

# LISTEN

A Journal of Better Living



To Beat,  
or Not to Beat?



# LISTEN

Journal of Better Living

## Getting to the Root



Myriad reasons have been advanced for our present drug problem in society. Some blame it on parental incompetence, some say it's because schools fail to teach well, others claim that our churches have not done right, still others put the responsibility on youth or on government or on the communications media.

Perhaps each of these groups is involved in the blame—all of them could do better. However, it does no good to

accuse one group, or for that matter several groups. It does better to look closely to our basic concepts and philosophy of life. Anything else is merely cutting the limbs off the tree instead of getting at the roots.

Dr. Abraham Kaplan is one authority who gets at the roots. This University of Michigan philosophy teacher lays the blame on our "exaggerated emphasis on inner subjective needs" and on "a sick devotion to the present moment."

"If you take a person for whom feeling is more important than thought and action," he says, "a person who says his inner subjective self has greater value than the outside world, a person who denies the past and fears the future, you've got a potential addict on your hands."

And he adds, "If the drug is there and you are such a person, you will get hooked."

In other words, society's problem is, bluntly, selfishness—putting our own interests and desires first. It's a well-known fact that the more a person becomes involved in drugs, most any drug, the more self-centered he becomes. Everything in his world is evaluated only in the light of its benefit to him.

Dr. Kaplan also observes that "instead of learning to live with some pain and using it as a constructive instrument, we take a pill instead."

Another cause of our current enigma is our insistence that all that counts is the present moment, the here and now, according to Dr. Kaplan. "We are hooked on now-ness, and we scoff at history as something irrelevant."

Further, he points out a sound psychological principle when he says that an important part of growing up is the capacity to postpone gratification. "We thought we could kid our youngsters into believing that living is easy, that all they had to do was take the right pill, smoke the right cigarette, drink the right brand of beer." It is this kind of "infantilism," he says, that is now bringing us to the realization that "life cannot be capsulized and swallowed in ecstasy without great and lingering agony."

With such a situation before us, is there any hope? Dr. Kaplan expresses some good common sense when he says, "I affirm a life of thought and action in a real world, a life of joy which comes from working and loving. It is precisely because drug abusers do not know such joy that we must love and understand and help them to find the way back to such a life."

*Francis A. Soper*

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6840 Eastern Ave., N.W., Washington, D.C. 20012

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Pacific Press Publishing Association, 1350 Villa Street, Mountain View, California 94040

### Subscription

Yearly subscription, United States, its possessions, and Canada, \$5.00; single copy, 50 cents. To countries taking extra postage, \$5.25; single copy, 50 cents.

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LISTEN, monthly journal of better living (twelve issues a year), provides a vigorous, positive educational approach to the problems arising out of the use of tobacco, alcohol, and narcotics. It is utilized nationally by Narcotics Education, Inc., also by many organizations in the field of rehabilitation. Second-class mail privileges authorized at Mountain View, California. Form 3579 requested. Printed in the United States of America.



# Your Body's Pump



The body has a quota of about five quarts of blood. The duty of the heart is to keep this quota circulating through the body to assist all the busy cells.

Your faithful heart beats automatically, without any instructions from you. Under average conditions it beats about seventy times per minute. But during times of excitement or physical exertion the body needs extra oxygen and nourishment from the bloodstream. Then the heartbeat speeds up to satisfy the demands.

The heart is a fist of tough thick muscle that works as a pump. It is, of course, the powerhouse of the circulation system that carries blood to every part of the body.

This system is an unbroken network of about 100,000 miles of large and small blood vessels. The purpose of the streaming blood is to supply cells with fresh oxygen and food and to gather up their waste carbon dioxide and other wastes. The heart keeps the system pulsing around the circuit. With each lub-dub beat it gathers used blood, sends it to the lungs, and pulses a supply of refreshed blood on its way.

## Muscles Give Power

This tireless powerhouse is run by the power of muscles in its thick outer walls. With each beat, these muscles relax and contract together like a mighty little fist. Actually the heart is a double pump with a sturdy wall that separates the inside into two parts.

The right side copes with the used blood, the left side with fresh blood—and the two may not be mixed. Each half has two compartments—an upstairs atrium and a downstairs ventricle. The atria and ventricles are connected by trapdoor valves. More complicated valves control the blood traffic that flows to and from the large vessels connected to the heart.

The heart begins each beat with a brief moment of relaxation. On the right side, a valve is open to let in used blood from a major vein. On the left side, valves are open to let fresh blood, recharged with oxygen, flow in from the lungs. In a moment, the upstairs atria are filled—the right side with used blood, and the left side with fresh blood. Then the mighty little pump begins to contract its fist.

First the atria squeeze tight. This forces open the trapdoors to let the blood flow down into the ventricles. Then the fist contracts downstairs, forcing the blood up with a mighty shove. On the right side, the chamber of used blood is pushed through a vessel that carries it to the lungs. On the left side, the chamber full of fresh blood is pumped through a trapdoor into the aorta. This is the major artery that courses the blood on its way through the network of tubes and tunnels.

## Sides Work Together

The double pump works in harmony with each beat. The right side of the heart gathers its chamber full of used blood and sends it to the lungs, while the left side gathers fresh blood from the lungs and pulses it through the body.

Nobody has invented a mechanical pump that can match the sturdy, fist-sized human heart. The work it does has been estimated in terms of lifting power. During an average hour, your pulsing heart does enough work to lift a ton weight five feet above the ground.



# Smoking and the Heart

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**HEART ATTACK!** One of the most frequent diseases to afflict modern man in Western countries, a disease most dramatic in its manifestations and most deadly, is coronary atherosclerosis.

The medical picture is all too common; perhaps the victim is a businessman in his early fifties hurrying back to his office after a hearty noon meal, when suddenly he stops, clutching his chest, immobilized by agonizing viselike pain—a typical heart attack. Previous to this he may have had only a few gentle reminders that all was not well with his heart; possibly some pain beneath his breastbone increasing in severity and frequency through the past few weeks.

But there may have been no previous warning of imminent disaster, the first attack striking him down immediately or culminating in death within an hour. Or he may have only sufficient time to be rushed to a hospital and to notify relatives before the end comes some hours later. More than half the cases, however, slowly recover from this initial episode, to succumb to a second or third attack some months or years later.

In the United States heart attack kills more people than does any other single disease. Its annual toll exceeds 600,000 lives.

A few decades ago this disease was common only in the older ages—the sixties and fifties. Today it is also seen in the forties and even in the thirties.

## What Causes a Heart Attack?

What is the immediate cause of such a disaster? The heart is a muscular pump about the size of your fist, which by beating a little faster than once every second—over 100,000 times a day—forces the blood with its oxygen and nutrients to all parts of the body.

Like all other muscles, the heart requires periods of rest (a fraction of a second between beats) and a continual supply of life-giving elements, for it must work twice as hard as the leg muscles of a person who is running. The heart obtains its own supplies, not from the blood in its large chambers, but from its own arteries, the coronaries which branch off to supply the heart muscle, from the first part of the aorta, the main artery into which the heart pumps the fresh blood.

Normally these coronary arteries are wide open and can further dilate or enlarge in order to carry

more blood to the heart muscle in times of greater demand such as during running or heavy physical work. If, for some reason, a branch of the coronary artery becomes so narrowed that it cannot carry enough blood to the heart, that part of the muscle stops working. The regular contractions of the entire heart may become disorganized and cause sudden death.

Or, more frequently, while that small area of the heart muscle supplied by the plugged artery softens and literally dies, the rest of the heart is able to withstand the shock, and though crippled, continues its work. Later the "dead" area is replaced with scar tissue.

Although medical scientists cannot explain with positive assurance the sequence of events and the exact cause of a coronary "heart attack," studies of thousands of such cases have emphasized the importance of several factors in the cause and progression of this disease, from its beginning stages, possibly in early years, to its eventual climax.

The two most important of these "background" conditions which set the stage for the killing attack are cigarette smoking and a high level of cholesterol in the blood. Other important factors include high blood pressure, obesity, and lack of physical exercise. Although heredity—a history of heart disease among other members of the family—may also play a part, we are here more concerned with those factors that are subject to preventive care.

