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Philosophy of Health

By

J. H. TILDEN, M.D.

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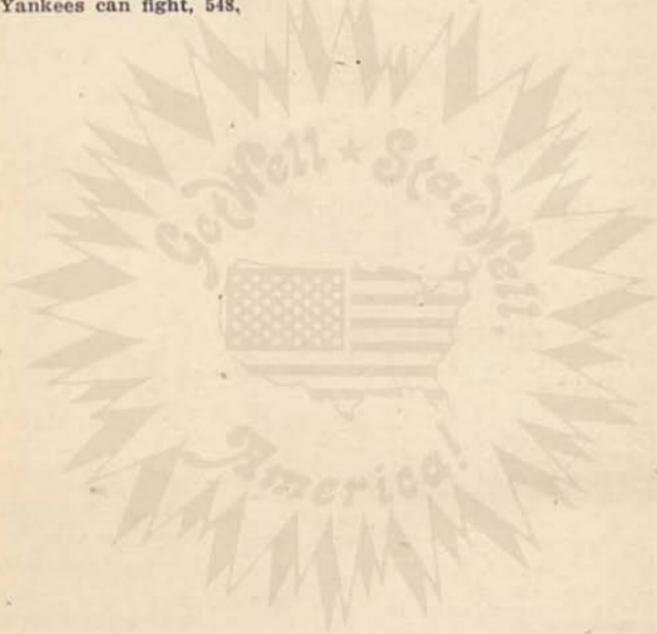
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Philosophy of Health

A TEACHER OF HEALTH—NOT A BUILDER OF DISEASE

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Number 1

NUTRITION

[Continued from April number.]



THE different acts of nutrition in man are now to be reviewed, with their perversions.

The first process in digestion is the liquefying of food. The food is ground by the teeth, and then mixed with the digestive secretions.

When the individual is normal, and eats normally of a properly balanced dietary, and when everything else is normal—*i. e.*, the mind is at rest, and the care of the body (such as bathing, rubbing, clothing, etc.) is normal, and properly adjusted to external influences—it can be said that ideal health is enjoyed. But, inasmuch as an ideal adjustment of man to his environment is obviously impossible, ideal health is an utopian dream. Like all such ideals, however, it is useful, in that it feeds ambition and rewards approximate attainments.

In every branch of life's activities the ideal is unattainable. The best is secured by endeavoring—the reward is in pursuing, not in attaining; for attaining is reaching an equilibrium where life ceases. Life is activity, growth, attaining. Health is activity, building, doing, striving, fighting against deterioration, and endeavoring to give life, or activity, to every potential of body and mind. It

should be known that the possibilities potential in man are drawn upon very lightly.

When food is unfit, when it is taken in too great quantities, or when the quality is bad, or made bad by improper preparation, very complex derangements are set in motion.

When the food supplied is appropriate, but partaken of too abundantly, or when it is bad in quality or wrongly combined, and is not suitable to the demands of the individual, digestive disturbances result. Fermentation takes place; for the microbe of fermentation is everywhere. It is retrograde nature's enzyme, is omnipresent, and is for the purpose of fermenting and disintegrating the excess, defective, and worn-out material in the body. It is the function of fermentation to remove everything that is unfit, or not appropriate, for physiological digestion—life-building—growth and repair.

Life and death—growth and decay—are presided over by two elements of destruction. Life, at its beginning, has enzymes that ferment and dissolve and prepare food for integration—organization into living bodies; while death, at its beginning, has enzymes (microbes) that ferment, dissolve, and prepare surplus, waste, and worn-out material for exit from the body—to give back the elements to nature.

These two processes are at work side by side, and a study and understanding of them give knowledge of how to aid each in its particular sphere. It is a physician's prerogative to understand life and death—growth and decay; for he must lend a hand in freeing each from its particular entanglements.

When more food is taken than can be appropriated by the body, it must be got rid of; otherwise it obstructs and prevents normal operations. The germ of fermentation dissolves and fits this surplus for immediate exit from the body. When too much is eaten continually, this microbic fermentation creates irritation, inflammation, or catarrh of the digestive tube and the associate, contiguous, and communicating organs.

On account of the gas generated by microbic fermentation, and the consequent distention of the stomach and bowels, dilation of the various parts of the digestive tube takes place. As a result of this distention, constipation is built, and the heart is disturbed, in that its action is interfered with by pressure on the diaphragm. All contiguous organs are pressed upon and put out of commission.

It is after intestinal fermentation is established as a habit that the reproductive organs of both sexes become functionally deranged.

The first functional disturbances set up by an over-supply of food are indigestion, dyspepsia, and sometimes diarrhea—usually constipation.

Nervousness and reflex symptoms accompany functional disturbances; namely: headaches, frequent urination—in children polyuria, causing bed-wetting; rapid pulse and palpitation of the heart; cough from throat irritation. Between insensible eructations of gas escaping from the stomach, causing throat irritation and cough, and a purely nervous cough from stomach and bowel irritation, it is hard to draw the line; but, as the treat-

ment must be the same, an erroneous diagnosis will not prevent a cure.

Gasterataxia, or dilation of the stomach, is caused by years of overindulgence at the table. A common symptom of this derangement is the development of nodules around the second joints of the fingers, named "nodosities" or "bonehard." In subjects of low resistance, or in subjects who have become profoundly enervated, the nodules may be the early symptoms of a developing rheumatoid arthritis.

The kinds of food taken in excess govern the type of disease. An excess of starch, sugar, and fat—especially the starch in the form of whole grain—causes deforming rheumatism and builds stone in the gall-bladder (gall-stones), kidneys, and urinary bladder in the lithemic or gouty diathesis; lime is deposited in the heart and arteries, around joints, and in other parts of the body.

An excessive intake of sugar and sugar compounds—such as puddings, cakes, and pies—develops obesity. Where the intake of carbohydrates is in excess of the needs of the system, glucose is stored, and when there is more than can be utilized, it is passed in the urine, producing glycosuria. It is the function of the liver to arrest and store sugar by dehydrating it to glycogen. When the liver is altered, the sugar passes into the blood and goes out of the body by the kidneys. Both these varieties of glycosuria are alimentary diabetes—the first cellular, the second hepatic from liver insufficiency.

Where animal proteins are taken in excess, they are taken up, but their digestion is not complete—cell- and blood-digestion flags. This nutritive perversion favors

putrescence, and the building of simple catarrhal inflammations into ulcerations.

Gout is supposed to develop from defective digestion of animal foods. Alcoholics stand first as a cause of this disease, and the alcohol produced in the body from imperfect digestion of carbohydrates is a common cause of all types of rheumatism.

It was observed that digestion by the cells of the body is carried on by the aid of endosmosis and exosmosis (physical laws), but nutrition cannot be accounted for by physical laws entirely. When peptones (the liquefied nitrogenous foods) pass through the walls of the bowels, the membranes appear to possess the power of dehydrating, so that peptone, as such, never reaches the blood so long as digestion is normal. In abnormal states peptone is found in the urine, causing peptonuria of intestinal origin. The nutritive materials that are carried to the liver by the portal vein are dehydrated by that organ. When the liver is diseased, however, peptones and sugar appear in the urine.

When intestinal indigestion and catarrh develop, the pelvic organs become involved; menstruation is made painful, irregular, and often too profuse; toxins are absorbed from the bowels; the lymphatics acting as quarantine stations are, in time, overworked, and catarrhal inflammation develops in the ovaries or womb, or both.

