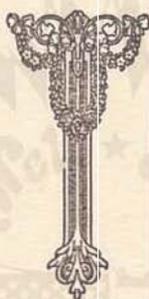


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Dr. Tilden's
Health Review and
Critique



Volume IX † 1934

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HEALTH REVIEW &
CRITIQUE

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

—TILDEN.

VOLUME IX

JANUARY, 1934

NUMBER 1

New Year's Greeting

I WISH for all my friends and foes the best New Year they have ever had; and I accompany this with the additional good wish that every day in 1934 may be an improvement on the day before.

Impossible and impracticable, do I hear someone say? Yes, if life and experience have not convinced anyone of the truth of evolution—that the desire for the best in life is possible for him only who has a faith that spurs effort—improvement is impossible.

Our desires must be rational—self-building, not self-destructive; for if the latter, success defeats itself. Have we not had a Herculean demonstration of how prayers and supreme effort are answered to our destruction? Our people strug-

[1]

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gled for wealth, and they got it. Some may be innocent enough to say: "Our wealth was on paper, not in fiat money." What is fiat money? Money backed by a government which all the people believe is stable. When faith in a country is lost, its money is worthless. We shall not soon forget when it took two dollars and fifty cents of Lincoln greenbacks to buy one dollar in gold.

Everybody knows where the German mark went.

There are people who believed themselves wealthy during the late Wall Street frenzy. They had stocks, bonds, and wonderful homes, valued at fifty thousand dollars—perhaps a million. What are these homes worth today? What they can get for them. What is the estate of the Match King worth? How much is Mr. Insull worth? Those who suicided, how much are they worth? Suppose all who were in the game could be given all they thought they were worth, would it compensate them for the sacrifice of honor and honesty which they paid for their so-called success?

Be mathematically correct, not supernaturally correct, nor correct because of a special dispensation of Providence.

When we understand law and order, which is omnipresent for each and every one of us to use for his betterment, there will be *peace and goodwill on earth*—a peace that will not require pledges to be broken, and a peace that cannot be

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bought by Carnegie's ten-million-dollar peace fund.

When we get out of the kindergarten ignorance of trying to live without an understanding of the laws of life; of man and his relationship to nature, to man, and to God; and cease believing that, when we suffer from *breaking the laws* of nature, prayer will cure us; or that the dope which doctors prescribe will cure, then we can hope to live without disease, without wars and panics, and the curse of the stupidity that brings unhappiness.

Friends, my wish for you is that you may gather much understanding this year. If you do, it will give you much joy—joy that money cannot buy. Understanding can save this civilization—not “Mineself mit Gott.”

Amoebic Dysentery

ALADY of delicate build, travel-worn and looking like an invalid, called upon me about six years ago. Her story ran about as follows:

My home is in China. My husband is a merchant, and for several years I have been a globe-trotter—not for the sake of travel, but seeking health. I have made three trips to different parts of Europe, consulting specialists. At intervening times I have taken treatment from some of the most reputable specialists in the United States. This time I left home intending to take up my residence

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in the United States for a time, believing that in that way I might hear of a reliable physician. I had become discouraged with specialists. On the ship coming over I made the acquaintance of a lady, who told me of you. She said that she had no personal acquaintance with you, but that she had heard enough to believe that Dr. Tilden, professionally, was quite versatile, succeeding often when specialists failed. While in San Francisco, I found that you were fairly well known, and in Los Angeles it appeared that everybody knew you or had heard of you. As a result, I am here. I have been under treatment most of the time for years, and I am most discouraged.

“You certainly have been unfortunate,” I told her. “But, my dear lady, you do not lack company.” There are people all over this country suffering from amœbic dysentery and *amoebic specialists*. The latter complication is the more to be dreaded; for the specialists rob all patients of time that might be spent in finding a cure outside of specialdom. If the company of amœbics is not large enough, some of the southern states can furnish hook-worm subjects galore, for those desiring the sympathetic association of parasite-producers.

The specialists on hook-worm have a perpetual job; for hook-worms are annual in their appearance. With Rockefeller's money, the specialists can harvest a crop of hook-worms annually. The worms, like alfalfa, come from the soil—“only barefooted people have the disease!” For years hook-worm has been subjected to a *cure* every

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year; and, so long as Rockefeller's money holds out, the job will be perpetuated.

The cause of amœba, hook-worm, and other "carrier diseases" has not yet been discovered *officially* and *ethically*. When it is, it will be good-bye hook-worm. The cause of perpetual "typhoid-carriers" belongs to the long list of incurable diseases. Why a long list of incurables? From the writer's point of view, all diseases are incurable until the cause is removed. Curing, or repairing function and structure of animal life, is a function wholly and entirely belonging to nature—God, if you please. Doctors, if not mentally carapaced, may learn from nature why man is sick. Then, knowing the cause, they may lend a hand in removing handicaps — *disease-provoking* physical and mental habits.

Medical superstition causes man to cultivate an egomania which exalts him above the laws of life; and, fool that he is, he rushes into responsibilities which angels or supermen would fear to assume. Consequently, his ego leads him to interfere in nature's healing processes. In what way? Discomfort accompanies nature's efforts at throwing off disease—eliminating pent-up poison. To secure relief, the aboriginal man called on the masterful elements to save him. All the known and imagined overt and covert powers of nature were petitioned by man to give relief and protect him. Man has looked outside of himself for causes of

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his afflictions, and he has not ceased looking for cause and cure outside of himself. A Supreme Being is the highest conception, and petitions have been sent to Him, and are still sent to Him, for protection and relief. Our Christian world goes to its God in prayer, when in trouble; not with the faith that "moves mountains," but with a perfunctory petition entirely lacking in enough faith to make an impression on the tympanum of the *Ear* that never fails to hear the cry of the *worthy* needy—those who have not grieved away the holy spirit of self-protection—before even a prayer is made. Attention of the life-giving and healing power is always centered on the subconscious—those organs and functions that never sleep. It is in this subconscious workshop that healing takes place. Broken bones are knit together, injuries repaired, worn-out cells renewed. The ailments of those who are sick from toxin-poisoning crises, such as respiratory diseases—in fact, all catarrhal diseases—are corrected, if corrected at all, by the healing powers of the body.

Man's body is under two masters; namely, volition (will) and creation (creative energy). The former is man, the microcosm (a world in miniature); the latter is the universe, or macrocosm. The universal creative energy is from lasting to everlasting, energy without end. Man, the microcosm, through his will-power and intelligence, can build a body and mind that are invincible. He

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can understand the creative energy so thoroughly that he realizes its needs—what foods are best, the best preparations, when to eat, and when not to eat, what to eat and what not to eat. It is possible for man to understand the functions of the various organs of the body so well that he will know when an organ is overworked, and how to rest it; and he can know what to do to help lagging functions. Man can know much about creative energy, but he cannot make blood—he cannot do anything that any organ in the body can do. He can, however, remove all influences, external and internal, that interfere with the normal functioning of the organs which are busy, when he is asleep or awake, in preserving his health and life.

Man has the intelligence. With a well-controlled and well-directed will, he can make the universal energy make him—not by changing energy, but by adjusting himself to energy.

