conditions

[November '47

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being what they are at present. Preventive measures can succeed only when people are settled in one place or other, affording full scope for active and effective work. We are now on the mobile stage, and it would take much more time in India to settle these people than in Pakistan where everything seems to have been pre-arranged and pre-planned. And till such time people get settled, the danger of infection and the spread of the epidemic will continue. It is proposed to send many of the refugees to various distant parts of the country with a view to help them settle peacefully. The Premiers of many Provinces, and the Dewans of some States have agreed, at the request of PANDIT JAWAHARLAL NEHRU, to receive a number of these refugees and help them to settle. These refugees

have now begun to move to various Provinces and States. We are anxious that sufficient precautionary measures should be taken at both ends to minimise the risk of the epidemic being carried or spread. Already the small quantity of the food ration and the poor quality of the stuff supplied have reduced the power of resistance of the people, and unless all precautionary measures are taken to prevent the epidemic spreading to other areas, no one can say what the result would be. We are already suffering terribly due to the lack of sufficient foresight on the part of our leaders and paying dearly with the lives of our countrymen and country women. Let them not in this matter also show the same lack of foresight and cause further damage to the country.

Sanitation of Schools

Dr. V. LAKSHMI NARAYANA RAO,

Asst. Health Officer, French Rocks, Mysore State.

THE child of to-day is the citizen of tomorrow. They are the people who keep up the prestige of the country. So they must be well trained to do this. If not the well-being of our country will go down. One of the most important services to the country is to train our children well. Well-trained children will be healthy, wealthy and will be able to safeguard the well-being of the country. The young age is the time when the mind will be clean and will grasp ideas quickly. Young children learn what they see and what their elders do. Children learn more by observation than by reading.

So if the school premises, which is intended to teach the student so many things, is not kept clean, he will in future practise unclean habits and he will be a victim to so many diseases.

For these reasons the school premises and its surroundings must be kept

scrupulously clean. Children in their future life practise what they did and saw in their younger days. If personal hygiene is enforced and practised in the schools the circumstances which spoil the health and produce sickness will be reduced to the minimum in later years.

So any amount of money spent on the sanitation of schools will not be a waste. It will be repaid manifold in the long run.

In our State there are something like 8,000 elementary schools, and a major portion of these do not adhere to sanitary principles. Nobody takes care of the sanitation of the surroundings. Many a time the school is conducted in a temple or some private house which will be invariably unfit for the purpose of conducting a class. The flooring will not be good. There will not be good lighting and ventilation. Many a time all the

students will be found congregated in one place as there will be no separate accommodation for conducting each class separately. The surroundings of the schools will have manure-pits, ditches, rank vegetation, etc. In some places the schools become a sort of temporary cow-shed and in some places the building will be in a dilapidated condition. Consequently students studying in such schools rarely learn clean habits.

Then, which school is fit for education? What characters it should possess? The following is the answer:

The site selected for the building should have a gravelly soil and it should be within easy reach of all the students. There should be no building around it for at least 50 yards. The site should be at a higher level and it should not be open to the dangers of heavy traffic.

As regards the building, it should be built strongly at a fairly cheap cost. The floor should be about 2 feet higher than the surrounding ground and should be plastered. It should contain as many rooms as there are classes. The area of each room should be proportional to the number of students

intended to study there; and it should be well ventilated. It should admit enough light. Students should be provided with benches to sit on. There should be a free supply of pure drinking water and the students must use their own drinking cups. There should be a latrine and students should be insisted to use it. Lastly, the building should be maintained well with proper repairs, etc.

As regards the surroundings, there should be no manure pits or stagnant water etc., in the surroundings of the school premises. No room should be given for the growth of rank vegetation. Surrounding the school at a distance of 40 to 50 feet it is better to have a wall about 3 to 4 feet in height and utilise this bit of enclosed space for gardening and playground.

Students brought up under these surroundings will put into practice in their future life all these things which they have seen and done, and live happily.

If the sanitation of the schools is improved, the number of victims from so many preventable diseases will be reduced to the minimum.

Homœopathy and Naturopathy

Capt. C. OOMMEN, M.B., B.S.,

President, The A.I.A. (H. & N.), Calicut, Branch Mavelikara, Travancore.

(Contd. from page 119, Oct. '47 issue of Health).

As we in India are concerned, not primarily with cities crowded with fans of fashion, but with villages inhabited by the agrarian class who live in the lap of Nature, we have immense scope for the propagation and popularisation of Naturopathy. But, in a field where Gandhiji has attained little success, we should naturally expect considerable obstacles. The great man has, on several occasions, shown to the world at large that, through compliance with the laws of Nature in the day-to-day life, one could observe complete fast for a number of days and still survive the ordeal and regain

his marvellous fitness. Could there be a greater triumph for Naturopathy? The great significance of this triumph should not be lost upon us who are proud to be his disciples and followers.

But, alas! people who lead a busy life in this modern world of hundreds of habit-forming and pleasure-seeking ways, hunt after more and more artificial methods of existence. Most of such people will not pause to heed to the message of Naturopathy. When we turn to the villagers, we only find the position yet more distressing. In spite of water being easily available, physical cleanliness is seldom maintained.