Because of a thickening of one side or the other of the womb, this organ is bent on itself, crooking and obstructing the passage or canal, causing pain when the menstrual flow seeks exit.

The womb and ovaries become very sensitive, and the downward pressure from gas in the bowels causes much discomfort.

The mucous membrane of the lower bowels takes on a catarrhal state from the constipation and gas distention. Colitis, appendicitis, proctitis, ovaritis, metritis, inflammation of the spermatic cord, urethritis, prostatitis, piles, and prolapsus of the reproductive organs, bladder, and rectum, are possible diseases coming from fermentation and gas distention. Indeed, a part or all of these derangements are so common that there is a procession of people, young and old, headed toward every surgical institution in the country.

When operating is once started—when, for example, the appendix is removed—the causes remain. The habit of overeating, or improper eating, fermentation, gas distention, toxin absorption, catarrhal inflammation of the intestinal mucous membrane, and lymphatic involvement—all these remain to continue the discomfort for the removal of which appendicectomy was performed.

Occasionally the patient has a respite from discomfort following the operation—not because of any curative effect produced by the operation, but because of the powerful suggestion often imparted by a surgical operation. Those who undergo an operation have faith that they will be cured, or they would not submit to it. The power of this suggestion holds the patient's belief for a time. If there is any discomfort following the operation, it is thought to be the consequence of the necessary mutilation, which will pass off in a short time.

After a brief, questionable rest from pain, the patient begins to complain to the doctor of pain similar to that suffered before the operation. The doctor may declare that the post-operative pain comes from adhesions; or the pain may be declared to be due to ovaritis or gall-bladder disease. In due course of time the ovary or ovaries are removed, and the gall-bladder is drained; or, as in the case of the late Governor Johnson, of Minnesota, operation after operation may be performed for overcoming adhesions—all to no purpose, for the cause is not removed, not even suspected.

In the case of men, the appendix, gall-bladder, prostate gland, piles, and prolapsus of the rectum are attacked with the knife because of the pain produced by intestinal indigestion, catarrhal inflammation, and gas distention. Of course, each and every operation must be a disappointment; for none of the organs is pathologic to such an extent as to justify its removal. Besides, the disease is not of these organs proper, which are sensitive only because the real disease has developed a neurosis of all the organs.

Where appendicular operations have been performed, and the appendices have been found normal, the patients often remain better for a time, because of the suggestion carried by the operation; but in pronounced types of intestinal indigestion, with catarrhal inflammation of the bowels and infection of the lymphatics, there is a general sensitiveness, with periodic attacks of pain, apparently confined to one or more of the organs of the abdomen or pelvic viscera. The real cause, however, of the paroxysms

of pain that pass as appendicitis, ovaritis, or disease of other organs, is gas distention, the pressure on the hyper-sensitive organs from gas being the sole cause. This being true, it should be obvious to every thinking person that surgery can be nothing but detrimental to those afflicted in this way.

The above is a true picture of the physical states of the great majority of those operated upon in the past two or three decades, and those who are now on their march to a surgical hospital. It must be continued; for it is certainly obvious to the discerning, with the illumination above given, that removing any one, or a half-dozen, of these organs will not remove the disease. To remove the lymphatic system of the lower bowels and pelvis, were it possible, would not cure a derangement of this kind.

Lymphatic or scrofulous diathesis is a structural evolution of the lymphatic system favoring the development of tubercular diseases. The word "diathesis" is out of date, and "germ infection" is made to cover all diseased states once ill understood under the name *diathesis*. It may be said of disease, the same as of a rose: "What's in a name?" This is true when a name carries no meaning.

Names only confuse, and help to hide from the mind's eye the true cause.

If we may look upon every child, born of well-disposed parents, as a purified lump of protoplasm with the potentialities of health and mental development normal, we can use the child as a standard of ideal health.

There are children, born of vicious parents, who are said to be born with venereal disease. It may be true;

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I believe that children are born with disease; but they were infected after conception.

My practice has been confined to a superior class of people. While I have always enjoyed a large private practice, it has been with those of a middle to a superior class of intelligence. The ignorant and vicious have always sidestepped me, because I require the giving-up of bad habits as a first step to a cure. Consequently, children born with venereal infection have never occurred in my practice. If they had, I should not believe that nature allowed the infection to take place before conception; for nature makes sterile all who are unfit to propagate.

Starting with perfect physical health, a child is fed too frequently, and kept from fresh air and sunshine. Many are bathed too much, handled too much, and subjected to too much noise. As a result, the child's resistances—its enzymes and body-defenses—are inadequate to meet the enemies of health; and the result is that a catarrhal state is developed. The child "catches cold" easily. The stomach and bowels are made sensitive, and ready to take on a state of indigestion; then toxin poisoning takes place, resulting in an effort, during the cold months, to throw off the poison by the skin and mucous membrane—gastritis, sore throat, and the exanthemata (eruptive fevers). It is a fact that the eruptive fevers—skin diseases—occur all the year around; yet their tendency is to appear more frequently in the winter, or during cold weather; whereas diseases of the stomach and bowels—mucous membrane—occur oftener in the summer, or during hot weather. Gastritis, bowel diseases, and the

various eruptive fevers are a necessary sequence to feeding beyond the child's nutritional needs, and catarrhal inflammation of the mucous membrane is established as a habit. Finally resistance is broken, making the child susceptible to epidemic influences. When the heat of summer comes, it adds the last link to a chain of causes that ends in cholera infantum. If treatment is unsuitable and the nursing bad, the child may die; indeed, many do die.

Children who get over the diseases peculiar to the teething age, carry, and further develop, enlarged tonsils, adenoids, gastric irritation, intestinal indigestion, constipation, intestinal parasitic diseases, the so-called contagious diseases, glandular enlargements, adenitis, tuberculosis, rickets, lymphangitis, scrofula, etc.

These diseases develop from childhood to puberty. Those children who are not swept out of existence will have seasons of betterment; a few will be carried by the force of development, which in a cyclonic fashion sweeps everything before it into health—and that, too, often in spite of wrong life, and a medical treatment that might prove fatal if administered at any other time in life.

These health storms, typhoons, revolutions, often sweep invalids into health, starting up without apparent cause, and carrying many victims of ill-health into physical states approximating good health. Then, if they are fortunate in having sense enough to follow proper advice, they may recover from the ill-health of youth and live to a ripe old age, enjoying life, health, and success. A few will enjoy *approximately good health* from early puberty to early middle life. Perhaps it would be better to say that there

are a few who, through the impetus of development, will enjoy *fairly robust health* until perhaps the end of the first ten years of business life; then, because of neglect of exercise, and the practice of bad eating and other habits, they break down and die of acute or chronic disease.

There are others who reach middle life before they have, by vicious habits, broken down their resistance and placed themselves in a physical state out of sympathy with health's revolutionary forces. These go down and out with tuberculosis, Bright's disease, diabetes, tabes dorsalis, apoplexy, and other diseases.

There is still another class who die between fifty-five and sixty-five of kidney, heart, brain, blood-vessel, and nerve diseases, because they have lost their resistance to such an extent that they fail to attract the revolutionary forces that would carry them on another decade.

We hear of disease influences, but never of health influences. The truth is that there are more epidemic influences for health than the reverse. Indeed, if man ever learns to court health—cultivate resistance, attune himself to the harmonies of nature—he can make himself immune to disease-producing influences.