What evidence indicates that cigarettes are involved in coronary heart attacks? One logical approach to this question is to compare the frequency and severity of atherosclerosis as seen in smokers with that seen in nonsmokers.

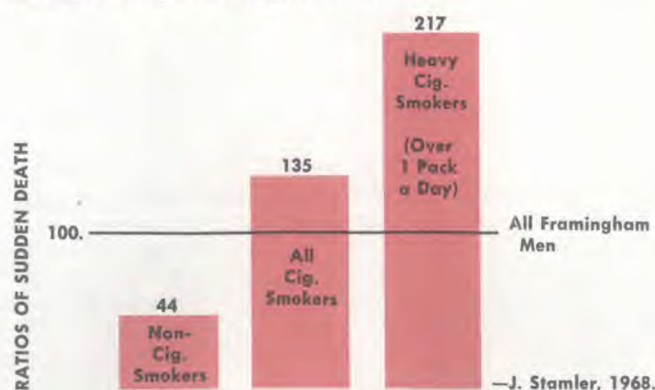
## Where Does Smoking Fit In?

D. L. Sackett<sup>1</sup> reported 1,019 consecutive autopsy studies conducted at a large cancer hospital, the Roswell Park Memorial Institute at Buffalo. This series showed that the severity of aortic atherosclerosis increases with both the rate of smoking (packs per day) and the duration (number of years) of cigarette smoking. Ex-smokers in this series showed a level of this disease intermediate between that of nonsmokers and "current users" of cigarettes. Death rates from coronary heart disease parallel these findings.<sup>2,3</sup>



Fig. 1.

Smoking Status at Initial Examination, and Ratios of Sudden Death From Heart Attack; 12-year Follow-up of Men, Originally aged 30-62.



In certain age groups, the hazard is especially high. Sir George Godber, chief medical officer of the Department of Health, London, points out that among heavy cigarette smokers, aged forty to forty-nine, the death rate from coronary disease is nearly four times that of nonsmokers. Although Sir George may spell it "programme," he has the happy facility of squeezing the air out of those ten-shilling words and expressing it in language that is readily understood. Note this, on overall death rates: The man smoking a pack a day from the age of twenty can expect to live five years less than the nonsmoker of similar age. The two-pack-a-day man can expect eight years less.<sup>4,5</sup>

Recent studies indicate that one factor in cigarette smoke which may be at least partly responsible for the development of coronary disease is the poisonous carbon monoxide which is formed during the smoking process. This gas combines with hemoglobin, thus taking the place of life-giving oxygen and preventing its transport to the tissues. This bond of carbon monoxide with hemoglobin is much stronger than that of oxygen, and only a small concentration of the poison is sufficient to suffocate the tissues.

This poison is also found in exhaust fumes from automobiles and may be detected in ordinary city air. B. D. Dinman, at the Institute of Industrial Health, University of Michigan, reports that the concentration of carbon monoxide in city air rarely exceeds 30 ppm (parts per million), while mainstream cigarette smoke contains 400 to 40,000 ppm. Thus about 3 percent of the hemoglobin of a light smoker is saturated with carbon monoxide and that of a heavy smoker about 8 percent, a level sufficient to impair further the function of a diseased heart. To that extent it inactivates this vital pigment, hemoglobin, decreasing its ability to transport oxygen to the heart and other tissues.<sup>6</sup>

## A Double-edged Sword

Cigarettes represent a double-edged sword aimed at the heart. Not only does smoking increase the severity of atherosclerosis, gradually clogging the arteries to the heart, but it also increases the likelihood of blood clot, so often the final step in blocking the coronary artery.

For several years the National Heart Institute has

sponsored an ongoing study of the development of diseases of the heart and blood vessels among over 5,000 men and women (two thirds of the adult population) of Framingham, Massachusetts. This continuing survey is shedding much light on this serious health problem.

Consider the incidence of sudden death (within one hour) from heart attack (Fig. 1). These data from the continuing Framingham heart studies show that this risk is increased for cigarette smokers in general, and particularly for heavy smokers using over a pack a day. Note that for all cigarette smokers the risk of sudden death is three times that for non-smokers. And for smokers using over a pack of cigarettes a day the risk is about five times that for non-smokers.<sup>7</sup> In fact, it now appears that to the smoker coronary heart disease is a greater threat than all other diseases combined.

In April, 1970, Taylor, Blackburn, Keys, Ancel, and their associates reported their five-year findings among 2,571 men aged forty to fifty-nine; employees of American railroads. Their data in Fig. 2 show that death rates from coronary heart disease alone, and those from all other causes, increased progressively with an increase in the number of cigarettes smoked per day. The coronary death rate for smokers of a pack or more of cigarettes daily was more than four times as high as that of men who had never smoked, while the death rate from all other causes among heavy smokers was a little over three times that of nonsmoking men.<sup>2</sup>

Then, to meet frankly and squarely the question: Does smoking actually cause atherosclerosis? today's answer must be, Very likely, though not positively proved.<sup>8</sup> However, from the evidence at hand it is clear that cigarette smoking does accelerate the development of atherosclerosis and does definitely increase the complications associated with this disease.

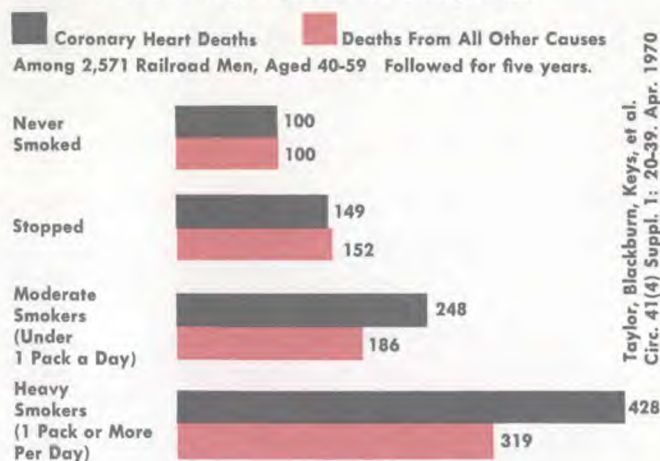
## How Does the Disease Develop?

A fatty substance, cholesterol, is present in low concentration as a normal constituent of the blood. It is either obtained from foods, especially animal fats, or it is formed by the body from other compounds.<sup>9</sup>

### SMOKING VS. RELATIVE DEATH RATES

#### Relative Death Rates

#### From All Causes, by Cigarette-smoking Habit





pounds. Cholesterol is required in small amounts by the liver to form bile and in the skin to form vitamin D.

So, while small amounts are normal and required, large amounts may be disastrous. High levels of cholesterol are commonly found in the blood during active stages of atherosclerosis, and also in those people whose diet includes a high proportion of fats, especially of the "saturated" type found in animal products such as meat, butter, eggs, milk, and cheese.

This high level of cholesterol in the blood presumably leads to the deposit of cholesterol plaques in the arterial lining, and thus would account for the close association of high cholesterol levels with the frequency of heart attacks. The average American diet has over 40 percent of its total calories from fat sources. This could well be reduced toward half that figure as a preventive measure against the likelihood of atherosclerosis.

Progressive stages in the development of the disease in the arteries can be observed with the aid of the microscope, and gross changes can be seen by the naked eye. Although this disease involves arteries throughout the body, it presents the greatest danger in the vessels to the heart and to the brain.

The first change in the artery wall may appear in childhood and is seen as a fatty yellow streak of cholesterol in the lining of the blood vessel. This may later fade away and disappear, or it may persist and build up.

If cholesterol accumulates in the arterial lining, it acts as an irritant to produce local inflammation and degeneration. The disease then passes through a critical stage—the change of the fatty streak to a fibrous plaque. Why this takes place, we do not know; but once it has occurred, it is then likely to progress farther to the third stage of serious complications, such as the deposit of hard lime salts (calcification—hardening of the arteries) or ulceration; even hemorrhage into the plaque with clot formation.

Excess cholesterol is always present in the active stages of atherosclerosis in man, and this material can be extracted from the plaques in the arterial walls. Under the microscope the plaque (atheroma) is seen to consist of fatty material and also frequently spikelike crystals of cholesterol, or elongated spaces where the crystals have dissolved out during the preparation of the slide mount.