The doctor is called to relieve a pain. An anodyne is given. This stops nature in her effort to throw out or eliminate poison. What results? If the cause of the discomfort is congestive headache, the intended cure may kill by increasing congestion. If the congestion is of the lungs, relief to the harassing cough fills the lungs with secretion, and the patient dies. If the patient is an infant suffering from diarrhea, to check the diarrhea may cause the infant to die soon after the illogical

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relief. If the subject is an adult, and the cause of the bowel disturbance is so-called *amoebic dysentery*, or possibly a "typhoid Mary," a treatment directed or intended to destroy the germs or parasite will build an *incurable* disease out of both derangements. Why? Because the continual irritating effects of the treatment, which is drugging by mouth and by medicated enemas—amœbicide treatment—with a view to destroying the parasites, build ulcerative colitis and proctitis (inflammation of the rectum). The disease is not built by amœbæ, but amœbæ and the treatment perpetuate a disease caused by a common catarrhal dysentery—a disease that runs its course in a week or ten days, if kindly treated. Where these and all other so-called diseases are understood, and the causes are removed, a return to health is speedy; but to call the change a cure, in the sense usually understood, is a misnomer and a damaging education to laymen. Truth, and nothing but the truth, will drive medical superstition to the hell of fallacy, where it should have been long ago—before Pasteur "sold" bacteriology to the medical profession and placed that insuperable incubus on the people crowding *Truth* back for another century.

Carriers of diseases of all kinds mean that such people have broken-down resistance—are enervated. Others, from gross animal habits, enervate their bodies and cause them to become tox-

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emic. Those who overwork, worry, or have cultivated a large fear habit—fear of being discovered in secret habits of petty pilfering, in being disloyal, or in living in a condition of hypocrisy—build enervation and a chronic state of toxemia. Add to such states of physical and mental depression the usual cure-alls, preventions, immunizations, etc., and chronic and incurable physical and mental derangements are built. These are also the people who furnish material for every epidemic, and who die off as they did in the world “flu” epidemic. Those who do not die often become carriers of some kind of germ or parasite. Are these people curable? Yes, but not with present-day medical philosophy. “Typhoid Mary” and all other walking sepulchers can be educated into health, but they cannot be doctored into health; neither can physical and mental diseases be extirpated—cut out. Why? Because the cause must be discovered and removed.

Crime can be cured, but not by electrocution or by hanging. The cause must be understood and removed. Crime is a crisis of physical and mental appetites brought on by overindulgence.

Hunger is a normal want, but when eating is overindulged, it becomes appetite—a form of nervous disease. Psychoneurosis is then in the offing.

Avarice is a nervous disease brought on from greed, and is transmissible. Its crises are seen in our capital crimes of today.

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Disease is not caused by germs or parasites, but by habits of body and mind which break down normal resistance and make man's body a prey to all kinds of parasites.

Only people offering favorable hostage to hookworms are troubled with their company. The same is true of amoebæ and every other parasite. All that is necessary as a cure is to teach mankind how to live to evolve dependable health; then germs and parasites must find a more congenial host elsewhere, or get off the earth.

The lady from the Orient was intelligent, besides being blessed with common-sense. The best-poised people, however, when subjected for several years to much contact with the learned men of the medical profession, will unconsciously absorb quite a lot of medical delusion, so that, after a half-score of years or more of advice and treatment from as many specialists, without any change except a conscious loss of health and strength, common-sense and general intelligence will become *hay-wire* (gnarled), and mind become pathologic. Here is where the psychopathic specialist shines. When those employed to cure any so-called disease fail to make good, and can give no logical reason for it except the stupid excuse that the disease is *incurable*, the incurability rests wholly on impossible etiology.

I succeeded in teaching this lady when to eat and when not to eat, what to eat and what not to

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eat; also how to rest (body and mind), *poise*, and, neither last nor least, the importance of forgetting the amœbæ, and that building back mind and body to the normal would soon restore normal functioning to all organs, after which the parasites would disappear. The theory of destroying germs and parasites to cure a disease is one of the many delusions of scientific medicine. Germs and parasites *are not a priori* (prior) to pathology. Abuse to functioning enervates and checks elimination; toxin accumulates in the tissues, causing degenerative changes; and this tissue change favors homesteading of parasites. Parasites, like germs, are everywhere. They are claim-jumpers when owners are absent. Remove the cause (abuse to the intestinal canal), and health returns. Ouster proceedings are served on the claim-jumpers. The patient left my service after four months' rest and health-teaching. I have had several letters from her—all favorable.

Less than three years ago a young woman came to me with the following sick history:

My home is in Australia. I developed amœbic dysentery seven years ago, and have been treated by some of the best specialists in Australia and England. When I had despaired of getting well in London, I had the good fortune of meeting Mrs. L., the wife of a former patient of yours, who recovered under your treatment [from an aggravated, progressive type of light epilepsy—called *petit mal*] after he had despaired of ever recovering, and

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was on the verge of resigning a responsible position in an English company in old Mexico.

After reciting a lengthy history of her experience with specialists galore, it became my turn to talk. I began with a question: "Aren't you tired of having your body used as a hunting preserve for sportsmen who specialize in bagging amœbæ? If you do not object, we will, from now on, ignore Mrs. Amœba and her family, and give you our entire attention. The parasites do not cause your disease. You have been a gormand all your life. I can control your eating while you are here, but you must learn self-control if you wish to develop dependable health."

Parasites of all kinds must find congenial habitats. When man evolves out of animal habits, he becomes immune to disease. Until then he must suffer from medical superstition.

Dr. Bundesen reports an *outbreak* of dysentery. His *startling* report to the United Press follows:

CHICAGO, November 13.—Dr. Herman N. Bundesen, president of the Chicago Board of Health, announced tonight that he had received reports indicating that there was a "startling" number of cases of amœbic dysentery throughout the country.

Dr. Bundesen disclosed last week that an outbreak of dysentery had taken fifteen lives. He said tonight that it had been estimated by competent authorities that many people in the United States were infected with the organism that causes this disease. Bundesen said that many individuals "apparently" have the disorder without

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recognizing it.—*Rocky Mountain News*, November 14, 1933.

Dr. Bundesen should have given the people a little something besides a "startle," the disclosure that an outbreak of dysentery had taken fifteen lives, that it is estimated by competent authorities that many are infected with the organism which causes the disease, and that many have the disorder without recognizing it.

This is a characteristic "startle" given the people every little while by *health* doctors. The public health-guardians must believe that startles, shocks, and apprehensions are immunizing.

The doctor declares that the amœbæ are infectious. If they are, why do such cases get well in a few weeks when rest and diet are the only remedies I give, with the addition of hot enemas and stomach lavation daily for a week or two? All patients are given massage.

What should these patients be given at the start of *any* dysentery? Stomach-washes and small enemas of water, as hot as can be borne, twice daily until discomfort is gone; then once a day. No food until the tenesmus (straining) is gone; then lamb broth, and fruit and vegetable juices, until all symptoms are gone. Then select meals from the Tilden "Cook Book."

Patient: "Oh, doctor, I am suffering so much I want to die."

Doctor: "You did perfectly right to call me."

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Facts and Fancies

GEORGE S. WEGER, M. D.
Redlands, California

The Big Epidemic

THERE is news every day. Different news, different views, different political hues. By the time this article appears in print some of the ideas presented here may have been clarified, acted upon, or cast into discard. Others of greater interest may have stolen the show. However, a little guessing now and then is relished even by the most venturesome speculators—and writers.

Facts and Fancies, as readers may have observed, sometimes reaches out into fields political and economic, the author daring as many another writer to dabble with subjects about which he claims to know very little or nothing at all.

Let those who would rather read a discourse on spinach or hobnail liver not lose sight of the fact that this country of ours is very sick. It is suffering from overstimulation; consequently it is enervated and decidedly toxemic.

