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Adulteration of Foods and
Drugs—Editorial

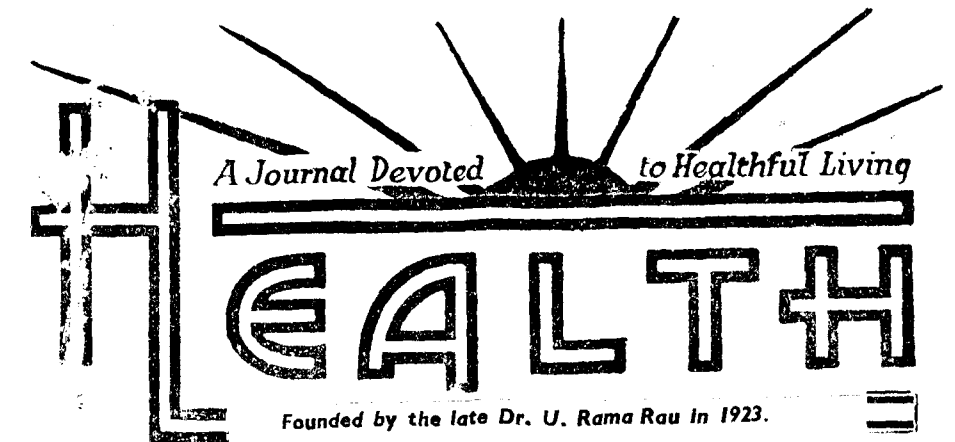
The Doctor on His High
Pedestal—(A Fable)

Sleep and Dreams ?

Chlorophyll—Has it any
Deodorising Action ?

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V. XXXI

DECEMBER, 1953

No. 12

ADULTERATION OF FOODS AND DRUGS

(A Growing Menace to Health)

THERE is no greater menace to the health of the people today than the rapidly increasing sale of adulterated food and spurious drugs. From the latest available annual report of the Government Food Analyst of the Madras State, we gather that over 40% of the pitifully small number of food samples examined were grossly adulterated. Earlier this year, a Select Committee of the House of the People was asked to consider and report on the Prevention of Food Adulteration Bill and in furnishing its report the Committee recommended that the penalty for offences against pure-food laws should be made considerably more deterrent than at present. The Bill as redrafted by the Sub-Committee providing for the award of such deterrent punishments by Magistrates of the First-Class, even in excess of that permitted by Section 32 of the Indian Penal Code will become the Food Adulteration Act of 1953. This Act provides that the Government of India may establish a Central Food Laboratory or specify any laboratory or Institute as a Central Food Laboratory to examine articles of food or to carry on other tests, and may appoint Public Analysts by the States. But unless each State has three or more Food Laboratories, to meet the needs of the entire State, it is not possible to give effect to the provisions of the Act. To give an example, the King Institute at Guindy is the only one for the Madras and the newly formed Andhra States, for the analysis of food stuffs under the provisions of the Madras state Prevention of Adulteration Act. Owing to lack

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What's New in the News?

Cashew-nut

A dollar-earning crop of India, is a very nutritious food, judged from its chemical composition. The present annual production of cashew-nuts in India is given as 60000 tons valued at about 7 crores of rupees. Most of this is exported to U.S.A. The other products from the cashew tree are the cashew apples, the shells of the nuts and the shell oil.—(*Ind. Farming*, 3: 4, 1953).

How much Salt per day Do We Take?

According to the first round of the National Sample Survey, the estimated consumption per head of salt for the rural areas of South India was 24.0 grammes per day—(roughly $\frac{1}{2}$ oz). Another survey was carried out in Mysore city between Oct. 1952 and March 1953, by the Central Food Technological Research Institute in 4 successive phases of 4 weeks each. 73% of the families included in this survey were using crude white salt and 18.6% were using crude brown salt and the rest used both.

The *per capita* daily consumption of salt worked out to 19.4 grammes for white salt and 18.2 grammes for brown salt and the over-all average was 19.2 grammes. By using 0.75 as the conversion factor to arrive at the adult or consumption unit the average consumption for Mysore city was 25.6 grammes per consumption units per day. This survey also revealed the facts: (1) that a nonvegetarian used less salt than the vegetarian; (2) that the *per capita* consumption of salt appeared to be correlated with the income of the family.—(*Technical Seminar*, Aug. '53, C.F.T.R.I. Mysore).

Women Doctors

Statistics show that only 5% of the doctors in U.S.A. are women, as compared with 17% in England, and more than 50% in the Soviet Union (*C.M.D.*, Aug. '53).

First Aid Caution

A tourniquet should never be applied in the region of the elbow or knee because the radial and peroneal nerves are readily damaged by local pressure.—(*Cur. Med. Dig.*, Aug. 1953).

Virus of Common Cold Captured at last!

The common cold may soon be conquered. Research workers at the Common Cold Research Unit at the Harvard Hospital, Seattle, have, it is reported, succeeded at last in capturing the virus of the common cold in the laboratory. They soon hope to find a cure for the snuffle. The author hopes this antidote will be available; or man may look back long days when he could take a holiday from the strength of a cold.—(*Sunday Herald*, 8-11-'53).

Duct under Suez Canal to Irrigate Land in Sinai

A Rs. 45-crore project to siphon water from the river Nile in Egypt by means of a duct under the Suez Canal to Sinai and to create arable land there, on which Arab Refugees from Israel can be self supporting has been started as a result of an agreement between the U.N. Relief and Works Agency for Palestine Refugees and the Govt. of Egypt.—(*The Sunday Standard*, 8-11-'53).

The Modern Cinema

Talking pictures came to India in 1931 and by about 1935, the silent movie films had faded out of existence, from the Indian screen. With the advent and wide extension of Television the talkies may also share the fate of the movies! What next then?

Tubeless Tyres

The first tubeless pneumatic tyres to be made in Britain has first been demonstrated in Birmingham. An outstanding feature of the tyre is that its beaded edge makes an air tight joint with the wheel rim. The inner surface of the cover is coated with a non-porous rubber skin impregnated with a self sealing compound. The valve is sealed into the wheel rim. At the demonstration, a car fitted with the new tyres was driven over a number of three-inch nails. Although several nails penetrated, no air escaped. The cost of the new tyre at present is about 20% above that of the conventional type of tyre.—(*The Mail*, 20-6-'53).

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of adequate accommodation, facilities and personnel, for the analysis of food-stuffs, the Government has limited the number of samples which municipalities and other local bodies may send to the public laboratory for analysis. Many may send only 4 samples a month and the bigger municipalities *not more than* a dozen each in a month for analysis. How could efficient control over adulteration be exercised under such severe limitations, which seriously militate against the effective detection of offences against the pure-food laws? To ensure the efficient working of the new Act, it is imperative that the Union and State Governments, should immediately establish a net-work of food analysis laboratories throughout the country, so that all local bodies may be enabled to send as many samples as may be found necessary to cope successfully with the task of preventing adulteration, which has become rampant.

The Union Government is reported to be considering amendments to the Agricultural Produce Act, according to a press report from Delhi, dated 21st October 1953, in order to prevent the adulteration of ghee. Sri Dr. PUNJABRAO S. DESHMUKH, the Union Agriculture Minister stated at the Agmark Ghee Packers' Conference, "It was tragic that few people could buy ghee in the bazaar with a sense of confidence

in its purity and real ghee was unobtainable; so substitute cooking-media flourish in abundance."

"Unless rigorous steps are taken to rehabilitate ghee in the national diet by making it available in a quality which will be above question, real ghee will soon be no more than a memory. Under modern urban conditions in course of time, the people at large may have to reconcile themselves to the consumption of vegetable oils only."

Now with regard to drugs, the position is even more menacing. The adulteration of drugs and the manufacture of spurious drugs have indeed, assumed terribly alarming proportions in our country. Sri Dr. A. LAKSHMANASWAMI MUDALIAR, Vice-Chancellor of the Madras University, drew pointed and forceful attention the other day to this rapidly growing evil, which if left unchecked, will soon make the position of doctor and patient intolerably difficult and the efficient treatment of disease well nigh impossible. The Union and State Governments should act promptly and pass suitable legislation, on the basis of the recommendations of the Special Committee appointed by Union Government, which is now touring the country and collecting statistical and other information from the medical profession and the pharmaceutical trade.

Chastity

Chastity is the life of a nation. Do you not find in history that the first death-sign of a nation has been unchastity? When that has entered, the end of the nation is in sight. In my opinion, a race must first cultivate a great respect for motherhood, through the sanctification and inviolability of marriage before it can attain the ideal of perfect chastity.—(Swami Vivekananda quoted by *The Vision*, Oct. '53).

The Doctor on his High Pedestal

(A FABLE WITH A MORAL)

FOUNT RICHARDSON, M.D.,
(Arkansas).

ONCE upon a time there was a gentleman who lived upon a pedestal. His intimate friends called him 'Doc'. He called himself a physician. He dressed in the conservative style of the day and carried with him the dignity of decision. He studied his fellow men with as much scientific knowledge as he could muster and conducted his care of his suffering patients with all the study and the art that he could command. He studied his patient as also the patient's family, his parents and others. Part of his treatment came from his pill bag and part from his heart. He gave full measure of both. He was not too busy or tired on a cold night to go to see a patient. He was not so busily engaged at his club that he felt it necessary to take Thursdays off. Though not often eloquent, he found time to attend the public meetings to express his own sound judgement on any social or civic problem. He did not leave his charity-cases to a social worker or a politician who was out of a job. Often with his fellow physicians, he would plan for an equitable distribution of the charity work to be done in his community. Often one would relieve another, so that time could be had for further study. He took these devotional practices as his duty to that stern mistress, the practice and study of medicine. He never had known of any such thing as a committee on public relations as

his public relations were automatic.

He found many privileges accorded him for this devotion to duty. He was given the first place in any home he visited. He could come and go when he felt it was best for his patients. His car was noted and accorded precedence over other traffic. His opinions were respected in any department and his word in medicine was Law. He was loved and praised by all his patients. His charges varied from nothing to a proper fee, for the rich. He found room to live on that pedestal and his clientele helped to keep him there. This is the man of whom it was truly said "He is the flower of our civilization."

Then he became a 'Big Doctor'. He called himself a surgeon, or an otolaryngologist or a roentgenologist or a general practitioner. His friends dropped the 'Doc', for the Doctor. It became necessary for him to dress in the *plus ultra* style of some distant city dominated by star-artistes and others. He turned from the dignity of decision, to the debonair nonchalance of a cosmopolitan. The study of his patients was entirely left to the laboratory. He omitted the practice of treating the family. Most of the treatment came in the cool halls of a modern

hospital from an ampoule, or an instrument, from an efficient but highly impersonal nurse. None of his treatment came from the heart. He could not be disturbed at night, but the night's problems could find answers at the hospital where interns were waiting in inexperience, for that service and experience. He could not be disturbed on Thursday or Saturday afternoons and all day on Sunday: Some other doctor, and so forth, and so forth and so forth.

He found no time for community problems which he left to the politicians and the social workers. He decided that the City or State or the Federal government could care for the charity cases. He even urged the government to take care of the veterans and their families!