Chlorosis is thought, by many writers on medicine, to be caused by a syphilitic *taint*; but this is no more true than the claim, set up by the same authorities, that the whole human family is tainted.

Chlorosis I have found to rest on a basis of toxin poisoning derived from intestinal indigestion. After the uterine lymphatics have taken on a state of subacute inflammation (sometimes called adenitis), painful men-

struation begins to develop, and the amount of menstrual discharge grows gradually smaller, until many such cases cease to menstruate entirely.

At first there is a catarrhal state of the neck of the womb; the mucous lining thickens up and prevents the menstrual discharge from escaping freely. The discharge is bottled up to such an extent that decomposition takes place. It is the absorption of this decomposition that causes the anemia peculiar to chlorosis. When the disease is well developed, patients suffer for want of oxygen. They suffer greatly from oxygen starvation. Carbonic acid accumulates; digestion is still further impaired, and cell-renewal is almost impossible.

The blood becomes so thin that there are noises in the head and giddiness. The patient is troubled with cold feet and hands. The mind is dull and inactive. Shocks—such as disappointment in love, excessive venery, sorrow over the death of a near relative or a friend—are exciting causes, because they shock the system and impair the digestion.

Mothers who eat imprudently and worry over family affairs—mothers who worry over boys who are unruly and who are getting into trouble—build indigestion, catarrh, and toxin poisoning.

Business men who carry their business worries around with them, or who use tobacco, coffee, tea, and other stimulants, and overeat, develop toxin poisoning.

Any worry that is habitual, in one who is severely taxed in a business way, and who eats too much, or eats

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improperly—for example, bread, butter, and fruit jellies, jams, or preserved fruits—will lead to a premature grave with hardening of the arteries. When excessive venery is added, nerve resistance is lost, and the ordinary fermentation changes into septic decomposition. Bright's disease, suppurative inflammations of the lymphatic glands, liver, appendix, pleura, lungs, and other parts of the body, are liable to develop. *Tabes dorsalis* is a common disease in those who abuse nutrition with food, work, and sensuality.

Those who live far away from the markets, who live on dry beans, cured meats, and an inferior quality of bread, potatoes, and a few canned vegetables, and who are shut out from sunlight, fresh fruit and vegetables (such as miners), develop a state of acidosis, and, when predisposed to tuberculosis, break down and die of that disease.

Emotional disturbances derange nutrition. Fear inhibits digestion; it deranges heart action to such an extent as to develop, in time, organic heart disease.

Anger has a serious effect on digestion and the heart's action.

Jealousy changes the whole being. From a sweet, even-tempered person, with mild, kindly features, the jealous subject is changed into a demon, with hard, cruel features; a kind, benevolent, philanthropic nature curdles into a cruel, selfish misanthropy; a disposition incapable of causing pain to the lowest animal is metamorphosed into a hatred that can kill the thing it loves.

Envy disturbs the entire body in the same way.

The giving-way to these emotions not only disturbs nutrition and interferes with cell-development, but alters the secretions from a benign, health-imparting influence to a malignant, disease-producing influence; from a neutral or agreeable odor to a rank, offensive smell that causes disgust even in those who are bound by love to the unfortunate one whose emotions have gone astray.

The cause of insane emotions is a wrong understanding of the relationship that should exist between people. The most violent types of emotional insanity spring up between married people. There is, and has always been, a feeling of ownership among married people. This is a survival of the chattel-slavery idea; it belonged to an ignorant age, and is not in keeping with advanced civilization.

Do away with the ownership idea, and have married people stand or fall on behavior—merit. Indeed, an abiding love must rest on the everlasting bonds of respect which spring up from conduct becoming, and in harmony with, dignity and refinement.

Too often, when men and women are united in the *holy bonds of matrimony*, they forget all estheticism. They are more polite and considerate of the most inferior member of society than they are of each other.

So long as marriage means license to be common, immodest, indelicate, and too often vulgar, just so long will love become shipwrecked.

Why should a man expect a woman's infatuation to ripen into everlasting love, when she discovers him to be a cad with disgusting personal habits, or *vice versa*?

The bonds of *holy matrimony* are not sufficient to disinfect vulgar habits. Nothing but habits of cleanliness of mind and body can keep men and women aseptic—worthy of love.

What has all this to do with disturbed nutrition? Allow the veriest swain, or professional novice, to answer! Indeed, marital infelicity is a common cause of intractable indigestion and chronic toxin poisoning. What can palliatives do toward curing such cases? The surgeon is busy removing complaining organs; but, much to his surprise and his patients' dismay, the same old symptoms are back after the operation. If the surgeon had not been so material, he would have known that he had to deal with pathology of the mind instead of the body.

Women have disturbed nutrition during pregnancy. The vomiting of pregnancy is often due to catarrhal inflammation of the neck of the womb. In all cases of excessive vomiting in pregnancy the womb should be examined; if congested, scarification of the mouth and neck of the womb, allowing a little of the surplus blood to escape, will relieve the tension and the reflex irritation. Often one or two treatments will correct the vomiting. There are cases of vomiting that cannot be controlled short of dilation of the mouth and neck of the womb.

The real cause of morning sickness harks back to over-eating, fermentation, toxin absorption, and the concomitant causes. *It is hardly necessary to spring an Irish bull by saying that people who are well will not be sick.*

However, the best writers on the subject of disease write much about the diseases of pregnancy, of change of life, of teething, etc., etc. In fact, it is necessary to have an undercurrent of toxemia, and, without this undercurrent, disease cannot develop. Indeed, toxemia is the only disease to which flesh is heir. Medical nomenclature clothes the various symptoms with individuality, but they are no more basically individual than are the limbs of a tree.

Diseases were clothed with a vague, uncertain specificity before bacteriology stamped them with an assumed individuality satisfying to the profession. I say "satisfying" advisedly; for the profession is so sure it is right that in all diseases where a germ has not been discovered to account for it, one is assumed to exist, and, as in infantile paralysis, all care, nursing, and treatment are in keeping with the assumption.

The nervous system must be normal, or nutrition will be interfered with.

Loss of sleep, overwork, excessive venery, overworked emotions—anything that uses up nerve-energy—lower the digestive and assimilative powers, and also lower the power of the organism to organize its defenses—its enzymes. Hence, an amount of food that could be eaten and utilized by an organism in health would be too much, and would cause toxin poisoning, which would further enervate, and create nervous derangements.

Those in the habit of using coffee, tea, tobacco, alcoholics, or other drugs will find that these stimulants have a much more profound effect on them when, from food

poisoning (toxins from fermentation) and lowered nerve-energy caused by irregular daily life, their resistance is lowered.

Where the enervation is great, elimination is inhibited.

Urea.—The amount of urea excreted by a healthy adult thirty-five to forty years of age is about 500 grains (32 to 33 grams). A child five years of age secretes 180 grains (10 to 12 grams). In hysteria the amount may fall very low—sometimes to 35 to 50 grains. When this takes place, nutrition is almost at a standstill. Hysterical women can refuse nearly all nourishment without getting thin.

The elimination of phosphates is affected by hysteria. After an attack, the earthy phosphates increase and correspond to half of the phosphoric acid, whereas normally the proportion of earthy to the alkaline phosphates is as one to three.

Drugs acting on the nervous system cause disassimilation. Mercury and iodide of potash pervert cell-life; and where cells are broken down, sclerosis follows, and then the diseases peculiar to hardening of the tissues—*tabes dorsalis* and arteriosclerosis.