We have a very competent, experienced, and humanitarian physician at the head of our national clinic. His staff of assistants leave important decisions to him, knowing that there will

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be glory enough for all when present objectives have been reached and convalescence well established. The staff has shown itself proficient in gathering proofs and data and in tabulating statistics. The complex symptoms are converging to a definite point and it seems that the chief of staff is about ready to make a composite diagnosis. We hope he may not mince his words nor fail to point an accusing finger at the principal cause of the nation's present protracted illness and tardy recovery.

Opposition to N. R. A. has had time since early summer to become well organized. It is feared that this laudable though somewhat audacious program is doomed to failure. If it fails of its purpose, we can well blame the same organized forces that have been mainly responsible for the depression and the present chaos. The false conditions and sense of economic and social security prevailing during the period of so-called prosperity could lead to no other denouement. The Senate investigating committee sitting in Washington is bringing to light what appears to be the real primary cause of depression. The inflation of stocks beyond all reason, beyond the most avaricious dreams of promoters and security jugglers, represented the height of economic folly.

Pride, vanity, and greed preceded the fall and it seems we have not yet reached the depth. Readjustment must first be accomplished in the high

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circles of finance, and finance is still unbending and unwilling. All in the middle and lower strata are ready and waiting, patiently still, in their helplessness; but with eyes wide open and focussed upon those whose hands held the destiny of industrial America. All who have unscrupulously gained by preying upon a trusting and confiding public should be forced in some way to carry more than they are carrying of the burdens of the victims.

In order to hold ill-gotten gains, organized opposition is standing, back against the wall, to fight for the supremacy of money over human suffering, misery, and want. Perhaps this opposition can be broken. Perhaps the present administration still has a few aces to play in this bitterly fought game. We trust this may be true. We hope that a way may be found to force hidden and protected money out in the open, not to be stolen or indiscriminately distributed, but to be put into channels of legitimate industry and business.

An orderly release of money in the interests of common humanity need not result in a wild or disorderly scramble. It could be eased into our economic life in such a way as to restore confidence in the leaders of finance as well as in the honesty of our government. The ax must hew close to the line of fair dealing, let the chips fall where they may. Adjustment is possible only if

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and when a more equable distribution of wealth is obtained. This country cannot much longer endure to be divided. The gap between the moneyed few and the demonetized many has widened to a chasm in recent years, starting with war profiteering and continuing in false security until 1929.

The Roosevelt plan may not be the best plan. But it was not ill conceived, nor would the attempt to enforce it work a very great hardship on anyone, provided that all of high and low degree gave it a full measure of sincere and earnest support. We on the side lines do not know the intricate details or the unpublished issues that are undoubtedly involved in the battle for human rights against organized greed and financial gambling. Nevertheless, the direction of the wind is a fairly accurate index.

Almost every enterprise that is well organized under the previously existing codes of agreement, whether among captains of industry or rapidly growing labor unions, presents obstacles which, taken collectively, are likely to defeat the President's well meant plans.

Can the organization we call government become sufficiently effective to override the determination of the few in the interest of the many? That is the question that vitally concerns this country. Will an obstinate malefactor—coming perhaps within the pale of highly technical laws

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but not within the laws of God or justice—submit to a somewhat painful amputation? Will those in high places submit as willing or unwilling donors to a blood transfusion so that their weaker or less fortunate or more honest brothers may survive? One force or the other will have to give ground.

Pity the government that acknowledges defeat. In the long run, however, retribution must overtake all that is unfair, unjust, or palpably crooked. This country is now being put to its severest test. No one can accurately predict the price we may still have to pay before right prevails. We trust that the great mass of people may have courage. That they may appreciate all that the present administration has already done and not lose sight of the fact that some one is trying hard to promote their interest and welfare. It is a big game, and the full hand cannot be played except as the opposition lays its cards down one by one.

What would the inspired framers of our constitution have to say, could they come back and view the situation of today? To them it would seem almost unbelievable that so great a number of leaders in society, kings of finance, captains of industry, and political princes, could stoop so low as to deserve the opprobrium of racketeers. And this in a professed Christian country. No wonder we now so seldom see a silver dollar with the "In God we trust" motto in bold relief. The scarcity may be due to our diminishing trust.

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The big internal questions now center around the subject of inflation. Shall the government be forced by pressure from many sides to print more money for those who already have much more than their share? Or can a way be found to force ill-gotten gains and unearned increment into the channels that lead to the poor and distressed? Is there no other way to coax hoarded wealth out of its places of security in the vaults of the higher caste than to offer government tax-exempt bonds for it? It seems to us that the government's biggest job is one that steadfastly works towards a more equitable distribution of the wealth that already exists.

The government should operate just as efficiently on one-half the taxes now imposed on an overburdened people. When mortgage holders and banks foreclose on one-half of our real estate, homes, and places of business and the other half is sold for delinquent taxes, what will take the place of tax income, and who will pay who, and what with?

Wish we knew more about the whole complicated mess. If we did, we would very likely write less.

The Little Epidemic

The ameba is again in our midst. Literally. Chicago is again in the news. The unclean hands of food handlers in some of the largest hotels con-

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taminated the food supply and started a flurry of dysentery.

Amebic dysentery is common in the South and in tropical countries. It thrives only in uncleanness. Not all the uncleanness is outside the body. An intestinal tract that does not harbor decomposition and putrefaction will successfully resist any invasion of pathogenic bacteria. Persons whose vitality has been impaired by excesses in eating and drinking, and who in other ways become enervated, are always fit subjects for infections and infestations of parasites.

The present trouble, which is causing quite a stir, is of a rather acute nature and is usually accompanied by diarrhea and abdominal pain. However, amebic colitis is quite common and not necessarily associated with loose bowels. There are varying degrees of colitis just as there are different degrees of a common cold.

The most popular medicinal treatment in recent years has been a drug injected into the blood. We have seen no cures effected by this method. To the contrary, we have seen and treated many cases in the last few years who had tried the injection treatment without deriving any benefit whatsoever.

When catarrh of the intestines has developed to the stage of ulceration, it becomes a real menace to life. However, in any degree or in any stage the only rational treatment is to empty the

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intestinal tract of all food residues and keep it empty until the mucous membrane is healed. Parasites do not thrive in an empty colon; and deprived of the kind of filth they live upon, they will die and the patient will live. If proper food in proper combinations is taken afterwards, parasites and other pathological organisms of other types will not become revived. One can be cured by rational and sensible methods and stay cured unless old and incorrect habits of eating are resumed.

If the present alarm is not broadcast, the number of cases will rapidly dwindle. It has not become actually epidemic and we have no fear that it will. We Americans are just bound to start something occasionally to divert us. We go off half-cocked and jump at the noise of our own explosions.

Our Future Milk Supply

Meetings and conventions of scientific groups always make first page headlines about something or other. We are informed that since a recent meeting of a chemical society in an eastern state there have been an unusual number of inquiries about women's wearing apparel. It is not strange that these inquiries came mostly from men but the fact that the sterner sex suddenly developed an intense interest in brassieres makes it unusual and newsworthy. Men sense the need of a big lift in the near future.