His latest-model expensive car forced its way along the thoroughfares, protected from the law by the caduceus—(the doctors' emblem). But he kept all the privileges, only until the public found that they had trouble in getting medical care on Thursdays, and

those other days, and that being shunted from the laboratory, to two or even three consultants for a few minutes each, was not only time-consuming but also very expensive; and that they were not getting the treatment from the heart of a sincere friend. He found the public taking over the treatment of paupers, and others, and calling the rules to fit the government, instead of the science and art of medicine. He found himself forced upon a salary subservient to the politician to whom he left the problem of the sick. He found some consolation in demanding and getting high fees.

But, he began to lose his privileges. He no longer lived on a pedestal. His acquaintances were large, his friends became few. He found himself without the elevation that was his, previously. He was soon looked upon as greedy and rich. He lost the sight of his obligations and so he lost his privileges.

Moral: "Never sell your birth-right for a mess of social pottage". (Southern Med. Jour., Jan. 1953).

The Patient's Duty to the Doctor

Here is a wonderful tonic for our over-worked physicians, to be handed out by the patient; its ingredients are compounded in a simple formula that possesses great restorative properties: viz., G-R-A-T-I-T-U-D-E.

His programme frequently requires him to violate the laws of health which he advocates for us. He has a busy day and has to break rest at nights, and rush to attend urgent cases. So be gracious to him and give him a lift by words of appreciation. Don't take his work for granted.

Too many patients have this philosophy: "I pay the doctor for home and office calls. Isn't that enough?" Frankly, it isn't. The best service of doctors cannot be bought with money alone. The doctor needs more than a lucrative motive for his humanitarian service. Gratitude and co-operation inspire the physician to do his best. Help him along by being grateful. Let him know that he is appreciated.—(D. A. Delafeld in *The Oriental Watchman and Herald of Health*, November 1953).

Is Baby Losing Weight?

Lt. Col. G. CLARKE, M.C., M.R.C.S. (Eng.).

Masab Talab, Hyderabad (Deccan).

THERE'S no such thing as an average baby. There must of course be an average to go by in all things, but the fact that a child is heavier or lighter does not necessarily mean that he is advanced or backward for his age.

Some babies are naturally below weight yet progress quite satisfactorily, building up solid muscle and bone. Others may weigh far more than the average yet be unhealthy, the extra weight being due to fat.

It is nevertheless useful to have some sort of indication. A baby weighing seven and a half pounds at birth might be expected to weigh eight and three-quarter pounds at the end of a month, ten and a half at two months, eleven to twelve at five months, and so on till he weighs on his first birthday twenty-one pounds, twenty-three at eighteen months, and twenty-seven by the time he is two years.

Scales can be important, but they are by no means all that is needed to tell whether baby is thriving.

Judges at baby-shows look for a clear smooth skin, bright eyes, plumpness evenly distributed over the body. Fat cheeks are deceptive, for a baby can lose a considerable amount of weight without it being at all noticeable in the face. The thighs and buttocks lose fat first, then the 'tummy' and the cheeks last of all.

When a baby does look really thin in the face, it is a sure sign

that he is badly in need of medical attention.

How then could you tell if failure to gain weight is caused by under-feeding? It is not a thing that a mother can usually judge herself. A doctor or a qualified nurse must decide, for the symptoms of lack of nourishment are apt to be confusing.

The child may be constipated, and not pass a satisfactory stool for several days or may soil his napkin two or three times a day with a thin greenish stain. Wind in the stomach may cause him to be restless after a feed.

A number of babies are under-fed because the mother is guided by the child's age rather than his weight. During each twenty four hours, a baby needs two and a half ounces of milk for every pound that he weighs. So if he weighs twelve pounds he will need thirty ounces a day. His appetite is likely to be biggest at 6 a.m. and smallest at 10 p.m. After a while the correct adjustment can be made. If a baby is breast-fed—breast-feeding is best—and does not seem to be gaining in weight, determine the amount of milk he is getting by weighing him before and after test-feeds.

Worry and overwork will affect the quality of breast-milk, so it is essential for the mother to take things easy when nursing baby

and also pay particular attention to her own diet.

If bottle-feeding becomes essential, owing to lack of breast-milk, then regular feeds with suitable wholesome milk-mixtures, should be instituted.

Sometimes a baby will lose weight because of faulty technique in presenting his food. If he is a slow feeder he may persis-

tently refuse to finish his bottle, because the milk has gone cold.

The bottle should have a wrap of flannel round it.

Baby's feed should be regular. Baby often cries for reasons other than hunger. If baby cries before his meals are due, and there is no other discoverable cause, increase the amount of the feed, but stick to the time-table.

Pica and Dirt-Eating

DIRT-EATING in a child is the result of perverted appetite—a condition known as pica. There is a natural tendency for this habit to cease naturally in such children by the age of 3 or 4 years. Occasionally there is an underlying nutritional disturbance, such as anaemia or there may be a distinctly neurotic disposition. In some children pica seems to result from an unconscious urge to obtain minerals or/and vitamins which are absent in the poor food they are able to get normally. Occasio-

nally also, depending upon the object the child swallows, serious consequences may result from this practice such as lead-poisoning as when the child picks lead-containing paint from toys or furniture, or various bezoars (concretions also called hair-balls) may accumulate in the stomach because of the inability of the swallowed articles to pass through the intestines—thus necessitating their surgical removal.—(J.A.M.A., 25-7-'53).

Are Sweets Good for us?

Sugars and starches provide calories in a cheap form which is almost immediately available for the supply of energy. Deficiency of sugar in the diet could only happen in a case of extreme starvation. Excess of sugar is far more common. In 1940, the people of England consumed 17 lbs. of sugar per head per year. Now it is about 100 lbs. in 1953. Sugar *does* supply energy in a form that can be quickly utilized but unfortunately it has displaced more valuable sources of carbohydrates *e.g.*, potatoes and cereals, in which as well as the carbohydrate in the form of starch, there is a proportion of minerals and vitamins.

It is generally agreed now, that catarrh is encouraged by excess of sugar and acid fermentation of sugar may be at least partly responsible for decayed carious teeth, particularly in children.

Therefore, as you value your health and your teeth, go easy on sugars and especially in the form of sweets, which should be eaten very sparingly.—(Family Doctor, London, 1953).

SLEEP AND DREAMS

(Strange Facts and Beliefs of Other Lands)

THERE is all over the world a widely mistaken idea, that a fixed amount of sleep is necessary every night. Doubtless it must have originated from an old English adage "six hours for a man, seven hours for a woman and eight for a fool". Similar old proverbs in the matter of the required amount and 'quality' of sleep are current in every language of the world, regardless of the fact that sleep is indeed "a restorer of tired nature", and that as constitutions differ and tiredness with them, some people would need more sleep than others.

The mystery of sleep has baffled man from time immemorial. The primitive peoples were obsessed with innumerable superstitious beliefs concerning sleep and dreams. To many primitive peoples, sleep is a period when the soul leaves the body temporarily and goes gallivanting in strange regions. Thus, for instance, when a South American Indian of Brazil or Guiana wakes up from his sleep, he is firmly convinced that his soul had been away hunting, fishing, felling trees or engaged in other activities according to the dreams he was having. Some believe that their souls went out visiting the homes of their deceased forebears. In the island of Bali, the soul is thought to have been disporting itself in the garden of the Gods. The Tiingit Indians (American) look upon death as a form of permanent sleep and hold that in a plane above life in this world,

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there is a sleep-house where the spirits of all departed persons take rest. The people of Shoshone island prefer to think that their dead are resting as comfortably as they did when they were alive. So in the graveyard of the American Indian Reservation in Wyoming U.S.A., may be seen even today, the curious spectacle of modern bedsteads placed at the foot of the tombstones! This close relation between death and sleep has also led to the notion that the earth on a grave becomes endowed with a soporific and even hypnotic influence.

A burglar in Java will sometimes sprinkle such earth round the house which he intends breaking into, so that the inmates may lie in a trance while being robbed.

Even in our own country (Bharath) the black magicians and witches attach a premium to the earth, skulls, and bones obtained from cremation and burial grounds, as aids in their sorcery and witchcraft.

Where the belief is prevalent that the soul of a sleeping person wanders away, there is also the fear of it meeting the soul of another, when a fight may ensue. A negro of New Guinea in Africa, concludes that this has happened on awakening in the morning with

pains all over his body. He feels that his soul has been badly thrashed. He may be afraid to sleep in or near the place formerly occupied by a recently dead person. In some of the Aru islands, the people will not sleep in a house where a death took place the night before. A nightmare frightens the islanders of Lengua, who imagine that it is due to the attempt of the deadman's soul to enter their own bodies in order to get back to life. The Javanese, on the other hand, court meetings with spirits by sleeping in places believed to be inhabited by them!

Most primitive peoples dislike the idea of rousing any one who is asleep, because of the dread that the soul may not have had time to return; or if absolutely necessary to wake any one it must be done very gradually. The position of a sleeper is also important. He must not be moved lest his soul, on returning, fail to recognize the body and by not entering, cause his death.

As one of the phenomena of sleep, dreams have been the subject of much speculation amongst scientists and psychologists. Ordinary people, however, puzzled by the strange workings of the subconscious mind, have not unnaturally given way to superstition. Pagan, Christian and Hindu are all alike in this respect.

There are also numerous expositions on the significance of particular persons, objects, or situations one sees in his dreams.

Among the Red Indians of Dakota, it is considered unlucky to dream of the moon, or of bears, because this means revenge; but it is good to dream of hawks.

In England, many a woman, on waking in the morning hurries to consult her dream-book! [Still the Britisher used to call us Indians a highly superstitious people!] Disturbing dreams are thought by many Japanese to be due to the presence of evil spirits in the house. They therefore, pay homage to *Baku*, a supernatural creature, having the physical characteristics of various animals and believed to be the devourer of dreams. When a Japanese wakes up from a bad dream he exclaims, "Devour, O Baku! My evil dream."

In Yorkshire in England bad luck is thought to follow the use of a mattress turned on a Sunday and even King Edward VII disliked sleeping on a mattress that had been turned on a Friday!

Many people too, are particular about the direction in which their bed shall face. Some favour the head being to the South; others are uneasy unless the position is from East to West. Still current also is the old belief in Great Britain that the head should be towards the North because of the electric currents that pass from the North Pole to the South." Thus the body would be in a direct line.

Charles Dickens when travelling, always carried a compass in his pocket to ensure that his bed was placed with its head to the North. Even medical men at one time thought this was the best position. Among country folk in Great Britain there is, on the other hand, a custom to lie facing a church when living close to one. So also in our country Bharath, people will not lie down

or sleep with their feet pointing towards a temple, if they live near one, or to the sanctum in the house, where the family deity is installed for daily worship.

In Bharath, the position taken up for sleeping at nights is considered important and there is an old South Indian adage which says that a man should sleep with his head to the East when he is in his own place, to the West in a strange place where he happens to have sojourned, to the South when in his father-in-law's house and to the North if he courts death. This is totally opposed to the Britisher's view-point. Again,

dreams are supposed to haunt persons who sleep lengthwise under a long heavy beam or rafter in the roof!

It will thus be seen, that customary and traditional beliefs, and superstitions die hard and it is next to impossible to wean people from such hoary beliefs, based mostly on religion. Even the so-called hardened unbelievers and breakers of idols, themselves break down when they are faced with domestic calamities and misfortunes particularly affecting their wives and children.—(Based on Edmund Grimley's article in *Chambers's Journal*).