No rules of sanitation are observed, and the premises of wells and bathing pools or tanks are left scandalously dirty with human refuses of all sorts. Are these healthy habits? How can we effect a helpful reformation in these unhealthy habits? Great and extensive health propaganda and the right kind of education are necessary to root out the evil. Until that is possible, we are not justified in looking up to Naturopathy to relieve the sufferings of the masses. It is here that Homœopathy comes in, and its introduction into the towns and the villages need not necessarily be preceded by so rigorous a reformation in the habits and methods of living of the people, though the elementary rules of hygiene and sanitation are essential complements to conditions of general health and well-being.

Indeed Homœopathy can effectively fill up the gap. In the present day conditions of living, most men would welcome Homœopathy as a preferable substitute to Naturopathy, or, for that matter, any other system of healing, because Homœopathy is easily learnt and practised, while being closely related to Naturopathy. In fact, Naturopaths advocate homœopathic remedies as a great and valuable complement to Nature Cure. One can find few good books on Nature Cure which do not also deal substantially with the system of Homœopathy.

There is great scope for independent thinking and action in the independent India. There is scope for making a good start based on the knowledge of experience the world has handed over to us. A gradual replacement of all suppressive methods of treatment by rational methods deserves to be attempted on the basis of an extensive medical and social reform. Even many stalwarts of the Allopathic School of Medicine have begun to plead for treatment of the patient as a whole as against treatment of diseases, I mean partial treatment for pathological manifestations

as such. The establishment of more and more Nature Cure clinics and instruction centres can go a long way in achieving the desired goal. The scope for Homœopathy is immensely greater. We should justly count upon the spread of Homœopathy as a means of effecting the greatest possible amount of improvement in the health condition of the masses, and for this we should essentially recognise and safeguard the elementary liberty of the individual to learn this harmless system and make use of it in order to keep himself fit and also to be of service to the sick and the poor immediately around him.

Let not the great possibilities of the simple system of Homœopathy elude our grasp. Its simplicity and cheapness are not meant for nothing. Homœopathy is one of the greatest gifts of Nature to humanity, and it is as I have already stated, a complement to Nature Cure. It was providential that Dr. Hahnemann stumbled upon the law of similars and thus discovered and developed one of the great hidden secrets of Nature. The so-called scientists were erring and erecting edifices on their errors with disastrous consequences when Providence brought before them a ray of real light which is Homœopathy.

There has been and is a move here and there in India to obtain official recognition of Homœopathy, and in Bengal, Baroda, Bombay and Travancore such recognition has already been given. Madras is about to follow suit. If we are to learn from experience, it is time for a stock-taking of the achievements of those Governments which have offered recognition to Homœopathic practitioners. The question whether recognition is offered to encourage the system has to be seriously considered. I would emphatically say that what these few Governments have done was just to impose a heavy duty on this knowledge, as though it was a prohibitive foreign commodity. Nothing has been done yet by them on the

constructive side. There is not a single well-equipped Homœopathic Medical School or College opened by any one of these Governments to satisfy the requirements of the intelligentsia who ardently desire for a working knowledge of the system. There is not a single Government hospital or dispensary for the system. On the other hand, the unnecessarily tight restrictions imposed on the practice of this harmless system of Homœopathy even by the highly educated class, and the conditions of registration of its practitioners, have materially served to hamper the growth of the system. Let not this mistake be repeated by other States and Provinces in India, and I have particularly in mind the Province of Madras. This is a time when every educated layman has to be encouraged in the study of this noble system of healing, and the makers of the rules and regulations should keep this salient point in view.

Let many faculties of homœopathic medicines be established, and let such faculties turn out well-trained and efficient doctors in as large a number as possible. Let such adepts in the art be given their proper place in the realm of medical profession as such. That is all very good and that is what India wants. But until there are enough of such faculties and until we have enough of doctors to serve our teeming millions, let not a short-sighted enforcement of a law discourage the layman enthusiast of the educated class from becoming a learned Homœopath. "A six months course will be sufficient to enable any intelligent mind to grasp the principles of the Homœopathic law of cure," said Dr. Hahnemann. Let this great advice of the founder of Homœopathy be respected. To learn that Nux Vomica

suits the fiery, quick-tempered, zealous, energetic man suffering from constipation with ineffective urge for stool, that Pulsatilla cures any disease in a plump, fair woman of yielding and tearful disposition and agreeably affected by sympathy or consolation, and that Chamomilla is suited to affection of children who are of a restless, fidgety, and quarrelsome nature, crying for everything but refusing when offered, nothing but a moderate habit of learning is required if the person is educated and intelligent. So is the case with hundreds of other Homœopathic remedies too. If hip bath, sun bath, steam bath, air treatment and other Naturopathic methods can be allowed to be practised freely on the basis of a man's knowledge in the system, the use of infinitesimal doses of Nux Vomica, Pulsatilla, Chamomilla and other Homœopathic remedies too can be permitted to be employed by one who has learned to use them. The only thing to be taken care of is to prevent mere quackery in the name of Homœopathy. This cannot involve any considerable difficulty as the means of testing the knowledge of a Homœopathic practitioner are many and extremely easy. Whether the care of the sick may be entrusted to him can be ascertained by a knowledge of his educational standard, and further by asking him to prescribe in a dozen given cases. Here is a challenge to the Government or Governments which have either recognised or are thinking of recognising the system of Homœopathy in order to encourage the system. Will the Madras Government take it? If it does, the great suffering masses of the province are fortunate. The public need not then fear a prohibitive duty on the knowledge of Homœopathy, which is a great heritage of the intelligentsia.