Drugs like those above mentioned spend their influence on organs which are most enervated. If the nerve-centers have been outraged by a lascivious mind and excessive venery, such drugs as those that are given for syphilis will cause such disassimilation of the great nerve-cells that spinal sclerosis will follow; and this change will be ascribed to syphilitic infection, when the truth is that the sclerosis is due to the treatment. All secondary

symptoms are due to lesions of the connective tissue, brought on by cell-destruction from drug action—not from syphilis; for that disease spends its force on the surface of the body.

If the vulnerable organ should be the kidney, the epithelium would be first affected by the drugs; or if the liver, the biliary cells would be affected by the drugs.

If the mucous membrane should be catarrhal, mercury causes ulceration.

Gall-stone is very common. The foundation is undoubtedly laid, in many cases, by mercury; first enervation from the thousands of influences which use up nerve-energy, then toxin poisoning, which ruins the body's defenses. With this basis, chronic organic disease can be built by any habits or treatment that will cause disassimilation of the cells of the most important structure of the weakest organ of the body.

The seat of the primary lesion of all toxic poisons is in the highest-organized cells. If a poison spends its force on the nerves and brain—as morphine, alcohol, and other drugs do—the disease will be of the brain and nervous system.

Morphine produces emaciation and morphinemia; alcohol often produces obesity and alcoholism, rheumatism and gout.

Lead disturbs the metabolism of proteids and causes an accumulation of urea, and rheumatism develops.

In those who are poisoned on starch and sugar, when the habit of taking too much is discontinued, and the

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intoxication and its influence are overcome, loss of flesh will be marked; but if proper habits of eating are adhered to, a normal weight will be restored as soon as physiological adjustment can be re-established.

Constipation, with its infection, often causes great poverty of flesh; but, when overcome, fatness may follow.

The habit of overeating not only creates catarrhal inflammations and the toxin poisoning described, but in those who have great digestive power it causes plethory—full habit—and great strength for a time. A time comes, however, when the organism begins to go down, obesity takes the place of muscle and strength, and rheumatism, “gout, lithemia, oxaluria, or the formation of renal, vesical, and hepatic calculi” (stone) are established. Biliousness, or congestion of the liver, with engorged stomach and intestines, with the accompanying symptoms—namely, constipation, heavily coated tongue, bad breath, foul odors from the body and bowels, piles, prolapsus of the rectum, colitis, appendicitis, engorgement of the ovaries and uterus—are developed; and, when toxin poisoning is added, the usual pelvic diseases follow, including tumors.

The secretions are altered; the urine becomes overloaded with salts, sugar, albumin. The overstimulation at last ends in enervation; then comes sluggish elimination, with headaches, fatigue, lassitude, chronic tired state, drowsiness, mental stupor, apoplexy; and the linking of this diseased state with the state described before, coming under the head of chronic intestinal toxin poisoning, all

together completes a vicious circle or chain, the links of which furnish the cause of all diseases.

The foods that feed this state are the carbohydrate and nitrogenous foods—the starch or sugar, and the meat or protein. When these staple foods are eaten in a refined state, with the tissue or building salts left out, or the foods that furnish them—namely, raw fruits and vegetables—the body starves for the salts, and disease must follow.

Few people in the centers of civilization starve to death from lack of food. They have food enough, if it only were the proper kind.

Many people eat what may be seen in the bakeshop windows. These windows contain what the masses want. This starch, fat, and sugar is eaten to the exclusion of fruit and vegetables, and the result is acidosis—scorbutus—ill-health, dull mind, and early death.

It has been the fashion in penal institutions to punish the refractory by placing them in solitary confinement and limiting their food supply to bread and water. Nothing more stupid could be done. If it is the institutions' desire to make the criminal or insane more criminal or insane, no better method could be adopted. But if the institutions exist for the cure of these invalids, they should be put in well-aired and sun-lighted rooms, with the comforts of reading-matter and a good bed, with fresh water and apples, keeping bread—one of the causes of their insanity—away from them.

Fresh fruit three times a day, with wholesome environ-

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ments, will start these incorrigibles on the road to recovery. Then, if they are fed properly afterward, they may be cured, with a prospect of staying well.

Tumors or neoplasms are allied with infection. Without toxins, and obstructions to the free circulation of the blood, there can be no tumors developed. The cure for tumors means the correcting of toxin poisoning and freeing the circulation.

All the nutritive changes we have gone over are caused by external influences. These changes are not transmissible, but there is no question but that children born of parents whose nutrition is perverted are more sensitive to like influences than those who are born of healthy parents.

The victim of alcoholism will beget a child with a sensitive nervous system.

Abuse to nutrition may extend to sterility. Any stage short of sterility is stamped on children as a potentiality for taking on perverted nutrition far more acute than normal, but not a state that cannot be resisted, and even improved upon after birth. Nature puts the stamp of sterility on the positively unfit.

[To be continued.]

TYPHOID FEVER

Definition.—According to modern medical science, the cause of typhoid fever is a germ known by the name of *Bacillus typhosus*. The disease is characterized anatom-

ically by hyperplasia and ulceration of the intestinal lymph follicles, swelling of the mesenteric glands and spleen, and parenchymatous changes in other organs. There are cases in which the local changes are slight or absent. In some others there is ulceration. In severe cases there is a secondary disease set up in the lungs, spleen, kidneys, or cerebro-spinal centers. The disease is marked by fever, and on about the seventh or eighth day red spots appear on the abdomen. Sometimes there is diarrhea, and then again constipation; always abdominal tenderness where the disease is fully developed. Tympanites is very distressing, and in some cases there is overstimulation of the heart from pressure. Osler declares that these symptoms are extremely inconstant, and even the fever varies in its character.

The above is as good a definition as can be given of the opinions of the leading authorities. For the benefit of my readers, I shall give my opinion of this disease, and as the treatment proves my opinion right, that should be proof enough.

Typhoid fever is the result of imprudent eating, bringing on decomposition in the stomach and bowels. If taken care of properly from the start, there will not be a single case that will develop any of the symptoms set forth in the above definition. Any case of typhoid fever treated properly will not last beyond eight to fourteen days. After the third day there will be no special pain or discomfort, and the patient will rest all night, so that, when asked how he is at the morning call, he will say he is "feeling fine" and rested well. In cases where the complications

named above appear, they are produced by improper treatment, and no doubt, on account of the decomposition in the bowels taking place in cases that are treated improperly, there will be developed germs galore; but they are an after-consideration and have nothing at all to do with the beginning of the disease.

Etiology.—Typhoid fever prevails in temperate climates, and constitutes the most common form of continued fever. Indeed, all continued fevers, if badly treated and nursed, will develop typhoid complications to such an extent that they cannot be distinguished from the regular type.

The disease is pretty generally distributed throughout the world, and of course presents the same characteristics. Why not? The treatment is very much the same in every country, the initiative symptoms are very much the same, and the cause must be the same. In an experience running over many years I can say that I have not seen a case of septic development except in cases that have been badly managed, and there are certainly no germs of typhoid fever until after sepsis has developed.

According to Osler, the United States has a disgraceful amount of typhoid fever. From 1900 to 1904 the death-rate from this cause was 33.8 per one hundred thousand. It is estimated that from thirty-five to forty thousand persons die of it every year. It is more prevalent in country districts than in the cities. Why? Because cities are better drained; sanitary conditions generally are very much better in cities and towns than in the country.

