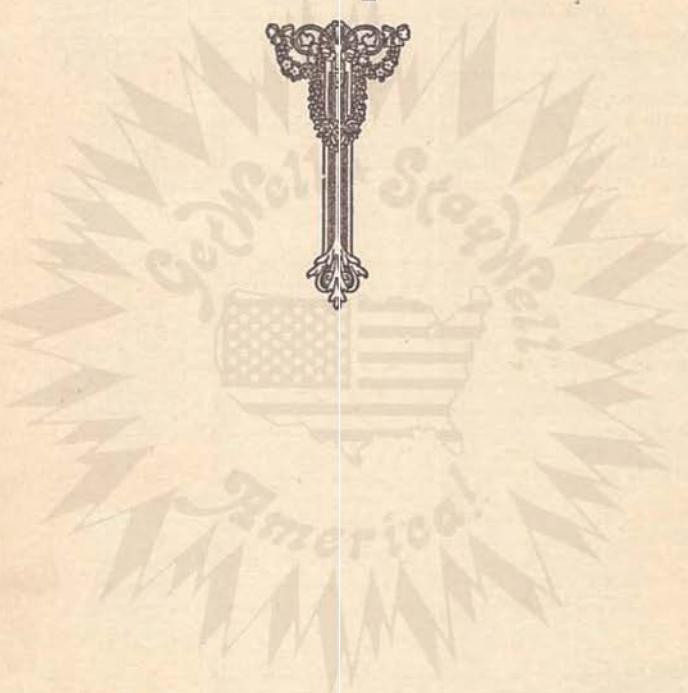


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# Dr. Tilden's Health Review and Critique



Volume VIII • 1933

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# *Dr. Tilden's* HEALTH REVIEW & CRITIQUE

*Can Humanism evolve out of an educational system  
based on Animalism? Educators are privileged to reply.*

—TILDEN.

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VOLUME VIII

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NUMBER 1

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## Appendicitis

*(Continued from December issue)*

Such sweeping statements as I sometimes make should not go unchallenged. I have been writing the truth concerning the cause and treatment of disease for more than thirty years. What I have to say now, and have said for years past, has been pooh-poohed by the profession. Lay people are too busy dallying with mammon, and sensuality and building disease to give any attention to the cause of disease. Why should they? Such questions are settled for them by their doctors—*medical advisers!* Stupid humanity is given over to enjoyment—enjoying the *innocent habit* of abusing the functions of nutrition and reproduction; the functions upon which life itself, as well as the physical and mental well-being of mankind, depends.

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As inconsistent as self-destruction is, humanity is not wholly to blame for its self-destructiveness; for it is fiendishly jollied along the road to self-destruction by the medical profession. Is it not a fact that doctors declare that enervating habits have nothing to do with causing disease? Do not the majority of doctors indulge in health-destroying habits? How about the doctors of another learned profession—those who give spiritual advice? Are gluttony, tobacco, alcohol, lust, and mental sensuality ideal elements out of which to build houses in which to germinate and evolve a being fit for perpetuation—for heaven? Think you a being begotten and cultivated in such muck is ideal—fit for perpetuation eternally? As a matter of economy, the Great Artificer could create perfect beings—perpetuate at less cost. After mundane doctors get through with the people of earth, they may be good plant-food, if they have not been ruined with an admixture of vaccines, serums, and drugs. Weeds, grass, and vegetation generally do not thrive when subjected to a treatment of mineral elements—mercury, arsenic, and their compounds. Such drugs stupid man is induced, by the priests of medical superstition, to take into his body to cure him of so-called diseases created by enervating habits of mind and body. Ataxia is a neurosis brought on from excessive venery; not syphilis, as scientific medicine teaches. Is not such a lack of true

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understanding of the cause of sex-perversion a travesty on modern intelligence. The doctor, a graduate from a Grade A medical college, and the patient a graduate of a high literary institution! What can we say of technical education when two such *informed* people are the standard-bearers of modern civilization, and believers in medical and other popular superstitions?

Is there any hope that education will ever educate? Not until superstition is eradicated.

What is the use of such discoveries as relativity, if the common mind cannot recognize the truth that universal unity and relativity are synonymous, and that an application of the law can be made to every phase of life? I apply the law to the cause and correction of disease. All so-called diseases are related. Their cures are closely connected—every cure is related to every other cure. This truth applies to every phase of life, from rock to man. One of the most stupid things about the so-called science of medicine is that it has no unity. Every disease is an entity, with a separate and distinct individuality—no unity, no relativity. Diversity of diseases and cures confounds the wisest. Doctors cannot understand that all so-called diseases are united by one pervading law. *Krishna*, the second god of the Hindu trinity, has said: "Men contemplate distinctions because they are stupefied with ignorance."

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The profession's *intense research*—delving into pathological muck, searching for a specific germ that is supposed to cause whatever pathology is under investigation—has been under way for the past threescore and ten years, and has ended in confusion confounded and compounded. The theories and so-called cures have resulted in the accumulation of tomes of literary junk that should meet extinction, as did the book of Galen and Avicenna at the hands of the most noted quack of antiquity; namely, *Bombastus*—a family name which he changed to *Paracelsus*. He endeavored to seek practical knowledge. The verdict of all his traducers was: "He was nevertheless a man of great ability."

Jenner was the pioneer modern medical muck-mixer. A hundred and fifty to two hundred years ago man had not evolved out of his animal habits. The bathtub had not disturbed the luxury of his Sunday morning beauty sleep. Whiskers and long hair made shaving and shampooing unnecessary. It is true, that the *hirsute*, when luxurious, was a veritable jungle even to the flora and fauna peculiarly and spontaneously (?) evolved in such jungles.

In those days of man's untidiness, domestic animals shared with the lord of the manor in comforts, privations, discomforts, diseases, and premature death.

Horses, cows, and other animals during the

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rainy season lived in filthy barns and barnyards. Mud mixed with animal excretions into an acrid, evil-smelling bog, from knee- to belly-deep. These poor, imprisoned animals were compelled to live in those filth bogs. The horses developed a disease of their heels and legs known by the name of "grease;" cows developed cow-pox—a disease of their udders; and hogs became mangy. The men who washed and doctored the horses' heels helped the milkmaids milk the cows. In this way it was thought that the cows became infected with grease, and the maid's hands became infected from the cows.

Cow-pox is described in Gould's Medical Dictionary as "a contagious, eruptive fever occurring in the cow, and thought to correspond with smallpox in man."

A mind *capable of reasoning* should readily see that the birthplace of smallpox was in the horse and cow lots, before the days when mankind was born again—this time out of animal (brute and ignorant man) filth, into cleanliness and semi-intelligence. The mind is not *cleared* of filthy inheritance yet; for it still goes back to the horse-lot-bog of filth to secure a purifier for our children's blood. Parrot fever, "flu," and everything of a so-called infectious character belong to filth, developed inside or outside of our bodies. When mental and physical purification really comes to man, he will give cleanliness to domestic animals.

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Hogs are splendidly clean when the human animal will permit them to be. Our medical superstition extends to the hog and other animals. Vaccination, and other plans of immunizing filth with filth, are protected and enforced by our *health* authorities.

When real health knowledge is taught in our schools, churches, courthouses, prisons, quarantines, disease will become a "has been." *Regular* medicine will not teach it until the people demand it.

Carelessness in the care of our animal friends reacts upon us. The great plagues of history were born in the filth generated in filthy *penal* pens for animals.