Defects of Nails

Slight defects in the nutrition of the nail, which probably indicate some general impairment of nutrition at the time when the affected part of the nail was being formed, such as loss of sleep, an attack of indigestion, or some other illness.—*Good Health.*

Ten Functions of a Doctor

D. N. DEBSARMA,

(Experienced in Public Dispensary & Tea-Estate Hospital Work).
Mathurapur, Tihu (P.O.), Assam.

THE duty of a doctor towards his country does not surely end with the mere removal of diseases of his patients. His duty covers many other things which he should aptly know when he ventures to enter upon such a noble and responsible profession like the medical practice. The healers of a country can perhaps be regarded as competent and successful in their mission of life only when that land is healthy, wealthy, and prosperous in all respects. So, it is obvious that his work is of a divergent nature, and the following points fall within the sphere of his duty:

I. Prevention of diseases.—"Prevention is better than cure". Preventive treatment of diseases is an important part of modern therapeutics. Both social and personal preventive measures against all preventable diseases should be taken and the physicians should see to it. This will save hundreds of lives, time, money, and energy. In fact, preventive treatment is the main treatment in some diseases, to wit small-pox.

II. Eradication of diseases.—Eradication of diseases should be the sole aim of the medical profession in all possible cases. Suppression or amelioration of diseases does not make the victims of the maladies absolutely free from their dangers.

III. Preservation of personal health.—Precautions against diseases and deterioration of health should be taken by everybody, and the doctors should explain these precautionary measures as well as the essential laws of health to all those who come in contact with them.

IV. Preservation of social health.—Over and above the personal precautions against abnormalities of health

there are certain other precautions which should be adopted by the members of a society conjointly for the preservation of health of their society, and the doctors should take an active part in the matter. Preventive measures against certain diseases such as malaria, tuberculosis, leprosy, malnutrition, etc., fall under this category.

V. Doctor's role in local medicine.—A medical man is often required to apply his medical knowledge in some cases of medico-legal importance such as the cases of mechanical injuries, poisoning, etc., for the elucidation of truth. He should also know something about the procedure in courts of law of his country for the purpose.

VI. Elimination of social sexual corruptions.—Rape and all other unnatural sexual offences are often the causes of various ghastly diseases, undermined health, and demoralization of people. Doctors have much to do in these matters too. They have to assist the law in laying bare the facts in connection with these offences apart from their medical treatment in such cases.

VII. Restriction of espousals amongst diseased persons.—Children born of diseased parents are likely to be diseased and of poor physique. Persons infected with some special diseases like syphilis should not marry till they recover or they will spread their infections to others. It is the medical man who will advise these diseased people as to their marriage.

VIII. Instructions on health matters to the public.—The health authorities of a country should make arrangements for imparting instruction on all matters of health to its people at regular intervals and at some fixed

places, and the physicians should take the main part in this work also. General education of the masses is, in fact, the main basis upon which the success of health education depends to a great extent.

IX. Invention of means for human happiness and longevity.—There is a class of doctors who are always straining their every nerve to find out some new means for longevity, health and

happiness of man. This spirit should be possessed, more or less, by every high-minded medical man.

X. Doctor's role in other social reforms.—Doctors like all other members of their society should take part also in other social affairs like economical, political and religious matters as far as their circumstances allow them to do so.

The Cattle Wealth of India

P. A. KRISHNAN,

Journalist, Coimbatore.

THE cattle wealth of a nation has a very marked influence on the national economy and national health, and as such it is the sacred duty of the Government which looks after the welfare of its people to see that the cattle wealth is not depleted by indiscriminate slaughter, disease or other circumstances.

The Government of India's record in this matter, as in many others, is a very pitiable one. India possesses the largest number of cattle heads but the least amount of cattle wealth, for the quality of the Indian cattle is the poorest in the world. The chief reason for this is lack of knowledge on the part of the peasants, want of sufficient pasturage and cattle food, and above all the abject poverty of the masses. Thus we have a vicious circle. If the standard of living of the masses is to be raised the cattle wealth should be increased, and a good live-stock position presupposes good living conditions.

Of late even the quantity of the Indian cattle has been steadily dwindling. This has been mainly due to indiscriminate slaughter aggravated by military needs. Again, disease has been taking a very heavy toll of our cattle. Murder of cattle to please the

Gods(?) has also told heavily on our cattle resources.

It is high time that the Government should move in the matter and follow a vigorous policy to check further depletion and promote, increase, and improve the quality of our cattle resources. Indiscriminate slaughter of cattle for sacrificial rites and for purposes of meat should be prevented, if necessary, by legislation. Wastage of milk and milk products should be checked. The masses should be educated in scientific methods of cattle-rearing and breeding. Co-operative cattle farming on improved scientific lines should be encouraged, if necessary, by granting financial aid. A greater number of veterinary doctors should be trained. A central institute of cattle research should be established with a view to produce better breeds of cattle more resistant to tropical diseases and to develop improved methods of combating diseases. The need for augmenting our cattle resources is all the more greater now when the food position in the country is very critical. It is to be hoped that the popular Ministries and the National Government would take up the matter in right earnest without further delay.