Eventually, as the plaque increases in size, its very bulk tends to clog the artery, thus reducing the flow of blood. Rarely do these atherosclerotic plaques grow beyond a small fraction of an inch in thickness. Consequently, it would have little effect in obstructing blood flow in the aorta, which has a diameter of an inch. However, the same size plaque could completely block a small artery, such as a coronary, with disastrous results.

Because of the roughening or sometimes actual ulceration of the lining of the artery over the plaque, and with chemical changes, a blood clot may form, completely blocking the vessel.

Cases of heart attack are the result of clogging of a coronary artery by an atheroma, with adjacent blood clot, or a tiny hemorrhage in the wall of the vessel beneath the inner surface. However, in many such cases examined after death, the coronary ar-

teries will be found narrowly constricted but not entirely obstructed.

It would seem reasonable that the heart attack would occur during conditions of extreme physical activity such as running or snow shoveling when the heart is under a greatly increased load. Although excessive activity is an important factor in a few cases, it is not often thus—probably not more frequently than one time in twenty. In fact, many attacks develop during rest or sleep.

In the larger arteries, especially the abdominal aorta, these irregular, light-yellow plaques may spread to practically cover the inner surface. With progressive calcification, the plaque surface may become as brittle as a piece of eggshell. When this is flaked off, the underlying material is soft and mushy, hence the term "theroma" from the Greek "athero"—porridge or mushy. When this same process occurs in the arteries supplying the brain, the result may be either an immediate "stroke" or a gradual impairment of the higher functions of the nervous system, leading to irritability, loss of judgment, or lapses of memory—typical of senility.

## What of the Future?

The course of coronary artery occlusion (clogging) varies widely, depending upon such things as the size of the artery involved, how great the damage to the heart muscle, and the extent that neighboring arteries enlarge and take over the work of the damaged vessel.

In the most severe cases (20 percent) death occurs within an hour.<sup>7</sup> A similar number succumb within a few days. In 60 percent of the cases of first attack, the heart is able to survive the shock. Although that small area of heart muscle previously nourished by the diseased artery softens and dies, neighboring arteries enlarge to pour blood into the starved area, and within a few days scar tissue begins to replace the destroyed muscle. This scar tissue cannot cooperate in active contraction of the heart, but it reinforces the wall. So the person may very gradually resume activity, several weeks being required for sufficient development of the scar to permit moderate exercise.

Thus the patient may recover from this attack, although it will be necessary for him to adjust his way of life to the reserves of a permanently crippled heart. Once healing has occurred, and the victim is now willing to live by the simple laws of life and health, he may have a lot of good mileage left—fifteen or twenty years of it.

## How to Avoid Trouble

Are there any practical measures available by which the progress of this disease may be halted or even reversed? We have already considered the main factors which lead to heart attack—cigarettes and high blood levels of cholesterol—and have mentioned high blood pressure, obesity, and lack of exercise.

In September, 1970, Dr. J. Stamler and associates<sup>8</sup> reported the results of their study of high-risk men treated at the Chicago Coronary Prevention Evaluation Program, in which they attempted to correct these major coronary risk factors. Five hun-



dred nineteen high-risk men, aged forty to fifty-nine, agreed to participate in the prevention program for at least five years. Their death rate from coronary disease was only one half that of the comparison group, and the sudden death rate only one fourth as great.

For the very-high-risk men who were cigarette smokers, the prevention of heart attack was most closely related to two factors: stopping the use of tobacco, and modifying the diet (low in cholesterol, saturated fats, and sugars; moderate in calories, carbohydrate, total fat, and polyunsaturated fat).

Among these high-risk men who stopped smoking and also adopted the protective dietary pattern, no deaths occurred during seven years' observation. However, of eight deaths among the very-high-risk group, six were among men who failed to quit smoking cigarettes.

The experience in the Armed Forces is parallel to this. Colonel E. C. Jacobs<sup>2</sup> reported<sup>10</sup> two hundred consecutive cases of coronary heart disease which came before the Army Council of Review Boards. All of these were found to be smokers, although three had stopped smoking before their heart attack. All the others were advised to stop smoking. Of thirty-seven who did stop, no further arterial disease was noted during a two-year period of observation. However, among the 160 who continued to smoke (at a reduced rate), fifteen experienced a repeated heart attack during this relatively short two-year follow-up.

This indicates that the progress of coronary heart disease was slowed by stopping smoking, and the disease advanced when smoking was continued, even with decreased amounts of tobacco.

What this all adds up to is simply a reemphasis of those divine laws of health which God has placed within our beings. "Pure air, sunlight, abstemiousness, rest, exercise, proper diet, the use of water, trust in divine power—these are the true remedies."<sup>11</sup>

Health does not depend on chance. Disobedience of these laws brings the sure penalty of disease and earlier death. Willing obedience produces that "more abundant" life as its sure result. ●

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## Smoking and Heart Arteries

Coronary arteriography is a special X-ray study that makes it possible to see the arteries that nourish the heart muscle. This is accomplished by inserting a small hollow tube less than one-eighth inch in diameter (called a vascular catheter) into an artery in the arm or leg. The catheter is carefully advanced upward to the aorta, the great trunk artery that carries blood from the heart.

By a series of precise maneuvers with the catheter, each coronary artery is in turn filled with a clear liquid called a contrast agent, which is opaque to X rays. A rapid series of X rays is then taken—both moving pictures and still films. Thus it is possible to see the blood supply to the heart muscle—the entire coronary artery system.

Examples of a normal and an abnormal coronary arteriogram are shown.

Figure 1. This heavy-smoking forty-five-year-old chain-store executive recently began to have severe episodes of chest pain brought on by physical activity and tension. Coronary arteriography revealed narrowing of the first part of the right coronary artery at "A."



Figure 3. This illustrates a normal right coronary arteriogram.

Figure 4. A normal left coronary arteriogram contrasts with Figs. 1 and 2, which show areas of constriction.

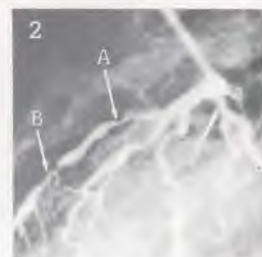


Figure 2. Several areas of severe narrowing in both major branches of the left coronary artery can be seen at "A," "B," and "C."



These coronary arteriograms were submitted by L. H. Loneragan, M.D., M.P.H., School of Health, Loma Linda University, from the service of Melvin P. Judkins, M.D., School of Medicine, Loma Linda University.



# I Learned the Hard Way

As told to Denise Tidwell

It all started about five years ago. My parents didn't want me to have anything to do with dating, and they usually had to approve of my friends. I began sneaking out of the house to be with my friends, who also had problems with their parents. Then I got into the wrong group, and we would sneak around and smoke and drink.

One day I was caught, and the school principal called my parents to take me out of school. They beat me, and they wouldn't listen when I tried to explain. When they did listen, they didn't understand.

A girl at my new school told me about a section of another city where I could live my own life. She said I could really be free. I loved my parents, but I thought I should leave. My choice hurt them, but I had to try to make it on my own.

Working after school as a clerk in a department store, I had saved a little money. I found an old couple who were going to this other city to see their son, who was in the hospital after a car accident. I told them I couldn't pay, and that I was going to visit some relatives. They didn't suspect that this was a lie; they were happy to take me along.

I was scared about leaving and must have gone through a million nightmares. After three days of tiresome traveling, we reached the city. They offered to take me to my destination, but I told them I preferred to take a bus.

When I arrived at the specified section of town, I asked about a place to stay and finally found a woman who took me in without question. She invited me to supper, and I accepted because I was hungry. The next day I asked her what I could do to repay her. She sent me to the grocery store for a few things. On my way back, I stopped for a drink at a small café. Some hippies were there, and soon we were all acquainted. I learned that this café was a hangout for them.

Months passed, and I became one of them, taking drugs and not caring whether I was clean or not. We were like one big family, living wherever we happened to be.

We were usually high on whatever we could get. Being high was a weird feeling. One time I stared at a stick on the floor, and suddenly it turned into a snake, and slithered across the floor toward me. As it came closer and closer, I began to scream, and I couldn't get away. The snake wrapped itself around me and began to squeeze. I was flipping out. Someone in the room grabbed me and started walking me around, and after what seemed like forever I calmed down.