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A Detroit doctor is said to have discovered a gland extract that would make it possible for every mother in normal health to nurse her baby at the breast. That is gratifying. But we view with alarm and considerable trepidation the possibility, as is claimed, of arousing, by the same method, the lacteal glands in manly bosoms. Scientists should be more secretive or at least more circumspect in making announcements so disturbing. Imagine mother at a bridge party and father sitting at home with his baby mouthing a pacifier that never knew its potentialities until the inquisitiveness of the twentieth century discovered a new source of milk supply. Imagine a suppurating mastitis hidden behind the hairy chest of a real he-man. Let's imagine all sorts of things and try to laugh them off, tragic though they be.

Cherry Blossom Time

From Huntington, West Virginia, comes another one. A certain ex-convict by the name of Dudding, which some newspapers prefixed by Doctor, made a startling announcement. His notoriety came from his claims that there was to be an increase in his family on a specified date, and that the conception was brought about in Mrs. Dudding by the injection into her veins of an extract made from the leaves and sap of a cherry tree. Later the date of delivery was

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changed, and at the same time it was announced that Miss Chemical Dudding was to be stillborn. A dud, so to speak.

There seem to be many aspirants to the fame of Baron Munchausen. Soon we may have radio crooners and lullaby artists interspersing their so-called melodies with advertisements of selected and certified cherry juice for procreative purposes. Send in your orders early and do not fail to specify the variety you prefer. There will be Royal Anns, Black Tartarians, Bings, Early Richmonds, Morellos, and Chokecherries. Other varieties will no doubt be developed and an aristocracy thus bred might later trace its genealogy back to the cherry tree that George Washington chopped down with his little hatchet so that he needn't tell another one. At last a real family tree for everybody of low and high degree. History has a habit of repeating itself. Once it was the apple and the fig leaf.

A properly trained will makes for health, comfort, happiness, and a glorious victory over death in a long and serviceable life. Without a trained will, there lurk in every cup of pleasure that is drained the lees of discomfort, dulled senses, enervation, toxin & drunkenness.

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Does Education Educate?

(Continued from last month)

Much mental and physical degeneration is brought about by vaccination and other so-called preventions. This is according to the so-called science of medicine. Herbert Spencer, Alfred Russel Wallace, and a few other world characters stood against polluting the blood in the name of prevention or curing disease. In spite of the approval of the masses as well as the educated, Scientific Medicine is reading the handwriting on the wall: "Mene, Mene, Tekel Upharsin."

The kind of tragic death brought to George Washington near the beginning of the nineteenth century was in vogue until the beginning of the twentieth, or the present, century. The deaths that are marked by the delirium of opium somnolence are brought on by kind-hearted doctors, in their endeavor to give relief to those who are dying from cancer or septic poisoning.

How much better it would be to allow a hopeless patient to die without drugs that steal his wits away! Withholding food brings an easy and rational ending.

These patients would rather go without food and drugs, if assured that they could die without pain and in their right minds. Such deaths as those from painful delirium belong to one to two

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hundred years ago, not to the twentieth century. The sick in the nineteenth century were bled, mercurialized, and killed with morphine and opium, and their nervous systems were racked with quinine.

The (medical) powers that be would like to have it understood that slaughtering with drugs and blood-letting ended with the advent of bacteriology and serum treatment. No cures have been made with serums. Tuberculosis was the first so-called disease to be attacked by the really great men of the profession. The germ theory of treating disease has been worked "to a fare you well," and failure has marked every move. What is the latest mental reaction? Hush! Quiet! Not so loud, please! It is now believed that the disease is neither contagious nor infectious.

How about the *king* of diseases—the erstwhile *only "specific disease,"* and the only disease with a "specific" cure? Dare I humiliate scientific medicine by telling the truth—namely, that syphilis is the disease alluded to, and, that mercury and potash were, before the advent of the germ theory, "the only specific cure"? Is the disease being treated according to the improved germ theory—namely, by administering the quintessence of the syphilitic pathology, on the order of *like cures like?* Nay, Nay, Pauline! Nothing so simple as that! The great Ehrlich buried himself in his laboratory, and there wrestled with the god

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of chemistry for "606" bouts before the right formula was evolved. It is strictly a chemical compound, and the entire medical profession, so far as I know, is satisfied that "606" is the last word on the subject.

The subject of medicine, from beginning to end, is a stupendous delusion. In truth, nomenclature, etiology, diagnosis, and treatment of so-called disease rest on the hypothesis that disease is an entity brought on by specific cause, and that there have been four hundred, more or less, individual symptom-complexes discovered and named. Not one of them could develop the symptomatology in keeping with the text-book description, unless treated according to the text-book. All so-called diseases vary in their symptomatology, in keeping with the school of practice to which the attending doctor belongs. Every school of practice gives good and bad results, according to the imagination and temperament of the doctor, patient and nurse. Some doctors and nurses have bad influences. I have noticed that there are a few doctors who have many malignant types of disease in their practice, while others see only lighter types. Is it accident or coincidence? Neither. Many doctors are unfit for the responsibilities of their profession. The morbid psychology that some doctors radiate in a sick-room is death-dealing. A doctor who imparts fear and apprehension is death-dealing to nervous patients.

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If the germ theory had any truth to support it, the before-mentioned *specific diseases* should be entirely under the power of the profession. Are they? Indeed, the researchers are on a still-hunt all the time for causes and cures. Monthly, at least, startling discoveries are about to be made for the cure of cold or cancer!

According to the germ theory, the doctor proceeds to look for a suspected germ. When the specific germ is discovered, it is corralled and taken to a pathological laboratory, and there a specific serum or vaccine will be made that will cure the disease, theoretically. A few months are given the stupid public to forget, and another startling cure is about to be discovered. This has been the frenzied medical propaganda for three-score years; in spite of the fact that not a single cure has been made. Koch (the German bacteriologist) discovered the tubercle bacillus, and in 1890 he discovered tuberculin, which, he asserted, would cause the tubercle bacillus to cease growing. This was his cure that attracted doctors to Berlin to fetch the *cure* home. But it failed.

The victim of tuberculosis, like the cancer sufferer, cannot return to the normal after pernicious amenia (cachexia) is established. Neither of these so-called diseases needs any treatment at the start, other than correcting disease-producing habits, such as wrong eating, insufficient exercise, neglect of bathing, and lack of a poised mind.

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The people are long-suffering; they are kept continuously looking for cures and saviors; but fiasco after fiasco follows prophecies. Men could learn from the ant. When the insect finds that crossing a railroad track is perilous to ant-life, the colony is informed, and a tunnel is run under the track. The human animal has been looking for cures so long that its memory runneth not to the contrary; and not one cure has ever been discovered that will allow man to live as long, and to suffer as little, as he would without it.

Vaccination and serum immunizations are practiced, and people are coerced and the methods enforced by law, and, of course, indorsed by such institutions as Yale College. Have any colleges ever made an "honest-to-God" investigation of the subject of contagion and immunization? No. Why should they enforce vaccination as one of the prerequisites to matriculation? If the student is honest—a conscientious objector—he will go elsewhere for education, or pay a doctor who is more frugal than honest to scratch his arm and burn it with caustic. Can he pass with that kind of scar? Why not? The faculties of colleges usually know as much about scars as they do about contagion and infection. Even some doctors who are employed by insurance companies can be fooled and made to believe that fresh smallpox pits are acne vulgaris. The whole history of contagion, infection, epidemics, and immunization is one

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stupendous farce—delusion piled upon delusion. These filth diseases will go as soon as man is educated out of his animal habits. Of course, any bright, intelligent boy fifteen years old knows that Tilden is deluded, for a part of his education is to believe what the masses believe must be true. Even Tilden at fifteen believed in medical superstition. He was brought up respectably and orthodoxly, and he learned when very young that, if the world is to make progress, it cannot do so by submitting to coercion as enforced in colleges; for such education places the people in a stereotyped mental state. We hear of progress, but fundamentals are *in statu quo*. Progress is swapping trade-lasts, conceits, and bolstering up weak points in the levees of school and creed. Progress is a joke—it is an effort at hermetically sealing delusions.