Women and Modern Stress

WINFRED OVERHOLSER,

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LIFE is nothing but a continuing adjustment to stress. Some stresses are internal. They result from conflicts between our instincts and what we have been taught to accept as the dictates of society. Some of these stresses may be due to constitutional or hereditary factors, but the vast bulk of them represent early influences. Other stresses are environmental. They result from organized society. These stresses may be domestic or financial; they may result from work, social contacts, or school. As civilization has developed, competition has become more intense in every field. Life has become more complicated. Stress is becoming more intense and more varied as society progresses.

The stresses that operate upon any given individual are at least in some way, and usually in many ways, different from those that operate upon any other. No two people are entirely alike.

Woman has to accommodate herself to an acceptance to the facts that this is a masculine world and to sublimate or to repress her aggressiveness. It is a fact, too, partly conditioned by biologic peculiarities, that woman is in general more deeply and closely affected by the various "mores" and "taboos" of society than is the male. There are some factors in the social situation that operate differently upon women from the way in which they affect men. This is true, even though for the last fifty years there has been a growing recognition of the woman as an individual.

The proportion of women in the service who became psychotic during the war was extremely small. Of

those who developed mental disorders a large proportion had shown in civil life, and under reasonably favourable circumstances, their inability to make a satisfactory adjustment. Those people who are unable to adjust to relatively simple situations are even more likely to fail of adjustment when stress becomes more difficult.

Many women were employed during the war and did their work well. The home suffered. The relative lack of supervision tended to promote the adolescent revolt against authority. The fact that the woman was employed has been disruptive to the family situation. Another phenomenon of the war has been the startling increase in marriages of young girls, often on short acquaintance. A substantial number of these marriages will end in divorce.

Now that the war is over many of the motivations have halted or reversed. Perhaps too rapid an attempt has been made to return to a peacetime status. A substantial change has already taken place in the industrial field regarding distribution of the sexes. Some women will welcome the return to the home; others will continue to work as long as possible. What the future results will be upon those unmarried women who have found satisfaction in their work and their pay is a subject to speculation. More than likely the future will continue to bring a somewhat further decline in the birth rate as more women prefer freedom to work rather than the more conventional domestic joys.

New sources of anxiety arise to replace those that have passed now that the war is over. Among these are the problems of prevention of future war,

the cost of living, strikes and wages. The cohesive tendency of war has given away to instability and restlessness.

What will be the woman's reaction to these stresses? Tension is probably the most common reaction. There is also a feeling of restlessness ('fidgety'). There is often a feeling of fatigue accompanying the tenseness. One of the manifestations and attempted cures may be excessive smoking—more common among women than men. A resort to alcohol is not at all uncommon in condition of tenseness.

What methods may be adopted to relieve tension and to prevent it? General physical hygiene is highly desirable. Observations have shown that men, who are in a state of extreme fatigue and suffering from hunger and thirst, are most vulnerable to psychologic stress. A reasonable degree of confidence in those about one and a broad toleration of peculiarities of one's friends are relaxing and

hygienic frames of mind. One needs above all a scale of values with relation to one's self. The development of hobbies and interests outside one's immediate occupation is a highly important thing. There is need to train teachers in mental hygiene as well as other subjects so that they may give better training to their students while they are young. The patient must resolve his or her own conflicts but guidance is often necessary. It is the psychiatrist's function to be helpful in these situations. Friends, satisfying work, security, agreeable hobbies, good health—all of them are valuable, but above all, man or woman, young or old, we need a readiness to face reality and an ability to rely on ourselves. Given these, even the stresses of the difficult times in which we live, may be faced with assurance. —*Mental Hyg.* 30, 545-48, Oct. '46.—*Quarterly Review of Obstetrics and Gynecology*, April '47.

Make Sure of Your Vitamin C

S. B. WHITEHEAD, D.Sc.

Of all the vitamins needed for buoyant good health the one most likely to be short in everyday winter diet is vitamin C. It is the Achilles heel of rationed dietary, simply because rationed foods do not supply it in anything like the necessary amounts. The importance of this vitamin to good health is recognized by the authorities in that they make special provision of it for expectant and nursing mothers and infants in concentrated orange juice, but as far as the rest of the population is concerned, the fulfilment of their vitamin C needs is largely a hit-and-miss affair.

The fact is vitamin C is not stored in the body like vitamins A and D, and any excess that you get one day is not carried over to the next but excreted. It is probable that more

vague symptoms of ill-health are due to a lack of vitamin C than to any other single dietary factor.

Every cell of the body is enveloped by cement-like substances known as intercellular substances which support the cells themselves, giving firmness and suppleness to the tissues and enabling cell nutrition to go on at a healthful level. When there is a lack of vitamin C, the viscous nature of the surrounding intercellular substances turns watery. In the final result, this manifests itself as a scurvy in which the gums swell and the teeth fall out, and the tissues lose firmness and there are hemorrhages.

Most people, however, get enough vitamin C to stave off scurvy, but not sufficient to prevent the minor effects of a vitamin C deficiency. Bleeding

gums, sallow, muddy complexion, fleeting pains in the joints and legs, loss of energy, restlessness, irritability, and run-down feelings may be caused by a shortage of vitamin C. The teeth are usually affected first, for the vitamin is essential to prevent decay.

When we get sufficient vitamin C, the teeth and gums are kept healthy, and the body maintains its youth and suppleness. We also know that vitamin C speeds up the healing of wounds, and of such troubles as ulcers in the stomach or duodenum.