Usually things seemed calm and beauti-

ful. I would concentrate on one thing and see things that no one else could see unless he were high too. Some people would think of heaven or be in a dream. It was a light feeling, as if we could jump as high as we wanted to, as if there were no gravity.

One night I was in the café where I had first met my friends. The record player was playing loudly, and the room was filled with smoke. I noticed a new face. She was with Jay, one of the tougher guys there. She had long blond hair and wore nice clothes. She was pretty, but I had never seen Jay with someone new before. Usually he was with one of us.

A few months later we had a pot party, using whatever kind of drugs we could get. I noticed that the girl I had seen with Jay was there. Only she was different now. She had become one of us. Then I realized what we were doing. The drugs were destroying our minds. We had to be high all the time, or collapse. Some of us existed like vegetables. I began to feel that I should stop. But that night the fuzz raided our pad, and we were all busted.

I was sent to a hospital for drug addicts. I didn't realize it, but the drugs had destroyed some of my mind. In intensive care a nurse was with me twenty-four hours a day. The hospital personnel treated me as if I had completely lost my senses! After what seemed to be eternity, and I had gone through nightmares which no one could ever think possible, I was released.

I asked myself, "Where shall I go?" I couldn't go back to my parents or to my old life with my friends. Finally I decided to go to still another city and start a new life. But somehow I couldn't leave without trying to get my friends out of the mess they were in. I felt I owed them that much.

As I came to the neighborhood, I remembered everything that had happened there. I wondered if the blond girl was still there and Jay with her. I stopped at the café. I didn't know what to expect. I stood outside for a while. Something held me back from going inside; I had been gone so long. But I went in, and everyone was happy to see me. I asked Jay, "Where is the girl with the blond hair?"

"She died last year from an overdose of heroin."

I was horror-stricken. With tears flowing down my cheeks, I pleaded with them that it wasn't worth the pain they were going through. But they wouldn't listen. They couldn't understand what I was trying to tell them. It seemed as if I was talking to a blank wall. Their minds had been affected by the drugs they had been taking, and it was impossible to get through to them.



# Sunny "Whether"

Pat Kinnaman



"Whenever my arthritis acts up, I know there's going to be a change in the weather," spoke one old-timer.

"I know it's going to snow," said another, "because my feet hurt."

Weather forecasting has progressed to a vast technological science since the turn of the century. Precise and intricate mechanisms of science enable the weatherman of today to chart the course of impending storms. If storms are severe, the weather bureau issues storm warnings to those in the paths of tornadoes and hurricanes.

However, you will still meet some old-timers who rely more on their own aches and pains than on the weather bureau. Both mediums have been known to be in error with their predictions.

The weather always makes a popular topic of conversation. You are quickly made aware that our world is populated with self-appointed weather forecasters. There's just something about the weather that is transmitted to an individual's life. Who hasn't felt the gloom that descends on a foggy day? or the tense irritability of a hot, humid summer night? or

the invigorating growth in a spring morning?

The average person has little control over the climate, such as sunshine, rain, heat, or cold. However, when you consider that weather is a part of daily living, you realize that you do have within yourself some power to control the temperamental sphere of your own influence. You can actually bring "sun" to someone's foggy day, or you can precipitate a quarrelsome storm with a friend or loved one. Doesn't that make you some kind of "whetherman"?

Did you ever count the number of times each day that you use the word whether? Whether to rise or go back to bed, whether to buy or sell, whether to work or loaf, whether to laugh or cry, whether to fight or run? Decisions, decisions, big ones and little ones, face you daily. Your decisions are responsible for your personality growth and that of those around you. How many times have you seen a hot temper cooled simply by the appearance or word of a pleasant person?

You can set the thermostat of the climate around you relative to your own climb to success or failure.

Your smile attracts smiles in return, your frown invites disagreement. If you desire stormy "whether," you can create turbulence. Your tongue can rain obscenities and abuse and nourish a crop of hate from others. A sunny disposition can bring you opportunities to meet your goals.

Don't hide under a tree of indifference when stormy "whether" thunders at you. Determine to extract the most sunlight from the situation. Then act on your decision. Silence is often construed as assent.

You can be what you want to be; you can do what you want to do. Right or wrong, the decision is up to you. Decide, and then do. Learn to say No, not only to adverse situations but also to pleasant profitable things you know might prove a hindrance to your desired progress.

The person who constantly sings "Stormy Weather" brings a lot of adverse rain into his life. If that is what you want, then let others make up your mind for you. If, however, you want to stand out instead of back, then stand up, set your course, determine your own sunny "whether."



# Teens—life can be beautiful—so why smoke?



Cough drops?  
Don't  
need them.



I shall not  
be conquered  
by habit.



Life is  
beautiful.



Now I've  
got my wind  
back.



My food  
tastes better.



I used to  
see my world  
through a cloud  
of smoke.





My gang  
loves a sweet  
breath.



My kids don't  
smoke either.



See, no more  
stained teeth.



I'm one of  
the big wheels  
now.



Save more  
money!



Now I can  
live longer.



Less risk of  
cancer and  
heart attack.





Here is your most vital organ—it deserves your best attention.

# How to Care

At a time when medical science is doing so much to combat disease and make life more livable, it seems almost helpless to stem the rapid rise of heart disease.

There is no cure for heart attacks in the same sense that an antibiotic cures an infection. The answer lies in prevention. This is a route that is simple and inexpensive, not requiring extensive treatment or costly medical bills.

Coronary disease has commanded public attention for only about thirty years. Until 1930 the number of deaths from it were so few that no record was even kept. In 1930 only 7.9 persons died from this disease out of every hundred thousand living persons. By 1960 the toll had increased to 160 deaths per hundred thousand, an increase of 2,000 percent. Over 1,300 deaths a day, more than 500,000 deaths a year, are attributed to this cause. Today coronary heart disease is the No. 1 killer, with fatalities from it still increasing.

There are many things yet to be discovered about the cause of heart attacks, but medical authorities list ten factors that have a direct bearing on their development. The more a person knows about these factors and how to control them, the more chance he has of avoiding becoming a heart victim. Once you know these principles, the responsibility rests squarely upon you to put them into effect in your own life.

## What You Can't Do!

Three of these factors, however, you have little or no control over, which makes it all the more important to be careful about the other seven. The fixed factors are—

**1. Heredity.** If your family, back to your parents and grandparents, were blessed with long life, this is fortunate for you. It gives you a running start on

the way to better health. On the other hand, if there is a history of heart disease in your family, you begin with a disadvantage, a strike against you to start with.

**2. Age.** Middle age brings an increased risk of a heart attack. When you reach forty-five your chances of such an attack begin to climb much more rapidly. Younger persons occasionally suffer attacks, but this is comparatively seldom.

**3. Sex.** Four out of five persons who die of heart attacks are men. Women, up to the time of their change of life, seem quite immune, but in their later years they begin to approach the same incidence as men.

## What You Can Do!

**1. Watch your diet—and your weight.** Calories do count—they're very important. Middle-aged men who are 20 percent overweight run two or three times the risk of fatal heart attack. Even as little as 5 percent over normal weight constitutes a significant degree of "overnutrition." Overweight hits, on the average, one in four Americans—three out of ten business executives.

And the type of diet is important. Cholesterol is a fatlike substance used by the body to produce hormones and other chemicals. Certain foods tend to produce an excess of cholesterol, which is associated with the buildup of fatty deposits in artery walls, in this way reducing the flow of blood and adding to the heart's work load.

So eat less fat, substituting polyunsaturated vegetable oils and polyunsaturated margarines for saturated fats. Avoid fatty meats, a large number of eggs (eat only two or three a week), and other high-cholesterol foods.

**2. Control your blood pressure.** Increased blood pressure and heart attacks are closely related. No





one really needs to have high blood pressure. Often overweight is associated with high blood pressure. When the weight is reduced, the blood pressure often comes down. If necessary, medications are available to help keep the blood pressure near normal.

**3. Avoid tensions and worry.** Nervous tension and emotional stress increase the blood pressure and may even raise cholesterol levels. Long periods of reacting to stress seem to increase the risk of heart attack and other heart problems.