In the Spanish-American War one-fifth of the soldiers in the National Encampment had typhoid fever. The disgrace was on the army physicians, who did not do their duty in looking after the sanitary conditions of the army. Today the armies are being taken care of in an enlightened manner, so far as sanitation is concerned. The credit for doing away with so-called typhoid fever is given to typhoid inoculation; but it would be very easy to knock the inoculation belief into discredit, if the sanitary condition of the armies would be allowed to retrograde to the state that existed during the Spanish-American War.

Sex.—Males and females are equally liable to have the disease.

Age.—Typhoid fever is a disease of youth and early adult life. Why? This is the age when indulgences are greatest. This is the age when overeating is more common than at any other age, and, as the disease starts from gastro-intestinal derangement, it is perfectly natural that young people should have it.

Immunity.—Not all who are exposed take the disease. In other words, not all who are imprudent in bringing on gastro-intestinal derangement will take down with the fever. Quite a good many who are imprudent will have a short sick spell, lasting for a few days, with vomiting, sometimes diarrhea, which clears out the stomach and bowels; and the disease goes no farther. Of course, such cases as this will be recognized as gastric fever. But a badly treated case of what is known as gastric fever to start with is often developed into a typical typhoid fever.

Those interested in the germ theory are referred to the encyclopedia or some leading text-book on theory and practice. As regards the distribution of germs, those outside of the body, those found in milk, the mode of conveyance, infection in water, typhoid-carriers, infection in food, oysters, flies, etc., the history of these things may be got from any first-class text-book; but it does not appeal to me to incumber this work with a lot of history with which I am not in sympathy. I do not teach it, because I do not believe in it. I believe in cleanliness, but not in the germ delusion.

Morbid Anatomy.—In so-called typical cases there is a catarrhal condition existing throughout the small and large bowels. Specific changes, such as ulceration, are found chiefly in the region of the ilium. This is why this disease is often confounded with appendicitis. Peyer's glands in the jejunum have always been credited with taking on ulceration in typhoid fever, and it is considered diagnostic. These glands, however, will never be involved in any case that is not fed and medicated.

Necrosis and Sloughing.—When the hyperplasia has taken on ulceration, necrosis or death of the tissues often takes place from a shutting-off of the circulation. This favors sloughing, and even fatal hemorrhage takes place. But, as stated before, no case will ever develop these symptoms unless it is fed and medicated.

Symptoms.—There is a period, described by the leading authorities on the subject as lasting from eight to fourteen days, known as the stage of incubation. This means

that the disease which is to follow the first two weeks is being hatched. In the first fourteen days, if the case has been properly treated, the patient will probably take his first walk in the open air and sunshine at the end of this so-called incubation stage. This opinion, being based on years of private practice, would naturally put me completely out of sympathy, and wholly unfit me for devoting twenty to thirty pages to describing conditions that never can occur except when the disease has been subjected to malpractice.

There surely could be nothing so unreasonable or absurd as for me to give the amount of space occupied by such a work as Osler's in giving the details of a type of disease that cannot have an existence unless a physician is educated into knowing how to treat a case to bring out these symptoms.

All the symptoms anyone will ever see, in treating a case of typhoid fever according to my plan, will be a feeling of discomfort, perhaps dizziness, slight headache, and a feeling of heaviness and dulness, with the patient rather inclined to be stupid. The first day or two, when these symptoms present, there will be no temperature. If there is, it will seldom be above $99\frac{1}{2}^{\circ}$ to 100° . The tongue will look a little red around the edges. If the case is to be of a nervous type, the tongue will be long and pointed. Most cases will have the usual appetite, and feel rather impatient when told that they should not eat anything. If the food is withdrawn at once, the slight discomfort may continue for seven days—usually only three days. If

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the patient is sick enough to go to bed, there will usually be aching in the loins, and the legs probably will ache. Some cases of a nervous type will have considerable headache, and the first night or two will be spent in tossing about. The sleep will be very fitful. At the end of the first week the temperature may come up to 101°; and from that time on there will be a decline. In all cases there will be a sluggish condition of the bowels. Just a few will start with a little vomiting and diarrhea. If the case is treated properly, the symptoms enumerated will be all that will ever develop. About the seventh or eighth day there will be rose-colored spots on the abdomen, characteristic of the disease.

There may be some readers who would like to know what the symptoms will be the first week, if the case is not treated according to my plan. The thermometer will show an increase in temperature; the pulse will run higher; the patient will become more nervous; the tongue will become more coated; the breath will develop a foulness that it has not had before, and the patient will complain of more aching in the back, limbs, and head, with perhaps nose-bleed. It is just possible that the case may have enough gastro-intestinal derangement to start off with symptoms as severe as those just named. The treatment, however, should be identically the same, and if a patient has an increase in symptoms at the seventh day, I will be almost positive that the instructions have not been followed, and that the patient has been feed without the physician's knowledge. If this could be proved not

to be true, it would be necessary to look for complications. The urine should be examined to see if there is an inflammatory condition developing in the kidneys. The bowels should be thoroughly examined. There may not have been a thorough cleaning-out, in spite of the enemas; hence the enemas should be given every three hours until the temperature goes down and the symptoms decline in such a manner as to convince the nurse or physician that the cause of the complication has been removed.

If no trouble can be found with the bowels, there should be an examination of the bladder to see if, from some cause, there be a retention of urine. All these suppositions are far-fetched, because, if the disease is to be typhoid, and the case has been started right in its incipency, and treated correctly, it is almost, if not quite, impossible to have a complication of any kind spring up. Where there is an unusual symptom, the disease is not typhoid. Complications never occur except where there is septicemia; and septicemia cannot develop unless there is decomposition taking place in the alimentary canal; and decomposition and sepsis cannot develop in the canal unless the patient is fed.

Treatment.—Osler says: "The profession was long in learning that typhoid is not a disease to be treated mainly with drugs. Careful nursing and a regulated diet are the essentials in the majority of cases." I presume that is in a nutshell what all the leading teachers of the world will say regarding typhoid fever. Then, after making that statement, they will go ahead and tell about how to get

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the room ready; what kind of a bed the patient should lie on—just the kind of mattress and springs, how the bed should be made up, and the necessity of placing rubber-cloth under the sheet, etc.; and then about the necessity of selecting a first-class nurse. Why all this preparation? Because feeding and nursing, along with what little medicine *it is considered proper to give*, prolong this disease twice to three times the duration it will require on the drugless and foodless treatment; and, when this is true, it is necessary to make extra preparation for the comfort of the patient.

The very best clinicians, including Dr. Osler, recommend milk, eggs, buttermilk, boiled milk, koumiss, peptonized milk, meat-juices, strained vegetable soup, barley water, iced tea, ice-cream, etc.

The food taken into the stomach at such a time decomposes, the rotting processes that take place in the bowels cause septic poisoning, and every complication that is named in the best works on the practice of medicine is produced by this septic condition. If patients are allowed no food at all, no sepsis will occur; hence there can be no complications; in fact, the prospective typhoid fever is jugulated and in reality never develops. All diseases threatening to take on a typhoid condition, even typhoid fever itself, will thus be expunged from the nomenclature; for they will never have an existence, if treated properly.

This no doubt sounds exceedingly radical even to liberal-minded physicians, and perhaps like insanity, or

idiocy, or ignorance, to those who are wedded to modern scientific methods.