A fresh-food vitamin.—The chief reason why the vitamin is likely to be short in a winter diet is that vitamin C is essentially a fresh-food vitamin. The richest sources are the fresh raw vegetables, salads, and fruits. Milk contains very little, and there is no vitamin C in such staple foods as cereals, bread, meats, butter, cheese, dried fruits, eggs, etc. In winter, it is the fresh raw foods which are in short supply, and what foods there are may be preferred cooked.

Here we come up against another reason for the vitamin C shortage in winter. Vitamin C is very unstable. It is richest of all in the rapidly growing parts of plants, green leaves, shoots, skins, etc., when fresh. Every day fresh foods are kept means some loss in the vitamin, for it just disappears when the plant stops growing and the wilting point approaches.

It is also the most easily destroyed of all the vitamins. It oxidizes quickly on exposure to the air and this means that fresh foods should not be left long with cut surfaces exposed. It is best to prepare salads and fruits immediately before serving.

Vitamin C is also very soluble in water. When a vitamin C food must be cooked, it is important to cook it in as little water as possible in a lidded pan, or to bake it. No soda should be used, and very high temperatures must be avoided.

Importance of careful handling of fruits and vegetables.—On the other hand, good handling will conserve the vitamin. By keeping fruits and vegetables at cold temperatures or in a refrigerator, vitamin C losses are minimized. Naturally sealed foods like citrus fruits do not suffer much loss of vitamin C in keeping, and this is why they make such excellent winter fruits for us in our climate. Apples and pears suffer slight gradual loss and should not be kept beyond their proper season. Potatoes and root vegetables hold on to their vitamin C so long as they are sound in skin.

So long as fruit imports are inadequate, we must make up our need of vitamin C with home-grown foods. On the days that we don't get some fresh fruit, we should have a salad. Freshly shredded heart of cabbage, brussel sprout, celery, thinly sliced onion, finely grated carrot, beet, turnip or swede are some of the winter vegetables which can be used for salads. Parsley is an excellent source of vitamin C.

All fruit juices, especially rose hip syrup, black currant purees, etc., are good vitamin C tonics. Canned fruits and vegetables under reputable manufacture suffer only slight losses of vitamin C and thus make useful winter fare.

Dried beans, peas, and lentils contain no vitamin C, but let them soak in water until they begin to sprout, and with sprouting, vitamin C is manufactured, and the legumes then have some of the vitamin qualities of a fresh food.

Cauliflower is very rich in the vitamin for a vegetable. The flowers can be enjoyed raw in salads. The young sprouted leaves of carrots, onions, chives, and other herbs, which can be grown on a window ledge are all worth cultivating to give variety and vitamin C.

It is estimated that the average adult needs about 1,000 international

units of vitamin C (50 milligrams) daily to be kept in tiptop health. This requirement can be met if we have in our daily menu one fresh fruit (orange, lemon, apple, pear, etc.) or its equivalent in fruit juice, syrup or puree; one small salad of three to four vegetables, two of which are leafy greens; and at least one serving of potatoes, preferably cooked in their skins, and one serving of a leafy green

vegetable. On the days when one or another of these foods is missed, another vitamin C food should take its place. Tomatoes can be substituted for oranges, canned fruit for fresh cauliflower or celery for cabbage, and even dandelion leaves for spinach. In making sure of vitamin C, we make sure of a host of vital food-minerals, too, and other vitamins found in fresh raw foods essential to health.

Education for Life

EVELYN & SYDNEY GRAY

Life begins in the nursery, and education should start there too.

(Contd. from page 124, Oct. '47 Issue of Health)

There is, we think, a danger now-a-days of over-emphasizing the value of the weight curve in infancy. The healthy baby certainly shows a steady, regular gain in weight, but that steady gain is not necessarily a criterion of health. Who has not met the large, pale and flabby child who is the pride of his mother's heart simply because he weighs several pounds more than the other babies of his age? The healthy baby is not always fat; he is muscular, active and happy, his flesh is firm and his cheeks pink. The child's bony frame should be taken into consideration when assessing his weight; and his general condition, mental and physical, be taken into account before judgment is passed.

As the months pass, the baby's world extends to include his father and other members of his family. He smiles in recognition at a familiar face and, sometimes, shows displeasure at the sight of an unfamiliar one. At this stage his progress is phenomenally fast. If we compare the baby of one day old with the same child at six months, we are astonished at the strides that have been made in such a short space of time. Already the actual proportions of the body have

altered; he can usually sit up for a minute or two without support; he can play with his rattle and grasp his toys using all his fingers together; he can focus quite small objects with his eyes and, when placed on his back, can nearly always roll over on to his front.

There comes a time when the baby shows quite clearly a desire for foods other than milk. At this stage he derives great pleasure from chewing a rusk, or pulling on a hard baked crust. He begins to enjoy completely new sensations through touching, tasting, biting and smelling. His palate has not only to become accustomed to new flavours, but to unfamiliar textures and, once he has shown a desire to experiment in diet, his attempts should not be frustrated. In our own experience it is the baby who is kept exclusively on a milk diet for the first nine months of life who becomes a problem at weaning time and a difficult child to please at meal times later on.