The "Augean Stables" myth may have been a take-off on the filth of that day. It has been a great struggle for man to evolve out of animal filth. Today the majority of human beings do not know how to keep clean. Few know how to wash their faces and adjunct organs. Many wash every day, but they do not know that the filth accumulating in the body daily sends out odors vying with those of animals. Few know that lascivious thoughts in time build disgusting odors. Giving way to anger creates an odor that bathing cannot remedy. After the disagreeable-odor habit is developed, it requires years of good mental and physical habits to overcome the smell entirely. Hypocrisy, dishonesty, and disloyalty develop

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odors that proclaim these mental derangements far and wide. A system of healing that does not take into consideration internal filth is not to be depended upon to correct many chronic ills.

The subject of this article is supposed to be appendicitis. It is one of the most pronounced diseases brought on from internal filth. Cancer is another, tuberculosis another, etc.

So long as the profession is willing to follow a false hypothesis concerning the cause of disease, our best medical men must make such confessions as Dr. Cabot, of Boston, has made. Dr. Cabot—one of the leading, if not the leading, diagnostician of the world—has published, for the benefit of mankind, that he has found that autopsies following deaths in his own practice proved that his diagnoses were in error in nearly fifty per cent of his cases. Dr. Cabot is not only learned, but an unusually brave man. In these days of cowardly kowtowing to authority, the Boston man is as refreshing as an oasis is to the traveler in a desert. What does the doctor's discovery really mean? It means that he foretold in nearly half of his fatal cases what organs or tissue were involved. Of what advantage are such painstaking investigations? Suppose the autopsy indicates or proves apoplexy; a form of liver, gall-bladder, or other liver derangement; ulcer or cancer of the stomach or the bowels; a perforation of the bowels; an abscess of the appendix or a typhilitic ab-

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scess; endocarditis, or organic disease of any of the organs of the various cavities of the body. What does it mean? Does it mean that the disease is found? Not at all. The change in any organ or tissue indicates the effect of present or past causes. The great desideratum in diagnosis is to find what causes the functional derangement, and to correct it before organic change takes place; for a continuous functional derangement, repeated year after year, ends in organic change —organic degeneration and death.

A continuous overstimulation of the heart from tobacco, fear, apprehension, anger, or any over-worked emotion, lasciviousness, etc., may end in fatal organic heart change. One of the modern remedies for a fagged or jaded heart is digitalis; and there are other whips which medical logicians use in their endeavors at strengthening the heart. Such prescriptions are on the order of the treatment given the ass by Balaam. How very modern was Balaam's prescription. He did not know what frightened the animal. He did not see what the ass saw. Hence he believed the animal was suffering from *ocular delusion*, and that it was up to him to convince the brute that there was nothing to be afraid of. But the ass became vocal and chided his teacher.

If the human asses would stop farming out their fears and apprehensions to doctors of the Balaam type, and use their own powers of in-

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terpretation, they would cease to suffer from stupid prescriptions based on the "rule of thumb."

What do I mean by the Balaam type of doctor? The type who *cures* without removing the cause. These causes may be so guarded and subtle, and the will for negating the obvious truth developed so strongly, that the end—death—may come unannounced. Then undeveloped minds—those so child-like as to believe that we can have an effect without a cause, and also a continuous cause without an effect—will say that death came in the midst of health.

Law does not work that way. We can depend upon law and order. Even prayer is stultified when sent up in opposition to the eternal verities.

Disease and its correction rest on law. To break the law invites discomfort in mind or body. To bring back dependable comfort means to stop breaking law. *Palliations and cures* lead to physiological chaos, financial frenzy, psychological mad-houses, a universe divided against itself, and a compromising, vacillating, faltering god.

If the best diagnosticians are wrong half the time, what about average doctors, and what about fledglings from colleges whose professors have had no experience in the field of practice? God save the mark! Is there anything strange about the fact that the mortality from appendicitis is greater today than it was twenty-five years ago? The speed with which the victims of appendicitis

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are rushed into operations *takes the breath away from the majority of them.* I mean that statement to be taken literally. Most of the patients who recover after such operations were not emergency cases of appendicitis. Indigestion, gas pains, constipation, and fear are the excuses for most operations, and recoveries should be one hundred per cent. Patients suffering from gastro-intestinal indigestion with much pain, sensitiveness, local inflammation, nervousness, and fear, are the type of cases run in and operated upon before they have time to get comfortable and have enough self-assertiveness to refuse the operator's demand. Most of the cases that die do so from infection—*septic poisoning.* Operations, under such circumstances, are, or should be, branded as surgical malpractice and as criminal.

Forty years ago it was generally conceded that a death from *septic poisoning* condemned the operation as slatternly and unskillfully performed. The truth concerning the inexcusable mortality in cases operated upon for so-called appendicitis is that death was caused by criminal haste, a general lack of understanding of the real pathology, and a total ignorance of the cause of inflammation of the cecum (blind pouch or cul-de-sac) in which the large intestine (colon) begins, and to which the appendix is attached. Appendicitis is one of the symptoms of chronic devitalization of the alimentary canal — digestive tube. Devitalization

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means expenditure of nerve-energy to the extent of retaining toxic debris to the point of degeneration. When this state is brought about, the most vulnerable organs are the first to give down. If the subject is of the lymphatic temperament, if the air-passages have gone through all the stages of catarrh, and, finally, when the pulmonary lymphatics have resisted the toxic siege until their resisting power is lost, pulmonary tuberculosis is established. If the vulnerable organ is the cecum, and its lymphatics have been resisting a stage of local infection for months or years, the bursting of an abscess may be precipitated by heavy-handed, brutal examinations. This officiousness must be met by an immediate operation; and, if the operation is performed with brutal unskilfulness, as was the examination, death will follow.

Deaths following appendicitis operations are frightfully frequent. We read almost daily death notices which run like this: "Miss, Mrs. or Mr. —, well and widely known, was taken to the hospital a few days ago and operated upon for appendicitis. The operation was skilfully performed, but complications set in and the patient died. Everything that science and skill could do was done, but the patient passed on." What are the complications? Premature operations; operating when infective inflammation, fever, and pain are at the zenith—at a time when skill adds to the fury of the disease, when the disease mocks surgical skill.

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When instrumental skill is all that the surgeon has to offer, the disease laughs him to scorn, and accepts his offering and uses it as an ally—uses it to seal the patient's doom, and sends him, fool that he is, to manufacturing alibis which fool only fools, such as heart failure, unexpected paralysis, and the contention that the operation was too late. One lie is as good as another; the people do not know the difference, and the majority would vote for my extinction to reward me for this effort to save a few from premature death at the hands of our modern surgical matadors.

When overeating, eating of improperly combined foods, rapid eating, and insufficient mastication and insalivation bring on devitalization of the digestive system, man is in line for developing any of the disorders peculiar to the digestive apparatus and its adnexa (adjunct parts). And what part of the entire organism has not more or less influence on the digestion and assimilation of food? I know of no part that cannot become an ally or an enemy. In advising the sick, only those who keep this great unitary truth before their minds' eyes are safe advisers in emergencies.

The surgeon who rushes into an aggravated case of appendicitis and performs a spectacular operation will lose his patient, and the hardest work for him will be in manufacturing a perfect alibi. He is aided, however, by public stupidity, which is as profound as his own. Dumbbells should

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not have much trouble in putting over their mutual apologies. When they know better, they will be across the divide; and, like Dives, they cannot talk back. Their brethren, however, still have Moses and the prophets, the same teachers that Dives had, who would have saved them from a premature exit—to hell, to “torment.”

Humanity is much like sheep—where the bellwether goes the flock follows; when he bleats, they all bleat. The mortality this year following emergency operations is equal to that of preceding years. The people appear not to be awed with the frightful death-rate which follows emergency operations in appendicitis, as well as other operations. It does not appear to deter the onrush to premature and unnecessary death.

This form of frenzy, like every other form, rests on a basis of stupidity and professional ignorance.