Christian Science would be favorable to longevity, if it had not lost all common-sense in building a senseless science cult. Common-sense is the price people pay for submitting to creed and cult.

Worship of creed and cult is the only excuse for the continuous existence of old-school medicine—in fact, all old schools of any kind. The cultist borrows or steals an idea, and builds on it; the herd takes it up, fits it to pyrotechnics, and does a cure-all business for a time—until all the hypochondriacs, neurasthenics, neurotics, hysterics, and curiosity-seekers are cured again; until they

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get on the lookout for a new cult that will cure them again. If it were not for the birth of a new cult every little while, the floaters—those who are always being cured, but never are—become restless for another cure, and will go to “regular” doctors if there is nothing new in sight. The “regular” runs them through the laboratory, and finds many organs needing removal. In a short time the morning paper reports Mr. Jones dead. He went to the hospital for a slight operation, and died “*unbeknownst* to his best friends.” This plan of exit is the only way to cure that great army of “ne'er-do-wells” whose special function is introducing new cults and young surgeons.

I have not given drugs for over thirty-five years, and of serums I have yet to give a first dose. I believe my clientele has fared as well as the clientele of the leading professional men. If my training were such as to create in me a belief in cures, I could report cures of such diseases as are under discussion—as many as necessary to convince the most skeptical. I do not cure—I cannot cure; but I do teach people how to live to get well, and then how to live to stay well. Some say my plan is really so simple that it strains the credulity of those taught along old lines.

* * *

Less than a century ago typhoid was “a scourge of God,” largely uncontrollable. Attention was chiefly given to treating individual cases. Now its nature is generally

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known, and an extensive epidemic of typhoid would be, not a misfortune, but a civic crime.

We commonly look upon corruption in government as somehow inevitable, as typhoid was with human life. Yet many of the worst evils of government are due to specific causes which can be understood and removed. We no longer ask of the typhoid patient, "What sin did he commit?" but rather, "How was he infected?" In political as in human diseases, we need to go back of the diagnosis or recognition of disease to its etiology or life-history.

It was my endeavor last month to give a few reasons why the increase in the length of life during the past hundred years was not due to the "regular" medical profession's ability to "cure" a larger percentage of sick people, but to the fact that medical treatment is *possibly less lethal*. Curing more people, or curing at all, is an unsettled question. From my point of view, a doctor cannot cure. There is no mystery about sickness, and no mystery or charm about curing. Curing is an attribute of nature. Man may understand the laws of health and disease—cause and effect—well enough to teach people how to live to get well when sick, and how to live to enjoy health and long life—how to avoid disease. Disease is not an entity; it is a state—a state of discomfort—brought on from abuse of privilege. Man can eat (enjoy) of all the fruits of pleasure; but when he "eats of the tree of knowledge"—experiences the discomforts of excess, surfeit—he must die,

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unless he reforms and rebuilds his resistance, accepting of all pleasure in the future within his limitations. Each person has a limitation all his own. Only innate intelligence helps the individual recognize his limits. There are a large percentage of people who estimate their limitations by the herd. They do not know that the herd is a complex which is disintegrating daily. The surfeited go down and out daily, so to speak, and their places are filled by converts to the grind of pleasure (?) seekers. If friends or advisers question those who are starting "to go the pace that kills," the would-be setters of the pace will brush aside advice and point out leaders whose paths are paved with asbestos, and who are ambitious to set a pace for the pace-setters. They are always endeavoring to assure friends that they are very moderate, compared with this, that, or some other man.

It is not the pleasure-seeking mob and its medical advisers who have added to longevity in the past hundred years; but these are the people who have enervated themselves by excess until they are in discomforts of all kinds. Then, true to the artificial genius which they have evolved, they call for a doctor peculiarly their own; not a doctor who advises rest in bed and the cutting-out of all stimulants, including excitement—absolutely rest until the body has eliminated all pent-up waste.

No, the doctor called will advise moderation.

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Who of the pace-setters knows anything about moderation? An operation is advised, and it often proves "the last straw." But why add more? A lack of conservative intelligence runs a rapid course. It fails to gather the understanding which is necessary for health and long life.

A sick man is a drunk man—a surfeited man; and unless he goes under training—teaching—and learns his limitations, and respects them, he will surely die prematurely.

(Continued next month)

Why has the human animal more sickness than other animals? There are many reasons. The first, and most profound, reason is a cultivated belief in esse (in the actual existence) of disease, instead of the more rational belief that disease is in posse (in possibility—potentially possible). To inculcate the fallacy that disease is inescapable enthralls the mind with fear and apprehension, and converts the human victim into an easy mark for high-powered salesmen who traffic in the cures of the various systems.

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Wounds and Infection

DR. MORRIS FISHBEIN is the oracle of the American Medical Association, editor the *Journal* of that association and *Hygeia*, the health magazine, and, neither last nor least, the Judge of Quackery in the United States, and editor and compiler of the largest "Blue Book" in existence, containing the names of twenty-five thousand doctors whom he calls quacks, when he wants to be nasty about it. In polite parlance, these professional gentlemen are referred to as "irregular doctors." In England, the so-called regular profession refers to doctors not in their class as "unqualified." This same Dr. Fishbein has condescended to instruct the reading public through the lay press as to how wounds should be treated. Our *Rocky Mountain News* feeds his wisdom to its readers. Probably there could be found in the city of Denver a thousand doctors whose medical opinions would be as reliable.

The following is taken from the *News* of August 17, 1933:

TREATING WOUND REQUIRES CARE AGAINST INFECTION

Whenever the skin is opened, torn, or punctured, the injury is called a wound.

The greatest danger from wounds, after the imme-

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diate danger of hemorrhage, lies in infection. Therefore, the first step of importance is to prevent infection by disinfection.

In taking care of a wound, one must be certain that his own hands are clean. Surgeons wash the hands thoroughly with soap and water, and then wash them in antiseptics, and thereafter wear sterilized rubber gloves.

All materials applied to the wound should be sterilized. If a sterile package of material, ordinarily bought at a drug store, is not available, it may be made by boiling thoroughly materials available in the home. Also, a freshly laundered handkerchief or towel is likely to be relatively free from germs.

Among the best of antiseptics is alcohol. Tincture of iodine is widely used as a first-aid dressing, as are also mercurochrome, saturated solution of boric acid, and hydrogen peroxide. When a wound has been contaminated with dirt, this should be washed out by a suitable solution. It is not well to apply hydrogen peroxide to a fresh wound, because it may cause pain and unnecessary crusting.

After the wound has been disinfected by the application of a suitable antiseptic, it should be covered with a clean, sterile gauze and suitably bound. No one should attempt to sew a wound unless he has had medical training.

Whenever pus or infection occurs, it should have prompt medical attention. If a person is far removed from medical attention, he should realize that it is of the greatest importance to release the pus by opening the wound, and then to apply the antiseptic. Wet dressings of concentrated boric acid solution applied for several days are helpful.

Small splinters are best removed by using a needle

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which has been passed through a flame in order to sterilize it; large splinters, by the use of a knife-blade sterilized in a similar manner.