Between the ages of four and six months the modern baby is usually allowed additions to his diet. It is a good rule, both in mixed feeding and in actual weaning, to give very small quantities of a new food at first

and to make only one addition to the diet at a time. Too sudden or drastic changes at this period often cause trouble and it is seldom wise to introduce a new method of feeding at the same time as a new food. The baby's sense of security is his most priceless possession and this can be rudely shaken by too sudden changes of experience for which he is unprepared. Happy is the child who has become familiar with a wide variety of flavours by the time weaning is commenced and who is already used to several different methods of feeding.

It is usually true to say that, where babies are concerned, comparisons are odious. As we have already pointed out, the child is influenced not only by his inheritance, but by his environment and no two infants should be expected to react in an identical manner to a given situation. The baby learns through feeling and doing and it is important that he should set his own pace. The average mother of intelligence prides herself on a modern and scientific approach to infant feeding. She consults text books on the subject, and rightly so, she asks advice from a doctor or clinic and attempts to carry it out conscientiously at all times. But no absolutely hard and fast rules can be successfully laid down with regard to infant management. The text book at the best can only deal with the average child and average progress; to the parents falls the task of interpreting the advice it has to offer to meet the needs of the individual and, at all times, respecting that individuality, even in the tiniest baby.

Many a difficult emotional situation arises quite unnecessarily when a mother confidently expects her baby to attain standards of behaviour at the age a text book has informed her it is normal to do so. The sense of dissatisfaction, or disappointment is bound to communicate itself to the child and eventually do more harm than good.

Even in early infancy children are peculiarly sensitive to atmosphere. Those unfortunate babies who are misunderstood, unwanted or unloved, however scientifically correct their upbringing, seldom flourish in the same way as those who can depend upon consistent affection and forbearance, even if their routine is more haphazard and their diet less perfectly balanced.

The children of unhappily married parents suffer physically, mentally, emotionally. The general practitioner, unfortunately, is all too familiar with cases of children who refuse to eat, who sleep badly and who show various bowel and bladder disorders, not because there is anything physically amiss, but because they have lost their sense of security. The same problem often becomes apparent in the teaching profession. One case particularly comes to mind, that of a healthy, happy and quite outstandingly intelligent little boy of nine who, on learning that his parents proposed to live apart, refused to eat, lost weight and became a difficult, miserable and finally unmanageable child, with little interest either in work or play.

The background of a happy family is the only ideal one for a child. He needs a home where he will neither be over-disciplined, nor over-indulged. He needs a mother and father who not only love him, but who will talk to him and play with him. He needs opportunities to develop self-reliance, time to play and material to play with, as well as a good example from which to learn. He needs both his father and his mother to take an equal interest in his upbringing and unfailing consistency in the standards they demand of him. It is little use one parent showing displeasure if the other is pleased or unmoved.

But even in the happiest households emotional conflicts do arise and, more often than not, these are connected with feeding, or meal time

problems. The fact that a good diet is of fundamental importance does not mean that if a child refuses a certain dish, or a certain meal, that his health is bound to suffer. Forcing unwanted food upon him is far more harmful in its effects than letting him do without. After all, a study of food values, plus a little common sense, will enable the parents to substitute items of diet which the child does like for those to which he shows an aversion.

Even very young children soon sense that they can cause a minor sensation by refusing their meals and once in their possession, this is a weapon

they seldom hesitate to use. If titbits between meals are avoided and no emotion is displayed when there is a temporary loss of appetite, the situation soon rights itself of its own accord, with a healthy child. From the first, food should be connected with pleasurable sensations and should be imbibed in a harmonious atmosphere. The normal mother should enjoy feeding her baby as much as the baby enjoys being fed; the healthy child should look forward to his meals as much as he looks forward to his play; the balanced adult should suffer no foolish inhibitions with regard to the delight and comfort of good food.—*Health Horizon*.

Curative Properties of Honey

HONEY has traditionally been used as a remedy in the home for centuries. It has recently been elevated into the scientific category through experimentation in Russia. G. Shakhov tells of this in the *American Review of Soviet Medicine* (June, 1946.) Some forty medical units cooperated in conducting a series of tests in which honey was used as a remedy. During the war, honey was prepared as a salve for wounds that healed slowly and for osteomyelitis (inflammation of the bone marrow). Soldiers suffering from slow-healing wounds were treated in four hospitals and in one outpatient clinic, with ninety per cent showing improvement. No untoward reactions were noted. In several institutions, honey was found to be an effective destroyer of bacteria. Taken internally, it produced favorable results in jaundice, chronic

dysentery and heart or kidney edema (swelling). In a Moscow hospital, stomach and duodenal ulcers were treated with it. The subjects were twenty-nine persons who had had recurrent ulcers for from three to ten years. For ten days, they each received about a pound of honey daily, without any other change in their diet. Nearly all felt better after four or five days. At the end of ten days twenty had no pain, while nine experienced moderate relief. Repeated X-ray examinations revealed that all deformities of the stomach and duodenum disappeared entirely in seven out of nineteen cases, and partly in six. Later examinations showed satisfactory progress. In another hospital, ulcers healed in from fifty to eighty per cent of the cases. No relapses were reported.—*Good Health*.