The Problem of Progress

In many parts of the world today new techniques of many kinds—of health protection, of agriculture, of industrialisation—are being introduced into old cultures. The problem of adapting themselves to the effects of the new ways, is a difficult one and can be made easier and shorter if those who seek to introduce changes know and appreciate the reasons which lie behind traditional methods and ways of thought. To help the innovator in this arduous task, the World Federation for Mental Health sponsored a survey by a team of social scientists led by Dr. Margaret Mead, the celebrated anthropologist and psychologist. The UNESCO has recently published the results of this study under the title "Cultural Patterns and Technical Change." Some of the highlights from a few chapters of this book will be presented to our readers in this and subsequent issues of 'HEALTH.'

1. "From the view-point of other peoples, many Western habits are dirty. The British who regarded the hill tribes of Burma as filthy, for taking almost no baths, were in turn considered dirty by the Indonesians for bathing only once a day. The Western handkerchief used for pocketing mucus, (phlegm) is found revolting by a number of other societies. There has been confusion among people of Western culture as to the meaning of dirt and cleanliness and the extent to which they are related to hygiene. Where new habits have been pressed upon other cultures without plan, they have often reflected this confusion. Cowdung, for example, is important in medication in some Indian villages where it is used in poulticing and for the treatment of burns. There is no disgust connected with it and disgust expressed by a foreigner may meet with strong opposition.—(WHO News-letter, Oct. 1953).

(To be continued)

CONQUEST OF FEAR

FEAR is a negative quality and is the result of ignorance. It manifests when one identifies himself with the body and forgets the immortal (*atman*) soul. It is the old champion of attachment and delusion. Fear, worry and anger, deplete all the energy of man and bring exhaustion and early death.

No one is absolutely free from some sort of fear. It is only the *gnani* or a full-blown *yogi* who is absolutely free from fear. If one can conquer fear, half of his *sadhana* is accomplished.

Fear assumes various forms. The Gurkha soldier is not afraid of the knife or a bullet but he is afraid of scorpions. A hunter is not afraid of tigers in the forest but is afraid of the surgeon's knife. The man of the frontier tribe is not afraid of the knife; he will even allow the surgeon to open his intestines without chloroform but he is terribly afraid of snakes! Some people are afraid of ghosts. The vast majority of persons are afraid of public criticism. Some are afraid of diseases. The most healthy and strong man has got some imaginary fear of some obscure, often non-existent disease.

The king is afraid of his enemy. The Pandit is afraid of his rival. A beautiful lady is afraid of old age. A lawyer is afraid of the judge and his clients. The wife is afraid of the husband. The student is afraid of the teacher. The police inspector is afraid of his superintendent. The frog is afraid of the snake. The cobra is afraid of the mongoose.

Shri SWAMI SIVANANDJI MAHARAJ,
The Divine Life Society,
Ananda Kutir (Rishikesh), Himalayas.

Fear manifests itself in various degrees: e.g., simple fright, timidity, shyness, alarm, terror and terrible fear. When one is in terrible fear, he profusely perspires, and may even pass urine and faeces involuntarily. The mind becomes inert like a log of wood. Sometimes shock and immediate collapse may occur and the man may die of sudden acute cardiac failure. The face becomes pale and he wears a peculiar ghastly listless look.

Parents and teachers should therefore, infuse the spirit of courage in youngsters from their very boyhood, by getting them to read the stories from the 'Mahabharata' dealing with the chivalrous acts of Bhishma and other valiant heroes. Young boys are impressionable and have a pliable and receptive mind which can be properly shaped and attuned. The Samskaras can be indelibly impressed on them at this age and true *Brahmacharya* gives tremendous strength and infuses courage in the youngsters.

If one keeps constantly thinking of 'courage', fear will slowly vanish. Man will have to develop courage slowly. Have the word image 'Om Courage', before the mind's eye. Repeat this formula very often. A word is the centre of an idea. An idea is the centre of a mental image. A mental

image is the centre of a mental habit. A mental habit is the centre of a trait in man. Have a clear-cut image in the mind of the quality of courage and this quality will surely develop. The sub-conscious mind will do everything for you. The 'will' also will come to your aid. Desire to be ever-courageous and the 'will' is sure to follow the desire.

Do not form abiding attachments to transient earthly pleasures. Do not identify yourself with the body, which is like the shell of a cocoanut. It is just like a pillow-case, which can be removed for washing. Meditate everyday for a while atleast, on the *Atma*—(soul). Identify yourself with *Atma*. Fear will vanish. This is the most powerful method, to get over fear.

Motivation in Health Education—Fear has no Place

Health educators must understand the basic principles of human behaviour before they attempt to motivate individuals.

Early attempts (prior to 1915) at motivation were based on 'Fear.' Pickled lungs and papier-mache tombstones and tolling bells were displayed in tuberculosis exhibits. This kind of motivation was replaced by a new approach, subsequent to 1918, based on "sweetness and light." Good health was said to result in happiness, beauty, popularity and success. A third method was later introduced in the 1920's, when 'presentation of facts' was used as the medium of motivation. Medical information was stressed in journals, newspapers and pamphlets. Because people had read that oranges contain Vitamin C and calcium, they would of course eat oranges.

All three methods—Fear, Sweetness and light and Fact—are still in use today. The appeal to stark Fear is gradually being minimised although many consider that the success of health education has been very largely in terms of the fear of ill-health and that few positive campaigns for good health have as yet been conceived. Only when a few cases of smallpox break out in a community, people rush to get vaccinated. Why? sheer, unadulterated fear!

But, today the general feeling is that motivation based on 'Fear' does more harm than good. Not only does it induce irrational behaviour but it may lay the foundation of widespread mental disease. Any programme based on fear also runs the risk of stirring up resentment and resistance. It can make people avoid doing something and thus defeat its aim. "If one in five will get cancer, I don't want to know if I am that one", is not uncommonly heard. The trend today is to AVOID FEAR, as a technique of motivation—(*Jour. Am. Assoc. Health, Phys. Edn. and Recreation*, Sep 1953)

"Distinctions like 'mine' and 'yours' are made by men of little minds, while the whole world is their home to the broad-minded and large-hearted persons".—(*Ancient Hindu Classics*).

TIRED HEARTS

(A PHYSICIAN)

"TIRED HEART" is not a medical diagnosis, and doctors use it to cover very many different conditions. So anything you read in this article may have nothing much to do with any particular tired heart you may be interested in.

The heart pumps out about a gallon of blood every minute if you are just sitting around. In a trained athlete in action, it can do much better than this. They did some experiments a few years ago on a man who was trying for the two-mile world record, and found that his heart was pushing out about six gallons a minute at the end of his attempt. But even in sluggards, the hearts push round about one thousand five hundred gallons in a day; so after seventy years of such work, you expect your heart to get a bit bored. It is surprising that it serves us as well as it does, until you come to think that other parts of our bodies also work just as hard and in their own ways. A heart removed from the body altogether, provided it is fed and looked after properly, will go on beating. The Russians have I believe, done some wonderful work recently on human hearts in this direction.

We may be able in the future, as a result of researches, to keep a heart going in the human being long after it would have stopped, but at present, we advise the owner of the tired heart to live within the limits it sets for him.

Some people get very much exercised over this, and feel that they have become invalids. But the answer to this sort of panic, is to tell them that when their eyes got tired, they get used to wear glasses which they certainly do not mind. The analogy may not be quite apt in every way, but the fact remains that if you have to wear glasses you can't play football; and that may mean as much to a young man as giving up some lesser activity may mean to an older one. Some people with tired hearts have to desist from all work. The financial implication does not seem to worry them so much as the thought of being an invalid.

But what of the young man who has to wear glasses? He may have set his heart on going into the Navy. At first he is convinced that no other job will satisfy him, and that life to him has become a void. But soon enough, he finds some other job and forgets that he is living within the limits of a disability; and so takes his short-sight as a matter of course.

When we advise people to live within the limits set by the amount of work their tired hearts are able to do, I do not mean to say that treatment will not avail. You should first know how the heart works, and how it *can* go wrong. The heart is made up of four tiny tanks or sumps. The two on the right side are connected by a valve,

and the two on the left by another valve. Used blood is sucked into the top right hand sump and pushed down into the bottom one on the right, which in turn, pushes it out into the lungs; here this impure blood is replenished with oxygen, and returned to the top left hand sump. These tanks have muscular walls. The muscles of the heart obtain nourishment from special arteries inside them. The things that *can* go wrong with the heart are (a) the muscles may wear out; (b) the nerves which make the muscles beat, can go wrong; (c) the valves can get stuck-up; and (d) the arteries in the heart muscle can

stop working.—(N. N. F. Copyright).

[Note:—Each of these conditions will present certain signs and symptoms which a physician can detect and if detected early, can remedy. It is therefore, necessary that we should have a regular periodical check-up at least once a year so that any deviation from normal can be promptly recognized and remedied. An "annual health audit" by the family physician is perhaps the cheapest and most efficient insurance one can effect to safeguard his life and earning-capacity.—Ed. HEALTH].

The World's Greatest Need of Today

What is the greatest thing we need to help us bear life's load, to help to lift us from our ills—something not yet bestowed? For surely there must be this thing for which the world doth cry, that will help us to bear its trials and fully satisfy.

I wonder if we need more gold, for surely this brings good: perhaps it's greater wealth we need in every neighbourhood. Ah! no, I've found with passing years that extra-wealth brings care, and tends to quickly lead astray with burdens hard to bear.

Is it a greater freedom then to do just what we choose, and not to be restricted to—we'd then have not to lose. I doubt it—for with liberty the self becomes so strong, and when we're free to do our will, we seem to do what's wrong.

Maybe it's leisure we all need with which to fill our days—to walk, or talk, to read, to play, to follow our own ways. How quickly man degenerates when he is free from work, for Satan still, will mischief find when we our duty shirk.

Is there nothing on earth below, or from the heavens above, to satisfy our greatest need? Yes, friend, there is—it's LOVE. Deep love to serve, the other's good, to crucify the self; such love is what the world craves for, and 'tis the greatest wealth.—(Stanley Combridge in *The Family Physician*, Oct. 1953).

Dreams

At night, we see the sad vestiges of what we have neglected during the day. A dream is often the revenge of things neglected or of persons deserted; hence its unexpectedness and sometimes its sadness.—(A. France).

NATURE—The Master Healer

WHAT does an animal do when it is tired? What does it do when it is ill, injured, or in any way not in good health? It rests and rests completely. Usually it rests its digestive system as well as its limbs by refusing food for some time, and this resting attitude is the animal's way to recover.

It would be to our advantage if we took a lesson from these sick animals. We should recover more quickly from all our ills if we, too, gave nature a chance. The medical profession can do much, but in all illness the final hope of recovery lies with the patient's own stamina, with his capacity to rest and relax, to withdraw from the worries and activities of everyday life and allow his own resources to function.

Within every person's body there are wonderfully balanced healing capacities—in the blood cells, in the glandular system, many of which can be aided and stimulated by special preparations.

Today so many people refuse to rest when they have what they consider some minor ailment. Perhaps it's a cold, digestive troubles, headaches, or so on. Women especially are over-busy, sometimes with work outside the home and then the responsibility of house-keeping and cooking for the rest of the family. Naturally, all the most conscientious workers hate to stay away from work for even a few days, knowing how

Condensed by

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Basavangudi, Bangalore-4.

much extra burden this puts upon others. Instead they hurry to the doctor for some palliative, or get into the habit of taking what *they consider* to be comparatively harmless drugs, pain-killers, which they buy themselves. They ask the chemist for a tonic, or they buy endless arrays of medicine to soothe an upset stomach. The one thing they really need is REST and this they refuse to consider.