Too much emphasis, however, can be put on this factor. Dr. Harry J. Johnson, authority on heart problems, says, "In my opinion, this matter of stress and tension has been grossly exaggerated." And he goes on, "All of us need some pressure and tension to be productive. There is always danger in overwinding a watch, but it is the tension in the spring that makes the watch run."

It is those who tend to compulsive activity over a period of time who may be more vulnerable to heart attacks. Such should make an effort toward a less hurried life, a less strenuous program.

**4. Sleep and regular rest.** The best life expectancy is found among people who average seven to eight hours of sleep a night, according to studies carried out by Dr. E. Cuyler Hammond of the American Cancer Society. Those who sleep six hours or less show a significantly higher mortality.

No direct proof relates the effect of sleep to the incidence of heart disease, but it is evident that regular rest sets the tone for a more healthy system that can better resist the inroads of heart trouble.

**5. Avoid smoking.** The evidence shows that the smoking of cigarettes is a major heart hazard. Dr. Hammond found that the risk of death from heart disease more than doubled for those who smoked a pack or more a day. There is a definite, undebatable correlation between smoking and coronary heart attacks.

To lessen your chance of such an attack, you clearly have no choice but to leave cigarettes out of your life.

**6. Obtain adequate exercise.** Arteries which supply blood to the heart improve in efficiency when exercise makes demands on them. But this does not mean going to the extreme. Some may hike fifty miles, or go in for heavy weight lifting, but these exercises are not for the average person. An ideal program is, according to Dr. Johnson, "walking, not riding, using stairs instead of escalators, and in every way moving around enough every day to maintain good circulation, muscle tone, and a general feeling of well-being."

Regularity pays off—it helps calm your nerves and control your weight. Whatever your exercise program, it should begin slowly, build up gradually, and continue daily if possible.

**7. Have regular checkups.** These serve to reveal conditions which could point to trouble later on. We hear much about curative medicine, which is essential after disease has developed. Today much emphasis is being put on preventive medicine, to avoid disease. Best of all, however, is predictive medicine, which discovers and corrects at an early date anything which later could develop into an unhealthy situation. A good suggestion is to use your birthday when it comes each year as a reminder to get a physical checkup.

In summary, the most important aspect of long life is preserving your body's pump in good condition. On the matters of age, heredity, and sex, you may not be your own master, but on the other seven major factors you can largely control your own fate. Follow carefully these simple suggestions, and the chances of your pump staying in good shape over a much longer period of time will materially increase. ●



# Mustard Seed

**Thea Trent**

There are some ways  
to get well  
that are better than pills.

**I**t is said that when midnight of 1899 struck, many called out "Happy New Century" instead of the usual "Happy New Year" greeting. Certainly the new epoch was bright with promises, among them promises of peace and prosperity.

When Cathy was two years old, the family moved to a residence town with the beautiful Spanish name meaning "The City of Our Lady, the Queen of the Angels," soon shortened to "Los Angeles." It was a charming, friendly place—street after street of homes, surrounded by flower gardens. Most of the daylight hours were golden with sunlight, and the air had special freshness from the sea. It was mild in winter, cool in summer.

Surrounding the town were many delightful orange groves, where the trees, laden with golden fruit, enchanted the tourists.

Cathy's father was a builder, and he was in his element in the rapidly developing town. But this in no way changed the simple pattern of their homelife. Childhood was different then. Toys were few and very simple. Children knew the joy of creation.

Cathy had a brother, two years older. They were friendly, even affectionate, but each had a half dozen close friends; and, of course, they were in different grades at school.

"This ought to be called 'Happy House,'" Cathy once said. "Lots of times when I come home from school, all the windows seem to be smiling!" There was no nagging or bickering; never a quarrel between the parents; for their marriage was sealed by a firm faith in God's love and by a deep tenderness and consideration.





In the first years of the new century, the town of Los Angeles began to grow rapidly. This involved cutting new streets and dividing open land into lots. This progress gave Cathy an entire new world.

**O**ne weekend Cathy could hardly wait to get her chores done. With Mamma's permission, she made a sandwich, added an orange and a cookie, and set out for her very own world. Walking up the gradual slope to a newly cut cliff, Cathy was soon enfolded by a sea of golden mustard blossoms—tall enough to hide a tall man walking through it.

The mustard finally thinned out, and Cathy saw a great expanse of fields. Here were smaller wildflowers—brilliant orange California poppies, low shafts of pale lavender and deep violet lupines with the separate blossoms shaped like miniature sweet peas.

It was a temptation to gather an armful of the many beauties, with some mustard flowers too. But Cathy knew Mamma would worry if she stayed away too long; and this first trip was to get the general look of the cliff top. Summer vacation was coming, and she and her friends could have picnics on the fields and start all kinds of collections.

The ground was almost level, and it stretched about as far as you could see. In the distance there were more mustard patches, and the ground had many clear stones that looked like crystals. Others she knew were agates. She gathered some of both for her parents and her brother. Just think how glorious to live in town, and have real country just a little way off—miles of it waiting to be explored, with not a single street or house anywhere.

**W**ait a minute! What was that almost straight ahead? In her excitement Cathy let some of her stones fall to the ground. It was a house—a house so huge it might almost be a palace. As Cathy walked closer, she saw that there was a neat hedge all around the large grounds, a low hedge that did not hide the beautiful beds of roses and many other flowering plants. The house was painted ivory white. All the windows had white

lace curtains, and the glass everywhere flashed and sparkled in the sunlight as if each window had been freshly washed.

Cathy was not a timid child, but the sudden sight of this vast dwelling, all alone on the cliff fields, almost frightened her. Was it really there?

Now she was back on the sidewalk, with a last look over her shoulder at the crest of mustard flowers high on the cliff. It was only a few blocks to her home, and she was eager to tell about her strange experience.

Suddenly she saw her brother running toward her, his freckled face flushed with excitement, and his tousled red hair wind-roughened. "Guess what, Joel?" she called to him. "I've been on the cliff where the mustard grows. You should see it! It's just beautiful, and there are lots of agates on the ground. I brought you some. But that isn't all. There's a great huge house—a palace, almost. It's all by itself in the fields—"

"Just wait a minute, will you?" her brother interrupted rather rudely. "An old house isn't anything to get all steamed up about. Just hear what I saw. I was walking back from the grocery store, and this giant auto came tearing along! It was nearly as big as a passenger car on a train. And it had front and back seats, and the ladies had their hats tied on with big scarves, and they had part of their faces covered with gray masks, and big goggles over their eyes! Steam was pouring out of the back too. A man standing next to me said it was one of the new White steamers, and he'd heard they went nearly twenty miles an hour. Just think of that! If I could only get to ride in a White steamer—just one time."

Cathy smiled at her excited brother, but she hardly heard a word he said. The great house on the cliff filled all her mind. As she went into the house, she heard the whir of the sewing machine, and the little song her mother was humming.

"Mother," Cathy said excitedly, "are you too busy to talk? I want to tell you what I saw on the cliff today."

"Yes, I have time. I want very much to hear all about your adventures. Papa telephoned, and he will be later than usual."

**I** was on the cliff that has been cut to make a new street, Mamma," Cathy began. "It was just beautiful—all the mustard blossoms and the ground sparkling with crystals and agate stones. See, I brought some for you and Papa. There were all kinds of wildflowers too. But most wonderful of all was a huge white house. Quite far off it was, and it had little towers the way they used to build houses long ago. You showed me pictures of them once, remember? Only this house was all sparkling and new-looking; the lawns and the garden were beautiful too. It looked like something magic. I was almost afraid, and I hurried home."

"That would be the Corley house," her mother said thoughtfully. "Seven years ago Pearl Corley was one of the happiest women I ever knew, and the big house was so full of joy that it seemed to sparkle. Dr. Corley was a physician. Everyone wanted to have him when they were ill, and his quiet smile would bring fresh hope to a family where there was serious illness. Both husband and wife had inherited money, and they owned much of the land you walked over today. They had one child—a son—who was ten years old when the terrible accident happened. You were just a baby then, so of course you didn't know about it."