To Each According to Its Needs

An elderly dame went into a restaurant. To the waiter she said: "I'll have a double orange juice, a large dish of prunes, and an extra size bowl of bran flakes wit parts of whit!" "Is that all?" he asked. "Of cuss not," she answered. "Dis is for mine bowels. For me I'll have two fried eggs, a hot dog und a malted."—*G.P.*

Self - Dosing

ROUGHLY, three out of four persons of both sexes and all ages dose themselves (or their children), partly for ailments, real or imaginary; partly as preventive measures, a practice which appears to be growing, and partly, possibly chiefly, as a tonic to add to the zest of life. What the people take matters less than the reasons for taking it, for most medicines are as harmless as they are useless. But the general belief that they are, or might be, beneficial, and above all, their seductive advertisement are destructive of health and do much to produce invalidism. Some of the drugs taken may in themselves be detrimental. Aperients of any description upset the healthy function of the alimentary canal, and aspirin, the most popular of all remedies, is suspected of causing mental deterioration; but in general the remedies do little harm. After all few remedies contain as much toxic matter as a glass of beer, a cigarette, or a cup of tea.

Self-medication is at least as old as the medical profession, but it is only within the last century, when it gave rise to a lucrative trade, that it has been a real menace. For the medical profession of the nineteenth century was in part at least responsible, though no practitioner has ever favoured or advised it. But in our battle against self-doctoring we have laid ourselves open to the charge that we were concerned less with the health of the people than in guarding our own perquisites, and promiscuous prescribing, which is still common, does give the impression that the medicines themselves are important and that if their ingredients can be discovered the elixirs can be had without paying a physician to prescribe them. The patent medicine trade reached its zenith towards the close of the last century, but as it declined the proprietary medicines stepped up. These differ

from patent medicines in their appeal, they claim neither secrecy nor magic, but "scientific" proof of their efficacy—an approach better fitted to a people who were getting some smattering of education including a very little "science." We see the effect of this in the recent demand for vitamin preparations. It is much more difficult to lead the people from sham to true science than from magic to sham science. Some years ago, the British Medical Association tried a crusade against patent medicines by publishing the analyses of many of them, showing the real market value, which was generally in terms of farthings, of what the people got for their 1s. 1½d., or 2s. 9d. This did little good for several reasons, one of which was that the reports were published only in the medical papers; the popular newspapers, which depended largely, and in some cases almost entirely, on the revenue from advertisements were not keen on enlightening their readers at the cost of their dividends.

Control of self-medication by legislation has been and still is advocated and we have laws which do limit the sale of drugs to the people. In their main object they fail and must fail unless, like the laws governing dangerous drugs, they are drastic and administered as part of the criminal code. Most of the laws of patent medicines can, by the ingenuity of the vendors, be turned to advertisement. One thing only will control self-drugging and that is popular education in the principles of biology, and for this to be effective we must put our practice in order and give a right and not wrong example to the people.

There is no line of demarcation between a drug and food. We all take tea, or coffee, or alcohol, or tobacco which have no nutrition value. Except in excess, these agents are harmless on condition that we take

them only because we like them. When we make excuses for our indulgence, they can be just as destructive to health as what are more generally recognised as drugs. The danger is the autosuggestion of advertisement and this can be so subtle that it is

next to impossible to circumvent it. A patent medicine may not be advertised to cure nephritis, but it may be as a kidney elixir which gives it much greater scope for suggestion.—Dr. J. N. P. Davies in the *B.M.J.*

The Flight of Mosquitoes

THE U. S. Public Health Service has issued "A Critical Review of the Literature Relating to the Flight and Dispersion Habits of Anophelene Mosquitoes" which gives details of the known dispersions of the various species and describes a new method of marking individuals with a view to accurate determination of their roving. The work must have entailed great labour, which it well repays, for it is very useful for reference by all who have to do with the control of malaria. The cost of control of malaria increases as the square of the distance of the periphery of an area from the breeding centre, so a knowledge of maximum flight of each species is a great asset in reducing costs. It is still generally accepted that control of a half-mile belt around an area would give adequate protection, but though this is justified with many species and in some circumstances, it is not universally acceptable. In some species "maximum flight proved by experiment" exceeds four miles and in *A. maculipennis atroparvus* reaches 8.7 miles. Mosquitoes can, of course, travel as passengers any distance. For instance, *A. gambiae* was carried from Natal in S. Africa to Natal in Brazil where it established itself and became a great nuisance. The presumption is that a passenger will not find its way back to its breeding pool so will either die or find a new spot for its family arrangements in the area to which it has been carried. Most animals return to their own nurseries

for reproduction purposes, some with such persistence that they remain permanently local and should their breeding ground be destroyed, they become extinct. But this is not always so, and some thrive in a new habitat. *Aedes aegypti*, the main carrier of yellow fever, is an Old World species, yet it was carried to America and thrived there and set up endemic Yellow Jack in Central America which has only recently been suppressed. It is probable that *Aedes* travelled to America in slave ships where it would find opportunity for breeding on board and a reservoir of virus in the human passengers. Anopheles have been proved to travel by aeroplane, and such transport being speedy, the flies can not only survive the journey but can be delivered at the terminus in a ripe state to spread *plasmodia* picked up at their port of embarkation. So the possibility of malaria being reintroduced into districts where it has become extinct is a real one. How real it is, we do not know. It is possible that a potent malaria carrier on transportation may lose its carrying properties without any other tangible alteration, whereas a non-carrier may gain carrier property in similar circumstances. We may assume that a mosquito which travels on its own wings will either return to its breeding ground or find a suitable spot at the end of its journey and set up a new malarious district. It is therefore of much consequence that we should know how far they can travel of their own volition.—*The Medical Officer.*