The Real Cure.—In almost every case the real cure for their ailments would be a warm bed, a plentiful amount of diluted fruit juice and later on, some pleasant, easily digested meals tastefully prepared and neatly served. This would mean however someone to take on the burden of dealing with the house (in the case of women) as well as preparing the invalid meals. It is a rare household today, that possesses any person who can be spared to do this extra work. Yet a few days' true rest would often save a later serious illness and possibly a stay in our over-crowded hospitals.

All the same, many of us could do more in the way of sensible rest and self-cure if we tried harder. Too often we refuse to admit that our lives need re-planning in order to eliminate unnecessary strain. We won't admit that much of our digestive trouble

is due to hurried and unwise gulping down, our headaches to indigestion, or too little outdoor exercise. We enjoy sitting and talking in the evening or hug the fire until too late, and then feel overtired in the morning when it is time to get up! We commit so many health crimes, and then are surprised when the deserved punishment comes!

What all can do.—The one thing we could all do, if we feel off colour, is to go to bed the minute our work or duties are done. By this, we mean not eight or nine o'clock, but the very minute we can—say at six, or whenever the children that have to be looked after are in bed. Let us have a warm bath and a suitable fruit-drink—not the wretched coffee or tea, which are the most frequent and favourite drinks with most people—and go to bed to really rest, not to read or fuss or keep on gossiping with others late into the night. It takes a good deal of determination to do this, especially at first. It needs concentration to relax and let nature have the chance to begin healing. What is more, we may feel a great deal more tired, with the first experiments, as our poor, ill-treated system begins to relax some of the tensions that have kept us going. But if we continue this real rest cure and let oursel-

ves withdraw from our normal interests, we will begin to sleep more profoundly (some people have been known to sleep for a day and a night, with just brief moments of consciousness) and be convinced that this is the answer to many modern ills.

Present-day doctors are usually too busy with their many duties to give thorough directions over minor ailments, but it may well be that they feel it a hopeless task. All the same, a campaign to prescribe rest, instead of medicine, would be a good move. At the moment I have two friends, both with broken ribs, who are carrying on their normal work but with great pain. This is I feel sure, a mistake because the mending of bones especially in elderly people, is quite a considerable task for the body's resources, and can best be done when there is plenty of rest. These two "heroines" will make their recovery all the slower by their actions and may even harm themselves considerably. We all know similar cases of mistaken carrying-on, and we should watch the consequences and be warned in time.

No, if you feel tired, you probably *are* tired, so rest and let nature have a chance to restore you before anything really serious happens.—(Elizabeth Gross in *Good Health*, Oct. 1953).

Man and Woman

Man by nature, is egoistic, individualistic and selfish; woman is altruistic, selfless and socialistic. All initiative and creativeness are born of self-assertion and individualism. All conservation and continuity are born of altruistic self-denial. Socialism is as little superior to individualism as woman is to man. Both are correlative, equally valuable and necessary for progress. Neither incarnates a spiritual value in itself. Both are capable of doing so and must be harmoniously blended.—(Keyserling quoted in *The Vision*, Oct. '53).

The Challenge of Iatrogenic Disease

SIR ARTHUR HURST defined iatrogenic disease as a disorder induced in the patient by auto-suggestion, based on the physician's examination, manner, or discussion. It is, therefore, an ailment caused or aggravated by the doctor's indiscreet talk or act in the patient's presence or/and hearing.

A great number of people owe their illness to physicians who either made false diagnoses or failed to use properly the most powerful weapon namely, their words—what to tell the patient, when and how to tell them.

Very recently, Goldwater and his coworkers presented records of 175 persons, the majority of whom had been advised by their physicians to restrict their activities and 25 per cent of them were not working because of wrong diagnoses of heart disease at some time in their past life. There are some persons, who for years, have been having high blood-pressure without any complaint. When they come up for life insurance or other medical examination and are told of their high blood-pressure, they get upset and begin to feel dizziness, headache, irritability and sleeplessness. These symptoms get aggravated when some one dies of a cerebral attack. How regularly these high blood-pressure patients visit the doctors just for blood-pressure measurements and how soon they develop what doctors call "sphygmomanometric monomania"! (Sphygmomanometer is the instrument used

for recording the blood-pressure). Dr. R. V. Guian, M.D. of Bugallon, writing in the *Journal of the Philippine Medical Association*, recollects the case of a perfectly healthy young lady who, after a routine X-ray examination, was thrown into a panic of fear and started going from one doctor to another to get opinions because the radiologist reported that her heart was small. The X-ray man who was apparently more interested in the X-ray plate than in the psychological reaction of his patient, simply reported what he had seen, not aware of the fact that the patient could easily be alarmed over the trivial X-ray finding. Dr. Guian records two more cases, to illustrate how the patients could be scared even to death, by indiscreet words, not really meant to scare patients.

A hardworking housewife who for the past 5 months continued to feed and sleep well and to enjoy three square meals a day, despite the fact that her liver was seriously affected by cancer, suddenly got worse, refusing to eat or sleep and becoming indifferent to her surroundings, because an enthusiastic young physician was so brutally frank and so honest as to tell her that no amount of medical or surgical treatment could ever delay the approach of an impending death!

A college student in Manila complaining of severe recurrent headaches, consulted a physician who indiscreetly told him to see an alienist (a doctor of mental

diseases). Ever since the patient heard this advice, he had been acting queerly and had been haunted by a gnawing fear of becoming insane. Instead of going to the psychiatrist (alienist) he went to the top of the sixth floor of the University building from where he plunged to his death.

These are some of the many ways by which a physician may cause or aggravate the illness of his patient. —(J. Philip, M.A., March 1953).

[Note:—There is also the other side to this picture. viz., the patient's insistence in many cases to be told the truth about his condition, to the extent

sometimes of wrongly accusing the doctor of wilful suppression, incapacity, etc. The patient should cooperate with the doctor and give him sufficient time, and facilities for diagnosis and treatment, without hustling or embarrassing him. The doctor is usually always very discreet and reticent in his talk and he should be treated with the respect and consideration which his professional status deserves. A really good and honest doctor, will not hesitate to call experts into consultation, if and when the patient's condition demands such a procedure. Ed. HEALTH].

BONERS—Medical Howlers

Dr. R. NARAYANAN, B.Sc. (Hon.), M.A.,
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1. Appendicitis is caused by information in the appendix. (Inflammation).
2. A comma is what a medium falls into. (Coma).
3. A parasite is the murder of a parent. (Parricide).
4. A skeleton is a man with his inside out and his outside off.
5. Esophagus was the author of Aesop's Fables.
6. Caviare is the eggs of a surgeon. (Sturgeon).
7. An epidemic is a needle the doctor uses to put medicine in your arm (Epidemic).
8. Prophylactic means to bear young in large numbers—a rabbit is said to be prophylactic. (Prolific).
9. Purgatory—what 'the doc asks' you to take to clean your "intrails". (Purgative).
10. Anatomy is the study of heavenly bodies. (Astronomy).
11. A mosquito is the child of black and white parents. (Mulatto).
12. Thrombosis is an instrument used in a jazz band; something like a slip horn. (Trombone).
13. If it were not for Madame Curie and her husband, there would be no radio today. (Radium).
14. Oliver Goldsmith died of pecuniary 'embarassis'.
15. Ptolemy, the Greek surgeon, discovered ptomaine poisoning.

Musings of a Medico—While Relaxing

NANDLAL B. VANI, M.B., B.S., Nandurbar.

1. When dealing with people, remember you are not dealing with creatures of logic; you are dealing with creatures of emotions—pride, vanity, prejudices etc.
2. Let “cooperation” be our watch-word, as “inability” to co-operate stands at the head of the list of causes of failure.
3. While speaking or writing to others, avoid the use of “I”, “my,” “mine”, as far as possible. ‘I’ smacks of ego and vanity.
4. Don’t talk of your personal success to one who has failed.
5. No one is immune to flattery; for the art of flattery is infinitely varied.
6. Speak ill of none, speak all the good you know of every body.
7. A great man shows his greatness by the way he treats little men.
8. Bear malice towards none; but love to all.
9. A woman never agrees; she always argues.
10. Power corrupts and makes one an autocrat.
11. To be the master of yourself, be neither elated at success nor demented by failure.
12. Humility marks the beginning of wisdom; but affected humility is refined imposture.
13. Silence is a virtue but studied silence often covers deceit.
14. “Poise” comes from self-control and self-confidence.
15. The taxes piled up through indiscretions of youth are collected through the infirmities of old-age.
16. Criticism is like the homing pigeon, it always returns home. Criticism gives a lordly right to the other person to pick holes in your pocket.

An Expectant Mother's Prayer

Dr. J. E. Kopcha, M.D., writing in the *Am. Jour. Obst. and Gynaecol.* for March 1953, states:—

One of my patients gave me this little prayer which she wrote:

“Oh, Lord, Jesus Christ, Lover of little children! grant Your abundant blessings to my doctor. If there is any task more important than the preserving of life, it is the task of bringing that life into the world”.

“Give my doctor a deep appreciation of the work that he performs. May he ever know how precious that work is in Your sight. Guide his hand at all times in his work and may it never do a work in Your dishonour”.

“May he ever regard his office as a sacred trust received from You. And finally, may he one day know Your rich rewards for having striven earnestly and faithfully to suffer the little children to come unto Your ardent desires. Amen”.

These are the little Adrenalin injections that make us work day and night, that get us out of bed at 3 a.m. early in the morning!

Risks in the Indiscriminate Use of CORTISONE AND ACTH

(The New Hormone Remedies)

WORLD experts on rheumatic diseases who met in Geneva in October 1953, under the auspices of the WHO, strongly deprecated the indiscriminate use of the new hormone remedies (Cortisone and ACTH). While agreeing that they *can* be of great value, the experts warned that the hormone treatments are still in the experimental stage and should be reserved for selected cases under the control of specialists attached to hospital departments and clinics.

The experts however, insisted that there existed a number of well-tried treatment methods for rheumatic diseases which yielded good results. The belief of many sufferers that these diseases were incurable, untreatable, and usually completely disabling is often unfounded, the experts agreed. Since there are at present no proven preventive measures for this group of diseases, the importance of improving the facilities for early recognition, and treatment was stressed. The experts were of the considered opinion that medical education concerning this group of diseases had been much neglected and they therefore, recommended that general practitioners should receive instruction in modern methods of early diagnosis and treatment now available and that larger special centres should be developed in all teaching hospitals. Young medical men should be asked to specialise in the

study of the rheumatic diseases.

The economic importance of these diseases was graphically presented to the conference. In Denmark, for example rheumatic diseases cost the community some 25 million dollars every year, for treatments, loss of earnings, and disablement benefits. Some 20,000 people are unemployed all the year round, because of these diseases. A similar calculation for Sweden reveals 80 to 100 thousand people are incapacitated each day. In France, the cost of rheumatic disease reached at least 3 milliard francs, in the Paris area alone. In the United States of America one investigation showed that more than ten million people over 14 years of age, claim to be suffering from ‘arthritis’ or ‘rheumatism.’