A person who is just developing the fever, and who has no well-defined symptoms (indeed, the patient can hardly describe his feelings—he simply knows that he is not feeling well), should be told that he is threatened with typhoid fever, but that, if he will follow instructions, it need not develop. He should go to bed, and stop eating. There is no objection to drinking all the water desired. Every night he should have an enema of two quarts of water and a tablespoonful of salt. If in two or three days there is a feeling of discomfort in the abdomen, a towel wet in cold water should be placed on the abdomen, and a dry towel pinned around the body in such a manner as to keep the wet towel in place. The wetting may be renewed about three times in twenty-four hours. The feet should be looked after; if there is a tendency for them to be cold, or cool, something warm should be put in the foot of the bed—a hot jug or a hot-water bottle. The feet must not be neglected. If they are, it will cause the patient to be sick much longer than necessary.

Company should not be permitted. If the patient is not suffering, has no discomfort of any kind, there is no objection to the nurse reading to him for a half-hour in the forenoon and a half-hour in the afternoon; but he must not be worried or tired out by company, nor must he tire himself out attempting to read papers or books. Often these patients are so comfortable that they will insist on being allowed to entertain themselves by read-

ing; but this uses up nerve-energy, and the reflex irritation from reading will make them unnecessarily nervous, and tends to prolong the disease.

At bedtime, after using the enema, the patient is to be sponged with tepid water. The sponging should be carried over the entire body quickly, and then followed with dry-towel rubbing, not too harsh; and, last of all, the spine should be gently rubbed for fifteen to twenty minutes. This rubbing, when done properly, will prove to be quieting. It will cause the patient to drop off to sleep, and he will probably rest comfortably until morning. The following is a description of the rubbing: Lay the hand flat on the patient's spine, and then begin a rotary movement, describing a circle. Each time the hand passes over the spine, the heel, or the part at the root of the thumb, may be pressed gently on the spinal column, and each circle made with the hand should be about two inches lower than the previous; in this way the hand travels slowly down to the end of the spine. Then it should be slipped back again, begin at the neck, and the movement repeated. Continue to repeat in this manner for ten to twenty minutes. If the patient appears comfortable and inclined to rest, continue the rubbing for the maximum time—twenty minutes. If at any time through the night the patient should get nervous, this rubbing may be given for five minutes, or even ten, if it appears to bring the quiet for which it is given. I do not encourage night nursing. I have found that this rubbing quiets the nervous system, and certainly takes the place of remedies that are

generally used for securing rest. Where the patient is extremely nervous, the rubbing can be over the entire body first, then on the abdomen, and lastly on the spine.

As a rule, most of the discomfort will pass away at the end of the third or fourth day. From that time on there will be no especial discomfort, except being tired of the bed—and the rubbing will relieve this. After the nervousness has passed off, and the discomfort is well under control, if the patient has a little craving for acid, a quarter of a lemon may be squeezed into a glass of water and taken about every three hours.

If the abdomen is closely watched, the rose-colored spots will be seen to appear in the neighborhood of the seventh or eighth day, even in those cases where the temperature never runs higher than 101° in the evening and $99\frac{1}{2}^{\circ}$ to 100° in the morning. The pulse in such cases will range from 80 to 100. After the fifth day the pulse may not go higher than 80. When the temperature and pulse come down to the normal—be that the seventh, eighth, or fourteenth day—the patient may be permitted a little fruit—at first just the fruit-juice. There is no objection to a little fresh sweet cider, or the juice of orange, grape-fruit, or any fruit desired that can be taken without sugar. Sugar will cause fermentation, and should not be permitted. After two days of fruit-juice, fresh fruit may be eaten. It must be thoroughly masticated. After the fourth day the patient may have baked apples and a little sugar, and cream half milk, for breakfast, buttermilk for the noon meal, and, in the evening, lamb or chicken broth.

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If all goes well the next day, baked apples may be taken for breakfast; toasted bread and butter and a glass of milk for the noon meal; or, if milk is not desired, tea-kettle tea or well-cooked breakfast food, no sugar, dressed with a little salt and milk one-half cream. If the afternoon is spent in comfort, a little meat may be taken for the evening meal—a lamb-chop with a dish of salad, or a small steak with salad. If the patient is improving right along, by this time he will be going out, perhaps walking. In fact, patients lose so little strength, when treated in this way, that they recuperate rapidly. Within a week or ten days they are as strong as ever. Why not? There has been no septic poisoning that causes a long convalescence.

When called in consultation, or called to take charge of a case that has been subjected to malpractice, at the end of three or six weeks, the physician must at once stop all that is being done in the line of feeding, medicating, and a great deal of the officious nursing. I can do no better, in describing what is to be done, than to refer the reader to a case of the kind that I reported in the September, 1906, STUFFED CLUB.

Nurses should be instructed about putting the lights out at nine o'clock, and they themselves must retire and stay away from the patient until six in the morning. Water can be left by the bedside for the patient to relieve thirst during the night.

VACCINIA (VAK-SIN-E-AH)—COWPOX



VACCINIA is a disease caused by inoculating or vaccinating the virus of cowpox into a human being.

This is one of the old medical superstitions that would have gone out of use, along with thousands of others, if it had not become the special protégé of commercialism and partisanism.

For the perpetuation of this disgraceful superstition there are now invested millions of dollars in vaccine-farms producing *pure pus—pure vaccine*.

When the spirit of commercialism is stimulated to invest millions of dollars in an enterprise, is it in the habit of closing down and going off to a pleasure resort, making no effort to secure a return on the investment? Fie on such nonsense! These investments are made because there are a hundred million people in the United States to be vaccinated, if they can be made to believe in the superstition; or, if they cannot be made to believe in it, *it will be all the same if they can be coerced into submitting to the outrage.*

Is there any temptation, on the part of those who have vaccine for sale, to stir up a smallpox scare, and then force the people to be vaccinated and re-vaccinated? Once it was believed that vaccination immunized for life; then the belief changed to fourteen years, and again to only seven years; but after lots of vaccine-farms had been established, the limit of prevention or protection was

brought down to two years or less; and now it is up to the people to prove that it does not immunize at all, by refusing to submit to having their blood outraged by septic or syphilitic contamination in the name of immunization.

What would the people of this country do if there should be a law passed compelling fathers and mothers to submit their sons and daughters in marriage to a brigandish race noted for its impure blood, and where the chances for developing syphilis were almost positive? Would they submit without protest? Is it not a fact, coming down from the earliest times, that races have fought harder for pure blood than for anything else? The life of a people depends upon pure blood.

Then, if our people knew that submitting to a given law or custom jeopardized the purity of the blood of their children, would they stand for it? Twenty million noes would go up from twenty million throats, in this country, and the legal rape committed on the blood of our children would come to an end *instantly*.

The very same professional people who advocate and undertake to force universal vaccination declare that there is a universal syphilitic taint; and these same professional people admit that syphilitic infection is sometimes caused through vaccination, and that syphilis is transmitted by marriage, not only to the children born of such marriages, but also to whichever parent does not have the disease at the time of marriage.

All authors — all medical authorities — declare that syphilis is sometimes contracted through vaccination. If

so, what percentage? If all the vaccine produced and used now is the virus from cowpox, and cowpox will sometimes produce human pox, or syphilis, why will it not produce syphilis all the time and in every subject?

The profession, so far as I know, has not undertaken to explain this, except as it has many other medical anomalies; namely, by the very ingenious subterfuge of declaring that it is a case of idiosyncrasy.

There is no such thing as idiosyncrasy. There cannot be a deviation without a cause. A cause always produces the same effect, when nothing intervenes to modify its action, or change the object operated upon.