When a fishhook gets into the skin, it is not well to attempt to pull it out. In order to avoid tearing the tissues, it is perhaps better to push the point onward and forward, and to let the end of the fishhook follow the point. The barbed end may then be cut off with a wire-cutter, making removal easy.

In the doctor's first and second paragraphs he gives his *modus operandi* of how he and his school care for skin wounds. He declares rightly that the greatest danger from wounds, after hemorrhage is checked, is infection; "therefore, the first step of importance is to prevent infection by disinfection." That statement is absolutely untrue, notwithstanding the fact that there are one hundred and fifty or two hundred thousand A. M. A. physicians in the United States who will declare that that statement is classic—classic because it has the backing of the scientific physicians of the country.

In the past fifty years I have had occasion to remove a great quantity of antiseptic dressing to get at wounds that had been badly managed; namely, a few stitches taken in them, without any attempt whatever being made to drain the exudate that always follows an injury. One case comes to mind just now: A young man had his hand buried in iodoform, the odor of which made

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him a nuisance to the public wherever he went; but, in spite of antiseptics galore, infection was starting up, and he would have lost his arm if proper treatment had been put off twenty-four hours. Dear people, keep in mind, please, that a stinking remedy has no right-of-way over clean water, which is not offensive to the most delicate nostrils!

I shall take pleasure in stating the whole truth and nothing but the truth concerning the proper treatment of wounds, and in opposing the statement, "Prevent infection by disinfection." I declare the only rational treatment; namely, "Oppose infection by perfect drainage." We are continually having surgical cases reported as dying from heart failure, unusual and unlooked-for complications, heart clot, embolism, etc., etc.; all of which is Greek to the lay public, and gospel truth to the rank and file of unquestioning sisters in the profession. The truth is that the majority of such cases die of septic poisoning.

The following is a sample: A gentleman sixty-six years of age had a little trouble in micturating (urination). He called on a physician, and the physician advised him to go to the hospital for observation for a couple of weeks. At the end of two weeks the physician told him he ought to have a very small operation, which would keep him in but a short time. He had the operation, and septic poisoning took him off in three days.

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Was it reported that he died of infection? Never!

Again, someone is operated upon for appendicitis. He gets along splendidly for about three days, then has a chill. A septic fever follows, and the funeral follows that. What is the cause? Septic poisoning. Were these cases operated upon without the use of disinfectants? Perish the thought, because all our surgeons all over the country declare, as Fishbein does, that infection is prevented by disinfectants! Until this belief is outlived, the profession will continue to place faith in disinfectants, and such misfortunes will continue to take place.

I once believed just as Dr. Fishbein believes. In the early seventies I began abdominal surgery under the Lister method. Operations were performed under a carbolic-acid spray which played on the wound, hands and arms of nurses, operator, etc. The after-treatment was the Lister perfect dressing. My patients suffered from carbolic-acid poisoning. Those were the days when stitch abscesses were very disagreeable, to say the least. I began a systematic reduction of the amount of antiseptics which I used, and the more I reduced the antiseptic spray, the better my patient felt immediately following the operation. It took me two years or more to persuade myself to operate without antiseptics. Right here allow me to say that antiseptics and disinfectants are not one and the same. Permanganate of potash is a disin-

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fectant, but it is a very poor antiseptic. I certainly should not care to trust a disinfectant, if I believed in antiseptics and asepticism. It is perfectly proper, and one should have clean hands, if for nothing more than to be esthetic. A surgeon with dirty hands is unthinkable from the standpoint of estheticism. But, without drainage, clean hands and antiseptics, used as freely as possible, will not prevent death from septic poisoning. Assure thorough drainage, and the surgeon may be slovenly—in fact, dirty—and nature will get through without absorbing the decomposition which always follows imperfect drainage.

I have always advised those going into the mountains or on hunting trips, if they get a wound, to wash it well. If they do not happen to have gauze, not even a clean handkerchief, they should rip off a piece of underclothing, tear it into small strips, and push one strip into the bottom of the wound with a clean stick. They must wash the wound thoroughly the next day, and remove the dressing; then insert another strip of the same character. It will be impossible to put in as much as on the first day; for the wound is closing up from the bottom. That is what prevents punctured wounds from developing decomposition of the secretions, ending in septic poisoning. The use of antiseptics under such circumstances, without due attention to drainage, will end in death.

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Indeed, the surgeon should wash his hands with soap, and cleanse them thoroughly; but, so far as using antiseptics or wearing sterilized rubber gloves is concerned, that is all grandstand play. No wonder there are no reports sent in of deaths from septic poisoning! After so much display at prevention, certainly a death from septic poisoning is not complimentary, to say the least.

The doctor states that all material applied to the wound should be sterilized. I have not used a sterilized instrument for fifty years. I wash my instruments; I have clean towels and clean hands; but I make no great display of asepticism or cleanliness. And I am continually establishing drainage in my gynecological work. Years ago I went through the whole formula given above by Dr. Fishbein. It took me a long time to prove to myself that it was not necessary, and that it belongs to medical superstition, particularly pertaining to the germ theory.

The doctor declares alcohol to be among the best antiseptics. He also advocates iodine and mercurochrome, saturated solution of boric acid, and hydrogen peroxide. I am perfectly familiar with all these remedies, and once was a slave to them. When a man has followed such practice for ten years, gradually proving to himself that there is nothing to any of it except superstition, and has continued work in this line for the fifty following years without accidental (?) infection,

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he cannot help but smile at such childish articles as this by Dr. Fishbein that I am quoting and commenting on.

Concerning the sewing of wounds, a man who does not understand the great need of a drainage-tube, or a string of gauze or silk ligature, put in the bottom of a tear or cut before a stitch is made, should not be allowed to practice surgery.

A glazier came into my office with his arm in a sling. He said: "Three days ago I cut the palm of my hand very severely, and I called on a physician. He dressed my hand and put in three or four stitches. But my hand is so stiff and sore, and the soreness is running up to the armpit, and this makes me uneasy. That is why I came to see you." I undressed the hand. There was nothing wrong with the dressing. I think Dr. Fishbein would have had nothing to criticize. In spite of antiseptic dressings, however, infection was starting in—so much so that there was a redness on the back of the hand and a sensitiveness leading up to the armpit. I cut the stitches, opened up the wound thoroughly, washed it with clear water—nothing in the water to make it smell—put in gauze drainage, and held the wound together with adhesive plaster. There was no further trouble, and no more antiseptics were used.

A wound thoroughly dressed will not have pus formed in it. When an abscess is opened, it should be drained, and drainage should be continued

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until the wound is healed. In cases of excessive pus discharge, with the drainage working well, the eating must be cut down, or a fast insisted on for two or three days, to stop excessive formation of pus.

Concerning fishhooks, etc., within the past two years I have written on this subject.

I could not allow this opportunity to pass to criticize what I consider foolishness or slavery to medical superstition or simply plain "hooey."

Some people may think that I love to criticize. I do not; but there is so much of this kind of medical education going to the public that someone should have the audacity or the egomania, if you prefer that term, to speak out plainly for the people. Of course, very few people will pay any attention to what I say. Yet it will not be entirely lost, and so long as I continue to live and practice my profession I intend to criticize whenever I see anything going to the public that is detrimental in its influence. I cannot hope, however, to be able to cope with the quantity which is being sent out continually.

Fishbein is a regular contributor, and there is very little of his material that is worth noticing. Being a man holding the position that he holds, many people will listen to him. I do not mean by this that he is any worse than hundreds of others who are educating the people into medical lies continually in our daily papers.