Experts from six different countries attended the First Session of the WHO Expert Committee on Rheumatic Diseases. The Committee suggested that the WHO could play an essential part in combating this serious public health problem by assisting in the planning and execution of further surveys of rheumatic illness, particularly in the medically less developed countries, and by providing facilities for exchange of information on important fundamental research now being developed in many countries of the world on various aspects of rheumatic disease.—(*U. N. Weekly News*, 8-11-53).

CHLOROPHYLL

—Has it any Deodorising Action?

JOH C. BROOKRHURST, M.D.

(Chlorophyll is as important to plants as hæmoglobin, the pigment of blood is to man)

CHLOROPHYLL is the green pigment which is present in most forms of plant life. It is used to assist in certain chemical reactions which are essential for the nutrition and life of the plant. Chlorophyll and hæmoglobin are chemically very similar compounds, the main difference being that chlorophyll contains an atom of magnesium in place of the atom of iron carried in hæmoglobin.

It was because of this similarity between chlorophyll and hæmoglobin, that medical interest in chlorophyll was first aroused. Experiments were carried out early in this century to see if chlorophyll would be of any value in the treatment of *anaemias*. The results were disappointing and it was judged to be of *no value*.

Treatment of skin wounds and ulcers.—The next medical use of chlorophyll that was suggested was as a local application in treating skin wounds and ulcers. A real assessment of the value of chlorophyll has since been made and the substance is now regarded as being of *no value* in promoting the healing of wounds and ulcers.

Use as a deodorant.—Although the ulcer did not heal any more quickly, it did seem to lose its smell—which was often very offensive—when chlorophyll was applied to it.

It was on the basis of these reports that the third possible use of chlorophyll in medicine was considered—that of a deodorant. In the past ten years, a number of reports have appeared in the medical press about this suggested deodorant action of chlorophyll. Many are enthusiastic. Some are highly sceptical, doubting whether chlorophyll does, in fact, have any deodorant action whatever. As chlorophyll is now sold and advertised widely throughout the world, contained in all manner of things, it is worthwhile considering briefly what the evidence is on which these claims are based.

How could chlorophyll deodorise?—There are three possible mechanisms. Firstly, chlorophyll itself has a strong and pungent odour and it is possible that this may mask the more unpleasant smells. If this were so, it might be used either as a “perfume” or else sucked in the same way as peppermints to remove smells from the breath. In this latter case, a “deodorant” effect might be expected only as long as a strong smell of chlorophyll remains in the breath.

Secondly, chlorophyll might have a direct physical action with molecules of an odorous gas which come into contact with it—in a manner similar to charcoal, as used for instance in gas masks.

If this were so, it should be simple indeed to demonstrate such an action in the laboratory. Exposure of an unpleasant smelling gas to chlorophyll in a closed jar should remove the smell of the gas almost immediately.

Experiments have been carried out along these lines and they show that chlorophyll *definitely does not act* in this way.

Laboratory trials.—Thirdly, there might be a chemical reaction between chlorophyll and the particles of matter which produce smells, which would alter these particles, turning them into different, non-smelling substances. If this were so, it should be possible to demonstrate in the laboratory that chlorophyll has acted with an odorous substance to produce a different substance that is non-smelling. So far, only two such trials have been reported. One was with the gas *methylmercaptan*, which contributes to the unpleasant smell from the human gut—and in this case no chemical alteration could be demonstrated. Other workers used *benzylmercaptan*, an allied substance, and were able to show that after a period of 18 to 48 hours in contact with chlorophyll it was altered to a different substance which had no smell.

This is the only objective laboratory experiment at present available on which any claim for a deodorant action of chlorophyll can be based. Consider now how this might be applied to the body.

Chlorophyll as a body deodorant?—On the basis of this experiment, it is possible that chlorophyll might deodorise substances in the body if the chloro-

phyll *can* be brought into contact with such substances for a sufficient period of time. Body smells may arise in three ways—from the mouth, the breath (coming from lungs) or the skin. Chlorophyll kept in the mouth for a sufficiently long period of time (probably a minimum of one hour) might conceivably affect smells coming from the mouth, (though a more rational way of removing such smells would seem to be by keeping the teeth clean by brushing). To affect any other smells, chlorophyll, when taken by mouth would have to be absorbed from the stomach and diffused throughout the body. It would have to reach the lungs and the skin in particular in sufficient amount to allow a reasonable concentration to persist for a fairly long time.

Experiments undertaken some time ago have shown that *there is no evidence whatever* that chlorophyll is absorbed from the stomach at all. Nowadays, there is probably no one who believes that chlorophyll taken by mouth has any action either on smells arising on the skin (for instance the smell of sweat) or on smells arising in the lungs (the smell of alcohol in the breath for example).

The experiments of a university professor, which are recounted in some recent correspondence to the *British Medical Journal*, on the subject of chlorophyll, are of interest. Being anxious to test the effect of chlorophyll tablets for himself, and being anxious also to leave nothing to chance, he took 100 tablets, followed by a further 40-three-and-a-half hours later and then he ate asparagus tips. The unpleasant urinary

On the evidence which has so far been produced, therefore, it would appear that no body-deodorising effect is to be expected from taking chlorophyll by

mouth. It is possible that so long as chlorophyll tablets are being sucked, the smell of decaying food particles between teeth may be overcome either by the smell of chlorophyll or by some direct action. In any event, it would be more pleasant to clean the teeth, or suck peppermints.—(Condensed by Chandrika Priyadarsini from *Health Horizon*, Autumn, 1953).

THERE is an old adage that a *padre* (the priest) sees a man at his best, a lawyer sees him at his worst whilst a doctor sees him as he really is. Like all old adages there is much truth in this description of mankind and certainly there is no doubt that the reaction to illness is one of the most accurate touchstones of character. Some of the noblest examples of the heights to which human nature can rise are the supreme conquests over disease which are achieved by so many of our patients. Every doctor will be able to give examples from his patients of this victory of mind over body. During the last few years the *Lancet* has published a series of autobiographical articles

by patients telling how they have overcome their physical and mental disabilities and in spite of them, have managed to evolve a *modus vivendi* which permits them to live full, active and happy lives. Fifty five patients contribute to this series; and their disabilities cover practically the whole gamut of human disabilities including blindness, deafness, cerebral palsy, epilepsy and double forearm amputation etc. These articles highlight the unlimited reserves of resiliency, high courage and determination which are to be found in human nature.

"A noble mind disdains to hide his head,
And let his foes triumph in his
 overthrow."

—(*Practitioner*, Feb, 1933).

Obesity is both disadvantageous and dangerous. Obesity predisposes to diabetes, increases the tendency to hypertension, (high blood-pressure), favours the development of atherosclerosis and contributes to heart-failure. It increases the incidence of gall-stones, causes shortness of breath on exertion, intolerance to heat, and excessive sweating. It lends also to maceration, intertrigo, eczema and and furunculosis. It fosters the development of postural emphysema, flat feet, hernia, and osteoarthritis of the hips and knees. In every physical activity, its presence constitutes a burden varying only with the degree of adiposity. It is unæsthetic, socially unacceptable and psychologically crippling. It shortens a life that has been made ridiculous and miserable by its presence.—(Barr D. P., *New. Eng. J. Med.*, 4-6-1953).

(Bill Prohibits Transportation of Fireworks in U.S.A.)

TWENTY eight states in America now have laws banning the sale of fire-works except for public displays under proper supervision. Other states and cities have adopted less restrictive measures. Yet reports of eye injuries from fireworks appear increasingly in the press. This is due largely to the fact that manufacturers are able to circumvent state-laws by advertising in various publications and filling direct mail orders.

In North Carolina, for example one of the states which prohibits general sale of fireworks, the Hospital Care Association of Durham made a survey one year and discovered 751 patients treated by physicians, for fireworks accidents. Among the seriously injured persons were, four cases of burns of the eye, two with corneal scars, two resulting in questionable vision of one eye, six resulting in the total loss of vision of one eye, and nine additional cases of the complete loss of an eye. It is almost impossible for the state or local police to prevent the use of fireworks when they

can be mailed or bootlegged into a State, as shown by these tragic examples.

A bill now pending in Congress (HR 116) prohibits the transportation of fireworks into the States, which have restrictive laws regarding their sale. This bill is strongly backed by the National Society for Prevention of Blindness and many other local agencies, concerned with health and safety. It is hoped that all community agencies and individuals who have seen the tragic results of fire works accidents will inform their Congressmen of their support of this important measure; also that all will work aggressively for the enforcement of State control laws and local ordinances now in existence. (*S. S. Review*, 23 : 2, 1953).

[Note:—We feel that similar legal enactments are necessary in our country, in view of the many serious fireworks accidents that occur every year particularly during Deepavali and Karthiga festivals.]

—Ed. HEALTH].

Safety vs. Time

It takes one minute to write a safety rule. It takes one hour to hold a safety meeting. It takes one week to plan a safety programme. It takes one month to put it into operation. It takes one year to win a safety award. It takes one lifetime to make a safe worker. It takes but the fraction of a second to destroy it all with an accident.—(Michigan Mutual-shopman quoted by *Efficiency News*, Oct. 1953).

Intelligent women always marry fools.—(Anatole France).

224 [Dec. '82]

[Page 287]

Diagnosis and Treatment

It was a common reflection, a couple of decades ago that treatment lagged behind diagnosis; the physician was often accused of being more interested in the latter than in the former. In so far as the change had reference to the common bacterial infections, the lag has been eliminated. Indeed, the position has perhaps been reversed. There is in this field such a wealth of available resources in treatment that the temptation to "get busy" with one or more of the 'sulpha' drugs or with one or other of the "antibiotics", or indeed with one or other of both of these, before the nature of the infection is fully ascertained is almost irresistible. This is not *always* the doctor's fault; his hand

is sometimes forced by the patient's anxious friends, who do not know, as does the doctor, that powerful remedies sometimes have serious "side effects", and that the patient's germ may have been rendered insensitive to the "antibiotic" when he badly needs it, because he has already received it when it was not really necessary, or even indicated. But diagnosis is, after all, the alpha and omega of Medicine, and side by side with these slow advances in treatment came developments equally important, if less dramatic, in this sphere.—(Lord Horder, M.D., Fifty Years of Medicine; *Journal of the Royal Institute of Public Health and Hygiene*, March, 1953).

Respect to Womanhood

1. "All nations have attained greatness by paying due respect to women. That country and that nation which does not respect women have never become great nor will be. Manu says "Where women are respected, there Devas, the Gods, delight; where they are not, there all work and effort come to naught." There is no hope of rise for that family or nation where women live in sadness, where there is no regard for them. If you do not raise women who are the living embodiments of the Divine Mother, don't think you have any other way to rise".—Swami Vivekananda.

2. Only women can raise women. This requires sacrifice and hard work. It is true that women are more capable of sacrifice than men, but the sacrifice must be intelligent. One should give up the idea that one is helpless. God is the help of all.—(Mahatma Gandhi quoted by *The Vision*, Oct. '53).

Self-Confidence

A man's self-confidence measures the height of his possibilities, but synthetic self-confidence will not do. The most painful tumble one can take is to fall over his own bluff.—(*Royal Bank Canada Monthly Letter*).

Sadness arises solely from discontent and idleness.—(Anatole France).