Health, November '47

Topics from Medical and Health Periodicals

Music a healthful hobby.—"Cultivate a hobby" is advice frequently given to patients by their physician. The choice may be easy in some cases but often the question is asked, "What hobby?" Music is an excellent selection if any talent for it exists. It has been found highly satisfactory to the physicians, nurses, pharmacists and medical technicians who form the Doctors' Orchestral Society of New York City. This organization has been giving concerts of classical programs since 1938. The members declare that this avocation is the best "fatigue eliminant" they know. In recent days they have had to carry a heavy burden of work daily. Dr. Cornelius Traeger, the president, who is chief of the arthritic clinic at Roosevelt Hospital, declares: "Most of us come down to practice dead tired, but after a half hour of playing we feel completely revived. We could go on for hours."

Music, as well as being a real benefit to those in tense occupations, is now used in hospitals as a curative measure. In many mental cases it proves very soothing. It is especially helpful if the sick person can be induced to play some instrument or to take formal part in singing. Well people who have no talent for actual production may find relaxation which is medically beneficial in going to concerts or listening to appropriate programs on the radio. Most of us need something to lessen tension.—*Good Health.*

Campaign against multiple sclerosis.—National associations for the study and cure of various diseases have been formed in recent years. A late addition to the list is that concerned with multiple sclerosis. This is a chronic nerve ailment in which a patchy destruction of the nervous system occurs, writes Dr. Howard A. Rusk in the *New York Times* (April 20, 1947). Since it affects the central nervous system, it may cause symptoms in almost any part of the body. Among the more common signs are disturbances of vision, such as double vision; tremors, or involuntary quivering of parts of the body; nystagmus, or involuntary movement of the eyeball; general weakness; disturbances in walking and equilibrium; numbness of parts of the body; difficulty with speech, and emotional upsets. In some cases, there is improvement lasting for long periods; in others, deterioration is so rapid and continuous that the patient is soon confined to a wheelchair or to bed. Statistics about the prevalence of the disease are not available. It is common in our Northern states, in countries of Northern Europe but rare in our South, in the Mediterranean region and almost unknown in China, India, Japan and Turkey. One explanation advanced for this difference is that where chemical fertilizers are much used, the mineral balance of the body is upset. In Asia, natural manures serve to restore depleted soils. Freedom of this continent from some other degenerative diseases has also been attributed to the system of fertilizing.—*Good Health.*

Foreign bodies swallowed.—Small coins, buttons, and other round objects generally create no very great disturbance if they reach the stomach, as they usually do. Much unnecessary alarm is often felt when articles of this kind have been swallowed. Even pins and needles are generally successfully passed through the intestine if they reach the stomach. The intestine shows marvellous intelligence in dealing with these sharp objects. Professor H. Roger years ago showed by experiments upon animals that when a pin is placed in the intestine with the point downward and sticking into the intestinal wall, the intestine promptly turns the pin over, giving the head a down-stream direction, thus preventing penetration of the intestine. When any sharp or angular object has been swallowed which may possibly injure the stomach or intestines, the danger of injury may be frequently lessened by giving large quantities of potatoes and other bulky vegetables, so as to distend the stomach and bowels and thus give plenty of room for the passage of the foreign body.

When the substances swallowed is of a metallic character, its location may easily be determined by means of the X-ray. Frequently such bodies are discharged from the bowels without their escape being noticed. In such cases the X-ray examination will render great service by removing cause for further anxiety. Occasionally a surgical operation is needed. The patient should be under a physician's care until the danger has passed.—*Good Health.*

Habits conducive to health.—This is the Golden Age of the psychoneurotic, we are told by Dr. Bruce C. Lockwood in the *American Journal of Digestive Diseases* (Vol. 14, p. 113). World conditions have brought on an increase in nervous troubles, which in turn are often associated with gastrointestinal disturbances. Many patients with such ailments have some degree of neurosis, psychoneurosis or even psychosis. So Dr. Lockwood has drawn up a set of rules which will tend to ward off and to cure maladies of the digestive system. It might be added that they will benefit health along other lines as well. Some of these rules follow: Do not take life too seriously. Let the other fellow worry. It is bad to strive continuously, even in a good cause. Resign unnecessary obligations, work and commitments. Learn to relax and rest at every opportunity. You will do more work if you do not worry. Avoid fatigue. Get nine to ten hours in bed every night. Learn the value of masterly inactivity. Avoid getting angry. Anger harms you more than the other fellow. Do not interfere with others. Cultivate a cheerful disposition and a sense of humour. Read humorous short stories and tell humorous stories. Avoid thinking constantly of yourself. Develop a hobby.—*Good Health.*

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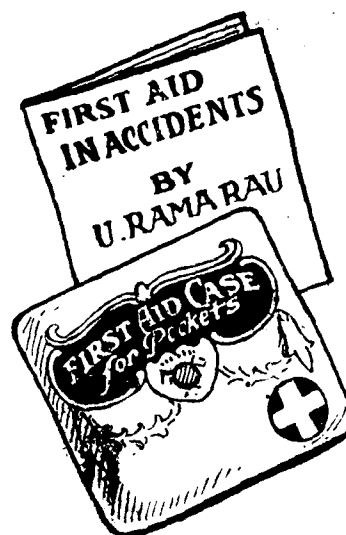
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