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Care of the Body

BY F. B. TILDEN

THE EYES

THE majority of people are fairly cleanly in their habits; a small proportion are very particular in the care of their bodies; and quite a number do not allow the subject of cleanliness to bother them at all.

There is nothing more repulsive to the average cleanly person than an unwashed and uncared-for individual. Unfortunately, the unwashed seem to have lost their sense of smell along with their estheticism, and their own deplorable condition bothers them not at all. What a splendid thing might be accomplished if, to paraphrase Robert Burns, "we could smell ourselves as others smell us."

But this discourse was not started with the intention of going into the subject of bathing generally, but to speak particularly of the necessity of giving special attention to the care and bathing of the eyes. Most of us are born with good eyes, and therefore have good eyesight. As a consequence, we give little or no thought to the care of our eyes. But if they begin to give us trouble, we at once get very busy desiring to remedy oversight in past care and learn more of proper care for the future.

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The eye is a wonderfully intricate organ, and it should have some consideration. Unless people have some special eye-trouble to call their attention to the eye particularly, they are rather inclined to forget that it is as much a part of the group of organs of the body as the stomach or liver, and is as much affected by the condition of the other members of the bodily group as the stomach or liver may be.

The eyes, being continually exposed to the air, are inclined to accumulate dust and dirt. They need bathing—thorough bathing—even more than the other surface of the body. Being set in a depression, there is more tendency for dust to accumulate around the eye than on other parts of the face.

In one stops to think back a bit, taking inventory of his daily habits, he is quite sure to find that he is in the habit of washing his face, either well or indifferently, with little or no special attention to the thorough cleansing of the eyelids and surrounding surface. The elimination which should take place through the skin is retarded on account of clogged-up pores. Accumulation of dust, dirt, and pent-up secretions brings on irritation, and the eyelids may become inflamed, and granulations form on the edges of the lids.

Improper drainage in the tear-duct, located on the lower lid close to the nose, may bring about

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a little ulceration inside the duct, with inflammation and much discomfort.

Many of us, working where there is dust or dirt of any kind, are careless about rubbing the eyes with dirty hands or dirty gloves. Such a habit may develop enough infection to cause much discomfort. Those of us who work in the garden, handling all kinds of plants, may thoughtlessly rub our eyes with hands or gloves, carrying the fuzz or dirt of an irritating weed.

If an irritation of the eyes is developed, what is to be done? Are we to use some drops or ointment, or what not, to bring relief? No, these are too questionable in their results. It is much better to use plain hot water—plenty of it. See that the eyes and surrounding territory are thoroughly cleansed at least twice a day. If there is much discomfort, they may be bathed every hour or so in hot water, followed with a dash of cold.

A cloth is not an ideal thing to use in washing the eyes. It is better to fill a bowl with hot water, cup the hands, and bring up as much water as possible in the hands against the eyes. The eye-cup is not of much use, as it holds too little water. One needs the action of the water dashed against the eye to help cleanse.

Sometimes there may be enough irritation to create quite a congestion of the tear-duct, and relief does not come, nor does the swelling subside, until a drop of pus is seen at the opening to the

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duct. After thoroughly washing away that pus, if slight pressure is exerted just below the tear-duct opening, a further small amount may be expelled. After another thorough cleansing, the elimination having been re-established, the trouble will subside. This is a condition one does not care to experience often, for the discomfort may sometimes be quite severe.

A little care—thorough cleansing night and morning—will be a great help to sidestep all eye-troubles.

Of course, it goes without saying that the living habits should be as nearly normal and rational as possible, to maintain a good condition of all the organs of the body, the eyes included. Overeating favors engorgement of the blood-vessels of the body, and in some cases there is hemorrhage of the blood-vessels of the eye. Will drugs and eye-washes, etc., have any effect in overcoming such troubles? The only hope of preventing a repetition of this condition is to cut down on the eating, overcoming the engorged condition of the blood-vessels.

Careless eating, eating of rich foods, eating of foods in haphazard combinations, and too small a consumption of the raw vegetables and fruits, will allow the development of an acid condition of the body. In those whose eyes are not so strong as they might be, the acid state may extend to the eyes and bring about great irritation there—

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redness, inflammation, and even granulated eyelids.

So cleanliness is necessary. But cleanliness alone will not keep the eyes well. Rational, sensible eating habits must also be practiced, along with cleanliness.

Tilden Cookery

BY F. B. TILDEN

THE SALAD QUESTION

AT THIS season of the year the salad question becomes quite a problem to those who are not so fortunate as to be located where the markets afford a selection of green vegetables the year around. Even in our best markets we are compelled to limit our variety of vegetables as the winter season approaches.

The real Tilden salad consists of lettuce, two-thirds by bulk; tomatoes and cucumbers, one-third; dressed with lemon juice, oil, and salt to taste. The lettuce may be cut up quite coarse, and the tomatoes and cucumbers as small as desired. Mix the whole lightly, and serve. Or the lettuce leaves may be placed in each individual salad-bowl without much cutting, the tomato and cucumber left quite large, and each person be allowed to cut and dress his own salad.

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The salad should be the last dish prepared for a dinner, and the ingredients should be cool and crisp. The lettuce may be wrapped in a damp cloth and placed in the refrigerator or in a cool place during the cold weather.

All the above applies to the summer salad. During the winter months, when celery is more plentiful, the salad may consist of lettuce, celery, and tomato; or lettuce, celery, and apple; or lettuce, apple, and grated carrot. If it is impossible to procure lettuce, crisp cabbage may be shredded and used as a substitute, with apple and grated carrot; or cabbage, apple, and celery; or cabbage, celery, and grated carrot. If cabbage is the only raw vegetable to be procured, it may be used as cabbage slaw. The slaw may be dressed with salt and lemon or vinegar; or a sweet, sour dressing may be used: vinegar or lemon juice, sugar, salt, and a little sweet or sour cream. Experiment with this dressing until you learn just what proportions suit your individual or family tastes.

Children are especially fond of the grated carrot, and many of them will enjoy eating a whole carrot which has been well washed and scraped. If children come in from school or play in the middle of the afternoon famished, and assuring the mother that they cannot exist until dinner-time without something to eat, there is nothing more simple or less harmful than a crisp carrot, turnip, or an apple to stay the young animal until

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meal-time. That is a much better practice than to allow the child to have candy or bread and jelly, or bread and sugar. The fruit or raw vegetable will not be heavy enough to spoil the keen relish for the evening meal. If it should prove to do so, the after-school lunch should be tabooed.

Children who are started early in life to eat salad will build a keen relish for it, to last all their lives; and it is such a safe and sane and necessary food to take.

We are often asked: "Don't you ever eat fancy foods, or foods usually regarded as desserts? If so, when and in what combinations?" Yes; when we are well and have dependable health, we may indulge occasionally—once a week perhaps. For dinner—apple pie, cheese, and a large combination salad; peach cobbler and combination salad; blueberry pie, cheese, and combination salad. Occasionally, for lunch, ice-cream and sponge or spice cake, or fruit and cake, or fruit and ice-cream. But if we do not have all the comfort we want in the health line, how foolish it would be to risk building further trouble by adding to our menus those foods which may produce more or less irritation or fermentation, and destroy, for the time being, perfect digestion! All people who have a sensitive digestion, experience these results from such eating. Wait until health is established; then enjoy an occasional celebration without fear of direful results.