We must accept the unity of all things, and not only accept the universality of unity, but learn to think within the law.

Disease is unity in diversity. There is but one disease. (This great truth is explained in my book “Toxemia Explained.”)

Until I discovered what disease is, I was very unhappy and had but one wish, and that was to get out of the profession into something I could understand. Medicine, the first fifteen years of my practice, appeared so intricate—so profound—

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that I felt that I could never understand it.

Having been in practice for sixty years, many things professionally abstruse—perhaps better expressed by the word “profound”—during the first thirty years of my practice have ceased to awe me with their super-adjectives in the past thirty. I have found that some of the best minds are at a loss to know which way to turn to seek understanding with which to dispel the chaos that reigns in spite of the accumulated medical wisdom of all ages. On the other hand, there are equally great men who endeavor to bulldoze—compel—dissenters and critics into acknowledging that regular medicine is the fountain-head for all medical knowledge. Solomon declared that knowledge and wisdom are necessary, “but with all thy getting, get understanding.”

Regular medicine knows a lot about appendicitis, but not enough to stop the slaughter of thousands of victims every year. What appears to be wrong with regular medicine’s knowledge of appendicitis? The popular opinion of “regular” doctors is that appendicitis is a distinct disease—an acute inflammation of the appendix. This is not true. It is one of the complicating symptoms developing in the course of chronic inflammation of the colon and cecum in subjects who have been developing catarrh since childhood.

The following report is by a young lady who suffered with a so-called emergency case of ap-

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pendicitis—what the doctors said, and what was done for her:

On July 18, 1932, I was invited out to a friend's house for dinner. The meal was unappetizing and of wrong combinations. I went back to work as usual. After a hard day's work, lasting until midnight (I have put in fourteen to sixteen hours almost every day for the past six months, besides the grief of losing my husband in February, 1932), I went home, and severe pains started in my bowels. They were all over my bowels. The bowels moved. I went to bed. The pains continued all night. The bowels moved again in the morning. I went to work. At 11 A. M., the pain getting worse, I lay down. I took one ounce of paregoric, one half-dozen Empirin compound tablets, Sal Hepatica, and Milk of Magnesia. I vomited twice. The pain continued to get worse. At 3 P. M., July 19, someone called a doctor. He said: "Pulse 140, temperature 104—appendicitis." He called a hospital, wanting to operate immediately. I said: "No, I want to go home." So, at my request, I was taken home. Someone called another doctor, who came after I had been taken home. He said, "Appendicitis," after punching and poking my bowels all over, and asking if it hurt. When I said, "Yes," he punched harder. The way those two doctors punched and poked my abdomen was almost more than I could endure. They both said I must go to the hospital and be operated upon immediately, or they could not take the responsibility of my case.

I asked mother to try to get Dr. Tilden, and by some magic she did. What a relief when he came and gently rubbed my abdomen, instead of poking and punching! He told me I was going to be all right—no operation necessary. Ice-packs were kept on and heat to the feet. I was allowed water, but no food for fifteen days. An

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enema every night. On the fourteenth day I was allowed orange juice and water, which tasted very good, and did not cause me any discomfort. Orange juice again on the fifteenth day. I chewed steak, swallowing the juice only, and canned tomato juice, on the sixteenth day. On the seventeenth day, steak again, swallowing the juice; morning and evening, watermelon juice. The bowels moved some pus. The eighteenth day, steak in the morning, swallowing the juice, and tomato juice; at noon, a salad of lettuce, tomatoes, and apple, and in the evening watermelon. Bowels moved more pus.

Since the nineteenth day I have had Shredded Wheat, prunes, and teakettle tea for breakfast; lettuce, tomato sandwich, and fruit for lunch; and in the evening a regulation dinner, selected from the "Cook Book."

I weighed 99 pounds on the 24th day of July, and now, August 23, weigh 115 pounds and am feeling well.

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## Facts and Fancies

By GEORGE S. WEGER

*Redlands, California*

EVENTS transpire too rapidly for us. At the moment of writing the memory of the recent political campaign is still fresh. The result of the election is not at all surprising. Evidently the mass of the people—or the one-fifth more or less who decide the issue—came to the conclusion that it cost us a lot of money to give the President an education in politics and government during his period of incumbency in

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office. Is it the irony of fate? There is bitterness of disappointment. There are wounds to personal pride and frustrated ambitions. By philosophical adaptation, defeated candidates by and large will adjust themselves to the variableness of the emotions and reasonings of the masses. But little consolation does this afford to those who really believed that a complete reversal of policy would lead to national or even international disaster.

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**W**HAT a tremendous task lies before the **W** party coming into such complete power! Best minds will think of and propose remedies for all ills of the present. But none can foresee the measures and means that will be devised to frustrate their plans or prevent the application of their remedies.

At present writing, foreign debt cancellation or modification is the burning issue, with pressure from Europe exerted to the utmost. Extension of the moratorium will be another victory won by European powers. Modification apparently will not satisfy them. Complete cancellation will give them the advantage over us that obviously they are seeking and will jeopardize whatever friendly relations still exist just about as much as will our insistence on full payment on a revised Dawes plan.

Rather an anomaly that debtors are enabled

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to maneuver creditors into an apologetic position and themselves into positions of command. They will soon have us in chancery by taking the play out of our hands altogether. Right now it seems that the people of the United States are doomed to hold the bag, pay for Europe's folly, and also pull her chestnuts out of the fire. They don't want much from Uncle Sam. We'll be damned if we do, and damned if we don't. And how about international trade agreements with our present high tariff as mitigating against harmonizing accord in any kind of settlement?

The party in power has a job on its hands, and it will eventually be judged, not by the cures it has effected, but rather by the mistakes it may make. As compared with his cures, the list of deaths in the doctor's record always looms large.

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MANY a very pertinent question is being propounded anent the prohibition controversy also. The question is neither settled or dead. We speculate upon the activity of the still strongly organized forces of prohibition in carrying on the fight on a national scope. To what degree will they be able to obstruct the pathway to beer and light wine? How can they frustrate the movement towards repeal of the Eighteenth Amendment or modification of the Volstead Act when the majority in favor of these changes was so

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overwhelmingly emphatic? Can the few override the will of the majority? If so, majority rule is a misnomer.

Where will the poor man go for his five-cent schooner of beer if we are not to have any saloons? Who will dispense beer and wine, and how? Will any proposed method of sale or distribution be fool-proof, graft-proof, racket-proof, and—like Caesar's wife—above suspicion? Will regulation cost us as much in taxes as the futile attempts to enforce prohibition during the twelve years of noble experimenting?

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THE bill of particulars grows. Who is going to adopt the orphan known as unemployment, for which nobody and nothing is responsible? It evidently has no parents and is irresponsible in itself. Is the new party in power able to house and nourish unemployment after its three years of aimless wandering? The orphan has grown very large on a nourishment of hunger and destitution. All it needs in order to bring it down to that irreducible minimum that is so much desired is shelter, warmth, clothing, food—and a job.

Those who think a new political party can clear up the whole muddled atmosphere of money, beer, and jobs in a few months are due for disillusionment. Hoover is a gentleman and a scholar, fortunate in being defeated. The King is dead, long

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live the King! Our sympathies are with those who are to guide our destinies for four years—possibly more—but no less. From the last chicken in every pot the American people at least salvaged the wishbone. Every little bit helps.

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**W**E TRUST that under the new administration it will be impossible for unwieldy corporations to exploit the people. If plungers such as Insull choose to risk their own gains by improvident or unwise expansion, let them take their chances with their own crowd. The general public should be protected by laws effectively insulated against erosion through which the current of small holdings is dissipated into thin air.