If vaccine is always the same (why is it not, when it is produced according to health laws?), then its influence on human beings must be the same. This statement will be accepted as self-evident—as a truism. But its influence is not the same; nothing could be more false. The influence of vaccination on human beings ranges from no influence at all, to the development of a disease (vaccinia) that destroys life; or from no action at all, to the development of syphilis, and, in fatal cases, septicemia, or putrid fever.

There is a reason for this, and it should be known to every vaccinator and vaccinologist; for anyone who will advocate the doctrine, or perform the operation, without such knowledge, is a quack, and a menace to the community in which he lives, and the right to continue his malpractice should be taken from him.

The reason for the variation in the severity of this disease (vaccinia) is the same as for the variation in the

intensity of other diseases; namely, individual resistance. An attack of disease is severe or not, depending upon the resistance—nerve-energy—and the state of the fluids of the body.

The normal state of the fluids of the body is alkaline. In this state, and with normal resistance, man is immune from disease. In this state so-called infections and contagions are inoperative; but when the alkalinity of the fluids of the body is reduced, they are made susceptible to disease-producing influences.

Intestinal fermentation is the common source of acid for bringing about this change in the fluids of the body.

Fermentation varies from normal, or enzymic, to bacterial, which is acetous and putrefactive. Food, when taken into the stomach in only just the required amounts, will be digested. This is called the fermentation of digestion. When more food—vegetables and fruit—is eaten than can be taken care of by normal digestion, it takes on an acetous fermentation, forced to do so by the common germ of fermentation found everywhere. When more animal food is eaten than can be digested, septic, or putrefactive, fermentation takes place.

When the system is rendered less resistant by the acidity of common, or acetous, fermentation, vaccination will produce a disease ranging from what is called a light to a severe vaccinia. The more acidity, the more inflammation, redness, and swelling there will be, with systemic symptoms ranging from a light to a heavy fever, furred tongue, and general malaise.

The septic, or putrefactive, type ranges from the severe forms referred to above, caused by acetous fermentation, to a septic, or typhoid, type that sweeps the patient out of existence.

There are active and inflammatory types of vaccinia. There are other types, one of which leaves its victims with glandular involvement. In this type tubercular glands and tuberculosis develop. And there are other forms of disease caused by vaccinia, such as vaccino-syphilis. This type shows itself in sero-muco-bursal inflammations—such diseases as are peculiar to the serous membranes, inclining those with this form of vaccine poisoning to take on diseases of the heart, blood-vessels, and membranes of the spinal cord and brain. Probably the ground-work for infantile paralysis is laid by “vaccine syphilis.” Then there are a variety of inflammations and ulcerations peculiar to mucous membranes of nose, ears, and other cavities and canals lined with mucous membrane. Syphilis is prone to cause ulcerations in nose and throat.

The type that causes bursal inflammation favors deforming rheumatism. Many diseases are the sequel of vaccinia. Simply because vaccination does not kill the victim is no proof that vaccinia does not lead to the development of many other diseases. The profession that demands vaccination knows and declares that after the bite of the rabid dog has healed and almost been forgotten, rabies may develop; that after a chancre has healed, and no symptom presented itself for years, in twenty-five to fifty years a brain tumor, or bone disease, may develop,

caused by the infection long forgotten; or a child or grandchild may develop an insanity due to that almost time-out-of-mind infection.

A profession that is so familiar with the never-ending influences of a blood-infection needs to explain why, according to its own beliefs, a disease like vaccinia will not send subtle influences of a disease-creating character down the corridors of time into an eternity almost forgotten by man, and especially why this cannot be true of vaccination, when it is generally conceded by the profession that syphilitic infection sometimes takes place from cowpox virus—the *official and accepted pure vaccine* of the medical profession, and indorsed by law.

It can be proved that in picked young men—clerks and mechanics—not one-tenth of one per cent of those thirty years of age are without blemish from some disease-producing process going on in their bodies. This being true, it behooves the people to demand that doctors give a reason and a remedy for this showing. If they cannot, then laymen should demand the right to do something for themselves. To begin, they cannot start better than by downing the vaccination superstition, and getting rid of that subtle, disease-producing influence which creates a sick heritage.

If what is claimed by statistics regarding the control of smallpox by vaccination be true, it certainly cannot justify the wholesale disease-producing influence of vaccinia, as pointed out above. The facts set forth are not overdrawn; every one is based on the teachings as set

forth in all leading text-books and authorities on modern medical science.

If it were not for prolonging this argument beyond reasonable length, every statement made could be proved by utterances of those who advocate vaccination.

Just a few thoughts in that line must suffice. The vaccinationist is a bacteriologist. He believes in germs as a cause of disease. He believes that, when a patient is infected with diphtheria, the treatment, antitoxin, should be given at once to modify and control the disease. He believes in antidoting septic, pus, and specific virus poisoning with an antidote made of these same poisons. He believes that syphilitic infection should be antidoted at once with specifics for its cure. He believes in the immediate, secondary, and tertiary effects of all poisons, and even the hereditary effects of syphilis, tuberculosis, and other diseases.

Then, why, when germs are so diseases-producing, and so far-reaching in age and transmission, are vaccine and its disease, vaccinia, an exception to the rule? By what extraordinary process or charm is vaccine poison made an exception to all other poisons generated in the same way?

Why do not the pus poisoning and syphilis poisoning induced by the disease vaccinia require the same careful attention as when the same infections are produced in any other way? The people should demand a reasonable answer to this question, or stop the building of this disease—vaccinia.

No answer is apparent, except that pus poisoning and syphilitic infection produced by vaccination are subsidized by a bigoted, selfish commercialism, and sanctioned by a profession that is so numerically strong that it can dare to be wrong when it serves its purpose best.

The error of vaccination is so apparent that, unless professional eyes were blinded by commercialism and partisanism, the practice would not last a day longer. So much for selfishness protected by governmental paternalism.

The people must get together and stand together to wipe out the syphilization of our children by vaccination. We must keep our children's blood pure, in spite of politics.

Just one more question that the people may ask of the learned profession: Why be so concerned about the spread of syphilis, as set forth in the play "Damaged Goods," when month in and month out, year in and year out, your representatives are hounding the people to submit their children to vaccination, which means *pus poisoning* when it does not mean *syphilitic infection*?

MY NEXT TRIP

I HAVE promised to be in East Aurora, New York, at the Roycroft Inn, July 4, 1917.

Where shall I stop on my way going and coming?

That is to be settled by friends. Wherever my friends on my route get together and secure a hall and hotel

accommodations for me, I will promise to do the rest. In the first place, we must know in what cities enough friends can get together to defray the expense of hotel and hall, and for how long, and the number of talks. We must know the names of the hotels and halls in time to publish them in the June and July numbers of PHILOSOPHY OF HEALTH; also the names of those taking an active part in arranging the meetings.

I should like to go by way of Chicago and return by way of St. Louis; but the direction of my going and coming must depend on where friends can arrange accommodations.

The meetings will be opened with a talk on a health subject, followed by a quiz. The people are allowed to ask questions concerning health, much as Dr. Tilden's clinics are conducted in Denver. These meetings last as long as the interest is intense—usually two hours.

Those contemplating a private consultation must let me know in advance. All those wishing consultations must make arrangements in advance through my home office in Denver. No shorter service will be given than a consultation and a month's follow-up advice by correspondence. Those wishing to consult me about coming to Denver for treatment must arrange for this interview in advance through the Denver office.