HEALTH

An Illustrated Monthly Devoted to Healthful living

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AUTHOR and SUBJECT INDEX

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AUTHOR INDEX

	A	PAGE	L	PAGE
Anderson, Clinton, P.		... 219	Lakshminarayan, V., Bangalore	... 251
Autolycus, P.		... 128	Larsen—Egon, U.S.A.	... 208
	B		Lockhart, Lloyd, U.S.A.	... 198
Balachandran, N. S., Kozhikode		... 18		M
Berens, H. A., London		... 94	Marmion, T., London	... 253
Blumer, G., M.D., Yale, U.S.A.		... 189	McFarland, W., M.D., London	87, 238
Brockhurst, John, C., M.D.		... 284	McKay Stella	226, 247
Burgess, Gelett		... 136	Mehta, V. N., L.M. & S., Marvi, Sourashtra	256
	C		Mills, (Mrs.) M., Bristol	... 85
Ghandrika Priyadarsini, R., Madras		... 284	Mukherjee, T. D., M.B., D.P.H., Burdwan	... 107
Chesterton, G. K.		... 143	(W. Bengal)	
Clarke, Lt. Col., G., M.C., M.R.C.S., Hydrabad, Deccan		... 99, 123, 147, 174, 200, 221, 249, 269		N
	D		Narayanan, R., B.Sc. (Hons.), M.A., Mangalagiri	114, 281
David, John G., Mehmabad, Gujarat		... 7, 34, 54, 89, 105, 182	Nitzberg, M. G., U.S.A.	... 94
Davidson, Bill, New York		... 115		P
Debsarma, D. N., Kaziranga, Assam		17, 113	Parvati Devi, S., M.B., B.S., Madras (Mrs.)	52
De Kruif, Paul, U.S.A.		... 36	Peterson, Prof. W. F.	144a
D., H. F.		... 134		R
Dublin, L. I.		... 138	Raghavachari, Rao Saheb, T.N.S., Madras 16	5, 31, 63, 75, 101, 124, 149, 171, 179, 201, 228, 244, 271
Dwarakanath, R., B.A. (hons.)—'Chandrika', Madras-16		10, 38, 159, 212, 232	Ratcliff, J. D.	... 28
	E		Richardson, Fount, M.D., Arkansas	... 267
Ewen, John, H., F.A.C.P.E., D.P.M., Surrey, England		... 184	Ross, W. D., Cincinnati	... 45
	F		Rutledge A., U.S.A.	... 143
Fox, J. D., M.D., London		... 191		S
	G		Scheele, L. A.	... 164
Garg, K. B., M.Sc., M.A., L.L.B., Allahabad		105	Shanti Devi Krishnan, (Mrs.) Basavan-gudi, Bangalore	66, 82, 110, 131, 156, 186, 206, 223, 238, 278
Ghose, Madan Mohan, Nakunda, Hooghly Dt., W. Bengal		... 41	Sivabogham, Miss R., B.A., Madras	... 215
Gibson, John, E.		... 119	Soundaravalli Srinivasan, (Mrs) Vellore	177
Gross, Elizabeth—England		... 279	Swami Sivanandji Maharaj, Rishikesh	... 274
Gupta, Krishna Kumar, M.A., L.L.B., Allahabad		153, 254		V
	H		Vani, Nandlal, B., M.B., B.S., Nandurbar...	236, 282
Hemingway (Mrs.)—M.R.C.P., London		... 69	Vine, A. C.	... 234
	J			W
James, Williams		... 143	Wheatley, G. M., New York	... 212
	K			Y
Kaufman, W., M.D., U.S.A.		... 58	Yeates, G.	144a, 240, 256
Kopcha, J. E., M.D., New York		... 282		
Kothary, B. M., Bharatpur		... 197		

HEALTH 1953—SUBJECT INDEX

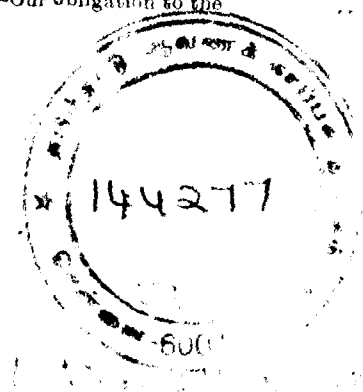
A		B—(Contd.)		C—(Contd.)		E	
	PAGE		PAGE		PAGE		PAGE
Absent-mindedness on the increase among educated Indians	169a	Blood pressure—Advice to those with high	237	Coronation present—Only	72a	Easel exhibitions in Denmark	241a
Abuse of antibiotics, use and	100	Blood pressure: New drug for	145a	Correspondence—(Woman's place)	215	Eating habits—children and their	65
Abuses of cortisone and ACTH	120a	Body is a temple—My—(poem)	240	Cortisone: Adenoids and	145a	Eclipse of the sun—How astronomers tell when—will occur	193a
Accident-prone persons—who are?	23	Body resistance of and T.B. of lungs	34	Cortisone and ACTH—abuses of	120a	Economics of ill health, The	166
Accidents and eye injuries resulting from fire-works	287	Body-Temperature—How regulated	107	Cortisone and ACTH—Risks in indiscriminate use of	283		
Acne—How to prevent and control	16, 121a	Book Reviews	168	Cosmetics	192a	EDITORIALS—	
ACTH: Risks in indiscriminate use of cortisone	283	"Boy" in true perspective, The	235	Cough is a symptom of many things	221	Adulteration of foods and drugs	265
Acute insomnia	37	Boners—Medical howlers	281	Cow's and buffalo's milk—Seasonal variations	24	Child-welfare and UNICEF	193
Adenoids and cortisone	145a	Braille for the blind—Solid dot	241a	Crematorium—Electric—in Bombay	217a	Experts advise against abuse of antibiotics	97
Adulteration of foods and drugs (Ed.)	265	Brain—How it regulates the speed of our breathing	104			Fight against malaria	73
Advice—The best—I ever had	219	Brain research	49a			Health is wealth	121
Advice to the young	120a	Brains: The clock inside our	119			Medicine and public health—In India's final five year plan	25
Air mail service, The first	49a	Breathing—How does brain regulate the speed of our	104			Modern menace to mankind—(Smoking)—The	241
Alarm clock, The	81	Breaths—Writing through	208			Population and education problems of India—The	145
Allergy—Definition of	200	Brittle nails	142			Reforming the juvenile delinquent	217
Alphabet for the blind—Louis Braille—Inventor of	95	Brown sugar helps children	121a			Rural sanitation and medical relief	169
Ambition	192a					Work for the blind in India	49
Ambulation—Early—after surgical operation and childbirth	244					1952 and 1953: Retrospect and prospect—Let us take stock of our basic needs	1
American doctors' incomes	22					Educated Indians—Carelessness and absent-mindedness increase in	169a
Antibiotics, Experts advice against abuse	97					Educational progress in India	169a
Antisnake serum—	216a					Education in China—Public	217a
Ape man at night	1a					Effect of cooking on Vit. A content of ghee	217a
Appetite—Where does it originate	264					Efficiency, Food and	159
Approach to motherhood—Proper	69					Eighteen programmes in operation—WHO assistance to India	72a
Archaeology helps	240a					Emergency	288a
Armpit abscesses	241a					Emotional problems and the G. P.	220
Arresting the heart beat	25a					Emotional reactions of patient to tuberculosis	89
Arrest of asthma	174					Emotions—Ulcers and	120a
Artificial insemination of foster mother	73a					Endurance—Man's powers of	240
Art of medicine	42					Equanimity and sweetness of temper aid long life	21
Ascorbic acid content of vegetables and fruits—Increasing the	43					Exercise—Good and bad results of	53
Aspirin—A warning against its promiscuous use	165					Exercises of India—Indigenous physical	254
Asthma	58					Exhaustion—Difference between fatigue and	236
Asthma: Arrest of	174					Existence—Regimented: of man	257
Athletes—Drugging	57					Expectant mother's prayer	282
Athletes—Medical examination of	193a					Eye injuries: Accidents and—from fire works	287
Australia—Advance of Medicine in	24a					Eyes	128
Automatic meal service	193a					Eyesight—What price?	23
B		C		D		F	
	PAGE		PAGE		PAGE		PAGE
Babies—Big and small	216a	Cabinet pudding?	288a	Dangers from Nylon and Rayon	188	Factor infantile vomiting—Underfeeding	135
Baby losing weight?	269	Cancer—Fear of	87	Danger Signal—Nature's: Fatigue	177	False ones dearer—Teeth	88a
Baby's meals—Music with	86	Cancer lung most common in U.S.A.	152	Dark girls—Prefer: (Rajaji's advice)	145a	Family doctor—The general practitioner...	250
Baby teeth—Let them alone	97a	Cancer—New cure for—Expected	169a	Deafness cured by surgery	28	Father, Not too late at 92, to become a	145a
Backyard gossip	120a	Cancer of prostate and breast—A new attack on	36	Deft definitions	48a, 96a, 144a, 168a, 192a, 240a, 264a	Fatigue and exhaustion—Difference	236
Bad breath—Halitosis	200	Cancer of the lung—Smoking and	63	Delinquency—Juvenile	198	Fatigue: How to do more work with less...	81
Bad work: No play: and poor health	14	Cancer—Smoking and	222	Delivery—Rapid: and diminution of pain with Vit. B1	47	Fatigue—Nature's danger signal	177
Bernard Shaw—Vegetarianism of: and longevity	134	Cancer—Tobacco and	117	Dental care	18	Fat people—Advice to	196
Best medicine—The	48a	Care-taking—Statistically studied	48a	Dental college for Madras	121a	Fear—Conquest of	274
Bihar village—Swayamvara in	97a	Cashew-nut	265a	Deodorising action of chlorophyll?	284	Feeding formulas: On prescribing infant	135
Biography of a four-time widow	65	Catering—Cleanliness in	237	Development of personality from birth to the age of thirteen	228	Feeding—Starch in infant	40
Birth control—Tablets for	97a	Challenge of Iatrogenic disease	280	Dextraven—A new antishock drug	217a	Fever	197
Births—Record number of: in a Maternity Hospital (Madras)	25a	Character	168a	Diabetes—Common mistakes made by patients in the management of	232	Film shows—Children's reactions to—Psychological study	66
Blind—Alphabet for the: Louis Braille—Inventor of	95	Chaastity	266	Diabetics—Infections of elderly: Controlled by terramycin	144	Films—Reaction of children to	48
Blindman's bus—The cinema?	288a	Cheaply bought—Health	88	Diagnosis and treatment	288	Filtration system—The world's most wonderful	238
Blind: The poor	145a	Cheating	72a	Diagnosis—Horseback	72a		
		Child birth—Early ambulations after surgical operations and	244	Dietary: Value of dried fruits and nuts...	179		
		Child meets with accident—What to do	247	Difference between fatigue and exhaustion	236		
		Children and their eating habits	65	Differences in distribution of subcutaneous fat with sex and maturity	48		
		Children—Reaction of—to films	48	Differences: Sex in illness	168		
		Children's reaction to film shows—Psychological study of	66	Dirt eating—Pica and	270		
		Children—The mother's love to her	96a	Disturbances—Sexual: The psychology of: I, II, III & IV	75, 101, 124, 149		
		Child—The moment to smack a	97a	Does your child grow and develop all right	131		
		Child-welfare in Delhi conference	72a	Doctor-patient relationship	223		
		China—Public education in	217a	Doctor—It's a privilege to be a	162		
		Chlorophyll	167	Doctor of old	33		
		Chlorophyll—Has it any deodorising action?	284	Doctor on his high pedestal	267		
		Chlorophyll products—The truth about	210	Doctor-patient relation—Psychotherapeutic approach	45		
		Choice compliment	264a	Doctors—Healthy	190		
		Churchillism	48a	Doctors—Women	265a		
		Cinema: The modern	265a	Doctor—The ideal	93		
		Citizens needed:—Older	164	Do no harm: First	158		
		Coffee—Clashing views on	9	Don't trifle with penicillin	257		
		Colds—Dirty coats spread	93	Dread—What's your pet—?	96		
		Cold: Virus of common—cultured at last	265a	Dreams	277		
		College girls should equip for family life	216	Dreams—How are they caused	205		
		Compartments reserved: on railways	96a	Dreams—Sleep and	211, 271		
		Confidence—How to win the patient's	223	Dried fruits and nuts in our dietary—	179		
		Conquest of fear	274	Drinking milk quickly	121a		
		Conversation—The art of good	136	Drugging athletes	57		
		Cooking—Practical hints for retaining food values in	93	Drugs: Adulteration of Foods and	285		
				Drugs—use and abuse of: in T.B. of lungs	7		
				Drugs with tags	147		
				Drunkenness—A new quick test for	241a		
				Duct under Suez canal to irrigate land in Sinai	265a		
				Duty—Man's primary	243		
				Dysmenorrhœa—Niacin for	120		