"The doctor had a fine light rig with two perfectly matched horses. He always used this when there was a critical case, calling for top speed. The roads were narrow, but smooth and firm; and the boy, Irwin, dearly loved to ride with his father. He would take care of the team while his father was inside the house visiting the sick person."

"This night was warm and lovely, with bright stars and a full moon. The doctor reached the sick woman quickly. Soon she was much more comfortable, and the doctor and his son were flying home."

Cathy's mother stopped for a moment, and her face grew very earnest. "No one knew what frightened the horses. All we know is that the horses and carriage plunged off the road into the canyon. Dr. Corley and his son were flung out, and they were found dead. The horses were hurt, but



# Mustard Seed



they managed to drag home what was left of the rig. What a shock and anguish it must have been to the wife and mother! She came out to greet her loved ones, and saw, instead, the testimony of their death."

Cathy gasped with horror and clasped her hands.

"How awful, Mother! Oh, how awful!"

"Pearl Corley didn't seem to be able to face life alone; she longed to die herself. Since that was not God's will, she simply shut herself into the house and refused to go anywhere or to have anyone come to her. No visitor has seen the inside of the mansion since that day. It is said that she has grown very weak and stays in bed most of the time, with photographs of her husband and son on all the walls. She has many servants and a trained nurse, but what good does it do? I understand she takes very strong medicine all the time, but she doesn't get any better."

**T**hough Cathy slept soundly that night, she woke far earlier than usual. Her young brain was busy with a plan to help poor Mrs. Corley. She asked Mamma if she might pick a bunch of wildflowers and take them to the big house on the cliffs.

Her mother thought for a minute, and then she smiled. "I don't see any harm in that, dear. There's a chance she might invite a child in when she wouldn't an older person. I'm sure the maid would put the flowers in a vase and take them to Pearl."

Cathy did her morning chores quickly, not neglecting anything.

Then she put on her new light-blue cotton dress, which had small daisies embroidered on the cuffs of the short sleeves. Her golden hair hung in two long smooth braids, tied with small blue bows, and her clear blue eyes sparkled with excitement.

Walking carefully up the slope to the cliff, she chose a few perfect sprays of mustard flowers and laid them in a box lined with damp tissue paper; then a cluster of royal-purple lupines, and some pale lavender ones. There were half a dozen brilliant California poppies in different shades of orange and bronze, and ivory-white mariposa lilies. Now the little box was full, but she couldn't resist picking a small spray of the new sage, crushing it lightly so the wonderful spice perfume poured out.

There was the house! As she came near, it was almost frightening in its splendor and perfect order. As she slowly climbed the front steps, she thought, "I won't be afraid, because I'm God's messenger." But as she pressed the bell she heard a sound of weeping, as though someone were in great pain. And a woman's voice sobbed, "Telephone again! Tell the druggist I can't stand the pain. I must have the pills at once. At once!"

The front door opened, and a maid in cap and apron stood inside. "Please go away, little girl," she said in a trembling voice. "Madam is ill this morning, and she can't see anyone. Shall I give her the flowers?"

Before Cathy could answer, another voice asked between sobs, "Who is it, Hilda?"

"Please, Madam, it's a child with wildflowers she picked for you. I'll send her away."

"I wish to see the child." The voice seemed stronger now. "Invite her in."

"Thank you," Cathy whispered as she entered the room from which the voice had come—a bedroom with every luxury and comfort an important invalid could wish for. But Cathy had no eyes for any of these things. All she saw was the gaunt face on the delicate pillow, the dull, sunken eyes, the deep lines of anguish and despair.

"That is all," a sharp voice said. And the maid left the room. The silence in the room was broken

only by the soft ticking of a small clock on the mantle.

"My name is Cathy, and you used to know my mother long ago. I thought you might like some wildflowers. They are so beautiful this year." She held out the opened box. But the woman's gaze was dull and clouded. "Mother said you worked harder than anyone else in church, that you scrubbed the floors and everything—"

"Church," the dull voice reported. "I worked and prayed with all my heart, but it didn't keep my husband and son from death that night. Then I tried to die, but that didn't work out either. All I could do was take pills to make me sleep. It was the only way I could keep from going crazy."

Cathy was lifted by a sudden wave of courage. "Mrs. Corley," she said, taking one of the sick woman's hands and speaking gently. "Your loved ones wouldn't be happy if they knew how you've grieved. You must live and work in their honor. I know about those pills; we studied about them in school. You don't want them, Mrs. Corley. Just say you'll try, and I'll work and pray right with you, and you'll get well."

**C**athy put aside her other vacation plans to spend a couple of hours every morning with Mrs. Corley. What a victory when the invalid lady first got dressed and went out into the sunshine! Slowly color came back to the woman's face. She gathered wildflowers and placed a bowl of them under her favorite photograph of her husband and son. She began to enjoy walking and taking short drives. She was not yet ready to meet people. That came on a certain Sunday when, after the congregation had turned to the first hymn, Mrs. Corley walked down the aisle, one hand on Cathy's arm. The child's eyes were shining with happiness.

At the end of the service the pastor said, deeply moved, "Welcome home, dear sister."

"It was this dear child beside me who showed the way," she said, her voice strong and clear. "She truly has faith like 'a grain of mustard seed,' that faith which our Lord promised could move mountains."



# The Age of Maturity

Shirley M. Dever

"I think it's time someone wrote a new song called 'The Age of Maturity,'" John remarked, as we watched a rock group sing "The Age of Aquarius." John and Edie, his steady girl friend, had been watching television with us. We were watching some campus demonstrations which had become rock-throwing riots.

Soon we entered into a lively conversation in which a question came up, What is the age of maturity? My husband, Chuck, came up with a good answer: "Some people become mature as teens, others are never really mature."

By now my mental wheels were going clickety-clack. Didn't young people, in particular, need some way to measure their degree of maturity? How could they be expected to know when they were mature if they didn't know the requirements? After chewing this matter of maturity over in my mind, I did some studying on the subject; then I managed to come up with twenty-five loaded questions for young people. Each one can be answered with a simple Yes or No.

If you've been wondering how mature you really are, why not think about these questions? After you've given every question some serious thought and come up with an honest answer, you may have a much better idea of how mature you actually are, regardless of your chronological age. (Scoring directions at the end.)

1. When you meet someone new, do you wait for the other person to introduce himself first? Yes No
2. Are you in the habit of saying "I can't do this or that," when you know you should make a change in your habits? (Eating, drinking, dressing, et cetera.) Yes No
3. Do you constantly lament, "If only I had more time"? Yes No
4. Do you believe, at least inwardly, that you can do almost anything better than the other person? Yes No
5. When someone asks you for a favor (perhaps to serve on some committee) do you usually come up with that age-old excuse, "I'm too busy"? Yes No
6. Do you talk so much that it's almost impossible for you to listen intelligently to another person? Yes No
7. When rumors are flying, are you inclined to judge the victim by the rumor? Yes No
8. Are you unhappy unless you're constantly being entertained? Yes No
9. Do you need always to be the center of attention? Yes No
10. When you goof, do you excuse yourself by saying "I intended to do it"? Yes No
11. Does it shake you if you are ever rejected or snubbed? Yes No
12. When someone else is given credit for a group accomplishment are you likely to pop up with: "That was my idea"? Yes No

13. Do you get upset when criticized? Yes No
14. Are you inclined to aim for rather than avoid arguments? Yes No
15. Do you expect everyone you do a favor for to say, "Thank you"? Yes No
16. Do you believe you can buy a person's friendship by giving him a gift? Yes No
17. If you know you've wronged someone, is it hard for you to say, "I'm sorry"? Yes No
18. Are you quick to anger, slow to forgive and forget? Yes No
19. Is it impossible for you to keep from telling other people what to do? Yes No
20. If you definitely don't like a certain person, do you refuse to do business with him? Yes No
21. Do you go around either remarking, or thinking to yourself, "Other people sure aren't very friendly"? Yes No
22. Is it a real struggle for you to admit you're wrong? Yes No
23. Are you in the habit of breaking into group discussions with a comment like this: "I guess I ought to know what I'm talking about"? Yes No
24. If you're "going steady" engaged, or married, do you often wish that you'd picked another partner? Yes No
25. Are you a person who must always have the last word? Yes No



→ In scoring yourself, remember that only "no" answers count. On the first five questions, give yourself 2 points for each "no" answer. (These are the kind of immaturities that won't get you into too much trouble.)