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**D**EPRESSION death rates are in for a period of statistical study. Persons who accept statistics at their face value may be deceived by the excellent health record for 1932 which, on the face of official returns, persists in spite of economic depression and, according to some writers, partly at least because of the depression.

Obviously, according to one commentator, fatal industrial accidents will decrease as a direct result of unemployment. There may also be fewer breakdowns due to diseases which are unfavorably influenced by industrial employment. Enforced rest may prolong the life of certain persons afflicted

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with tuberculosis, Bright's disease, heart disease, or high blood pressure. There may be fewer traffic accidents because so many cars are in disuse during hard times. There is less money to spend for pleasure driving, and shrunken business takes quite a few trucks off the highways. The reduction of rich foods in the average diet is also a factor that is beneficial to health. The mortality statistics were also lowered after the great pandemic of influenza in 1918 because that scourge carried away the most vulnerable, those who were so near the border line that an attack of flu was fatal. This left the healthier and more resistant to bolster up the general state of health for a few years.

Such apparent improvements represent merely the distortion of normal death rates. Those who died of the flu would have died within a few years after the pandemic of the diseases previously present. The law of averages always holds good.

Many adults are saved by economic necessity from the results of gluttony. On the other hand, many children are suffering from malnutrition because of an inadequate and improperly balanced dietary. Social service agencies are doing perhaps the best they can for the needy and hungry. Some communities are feeding their poor for six cents a day. The kind of food that six cents will buy certainly does not include fresh fruit, vegetables, and an adequate supply of milk. The heaviest

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starches make up about 90% of such cheap rations, and every student of nutrition knows that this lays the foundation for immediate or remote disease.

People who cannot buy food cannot pay for dental service, medical advice and treatment, or necessary nursing care. Operations of choice are put off and surgical risks increased. We refer specifically to the class of cases that really need medical treatment and surgery without stressing the oft-repeated statement that much that is included in these two categories is frequently unnecessary and uncalled for.

Of all the influences incident to economic depression there is none more destructive than the emotions of fear, anxiety, worry, disappointment, humiliation, discouragement, and despair.

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**A**MONG other interesting medical items, we note an article by Dr. Helmholtz of the Rochester Clinic on the so-called ketogenic diet in infections of the urinary tract in children. The ketogenic diet means large quantities of fat or fatty foods given to produce artificial acidosis. It is assumed from the satisfactory results obtained that urine of high acidity is bactericidal. Such a diet is now quite generally prescribed in the treatment of epilepsy and is in the experimental stage of its application to other diseases.

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Significant are the last sentences of the summary of conclusions: "At the Mayo Clinic no other treatment has been successful in this type (urinary infections) of cases. The clearing of an infection by means of the diet does not necessarily mean permanent cure."

The reason for this lack of assurance of permanency is due entirely to the fact that the right food in proper combination is not prescribed after the so-called cure. In previous writings we alluded to the ease with which children recover from urinary tract infections by stopping the conventional or customary diet and keeping such children on fruit, salads, and vegetables exclusively for a week; then adding the concentrated starchy foods and the lighter proteins according to individual physiological needs. By this method they get well and stay well without inducing abnormal acidosis by giving a diet overbalanced with fat.

Recently a professional colleague in discussing the value of fasting in asthma said "Sure, I know that spasmodic bronchial asthma can be brought under control by fasting, but we have one helluva time trying to keep it from coming on again when we start to feed them." Quite naturally, I replied: "Doctor, you are not successful for two principal reasons. First, you don't know how to conduct a curative fast properly and, second, you don't know how, what, and when

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to feed the patient afterward. Why shouldn't the asthma return if the patient goes back to the old diet that caused the attacks? Learn something about proper food combinations yourself, teach this information to your patient and sell him the idea with enough punch to make it stick."

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**N**EW forms of medical practice are being organized and promoted in some of our larger centers of population. These are being investigated and exposed when found unethical or unworthy. One company promoting a new scheme of medical service distributes every dollar paid in by clients in the following manner:

45 cents is set aside for medical care, not including hospitalization;

12½ cents represents the cost of hospital service;

42½ cents is used for promotion, organization, sales, administration, and profits.

Even the business of ill health is now coming into the hands of business men, profiteers (or racketeers), and service to the sick may soon come off the end of the line as quantity production like automobiles, washing machines, and all-day suckers.

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DU<sup>E</sup> to the inroads by physiotherapists, mas-  
seurs, osteopaths, chiropractors, naturopaths,  
hydrotherapists, spiritual and mental  
healing, the demand for paid medical service has  
been greatly reduced. During the nineteenth cen-  
tury there was at the same time a rapid increase  
in the production of doctors, out of all proportion  
to the increase in population. With the beginning  
of the twentieth century the number of doctors  
in proportion to population began to decline. Since  
1922 the production line is again being reversed.

Taking the entire world as an average, there  
is one doctor to 2,070 people; in France, one to  
1,697; in Germany, one to 1,552 people; in the  
United States, one to 789 people. Since 1921 there  
has been one doctor graduated for every 402  
increase in population. One writer opines—"At  
the present rate of increased production of doc-  
tors and decreased demand for paid service, the  
next few years will see a doctor for each pay  
patient." Evidently we are suffering from an  
oversupply of doctors as well as of commodities,  
food, and absurdities.

In Atlanta, Ga., there are 700 doctors; one to  
every 259 persons who are able to pay. Accord-  
ing to the world quota there should be only 174  
doctors in this city. In Nashville, Tenn., there is  
one doctor to 362 people; in Boston, Mass., one  
to 306 people; in Philadelphia, Pa., one to 494;  
in Persia, one to every 40,000 people. It is esti-

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mated that in this country one to 2,000 would be about the right ratio.

During the depressions people get along with less of everything and the doctor, besides doing a tremendous amount of work without pay, feels the pinch of hard times as much as any single class of victims.

Wish we had something more pleasant to write about rather than to file a list of complaints for those who have grievances to air and burdens to bear.

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FROM the Times and Sedatives column of the Journal A. M. A. we cull the following:

A new definition.

A Specialist is a doctor who knows a great deal about a very little, and who goes along knowing more and more about less, until finally he knows practically everything about nothing.

A General Practitioner, on the other hand, is a doctor who knows a very little about a great deal, and keeps knowing less and less about more, until finally he knows practically nothing about everything.

Every growth requires time. To develop habits that influence life requires time. Short roads to relief are always palliative. Those desiring to reform must be patient.

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## An Eye to Business

### SMOKING IN WOMEN

I HAVE noticed for quite some time that a few of the doctors in Kansas City have an eye to business. They know how to jolly up the people and make them believe that life should be one continuous pleasure; that there is no reason why they should not eat, drink, smoke, and be merry; for they will not die tomorrow.

A mother who knows anything at all about health, and what is necessary to build health, will not ask a physician whether she should smoke, because the average physician is looking for business, and he is very much more interested in what he is going to get out of a given case in money than he is in helping a woman go through her gestation period and bring forth a child that will be a credit to his parents and the community in which he lives.

Tobacco is injurious to the nervous system. Of course, there are millions of people who are willing to indorse tobacco as being a harmless, pleasant luxury, adducing as proof that they have smoked all their lives, and that it has not killed them. The world is full of perambulating dead people. No, it has not affected them. They do not know what a smoke-drunk is; they do not know how much brain-energy they have wasted

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sucking at the end of a cigar or pipe. They have positively refused to develop after they have been given a developing power. In these days it is frequently asked: "What is the matter with our young people?" There is nothing the matter with them—they are just as they are made. The parents have gone the usual pace in destroying their nerve-energy, so that they have very little to transmit to the children—in fact, a very little, except a strong tendency to take on health-destroying habits.