F—(Cont'd.)		PAGE	H—(Cont'd.)	PAGE
Fine lines and its origin	1a		How tobacco acts	6
First aid caution	265a		How to do more work with less fatigue	81
Flowers and leaves—Novel method of silver plating	241a		How to lead a full and satisfying life	256
Flowers spring from leaves	210		How to leave off smoking	4
Food adulteration—The menace of	5		How to live long	4
Food and efficiency	159		How to live long and happily	113
Food values in cooking—How to retain	92		How to prevent and control acne	16
Formula for youth	141		How to stop smoking	240
France—1000 births per day in	49a		How we learn to see	20
Frequent headaches, who are most prone	73a		How young am I?	97a
Freud's sexual theory	211		Human conduct	243
Friendship	144a		Humanities in medicine	240
G			Human kidneys—Grafting of	25a
Gastrectomy—Sexual after effects of	214		Human milk bank in Italy	241a
General practitioner—Emotional problems	229		Human nature	24a
General practitioner—Poem	28a		Hungary—Night medical service—New and efficient type	79
Ghee—effect of cooking on Vit. A. content	217a		Husbands—a word to:	25a
Grafting of human kidneys	25a		I	
Grumbling—On	41		Iatrogenic disease: The challenge of	280
Grown ups—What's wrong with the	164		Ice-cream—vegetable oil	73a
Grow old gracefully	163		Ideal doctor	93
H			Ill health—The economics of	166
Half world's women married	1a		Illness, sex differences in	168
Halitosis	200		India—Educational progress in	169a
Happily—How to live long and	113		India—Railway Progress in	169a
Happiness	96a		Indiscriminate medication	189
Happiness and health	263		Indiscriminate use of Cortisone and ACTH—Risks in	283
Happiness—True	168a		Industrial medicine pays	95
Happy and healthy to a hundred	195		Infant feeding—Hints on	114
Happy memories	24a		Infant feeding—Modern views on	258
Happy parenthood	110		Infant feeding—starch in	40
Harelip and cleft palate	249		Infantile vomiting—underfeeding is a factor in	135
Headaches—their cause and prevention	206		Infants—Premature in later life	204
Headaches: who are most prone	73a		Infants, Protein requirements of	14a, 96
Head colds—Spread by dirty coats	33		Infant welfare—For mothers only	10
Health and disease: Feeding of children in	156		Infections of elderly diabetics controlled by Terramycin	114
Health and obesity	286		Inflammability of plastic spectacle frames	47
Health centre—New London—(Birth to old age)	209		Injuries—Some psychological aspects of	23
Health cheaply bought	88		Insomnia—Acute (sleeplessness)	37
Health education—Motivation in	275		Intellectual servility	194
Health—Hills and	153		Intelligence tests and intelligence quotient	184
Health: music and mental	205		Interview with night duty doctors in N.M.S., Hungary	79
Health: Spices are good for	17		Isoniazid—not a wonder drug after all!	121a
Health topics—Random notes on	41		It pays to be good—a poem	208
Healthy doctors	190		J	
Hearing aid, smallest sized	25a		Jealousy: green eyed twins—Envy and	162
Heart and lungs—Smoking injures the	31		Juvenile delinquency	198
Heart beat: arresting	25a		K	
Heart disease—Cause and prevention	212		Kidneys—grafting of human	25a
Heart disease—Smoking and	255		Keeping youth	192a
Heart—Holes in the: plugged	193a		Knowledge, scientific: of 50 and 100 years ago	61
Hearts: Tired	276		L	
Heart—Transplantation of monkey's	121a		Large families—Records of exceptionally	216a
Height hazards—Tall men at a discount	118		Law and fact	48a
Heroes of medical experiments	115		Lawyer, the	33
High blood pressure—Advice to those with	237		Learn to see: How we	20
Hills and health	153		Leper girl 'adopted' by queen is cured	49a
Hints on infant feeding	114		Leprosy front—New development	96
Historicity of tuberculosis	182		Leprosy patients in the world	43
Hormone remedies—Risks: in indiscriminate use of	283		Life—How to lead a full and satisfying	256
Horseback diagnosis	72a		Like mother like daughter	1200
Hospital ward: their names: old and new	24			
House isolation of patients suffering from communicable diseases	251			
Howlers: Medical	281			
How much salt do we take per day	265a			

L—(Contd.)		PAGE	N—(Contd.)		PAGE
Lives for old—New	73 a	140	News & Notes:—	48, 71, 96, 144, 264	264
Longevity—Medical research results in	73 a	140	Next question		48a
Longevity—Vegetarianism of Bernard Shaw and	134	134	Night medical service in Hungary—New and efficient type of		79
Loss of taste and smell in severe colds	170	170	Nursing qualities: a patient values most		130
Love—The World's greatest need of today	277	277	Nuts—The value of dried fruits and		179
Love to her children—the mother's	36a	36a	Nylon and Rayon—dangers from		188
Lung—Cancer: of most common in USA	152	152	O		
Lungs—Smoking and cancer of the	63	63	Obesity—Health and		286
Lungs—Smoking and tuberculosis of the	105	105	Obligation to the young—Our		148
Lungs—Smoking injures the heart and	31	31	Oil painting in 18th century America		130
Lungs—Specialised treatment of tuberculosis of the	54	54	Older citizens needed		164
Lungs, tuberculosis of: Body resistance and	34	34	On prescribing infant feeding formulas		135
Lungs, T.B., of: Use and abuse of drugs in	7	7	Operation silence		90a
M			Oranges in a new role		239
Magic easements of the mind	143	143	Optician's window—Notice in		120a
Malaria, Fight against	73a	73a	Operations—when to avoid		144a
Malaria—Milk diet in	217a	217a	Outwitting fatigue		181
Male forgetfulness	288a	288a	Overcrowded city:—Los Angeles		246
Man and woman	279	279	P		
Man—Regimented existence of	267	267	Palato—Harelip and cleft		249
Marital relations—Unhappy: cause peptic ulcer	169a	169a	Parental responsibility—Changing social conditions and		85
Marriage happy—Nine ways to make a	127	127	Parenthood—Happy		110
Mathematics—Dog studying	49a	49a	Parenthood—Planned		82
Meal service—Automatic	193a	193a	Parents,—Prolific		204
Medical course in Madras: Short-term	145a	145a	Patient-physician relationship		155
Medical experiments, Heroes of	115	115	Patient's duty to the doctor		268
Medical research results in longevity	73a	73a	Peaceful living—Secret of		205
Medical scientists in Madras—A team of fourteen	72	72	Penicillin—Don't trifle with		257
Medication—Indiscriminate	189	189	People are so touchy—Why some		142
Medicine—Industrial—pays	96	96	Peptic ulcers caused by unhappy marital relations		160a
Medicine—Personal preventive	92	92	Personality—From birth to age of 13		228
Medicine—Social	52	52	Personality—in relation to health and growth		201
Medicine—The humanities in	249	249	Personal preventive medicine		92
Menace of food adulteration	265	265	Pert and pertinent		127
Men should avoid: 4 types of women	183	183	Physical changes occurring during sleep		148
Menstruation—Ninon for painful	120	120	Physical therapy—International congress of world confederation for		96
Mental health—music and	205	205	Physicians		263
Milk-bank in Italy—Human	241a	241a	Pica and dirt eating		270
Milk diet in Malaria	217a	217a	Pimples on the face		216a
Milk of cows and buffaloes—Variations in Vit. of A potency	24	24	Plastic spectacle frames—Inflammability.		47
Mind over body—Victory of	286	286	Pleasant topics from periodicals:—23a, 48a, 72a 90a, 120a, 144a, 168a, 192a, 216a, 249a, 264a, 288a		23a, 48a, 72a 90a, 120a, 144a, 168a, 192a, 216a, 249a, 264a, 288a
Mobile dispensaries for Kashmir valley	121a	121a	Poem—To Willie—yet unborn		92
Moment to smack a child	97a	97a	Poisoning: What to do in case of		91
Monkey's heart—Transplantation of	121a	121a	Poor blind—The		145a
Mortality—World's lowest tuberculosis	27	27	Poor Health: No play—Bad work and		14
Mother—a poem	255	255	Powers of endurance: Man's		240
Motherhood: Parting shot on	166	166	Practical hints for retaining food values in cooking		93
Mother's love to her children	96a	96a	Practitioner—The general—The family doctor		250
Mother's prayer—An expectant	282	282	Prayer—Value of		48a
Mother-in-law—The ever-despised	240a	240a	Premature infants in later life		204
Motivation in health education	275	275	Pressure cooker, Folems of the		99
Music with baby's meals	86	86	Prince of wails (not Wales)		118
Musings of a medico—while relaxing	236, 282	236, 282	Privilege to be a doctor—It's a		162
N			Problem of progress		273
Nail-biting—cause and cure	30	30	Proctologist		26
Nails—Brittle	142	142	Professional service—Test of		250
Nature's danger signal—Fatigue	177	177	Progress—Funds for medical		14
Nature—The master healer	278	278	Progress in India—Educational		169
New development on leprosy front	96	96	Progress in India—Railway		169
New disease—yet another—"television neck"	62	62			
New drug for blood pressure	145a	145a			