On the next ten questions (six through fifteen), give yourself 3 points for each "no" answer. (These immaturities can make life a great deal more difficult, yet these are the type you can overcome if you try.)

On the last ten questions (sixteen through twenty-five), give yourself 6 points for each "no" answer. A perfect score, of course, is 100 points. If you've been perfectly honest with yourself, it will be hard to come up with an extraordinarily high score.

If you scored yourself from 80 to 100 points, you possess real maturity; 70-80 is excellent; 60-70 is good; 50-60 is fair. If you scored yourself 40 points or less, you definitely need to bone up on mature living.

In my favorite chapter of the Bible (Paul's love chapter), we find something on the subject of maturity: "When I was a child, my speech, my outlook, and my thoughts were all childish. When I grew up, I had finished with childish things." 1 Corinthians 13: 10, 11, NEB.

Recently I watched a grown woman stand up and tell off a friend at a picnic. I'm sure she believes she's mature. Yet at the moment of her outlandish outburst, the child within her took over. Before the picnic was over, a man had told his wife off in front of the others, an engaged couple had a heated argument, and a number of other adults became living proof that the child in each of us should remain concealed rather than flaunted. Occasional outbursts are usually overlooked in children, but not in adults.

So if it's maturity you're after, take a close look at the questions you gave an honest and contemplative Yes answer to. Determine to change when it is necessary. The rewards will be worth it.

The "age of maturity" isn't a chronological thing at all. It's a way of thinking, talking, and living that involves a great deal of self-control but results in unbelievable self-fulfillment. ●

## Posters by The American Heart Association





## In the Future, Maybe--Pills for No-Dreams

Nighttime chest pains and peptic ulcer attacks occur while patients dream, two sleep experts report. They suggest the possibility of no-dream drugs to ensure deeper sleep.

Dr. Anthony Kales and Dr. Joyce Kales, a husband-wife team at the University of California sleep laboratory in Los Angeles, say it is wrong to assume that sleep is a quiet affair, devoid of stress.

Brain-wave studies, capable of detecting episodes of dreaming, show how angina attacks in coronary patients and how excess secretion of acid in ulcer patients are associated with the dream state.

Since dreams are known to occur during little sleep, it is important to begin evaluating drugs that inhibit dreaming, the scientists say.

They have found that exercise several hours before bedtime will increase the deep-sleep period.

"While patients are encouraged to establish a regular bedtime hour, they are also advised not to remain in bed if they cannot sleep," say the Kales team. Patients are also instructed to maintain relaxing mental activities prior to bedtime.



For health purposes, city dwellers should reduce their physical activities to a minimum on smoggy days.

## Signs of "High" Executives

Large expense accounts and early arrivals and late departures at company parties may be signs of a successful executive, but a recent

study shows that they may also be the signs of an alcoholic executive.

Alcoholism afflicts about 3 percent of the work force and costs industry about \$3 billion annually, according to Alcoholics Anonymous. According to researcher Gordon A. Berkstresser III, it is more difficult to detect among executives.

He found that executives do not betray their alcoholism by frequent illness and lateness as lower-echelon employees tend to.

Instead, their entertainment accounts may run larger than those of nonalcoholic executives in similar positions, and they tend to dally longer at company functions where liquor is served free.

Other symptoms of alcoholic executives, discovered in the survey of more than 200 reformed alcoholics, included frequent illness and accidents in the family of the alcoholic executive, a high rate of marital problems, and a need for psychiatric help by the executive's family.

Alcoholism among executives presents industry with the problem "of having important business decisions made by executives who are addicted to mind-deteriorating alcohol," Berkstresser says.

He asserts that continued high intake levels of alcohol destroy the nerve endings in the brain.

## Health Rules for People Who Live in Smog Areas

People should get extra sleep during periods of heavy smog. They should avoid stimulating foods, drinks, and medicines that increase their pulse.

Housecleaning, shopping, and cooking should be put off if possible. That's the smog advice of Stanley N. Rokaw, M.D., the new medical director of the Tuberculosis and Respiratory Disease Association of Los Angeles County.

Dr. Rokaw says the measures he prescribes on smoggy days apply generally to everybody who lives in Los Angeles or any other smoggy place; but they apply most of all to those who suffer from bronchitis, emphysema, and other respiratory troubles, and to the very young and the very old.

Dr. Rokaw says the average citizen is the main "uncontrollable" source of air pollution.

He says all irritants should be avoided, including dust, smoke, fumes, and sprays from aerosol cans. That's the chief reason he feels housework, and even cooking, should be kept to a minimum.

The TB & RD medical director, of course, thinks the only sensible thing to do is quit smoking—at any time, but especially when it's smoggy.

"Cigarettes produce the same pollutants that plague us in our air," he says.

## Don't Wink at Drink

Drinking in America has for too long been regarded with a wink, according to Kenneth L. Eaton, a researcher from the National Institute of Mental Health.

But the consequences of its by-product—alcoholism—cost the United States some \$7 billion a year, he says.

Eaton states that there are approximately nine million alcoholics in the nation. But what the figure represents, Eaton continues, is what's important.

Alcoholics, he says, cause about 25,000 fatal car accidents a year, cut their lifespan short by 10 to 12 years on the average, injure themselves and others fatally at the rate of some 36,000 a year, and account for about 25 percent of the welfare expenditures.

Also, crime and alcoholism have a definite relationship. Police costs, he says, total about \$100 million a year, and there is "a substantive relationship between alcoholism and other forms of crime."

"Adding it up," Eaton continues, "there is a massive amount of human waste in terms of destroying lives . . . but the economic cost is becoming unbearable." The consequences of alcoholism, he estimates, cost the United States some \$7 billion a year.

"Alcoholism is no joke," Eaton says.

## Drugs Move to Grade Schools

Drug users in America are getting younger and are trying more dangerous drugs all the time, according to Federal narcotics official Robert M. Stutman.

He says two main trends in drug abuse have developed over the past several months.

First is the increasingly young age of users, who now may be of grade-school age. Second is the increase in substances with which they experiment.

Stutman says heroin addicts as young as six and pushers as young as ten are turning up with increasing frequency. "The old stereotype of the ghetto junkie is dead—many of these youngsters are from middleclass homes."

Today's drug user is likely to use a number of different drugs rather than concentrating on just one, Stutman states. A popular combination now is methamphetamine, or speed, for exhilaration, followed by heroin when the speed begins to wear off. The heroin serves to cushion the user from the "crash" that comes when the amphetamine trip ends.

At the recent Speakers for America rally in Dallas author-lecturer Dick Semaan of Houston discussed the possible causes of the American drug problem.

"We have a whole generation trying to find out what life's all about. They're faced with parents who don't have the answers, a society they don't understand and which doesn't understand them, a war that won't end, and, generally, lives that are purposeless and hopeless. "Young Americans look at the fruitless, useless cycle of life and death and decide to try anything to get satisfaction."

## In This NEWS

- ◆ What bugs teens most about adults? See page 20.
- ◆ High-rise living isn't so healthy these days. See page 21.
- ◆ What Billy Graham thinks of the longhairs. See page 22.



In business today an increasing problem is having important decisions made by executives who are addicted to a mind-destroying drug, alcohol.





## What Teens Think of Adults

Tried to fix a parking ticket lately? Run a stop sign? Called a long-haired, barefoot kid a creep?

If so, you're on the double standard. What's more, you're probably a bigot. Most of all, you're an adult who bugs teen-agers.

Such unflattering characteristics of adults were cited by youth participating in a United Press International survey.

The youth, from more than 100 coffee houses nationwide, described the offensive habits when asked: "What bugs you most about adults?"

Together, their answers present a mosaic that few adults see when they peer at their countenance in a mirror. This portrait also contains some clues to the causes—and perhaps cures—of the generation and communication gaps.

Just by resisting change, for example, adults contribute to the gaps. As Marsha Hinckley, 19, of Portland, Maine, put it:

"I dig adults for their experience, but they appear to me to gather moss after they have done the initial required searching and found a lifestyle."

Gary Gottfried, 18, of Indianapolis, Indiana, said adults resist change because "they build walls around their respective worlds."