Down in Kansas City they may allow expectant mothers to smoke. Those expectant mothers will not be wise enough to know that they are putting a handicap on the child, the result of which cannot be foretold, but it is enough to say that he or she will not be a normal child. Anything that perverts the nervous system prevents proper development, in keeping with the power given. If this is not enough to prevent a rational sensible woman from smoking, she has so little to pass on by inheritance that it does not matter very much whether she smokes or not.

The expectant mother may smoke six to eight cigarettes a day without harm. All stimulants increase the function of the nervous system. Continuous increase of function in time brings about organic change. When this change takes place in mothers, the defect is transmitted to the offspring.

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If fretting, worrying, irritability, dishonesty, disloyalty, etc., are inherited, why should not defective bodies caused by smoking likewise be inherited? I knew one mother who smoked excessively. One son died of apoplexy, another of tuberculosis, another of cancer, another of softening of the brain, and one daughter died insane.

We are asked: What is the cause of so much crime in young people? They are cursed before birth.

EXPECTANT MOTHERS ALLOWED  
TO SMOKE

Kansas City, Mo., October 6.—There is no need for expectant mothers to refrain from smoking cigarettes, Dr. Joseph L. Baer, associate professor of obstetrics at Rush Medical College, Chicago, said Wednesday. "Any woman expecting a child can smoke six or eight cigarettes a day without harm," the physician said in an address before the Kansas City Clinical Society. "If she smokes in excess of that, however, the nicotine would be absorbed by the child."

Dr. Baer also said that business life in no way impairs a woman's ability to bear children—Denver Post, October 6, 1932.

The general belief of the people is that disease is an accident, misfortune, or the result of some influence beyond individual control. To meet this belief, a system of palliation, called the Art and Science of the Practice of Medicine and Surgery, has evolved. It is a stupendous plan of palliation.

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## Death Is Not Partial

### LARGE BULL GONE

O DESSA, TEXAS, July 2.—Jumbo has gone the way of all good bulls. He was owned by John M. Gist, of this city, was known as the largest Hereford bull, weighed 3,709 pounds, and was six feet high.—Rocky Mountain News.

From the smallest being to the greatest sun, all answer to the call of change; or perhaps make the supreme sacrifice—that of giving up, not only personality, but *the all*—individuality.

Jumbo has had his day; likewise all prehistoric dinosauria, mammonitis, and mammoths. So, too, must the bacilli and bacteriologists have theirs. If there is to be a continuation of individuality in the future, what that future is to be is not made apparent to this state of existence. What is to be the future state of the babe, the child, the youth, in the unbroken continuity of this life, is apparent to jugglers of psychology only. Those who reason from cause to effect approximate truth by understanding that cause, effect, and control explain facts and wants that are to come. It is fairly easy to predict what kind of life will follow a childhood that has neither parental control nor self-control.

A lascivious, sensual, selfish disposition, indulged in overeating, in eating highly seasoned

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foods, and in every reasonable and unreasonable want, will develop ill-health and go down with chronic disease, or end life in crime.

Continuing petty indulgences through childhood and young manhood bring a harvest of crime between forty and sixty that surprises self-controlled people.

Crimes committed in secret continuously break all bonds of restraint and declare themselves from the housetop.

Habits are controlled and kept from public view in early life, except for discomforts and acute sicknesses caused by them, which are not interpreted by interested friends—no, not by the family doctor, or even the specialist. Little by little habit grows too heavy for prudence, discretion, and pride to stand up under, and the victims fall under the load. Disease in the form of tuberculosis, Bright's disease, cancer, or some other derangement mercifully hides the truth from the nearest and dearest friends. Others not so fortunate, because disease is mental, advertise their secret habits by committing crime—finishing life as criminals. Habits uncontrolled, or not cut out, will declare themselves *to the wise*—just the people we would keep from knowing our double—Doctor Jekyll.

Man's body and mind disintegrate when he enters the state called death. Reason can go no farther than that. Reason demands evidence—

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not testimony or circumstantial evidence. Sound reasoning demands the truth, the whole truth, and nothing but the truth. Anything less than truth leads to unsound reasoning—the block on which the herd executes truth and perpetuates sweet fallacy. If there is to be a future, it is no concern of the present, past, and future of man. Only the now is ours to use to our best advantage. We have no more to do with the future than we have had to do with the past.

We are wonderfully favored by the whirligig of time, place, and matter in being given an individuality at all. Instead of making the most of fortuity, we busy ourselves with affairs that concern the cosmos. Instead of learning to adjust ourselves to law and order, we break ourselves against them; and then, heathen-like, we cry out to Father Abraham to send Lazarus—a man experienced in suffering—to tell us how he got cured, and if he would be kind enough to give us relief or direct us to a cure.

We stupidly follow appetite and passion until death threatens; then we *pay for relief*. We do not know the difference between relief and cure, and we dally with palliation until too late for a cure. Jumbo did not know much, but he did not eat without hunger.

*C* We shall be glad to send copy of HEALTH REVIEW AND CRITIQUE and other literature to any of your friends who may be interested. *H*

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## Heart Spasm

MANY people die of heart spasm, heart failure, heart paralysis, etc., every year. It would be very difficult for anyone to make me believe that people die of heart trouble without being given warning. The cause of a complaining heart should receive attention and be removed. Discomforts are warning voices, and providence should not be ignored.

### VICTIM OF HEART SPASM

Altol J. Zint, fifty nine, widely known in Denver Christian Science Church circles, died suddenly of a heart attack at his home, 5090 Tennyson Street, last night. Mr. Zint, who previously had been in perfect health, collapsed as he prepared to eat his dinner, his wife, Mrs. Joy Zint, told Deputy Coroner George Bostwick.

A resident of Denver for more than thirty years, Mr. Zint was one of the most prominent workers in his church. He was a practitioner of the church at the time of his death, and formerly was a reader in the First Church of Christ, Scientist.—*Rocky Mountain News*, October 6, 1932.

The above report of the case of Mr. A. J. Zint states that he had been in perfect health up to the time of his collapse. I have been in business sixty years, and I have never seen anyone die in perfect health, except in accidents. I protest against any insinuation that nature allows any-

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one to die without warning. We may suppress the still small voice until the mental ear is deaf to the warning. Who, then, is to blame? Premature death by disease is the rule established by man. Nature is willing for man to finish his development; but, when selfish interests, as in the parable of the rich man, crowd out the leisure vouchsafed to him for thought, contemplation, and self-development, he sees nothing more to do but to build "greater," after which "I will say to my soul: 'You have a-plenty; eat, drink and be merry.'" But, when he had no greater ambition than to eat and drink, he was taken without warning in the midst of his selfish contemplations. The past two years have been marked by a great exodus of "fools" who were in the act of tearing down great fortunes and building larger, while their victims, by the tens of thousands, were falling into the bread-line. If outraged ethics has not separated their souls from their bodies, it is because a living death is the greater punishment.

Nature always warns. If the present economic punishment is not enough to sober us—the people of the United States—the next psychological upheaval—frenzy—will wipe out Lustful Egomaniacs, so that ambition will be tamed to appreciate the freedom that accrues from "Three Acres and Liberty," or "What shall a man give in exchange for his soul?" Manhood? Individuality? Mental Senility? Riches? Financial Genius?