I shall be pleased to meet as many friends as possible at the lecture-halls, but I can see no one at the hotel who has not secured an appointment in advance from my Denver office.

Why all this red-tape? Because, on all previous trips, so many more have called upon me than were expected that I had no time for getting away from the hotels to visit points of interest.

I want to see those who want to see me, but I want to know in advance, so that arrangements may be made for enough time to prevent disagreeable hurry, disappointments, and confusion. There is time for everything, if a little system is used.

AN EVENING'S QUIZ AT THE CLINIC

REPORTED BY MISS F. B. GANTZ

(1) How should one live who has a tendency toward fibroid tumor?

Every woman who has a tendency for fibroid tumor eats too much, and every woman who eats too much has a tendency for fibroid tumor. Those who have this tendency should stop eating too much.

How is fibroid tumor developed?

In the first place, too much eating is indulged in. The habit of eating too much is established. Nature provides germs of fermentation for breaking down surplus food. And nature provides enzymes—digestive juices—for the purpose of digesting food that is necessary to make up our tissues. Unless enzymes are secreted, the food will not be digested, and we should starve to death with our stomachs full of food. If we digest food and get the benefit of it, we have to be normal and furnish a normal secretion for the purpose of liquefying the food and bring-

ing it into a state in which it can pass through the intestinal walls. That is what is necessary to prepare food for our nourishment. We put food into our mouths, masticate and swallow it, but nature has to fit the material we swallow for absorption. Nature seems to know that we all shall be weak enough to eat too much; hence she provides germs of fermentation to take care of that portion which we cannot digest.

Suppose we fill ourselves up on food, and do not have the power to digest it, what becomes of it—what becomes of us? We should soon be full of food material, with no room for more. These germs of fermentation serve a conservative purpose here. They are for the purpose of setting up fermentation in the food that cannot be digested so as to liquefy it and get it out of the alimentary canal.

Keep up the bad habit of overeating all the time, and the germs have a job of keeping up fermentation in the bowels all the time. As a result of fermentation, gas and toxin poisoning are continually developing in the bowels. There is no dodging it. It is an absolute fact that everyone who eats too much has decomposition going on inside of his bowels every minute of his life. Under those conditions there is a toxin poisoning taking place all the time, the same as in the case of the drunkard, the morphine fiend, and the tobacco-user. The habit once formed, the poisoning is going on all the time. A large resistance will hold up for a long time, but a catarrhal state of the bowels is sooner or later developed; then infection takes place more rapidly, and the lymphatic glands try to neutralize

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the poison. These glands are very numerous throughout the body. They are everywhere. The intestines are covered with them. The blood-vessels have a chain of lymphatics following them everywhere, and, as the lymphatics arrest and endeavor to stop and neutralize the poison, in time they are overpowered in their work of resistance. A little farther and farther this toxin is scattered throughout the body, until finally it saturates the entire organism. Those who are predisposed to pulmonary tuberculosis develop it.

Women are made vulnerable to toxin poisoning because of the monthly engorgement of the reproductive organs. The lymphatics of the reproductive organs are overworked because of the surplus blood sent to these parts monthly. As a result, infection takes place; catarrhal inflammation of the ovaries, and the mucous membrane of the neck and body of the womb, is developed; then hyperplasia—a thickening of tissues—begins. The enlarging is never uniform; an old placental site, an injury at childbirth, or an interference with the circulation from intra-abdominal pressure from gas or fat, will cause an unequal enlarging; then, when one side is enlarged, the bend or misplacement favors a free circulation to the enlargement and a decreased supply to the opposite side. Now we have conditions ripe for fibroid-tumor development. The larger the tumor, the more blood is being attracted to the part, and the more toxin poisoning and the more catarrhal inflammation are developed.

A displacement is brought about in the same way. All

flexion, version, and prolapsus are brought about in the same way.

When one side of the womb is thickened, it shortens the other side and curves it. This is how a womb begins to get a curvature. Lateral displacements are built in the same way. A posterior displacement means a thickening of the anterior wall, or an anterior displacement with a thickening of the posterior wall.

The circulation must be interfered with before a process is started for building a fibroid tumor. After circulation is badly interrupted, the tumor will grow very rapidly. The growth of a tumor is in keeping with the interference with the circulation. A fibroid tumor is a hyperplasia—an excessive growth—too much nutrition being carried to that point.

Those with fibroids should cut their meals in two, and stay with it. If they do not, they will go ahead and build more tumors.

Suppose the disease is tuberculosis, what should be done? Should the patient be stuffed? No; he should live moderately, and exercise a certain amount. Be sure to live within the digestive limitations; eat properly combined foods; then everything in a disease-building way must stop. Just as soon as less food than the organism requires is eaten, nature will begin to absorb the fibroid tumor. If the tumor patients do not care to do this, they can have their tumors cut out, and then proceed to build cancer; for they are going to build something as long as they are stuffing beyond their needs.

(2) May a person with hardening of the arteries eat Carque's whole rice, oatmeal, or hominy, and, if so, how often?

I do not know that Carque has any device by which he can take the starch out of oatmeal, rice, or hominy. This person who has hardening of the arteries likes the three foods that are the hardest on him. Of course, if he did not prefer these foods, he would not have overeaten on them, and he would not have developed hardening of the arteries. It is common for people with certain diseases to select the food that is favorable to the building of their disease. A person with hardening of the arteries should keep away from starch almost entirely. Carque's foods are all right, but we must eat those foods suited to our needs.

(3) I have been troubled for years with my stomach. For two years I have tried, as nearly as I know how, to follow your instructions as to eating, but do not seem to get along as I should. About two and a half months ago I had a stomach hemorrhage, and the doctors said I had ulceration of the stomach. I have been to a number of so-called good doctors, and they all wanted to operate on me—some for gall-stones, others for appendicitis—but seemed to think there was no danger of hemorrhage returning.

This person has ulceration of the stomach; and, of course, after a blood-vessel has been eaten off, or ulcerated off, hemorrhage will occur. If the patient will eat carefully for some time, there will be no danger of a recurrence of hemorrhage. I have known a great many bad cases of hemorrhage that were kept on liquid food for a few weeks—juices of fruits and vegetables—and then they gradually increased the food in quantity and variety, and had no more trouble. I certainly would not object to such a

patient having all the apples he wants, but he must masticate them thoroughly, or have them run through a vegetable-mill. He should not swallow anything lumpy. People in this condition should thoroughly masticate all food. Such an individual should have instructions fitted to his particular case.

CHANGE IN PRICE

ON ACCOUNT of the enormous advance in the price of paper, our publishers of PHILOSOPHY OF HEALTH have been compelled to advance their prices to us. They have been very lenient with us, and, on account of their leniency, we shall not be compelled to advance our price as much in proportion as all other periodicals have. Beginning with the publication of this issue of the magazine, the subscription price will be 15 cents a copy, or \$1.25 a year.

Although the change in price is small, we shall bring our subscription back to \$1.00 per year just as soon as the prices drop and our publishers can renew their old prices with us. We hope that this may be by the beginning of the next volume, which will be May, 1918.

Our books will remain at the same price as formerly, as they were brought out at a time when the prices had not advanced to such a degree.

Although there has been an advance in the price of paper since we made the special offer on our forthcoming book on "Practice," we shall stand by the offer made and fill all orders at the prices quoted up to the time of publication. (See publicity page XIII for order blank.)