P—(Contd.)	PAGE	S—(Contd.)	PAGE
Prohibition in Arabia	231	Smoking and heart disease	255
Proper approach to motherhood	69	Smoking and tuberculosis of the lungs	105
Prostate and breast cancer of	39	Smoking: How to leave off	4
Protein molecules—Structure of: Chemis-	88	Smoking—How to stop	240
try's most complex problem	193a	Smoking injures the heart and lungs	31
Protein of wheat—The	24a	Smoking—Not allowed in E.S.C. of U.N.	193a
Protein requirements of infants	23	Somnambulism	123
Psychological aspects of injuries: Some	45	Sneezing—Dirty coats cause	93
Psychotherapeutic approach—to patient	120a	Snyllygoaster	288a
Public—the writing	241a	Socialized medicine—Cutting	73a
		Social medicine	52
Q		Soon rewarded	144a
Quackery—Bombay inquiry into	23	Soporific <i>par excellence</i>	48a
Qualifications for specialists!	130	Sour side of sugar	191
Qualities—Nursing: patient values most	71	Spices are good for health	17
'Qua vadis' menu; good Roman digestion	171	Spectacles and their origin	253
Queen of the house—Woman's rightful	241a	Specialised treatment of T.B. of lungs	54
place	184	Specialists—Qualifications for	23
Quick test—A new: for drunkenness	184	Starch in infant feeding	40
Quotient—Intelligence tests and intelli-		Stomach troubles	234
gence		Stopped heart beat for 3 minutes	193a
		Sugar—Brown: helps children	121a
R		Suit case that never failed him—Novel	192
Q'Fever in India too	217a	Sulphone—Tribute to: Leper no longer	96
Random notes on health topics	41	Summing-up	192a
Reaction of children to films	48	Surest road to agreement	264a
Reactions—Emotional: of patient to tuber-	89	Swayamwara in a Bihar village	97a
culosis	66	Sweetness of temper - aids long life: Equa-	21
Reaction to film shows—Children's	261	nimity and	270
Reading in bed	216a	Sweets—are they good for us?	
Records of exceptionally large families	48		
Red Cross Conference—India invites 10th	257	T	
International	45	Tall men at a discount—Height hazards	118
Regimented existence of man	189	Teeth—False: dearer	288a
Relation: Patient-doctor: Psychothera-	96a	Teeth—let baby's: alone	97a
peutic approach	34	'Television neck'—another new disease	62
Remedy is worse than the disease—Indis-	288	Television risks	97a
criminate medication	38	Temperature of the body	107
Reserved compartments on railways	92	Temper tantrums in children	226
Resistance—Body: and tuberculosis of the	287	Ten points for human conduct	72a
lungs	288	Terramycin—Infections of elderly dia-	144
Respect to womanhood	288	betics controlled by	250
Restful sleep	288	Test of professional service	47
Retaining food values in cooking—Hints	287	Thiamine—Rapid delivery and diminu-	207
		tion of pain with	287
S		Three dimension X ray	24a
Safety vs. Tim-	287	Time: Safety (versus)	20
Salt—How much do we take per day	214	Tip to girls	17
Sandwiches—How they came to be called so	240a	Tips to denture wearers	276
Scientific knowledge of 50 and 100 years ago	205	Tips to the doctor: Ten useful	74, 96a, 86, 91, 94; 106, 109, 112, 116,
Scotchman—Yet another dig at the	288	Tired hearts	120, 120a; 123, 126, 127, 144a; 155,
Secret of peaceful living	216a	Tit bits:—21, 24a; 41, 48a; 51, 53, 72;	161, 165, 168a; 176, 178, 185, 188, 192,
Self confidence	194	74, 96a, 86, 91, 94; 106, 109, 112, 116,	192a; 197, 216a; 227, 235, 237, 239,
Serum—Antisnake	48	240a 246, 248, 252, 253, 264a 275, 287,	288,
Servility—Intellectual	168	288a	
Sex and maturity—Differences in distribu-	214	Tit for tat	144a
tion of subcutaneous fat with	211	Tobacco and cancer	117
Sex differences in illness	97a	Tobacco: How it acts	6
Sexual after-effects of gastrectomy	145a	Tooth, transplantation of: Austrian's	24
Sexual theory—Friend's	96a	success	142
Shock made them forget	241a	Touchy—Why some people are so	288a
Short term medical course in Madras	37	Transfusion of right type	121a
Silence: operation	38	Transplantation of monkey's heart	168a
Silver plating of flowers and leaves	123	True happiness	210, 284
Sleeplessness—Acute insomnia	170	Truth about chlorophyll products	265a
Sleep—Restful	137	Tubeless tyres	
Sleep walking			
Smell and taste—Loss of—in severe colds			
Smoking			

T—(Contd.)	PAGE	W—(Contd.)	PAGE
Tuberculosis—Emotional reactions of	89	What price eyesight?	23
patient to	146	What's new in the news? Front cover:	
Tuberculosis germ is browbeaten not	182	Inside: 1a, 25a, 49a, 73a, 97a, 121a, 145a,	
whipped	34	169a, 193a, 217a, 241a, 265a	
Tuberculosis—Historicity of	54	What's wrong with the grown-ups?	164
Tuberculosis of lungs—Body—resis-	7	What's your pet dread?	96
tance and	105	What to do if child has an accident	247
Tuberculosis of lungs—Specialised treat-		What two famous doctors said about	
ment of		smoking	243
Tuberculosis of lungs—Use and abuse		Where does appetite originate?	264
of drugs in		WHO assistance to India—18 programmes	72a
Tuberculosis of the lungs—Smoking		in operation	49a
and		WHO—New Director-General: Dr. Candau	
		WHO workers—Four Indian—to study in	
U		Denmark	71
Ulcers and emotions	120a	Womanhood: Respect to	288
Underfeeding is a factor in infantile vomi-	135	Woman is woman	240a
ting	100	Woman's rightful place—Queen of the	
Use and abuse of antibiotics	7	house	171
Use and abuse of drugs in T.B. lungs		Woman—What makes her truly beautiful?	186
		Women	264a
V		Women are different	138
Value of dried fruits and nuts in diet	179	Women are women	168a
Vanamahotsava	173	Women, men should avoid—4 types	183
Vegetable oil ice cream	73a	Women to banker	120
Vegetables and fruits—Increasing the	43	Word to husbands—A	25a
ascorbic acid content of	120a	World's greatest need of today—Love	277
Vegetarians—Mother of notable: celebra-	286	World's lowest tuberculosis mortality	27
tes 100th birthday	46	World's most wonderful filtration	
Victory of mind over body	265a	system—the kidneys	238
Vision-testing in schools	197	Writing through breaths	208
Virus of common cold cultured at last?	24		
Virus—What is it?	47	X	
Vitamin A potency in cow's and buffalo's	135	X ray—Three dimensional	207
milks			
Vitamin B1 (Thiamine) rapid delivery		Y	
and diminution of pain with		Youth—Formulae for	144
Vomiting—Underfeeding is a factor in		Youth—Framed text on MacArthur's	
Infantile		deak	84
		Youth—In the days of thy	51, 262
W		Young female patient to dentist	120a
Weaker Sex Myth gives eve longevity	288a	Young—Our obligation to the	148
What is this chlorophyll, that's so much	167, 284		
advertised these days			



Pleasant Topics from Periodicals

Emergency

Dr. Blank awakened from a sound and much-needed sleep in the middle of the night, by the persistent ring of the telephone bell picked up the receiver and listened to a very excited voice say "Hurry over, Doctor, my wife is reading one of those books on what to do before the doctor arrives".

"So what?" asked Dr. Blank, much annoyed. The frightened man replied "I'm afraid, she'll do it."—(*The Pendulum*).

The General Practitioner

There comes a time in the lives of men,
When they wish they could begin again,
At least this phenomenon must occur
In the life of the General Practitioner.
When he's tired of hopping out of bed.
Or calm a stomach over-fed
Does he long for specialized work instead?
If so, in this age of specialization
What would become of the population?
Whom could it call at one or two
To diagnose a case of 'flu'?
Whom could it get to come (and hurry!)
To hold its hand and say, "Don't worry"?
So let the others take the prize.
And, Doctor, please don't specialize!

(*S. Afr. Med. Jour.*, 13-6-1953).

False ones Dearer

Dr. Greenstein of Philadelphia was instructing a denture patient in the care of his new teeth. "You've got to keep them as clean as your natural teeth." The patient nodded approval "I'll take better care of these false ones, Doc. These teeth cost me real money. I got my first real ones for nothing."—(*For Doctors only*).

Blindman's Bus—The Cinema?

From a Draft Board Induction Centre comes this story:

An unwilling conscript faced the Army eye surgeon who asked him to read a chart.

"What chart?" asked the draftee. The doctor persevered.

"Just sit down in the chair and I'll show you".

"What chair?" asked the man.

Defeated because of bad eyesight, the draftee went to a nearby cinema theatre. When the lights came on, he was horrified to see the eye surgeon in the next seat!

"Excuse me" said the conscript as calmly as he could, "does this bus go to Manchester?"—(*For Doctors only*).

Who is Wise?

He is wise who knows that he
Dust has been and dust must be
But a fool is he who must
Fill the interim with dust.

—(*Lancet*, London: 27-6-'53).

To Make Your Old Car Run

The best way to make your old car run is to ascertain the price of a 1954 model.—(*U.M.W. Journal*).

Male Forgetfulness

Even husbands with strong memories sometime forget that are married men.

'Weaker Sex' Myth gives Eve Longevity

How smart women are! By preserving the 'weaker sex' myth, they lead a life of less exertion and so outlive men by an average of six to seven years, according to Dr. William Leman, the heart specialist of Philadelphia.

"Men beyond 50 cannot resist the temptation to shovel snow" he says. "Men like to show off to prove they are big and strong".

"And there is far more to it. Women can lose more blood, they can stand more shock; they are far better drivers; they can hold down a job, take care of home and family and at the same time guard the supposedly strong male.

"It is a woman's world, if she wants to admit it and claim it. But perhaps she would be unwise to do so".—(*Sunday Standard*).

Snyllygoster—What does it mean?

Tandon writing in the *Daily Mail* says "three times this week I have heard this new word, claimed to have been invented by H. L. Mencken, who hurled it at the U.S. Republican Administration".

It means "A fellow who wants office, regardless of party platform, or principles and when over he wins, gets there by the sheer force of monumental talknothical assumacy".—(*The Weekly Mail*, 15-11-'53).

Cabinet Pudding

A medical man in Coxtown one night complained to the waiter in a hotel, "there is hardly a particle of turtle in this turtle soup". The waiter was a tough mug." So what, Doc? If you ordered Cabinet pudding would you expect to find the Prime Minister in it?"

Transfusion of Right Type

Her mother-in-law needed a blood transfusion, but they failed to find a suitable type of blood donor, although they searched the hospital files.

The husband lamented to the wife "It seems strange we can't find the true type blood for mother". The wife edged toward the door as the husband was going out for a further search and said "Have you tried a Tiger?"

Dr. U. RAMA RAU's Hand Book on

FIRST AID IN ACCIDENTS

Revised by: Dr. U. KRISHNA RAU, M.B., B.S.

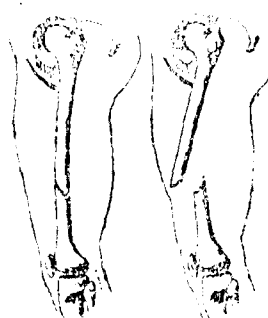
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Fainting,
Convulsions,
Shock,
Collapse,
Sun-Stroke,
Heat-Stroke,
Asphyxia,
Shock from Electricity
and Lightning Shock,
Burns,
Wounds,
Bites,
Snake-Bite,
Bruises,
Strains and Rupture
of Muscles,
Poisoning,
Insensibility,
etc., etc.

चौथा अध्याय

हड्डियों का टूटना।

हड्डियां कड़ी हैं, पर आसानी से टूट जाती हैं।
धक्का, गिरना, कूदना आदि में जब उन पर अधिक जोर



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