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I know that there is such a thing as a subtle derangement of the organism—purely functional—that will end in death, of which autopsies and post-mortems fail to show the cause. Post-mortems never tell the truth about the cause of death. Critical examination of the body, ending in discovery of deranged organs, invariably fails to find the cause. Post-mortems and our most scientific clinical examinations of patients never find the cause of disease. The examination may disclose a deranged state of certain organs, but the pathology tells no tales. The sooner we learn that what doctors find in the dead and living is nothing but an organic change brought on from functional excitation repeated a sufficient length of time to produce organic change, the better; but the organic change tells no tale of value concerning cause. The people generally are urged to be faithful in securing thorough medical examinations once a year at least, and twice a year if possible. What for? Is anybody benefited by these examinations? If we find a certain so-called disease, of what benefit is it? Suppose it is Bright's disease. Suppose it is tuberculosis. Doctors do not know the cause of what they find. Is anybody curing tuberculosis? Suppose there is something the matter with the heart—irregular action, or enough symptoms to say that there is a heart derangement. What of it? Does anyone know the cause? Suppose it is diagnosed thyroid-

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ism. What of it? Effects explain nothing. The cause is the indispensable desideratum, if rational advice and treatment are to follow. If treatment is to be the "rule of thumb," why the mockery of frequent examination? Will rationality uninvited overtake a profession lost in a tangled web of diagnostic deceit?

Frequent examinations are in keeping with business sagacity, so far as the doctor is concerned. Each individual taught to attend to this chore is another unit added to the doctor's store of assets.

A woman came to me from one of the leading clinics to which she had gone for advice concerning a very crippling *rheumatic arthritis*, from which she had been suffering for several years. She was subjected to a thorough examination—a real search-warrant examination. When the examination was finished, the patient was told: "We cannot find the cause of your rheumatism. Go home and return in six months. We then may be able to find the cause." Ballyhoo—buncombe—for the buncoed, by a profession of whom the majority are willing victims of medical delusion. They find it easier to stay with the delusions they have than to fly to truth they know not of. "Conscience does make cowards of us all."

The cause of disease is ever, and will be forever, present; it is so obvious that "he who runs may read."

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The rheumatic must overcome *outlawry*. Then, if organic change has not locked and distorted the body, full health can be re-established. Law-breaking is the universal cause of all diseases.

Laymen are well trained into valuing high-class examinations and paying for them, notwithstanding the fact that the best-informed doctors know that etiology (cause) is unreliable, and treatment is worse, if possible. This being true, why urge frequent examinations, if camouflage is not deliberately intended?

Nothing can need a lie;  
A fault which needs it most  
Grows two thereby.

It is perfectly absurd, this constant advice to people to go and be examined, when the best diagnosticians the world has ever produced declare that no one knows the cause of any disease —yes, not only that they do not know the cause, but it is acknowledged that they do not know how to begin to study or look for the cause.

Mr. Zint's picture accompanied the item in the paper, and by people who do not know anything about the true signs of health he would be considered a very healthy man. But he had all the marks of a crowded nutrition; and that is all that is necessary in the majority of people who have passed the fifty-year mark to cause anyone who is informed about the cause of disease to suspect every one of them of having a decidedly toxemic

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state, in which the toxin is joined with one or more infections coming from catarrhal inflammations and ulceration of various mucous surfaces and closed cavities in different parts of the organism. Where this has been running on for some time, there can be a gastro-intestinal catarrh. There can be a catarrhal condition of any of the leading organs, and the heart may show a state of endocarditis that has been running on for several years. The constitution is so disturbed by an *excessive* acid state that those predisposed to rheumatism or a gouty diathesis can develop some form of rheumatism; others may have a very irritable condition of the nervous system. They may be troubled with spasms and cramps. It is this kind of case that could die suddenly from heart spasm. I have been in my profession for sixty years and have said quite a number of times that I never have seen anyone die of old age. They always die of some unnecessary and avoidable derangement.

{ *Exercise of the mind as well as of the body gives strength of body as well as of mind. The two must go together, if the best results are to be attained. Developing will-power, self-control and health-imparting habits is all in the line of exercise. Man is master of all animals, not because of his physical strength—his brawn—but because of his brain.* }

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## A Doctor's Opinion of "Toxemia Explained"

SPOKANE, WASH., December 5, 1931.

**D**EAR MR TILDEN: In the first place allow me to congratulate you. You were successful, where I failed. You see, for over fifty years I have been looking for the cause of ill-health, and have failed. The reason, as I see it now, after reading your "Toxemia Explained," was that I was looking for a cause for every different "disease," while you succeed because you say: "There is only one cause."

The first jolt I got in medicine was in connection with a case of prolapsus. The woman was pregnant, and the womb protruded. I went to my "Medicine Book," and found 103 different remedies given. I was surprised, closed my book, and said: "What am I to do?"

Dr Cromet, of the Detroit Medical College, was in town, and I had got quite well acquainted with him. So I went to him and asked for advice. He said: "Take your book, and go to the bedside of the patient, and ask her carefully to define how she feels; then use the remedy that comes nearest to it. That is what I would do." One hundred and three remedies for the falling of the womb! Guess which is the best one! I said: "But what is the cause of the falling?" There was no answer.

I got so disgusted that I quit. Now you come along and give the cause for human ailments, and it sounds so reasonable that I said: "IT MUST BE TRUE." Of course, it will take some time before I can grasp it all, but I am at work to grasp the idea.

Will you allow a question? You say nothing about

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the eye. Is the cause of presbyopia, astigmatism, and cataract also brought on by toxemia?

Thanking you in advance, I am

Yours truly,

M. A. D.

Presbyopia and astigmatism are defects or perversions of the motor nerves of the eyes, brought on from abuse of the eyes, systemic enervation, and checked elimination. The only reason why the eyes are the storm center for the elimination of excess toxins is because they happen to be more subjected to local irritation than any other part of the body.

The eyes are overworked with nicotine and caffeine, or subjected to wind, dust, snow-blindness, or strain. Catarrhal inflammation follows. If hearty eating is indulged in, the ophthalmia or conjunctivitis may take on ulceration or suppuration of the cornea, and possibly the ulcerative process may extend to the eyelids. When the disease is overcome, sensitiveness may remain, causing contraction of the muscles. This contraction, continued, distorts the normal shape or contour of the eyeball, perverting vision.

No doubt Toxemia is the beginning of eye irritations, as well as irritations of every other part of the body. Any part of the body forced to function excessively in time takes on disease. Why strain people's imaginations, as well as their eyes? Even modesty is overworked. The nude cult of Germany sets an economic pace for the

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world. If the cult can cut out eating, the jobless can live without expense, and doles will not be necessary. Overfunctioning causes enervation, checked elimination, and then Toxemia.

The first variation or departure from the *status quo* is irritation from some form of stimulation. This irritation causes a reaction, and, as the eye is fixed, it cannot get away from the offender; hence, the offender must be removed. What is it? Imperfect drainage of the eye, causing catarrh. Extension of the catarrh demands more attention. That is why shiftless washing of the eyes was tolerated before catarrh began to interfere with normal drainage. The eye drainage not being normal, accumulated dust, pollen, and other debris must be removed by greater care in washing the face, eyes, and ears.

Where this cleansing is not known to be necessary, the services of an *eye doctor* are sought. He advises "drops" for the eyes and an eyeglass—a little bathtub (?), awfully cute, but no good for washing and bathing the eyes; wonderful bath, but as scant as the fig-leaf covering of Mr. Adam's family, or the slight covering thought by some to be necessary at our beaches.

Dear Dr. D., your mind is too literal. I think the homeopathic provings were to be used, not literally, but in conjunction with art. The orthodox consignment of a sinner to hell was literal. Interpreted literally, it was a lie in more ways

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than one. When approached by way of a reasonable, rational interpretation, the meaning is applicable in as many ways as it is possible for the imagination of a Raphael to paint it.

Hell to the pessimist is punishment forever. To the rationalist, punishment is sure, but limited, to be in keeping with the crime. The people push their pleasure-seeking to such an extreme that pleasure turns to pain. The common, stupid imagination cannot associate excess pleasure with pain, as cause and effect, and that discomfort is the legitimate offspring of abusing the natural privilege of enjoyment.