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If variety is desired in the cooked vegetables during the winter, when there are not so many from which to choose, try some of the various combinations: carrots and turnips cooked together, peas and carrots, canned tomatoes and stewed celery, okra and tomatoes, corn and beans (canned); or even a mixture of three or four vegetables may be used, such as peas, carrots, and turnips. This mixture of vegetables is an advantage when one wishes to use up left-over vegetables of which there is not enough of any one variety for a full meal.

The vegetable soup is a splendid lunch during the winter months. If made with the potato along with the non-starchy vegetables, there is quite a body to the soup, and it gives sufficient nourishment for all working people. Enough of the vegetables for the soup for several days may be cooked at one time and kept in the refrigerator, using only enough for each meal, thinned with water and a small amount of cream, if there is to be starch, such as potato, in the soup, or thinned with milk if there is no potato in the soup, and no other starch is to be served with the soup. If no potato is used in the soup, and one wishes to serve starch with the soup for a more hearty meal, the soup may be preceded with well-dried and toasted bread or crisp wafers. But the starch should be thoroughly masticated and well mixed with saliva before swallowing. The soup should not be

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taken into the mouth while the starch is there. Saliva mixed with starch digests the starch; but soup has nothing to do with digesting the starch. On the contrary, it hinders proper mastication. The best plan is to finish the starch first, and then have the soup. In this way there is not so much temptation to eat starch and soup together.

The worrier is always smaller than his job even if the job is that of a hobo or president of the United States, or John D. Sr.'s job. Mr. Rockefeller is the finest example of a poised business man this country has ever produced. If he had not practiced self-control all his life he would not be here, he would have gone in middle life as 90 per cent of successful business men go and as 90 per cent of the other 10 per cent go before John D.'s age.

I hear the thoughts of ambitious young men say, "Give me the oil king's wealth and I could be poised." Indeed not, you would die of dissipation at half his age if your only dissipation was an overgrown conceit. Vanity is a drunkenness that enervates and disintegrates the body from Toxemia. John D. is larger than his wealth, larger than "he who takes a city"—in fact, larger than kings, presidents, captains of industry—for he controls the largest magnet in the world; namely, himself. He is larger than his business.

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Menus

Breakfast

Whole-Wheat Bread—Butter
Prunes

Lunch

Vegetable Soup

Dinner

Spareribs—Sauerkraut
Tilden Salad

Breakfast

Baking Powder Biscuit
Butter—Oranges

Lunch

Baked Apple—Cheese

Dinner

Baked Hubbard Squash
Carrots—Spinach
Tilden Salad

Breakfast

Shredded Wheat—Butter
Grapes—Teakettle Tea

Lunch

Fruit Salad—Wafers

Dinner

Lamb Stew
Peas—Turnips
Tilden Salad

Breakfast

Wheat Cakes—Butter
Honey—Teakettle Tea

Lunch

Vegetable Soup

Dinner

Macaroni with Tomato
Beets—String Beans
Tilden Salad

Breakfast

Whole-Wheat Bread—Butter
Grapefruit

Lunch

Tomato Soup—Apple

Dinner

Baked Fish
Stewed Tomatoes—Spinach
Tilden Salad

Breakfast

Cereal with Cream
Prunes—Teakettle Tea

Lunch

Baked Apple
Cottage Cheese

Dinner

Baked Potato
Bacon—Carrots
Tilden Salad

Breakfast

Bananas

Dinner

Cream of Tomato Soup

Roast Pork

Baked Apple

Parsnips

Tilden Salad

Lunch

Jello

Sponge Cake

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Question and Answer Department

Question: Could the following drink be SAFELY given to an eighteen-months-old baby who refuses to take plain milk: Juice of one orange, one glass milk, a little brown sugar if required. The juice is poured slowly into the milk while stirring vigorously, forming very small curds. Then the mixture is well shaken in the beverage shaker, making a delicious creamy drink. If one-half lemon's juice or less is used instead of the orange juice, would the drink then be unsuitable for a child this age? It would be given the first thing in the morning, 7:30 a. m., with breakfast about 10 a. m.

ANSWER: I should not recommend your suggested substitute for plain milk for your child. You wait until your child is hungry, then it will take milk all right. What is the matter with letting the child go without anything to eat until it is hungry enough to take the milk? You are silly like many mothers. You imagine your child is going to starve to death unless it gets more milk than it wants. Your child has no appetite, and if you will wait long enough and not be afraid that it is going to starve to death, it will take milk all right. The fact of the matter is any human being will take milk before he starves to death. I do not approve of your substitute—orange, milk, and brown sugar. Keep sugar away

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from your child unless you want it to have tonsillitis later on. If you propose to get your child in the habit of drinking delicious, creamy drinks, you are going to prepare your child for eventually going down with kidney disease, tuberculosis, or something of that kind. I should not want you around where I had children if you have an idea that their appetites should be tampered. Feed your child regularly morning, noon, and night, on plain food, and when it won't take plain food, let it go without food until it is hungry. That is, if you want a nice, healthy child, one that will grow into first-class manhood or womanhood.

Question: I have a daughter sixteen who has pyorrhea. What can we do to cure it.

ANSWER: If you had been feeding your daughter properly from her birth on, she would not now be developing pyorrhea, and unless you learn how to feed her properly and she is willing to submit to a proper diet regime, she will lose her teeth very early on account of pyorrhea. This is a very serious trouble, and I could not take the time or space to write instructions on how to take care of and treat her. Call on your dentist and if he does not know how to take care of her teeth and feed her, you will have to take up the subject of feeding with someone who does know. You might send for our books. If you care to undertake to feed your daughter right, you must have some

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information. Either study it out yourself or get somebody who has studied it out to advise you.

Question: I have a rupture on right side. When bowel comes out, it is nearly the size of a hickory nut. Have had it for about twelve years. I am forty-one years old. Can get along quite good by wearing a truss. What do you recommend?

ANSWER: You say you can get along very nicely by wearing a truss. If you will wear your truss right, your hernia will get well, and what is the right way? Don't take your truss off until you get in bed at night, then put your truss on before you get on your feet in the morning. Don't allow the hernia to protrude and within six months if you do not allow it to come out, it won't come out unless you lift something heavy without bracing your abdominal muscles while you lift.

Question: Are all nuts in the shell safe to buy so long as they are not treated with chemical? Are nuts one year old in shell good to eat yet?

ANSWER: Nuts are safe to buy so long as they are fresh or within a year after the harvest time. After a year has passed, nuts are a little old. In damp climates nuts are liable to be rancid—more or less spoiled. You ask the question, "Are nuts one year old in shell good to eat?" If you are liv-

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ing in a dry climate and the nuts have been in the dry climate for a year, they should be all right up to the end of the second year.

Question: Would you be kind enough to give some information in regard to crystal scales forming in the kidneys? Having had X-rays taken of both kidneys, crystal scales appear on both kidneys.

ANSWER: I should advise you to get another examination to see if scales are still forming in the kidneys. The truth of the matter is, all urine has crystals in it; there isn't anything strange about that, but if the crystals come together in forming stone, then you should have a good physician's opinion on your case. The sooner you have your diet corrected, the sooner you will stop building kidney stone.

Pittsburgh, Pa.,
Oct. 7, 1933.

My Dear Doctor:

Your picture hangs in my room, a most conspicuous place, and it has been said many times "Dr. Tilden is my God." As I have told you before, I should be dead eighteen years but for you.

Please renew my subscription, and thank you for the best magazine in the world.

Long live Dr. Tilden and best wishes.

MRS. C. D.