Your patient with prolapsus was no doubt suffering from a weakened state of the musculature of the pelvic organs, and she may have been too heavy with intra-abdominal pressure. Such cases must be put on a reducing diet and vigorous exercise to bring back muscular tone. Your indicated drug was about as helpful as Mrs. Partington's broom was in keeping back the waves of the ocean.

• AN APPRECIATION •

*In just a few words Mrs. Tilden and I wish to express our appreciation of the Christmas greetings received from our many readers, former patients and friends. They brought to us a realization how many good friends we have and we only regret we were not in a position this year to reply to each and every one individually*

—J. H. TILDEN.

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## Nature Calls a Halt

Nature has called a halt and it is up to me to obey in order that I may later on continue the work of educating the people into knowing how to live to avoid unnecessary sickness.

You may ask why this halt. Because I have disobeyed the laws of nature and gone beyond my strength—working when I should have been resting. I must carry the results of this valuable experience to you my dear readers, and prove to you that no one can outrage the laws of nature in any way without paying the penalty, be he doctor or patient.

This is to notify my friends and readers that I shall rest from my work until February 1st, at least. If a longer period of rest is necessary I shall advise you through the pages of this periodical.

Those contemplating seeking professional advice from me should communicate with my office to ascertain about when I shall be back at work again.

The office at 331 14th St., will remain open to care for book and periodical business and to give information regarding professional work.

J. H. TILDEN.

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## Procrastination Causes Needless Expense

WE HAVE had numerous inquiries recently as to why it is not possible for us to cut the subscription price of "Health Review and Critique" as the costs of all commodities are lowering.

There is nothing we would so much enjoy doing as to lower our subscription price, but there are several reasons why this is not possible. In the first place, the largest item of expense in such a publication is labor in the printers' trade. The Union has not as yet allowed any cut in wages of those connected with such work so that expense is as high as formerly. The other items have not been lowered sufficiently to allow our printer to cut his figure to us.

Now as to procrastination and its attending evils of needless expense. Each month we enclose a slip in the magazine of those subscribers whose subscription expires with the *next* issue, allowing them over a month in which to send in their renewal. Only one-fourth to one-third of such subscribers answer this first notice. Then after allowing sufficient time for receipt of a reply, we mail from our office a second notice. Perhaps another one-fourth to one-third of the expirations heed this notice. Then we are compelled to remove

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the names of the balance from the mailing list. Another quarter of the expiring subscriptions come lagging in after removal of their names from the mailing list has taken place, necessitating the reinstatement of their subscriptions and re-entry of names the following month on the mailing list. Imagine the vast amount of extra labor this imposes on our office force.

These subscriptions must be treated as new ones, and as we are charged for each such addition as well as for each and every change of address, it is easy to figure how the expense piles up.

How much it would be appreciated if our readers would respond with their renewals upon receipt of the first expiration notice received in the magazine.

We feel that our readers are just a little superior to the common run of people who read most periodicals, and we feel that this note calling their attention to these items will be all that is necessary to interest them in being more prompt in taking care of renewals and hastening the day when we may lower our subscription price.

While we are writing, we would also request that you be quite prompt about sending in your changes of address in order that no issues may be missed and duplication made necessary. Remember that Uncle Sam does not forward our periodical unless you furnish him forwarding postage.

The habits of doing things on time, always

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being prompt for appointments and not procrastinating are most worth while, and a wonderful form of self-discipline. The New Year is here, and now is a splendid opportunity for turning over a new leaf in these respects. Anticipating that you will give this question your consideration in the future, we thank you in advance.

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## Tilden Cookery

By F. B. TILDEN

**T**HE following letter leaves me in a quandary:

DEAR DR. TILDEN:

As a constant reader of your HEALTH REVIEW, I frequently find the statement that sickness comes from "improper food combinations," and that many people die because of the customary eating of "wrong combinations," etc.

It is not clear to me what is meant by such terms as "improper food combinations" or "wrong combinations," and your explaining these terms in your HEALTH REVIEW, so that possibly other readers may benefit from your explanation, would, I am sure, be of great value. For instance, is it harmful to eat chicken and fish at the same meal; or fish for breakfast and chicken for dinner; or should they not be eaten the same day?

Yours very truly,

MRS. O. E.

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The only excuse I can find for this suggestion is that the writer of the letter has only recently become interested in, and taken up the study of, rational living habits. However, she says she is "a constant reader" of this periodical.

In the December issue we gave a set of skeleton menus, indicating the various classes of food to be combined in the three meals, allowing people to make their own selection of foods from those which their markets provide.

I am sure our friend will not find protein given for more than once a day in those skeleton menus, unless it is that one may choose to use fifty-fifty (half hot water and half warm milk) with fruit for breakfast or lunch on a day when a protein dinner is to be served. This answers the question regarding fish for one meal and chicken for another on the same day. These foods, both being protein, should not be served twice in a day. It gives one altogether too much protein. In fact, protein once every day is more than most people can take care of well. A protein dinner on Sunday, Tuesday, Thursday, and Saturday, with a starch dinner on the alternate days, makes a good regimen to follow.

The question might arise here as to whether it is objectionable to serve two proteins in the same meal. Some people feel that it is better form to serve a fish course and a meat course. There is nothing particularly objectionable in such a

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procedure, but it did always seem such a silly custom to serve a dab of fish and then a meat course. When two meats are served in one meal, there is much more opportunity for overeating on protein. A variety of one class of food, or of all classes, tends to make one eat beyond his limitations. A very few varieties of simple food are always safest.

We would gather from this letter that the writer does not possess the "Cook Book," or she would have a better understanding of food combinations, classes of foods, etc. All our readers would secure so much more value from these articles if they have the "Cook Book" for a reference-book; for our space is so limited that it is impossible for us to cover all the ground in a short period of time. We would suggest that all readers make an effort to secure the "Cook Book" as soon as possible.

Not long ago we published a list of the protein foods, but we will repeat it herewith, for the benefit of this reader:

Beef, lamb, pork—any of the fresh meats; chicken or any other fowl; rabbits; fish; eggs; milk, cheese, both cream and cottage; nuts.

Now we take up the most important portion of our correspondent's letter—that portion referring to wrong food combinations as the cause of disease. I am sure in all of Doctor's writings he has iterated and reiterated, explained and re-ex-

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plained, that he looks upon Toxemia as the cause of all disease. Wrong food combinations in themselves will not build disease. They may be one factor in helping to build disease, but there must first be developed a toxemic state—a retention of toxins in the blood—due to an enervated state, before we build disease.

If one eats within his limitations, his food combinations are of secondary importance; but if one wishes to do the very best for himself, he will lighten the load on his digestive organs by taking as simple and as easily digested combinations as possible.

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We have a request for a recipe for making white sauce and apple sauce. White sauce is generally used for the dressing of vegetables; but the more plainly food is cooked and served, the easier it is to digest. The best way for serving vegetables is in their own juice, with just a little seasoning, such as butter and salt, added when ready for serving. Following is the recipe for white sauce:

#### WHITE SAUCE

- 1 tbsp. butter
- 1 tbsp. flour
- 1 cup milk
- 1/2 tsp. salt

Rub the butter and flour together in a double boiler. When smooth, add the milk. Stir over the

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fire steadily until it thickens. Add the seasoning, and it is ready for use.

Some cooks prefer to make the white sauce in a pan directly over the fire, but it takes very careful attention to handle it in this way. The double boiler is much safer.

#### APPLE SAUCE

Nearly every cook has her own peculiar way of making apple sauce which she thinks is a little better than that of anyone else. The general rule is to pare the apples and cut them in rather small slices, putting them to cook with about a half-cup of water, if a medium quantity is to be prepared. Of course, for a large quantity of apple sauce you will have to use more water. There is plenty of juice in raw apples, so that only enough water may be used to start them cooking well, as the juice soon begins to be thrown out by the apples. Cook the apples until they are quite tender; then, with a potato-masher, mash them up quite fine. Return them to the fire, and add the sugar. The amount of sugar used depends entirely upon the personal taste. Cook for just a few minutes longer after adding the sugar, and it is ready to serve. Some people prefer to leave the apple slices whole, not mashing them with the potato-masher. The sugar does not permeate the apples quite so well when they are not mashed.

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### CRANBERRY RELISH

Now that the cranberry season is at its height, we will repeat the recipe for cranberry relish which we give each year for the benefit of our new readers:

- 1 lb. cranberries
- 2 cups sugar
- 1 large or 2 small oranges

Grind the raw cranberries through a fine meat- or vegetable-grinder. Cut the oranges in half, remove the seeds, and grind through the same fine grinder, peeling and all. Mix the orange and cranberries, and add sugar. Stir well, and allow to stand at least twenty-four hours. One pound of cranberries is about one quart.

Those who have tried out this cranberry relish have agreed that it is very much superior to the cooked article, and it is easier to prepare.

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### "BOTTLES"

On bathroom shelves the bottles grow,  
From illness to illness, row on row!  
Who has the heart to clear away,  
The dregs of the drugs of yesterday?

Tonics to lash the jaded taste,  
Cosmetics to freshen the faded face,  
Pills to purge the piggish pains,  
Of Gourmets, who eat but to eat again!

Each bottle, phial, box and jar,  
Pays testimonial to what we are—  
Slaves to our lesser, baser selves—  
We build our monuments on bathroom shelves!

W. G. L.

We Also Have Dr. Tilden's 15 Books All on 1 DVD, Waiting — Just for You!

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### MENUS

#### *Breakfast*

Shredded Wheat Biscuit  
Butter—Prunes

#### *Lunch*

Vegetable Soup

#### *Dinner*

Spareribs  
Sauerkraut  
Combination Salad

#### *Breakfast*

Toasted Whole Wheat  
Muffins  
Butter—Orange

#### *Lunch*

Vegetable Soup

#### *Dinner*

Baked Fish  
Stewed Tomatoes  
Combination Salad

#### *Breakfast*

Cream of Wheat  
Cream—Oranges

#### *Lunch*

Tomato Soup—Figs

#### *Dinner*

Roast Beef  
Carrots—Cabbage  
Combination Salad

#### *Breakfast*

Toasted Whole Wheat  
Bread  
Butter—Grapefruit

#### *Lunch*

Baked Apple—Cream  
Fifty-Fifty

#### *Dinner*

Baked Hubbard Squash  
Turnips—Spinach  
Combination Salad

#### *Breakfast*

Bananas

#### *Lunch*

Baked Apple—Raisins  
Teakettle Tea

#### *Dinner*

Baked Sweet Potatoes  
Beets—String Beans  
Combination Salad

#### *Breakfast*

Whole Wheat Muffins  
Butter—Prunes

#### *Lunch*

Apples—Milk

#### *Dinner*

Rice With Cream  
Rutabagas  
Combination Salad

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## Question and Answer Department

*Question: Dr. Tilden, in his "Cook Book," often combines fruit and starches. Is it true that acids aid the digestion of protein, but retard the digestion of starch?*

**ANSWER:** Quite a number of years ago I told people not to eat starch with acid fruits. At that time this was all I knew about eating starch and fruit together. I have learned *quite a little since*, but it seems that I got a lot of people into a lot of trouble. There are many people in this world who do not move very fast, and they are so far behind the Tilden band-wagon that they fail to hear all the music that is being sent out. If those who are worrying about eating fruit with bread will take nothing but hard bread, Shredded Wheat, or whole-wheat bread dried out in the oven until it is crisp, and if they will chew every morsel of it until it is liquefied in the mouth, eating nothing else, nor sipping fluid of any kind —using mouth secretions only in fluidizing the dry bread—then they can eat fresh, cooked, or canned fruit, and no indigestion will follow, unless there is some form of stomach derangement. While bread is being eaten, no other food should be taken into the mouth. Thorough mastication and insalivation are the two indispensable necessities for securing perfect digestion. Continuous

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fermentation from bolting starch builds an acid state of the system that creates catarrh and the endless crises of Toxemia, and at last hard arteries and other senile derangements.

Once upon a time I had trouble when I ate bread with fruit. What was the trouble—why did the meals ferment? Because I did not masticate and insalivate the bread as I should. The bread should be masticated until every granule of starch is thoroughly saturated with the digestive secretions. If bread has been treated in this manner, then, if orange, or grapefruit, or any other fruit, is desired, it can be eaten if a reasonable portion is used, and the meal will give no trouble—digestion will be satisfactory. The harm that comes from eating fruit and bread is the fact that no one masticates and insalivates bread *enough* when he eats it with any other food. Fruit speeds or hurries up the moisture. In just a few words, no bread should ever be taken into the stomach that has not been masticated and insalivated thoroughly, and it cannot be done unless the bread is hard and eaten without any moisture other than mouth secretion. I hope this will reach a lot of people who are not informed on the subject of bread and fruit-eating in the same meal.

Fruit acid is not the kind of acid that is needed to digest protein—meat. Get this well in mind, that the ash of all burned fruits is alkaline.

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*Question: Does soup, or any liquid with a meal, cause constipation?*

ANSWER: Taking too much liquid, failing to masticate and insalivate the food, will bring on constipation, indigestion, and everything else that people generally would like to avoid. When bread is to be eaten with soup, the bread is to be eaten first. Finish the bread, then take the soup. Bread should be eaten dry and alone, if perfect digestion is desirable; then follow with soup or other foods.

*Question: I have heard the statement that strawberries are not a healthful fruit. How about it? How should they be served?*

ANSWER: Strawberries do not agree with some people. And who are those people? They are those who persist in eating too much bread, and who have a sensitive, catarrhal state of the stomach. They are in the habit of taking altogether too much carbohydrate food—particularly too much bread. Then, when they eat strawberries, they may be troubled with hives or a rash. I should advise everybody to eat strawberries. If they get hives, they should stop bread, butter, and meat for a while; then eat less of these foods when they are resumed. Strawberries are just as wholesome as any other food. When they disagree, it means wrong eating, which should be corrected. We live longer when normal.

You want to know how they should be served.

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Just as they come from the patch—washed, of course; enough sugar to make them pleasant, if they are acid, and also cream. What shall be eaten with them? A couple of pieces of dry toast should be eaten first, masticating and insalivating every morsel until it is liquefied. Then, when the toast is finished, eat the strawberries, and call it a meal. But if the bread is to be masticated with the strawberries, fermentation is invited, because mastication and insalivation are necessary to prevent fermentation (sour stomach).

*Question: Is (near) beer healthful, and should it be taken with a starch or protein meal, or between meals?*

ANSWER: I do not know anything about near-beer. From appearances, we are getting a little *nearer* to it than we have been for some time. If you will be patient, it may be that you can get the real stuff to eat with your dinners. If near-beer means beer with a light percentage of alcohol, it would not interfere with digestion so much as heavier beer would. The trouble with the bootleg beers, whiskies, and all kinds of drinks is that they are concocted out of all sorts of waste-matter, waste-products, cheap-john stuff—anything that a fool will buy and drink at the risk of his life. It is better if we get back where the manufacturers will be able to get Uncle Sam's O.K. We cannot successfully force temperance.