Other adult characteristics:

- Their inability to communicate among themselves and with those of another ethnic, social, or age group—and the resultant apathy.

- Refusing to be human with younger persons, failing to realize that teen-agers have rights too. Some of those rights include freedom to have a say in their hairstyles and wardrobes.

"Though they speak of involvement with youth's problems and mankind's, they do not act; they only talk; they remain uninvolved except for words," said Dennis Bosch, of Cincinnati.

Most of the youth found such surface concern for issues, coupled with apathy, an extremely offensive trait among adults.

Gaynelle Day, 18, of New York City, said adults often have an attitude that says—"Don't worry, soon these kids will outgrow the protest nonsense and fit right into our society."

"True," she said, "we probably will become less radical as we grow older; but I do not think we'll lose our wish to better the world."

J. Kocik, 20, of Edinboro, Pennsylvania, wrote a little essay in response to the question. It goes like this:

"I am bugged by their attitude toward the young, their refusal to accept and recognize the need for change, their maintenance of the status quo (my country, right or wrong). This attitude has put us in the mess we are in now, both at home and abroad.

"We need the changes; we say so; and we are the ones shot or maced. This negative attitude toward us must change. We will not live in the fouled-up America our parents are living in. They are the unquestioning nation of sheep that blindly follow. They equal the silent majority.

"We will not be sheep. The young are gathering. Our minds are set. Our day shall come."

When the day comes for the young to have their say, don't count on all joining one camp. The younger generation has its share of apathetic types afraid to rock the establishment.

"They are like the adults who think things are impossible to change," said a girl from Detroit, Michigan. This young philosopher added: "There are possible and impossible people all over the world. There always have been. And they are all ages."

## Start Drug-Addiction Battle Early

The way to prevent teen-age drug abuse and other delinquent behavior is to pinpoint and treat early emotional ills in young children, according to testimony given to a Texas legislative committee.

Moreover, it says, the major attack on the problem must come through the public schools with the support of psychiatrists and other mental health experts.

The committee was barraged with facts, figures, and opinions. But there were two recurring themes:

1. Most teen-agers who turn to drugs or exhibit other delinquent behavior have underlying psychiatric or emotional problems.

2. Such problems are rooted in childhood and must be diagnosed and dealt with as early as possible to keep them from developing into serious mental illnesses later on.

## Smoke Still Lures Youth

Former U.S. Surgeon General Luther L. Terry says the war on cigarettes, which has helped 13 million adult Americans quit, is less than a success among the young.

"Compared with our adult population we are not achieving a corresponding decrease in the numbers of young people who are either deciding not to smoke or deciding to quit," Dr. Terry says.

"We must be ever more aggressive in involving young people in our programs," says Terry, who is chairman of the National Interagency Council on Smoking and Health.

## No Class, Color for Alcoholism

Alcoholism is no respecter of class, religion, color, or other social restrictions, or of the physician's income, intelligence, or specialty, reports Dr. LeClair Bissell of Roosevelt Hospital, New York.

For three years Dr. Bissell studied 100 alcoholic physicians who had more than a year of complete sobriety in AA. More than half of the group were specialists.

Alcoholism is a real illness and not the fault of heredity, moral turpitude, or stamina, or any special psychosomatic defects of personality, Dr. Bissell says.



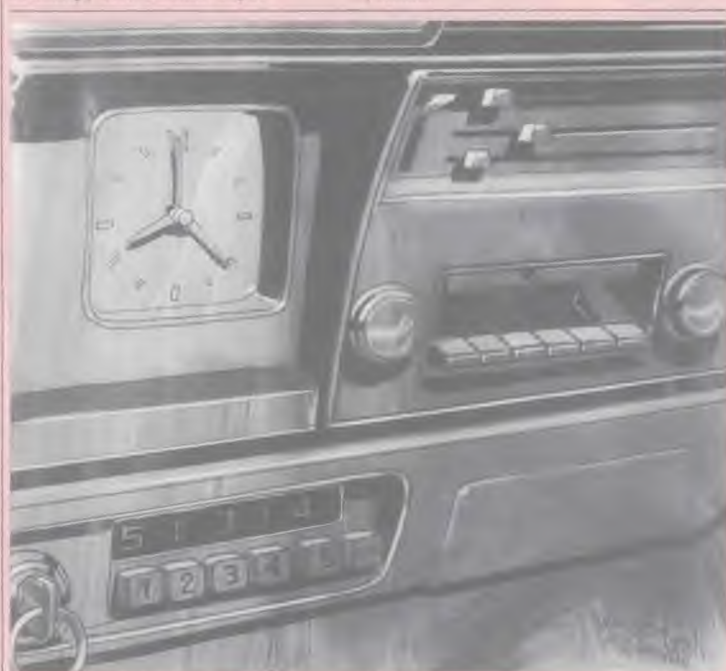
## Stoned Rats

Pregnant rats that breathed marijuana smoke to the equivalent of one cigarette a day for 10 days produced offspring with serious genetic defects, reports Dr. Vincent DePaul Lynch of St. John's University in Jamaica, Queens.

Dr. Lynch says his studies indicate that the use of marijuana could have "very serious consequences" for human reproduction.

The rats and mice in Dr. Lynch's experiments were placed in a glass-enclosed cage for three minutes and breathed marijuana smoke that was channeled to them from another container in which marijuana leaves were burning. Twenty percent of their offspring, Dr. Lynch says, were born with serious defects.

"We calculated every aspect of the experiments," he adds, so that the rats would receive "the equivalent amount of marijuana that a human being would normally consume."



An experimental physiological tester is under development by General Motors to prevent people from driving motor vehicles when their consumption of alcoholic beverages or drugs impairs driving ability. It works like this: when the driver turns his ignition key, a random number of as many as five digits is displayed for a few seconds on the miniature scoreboard. Then the numbers turn off, and the keys on the keyboard are lighted. The driver then has a short time in which to punch into the keyboard the numbers just displayed. If he does this successfully in the time allowed, and GM believes that people not under the influence of alcohol can, the car starts automatically. If the driver fails the test, he would have two more chances, with different numbers displayed for each try. If he fails the two extra times, the car could not be started for an extended period of time.





"They want to borrow you for a traffic safety advertisement."

## UN Fights Drug Abuse

The United States has formally proposed the creation of a United Nations voluntary fund to finance an emergency program to fight the abuse of drugs.

The U.S. has pledged an initial contribution of \$2 million.

John Ingersoll, U.S. delegate, told a special session of the UN Narcotic Drugs Commission that Washington hoped that contributions by governments, private organizations, and individuals to the fund would total at least \$5 million within a year.

The 24-nation commission is to mount a three-pronged international attack on what UN Secretary General U Thant termed a "universal menace to which no country is immune."

Urging the adoption of strong action against illegal narcotics production and trafficking, Thant warned that time is running out.

Any further delay, he said, "would put the solution of the drug problem beyond our grasp."

## WHAT WHERE WHY WHO WHO HOW WHEN WHAT

◆ Education provides the key to solving the growing problem of illegal drug use, according to Dr. Allan L. Seid, president of The Drug Abuse Coordinating Council of Santa Clara County. "Slowing the rising tide of drug abuse in our community must begin in the home and school with early education," Dr. Seid says. "The key to the whole problem is really in preventive rather than rehabilitative measures." (San Jose [Californian] "News")

◆ Marijuana is harmful because "it is used mostly by young people attempting to escape from reality just at the time when they are reaching out for independence," says U.S. Surgeon General Dr. Jesse L. Steinfeld. But he adds that "in this sense anything that promotes escape from reality is harmful." (AP)

◆ AFL-CIO President George Meany advises America's youthful protesters to take a lesson from trade union history and organize to accomplish constructive programs rather than spending time protesting and smoking pot. "I don't know what you are going to get with that sort of thing. But I feel that the young people have got to face up to their advantages and use their advantages instead of spending their time in endless protest against things as they are." (UPI)

◆ Do you think of yourself as normal? Or would you like to have "normal" health? More than one out of two of our so-called normal people die of heart or vascular disease, while many others have senile mental problems.

No, being normal in that sense is not good enough. What you want is an optimal state of health—a condition not likely to be associated with the "normal" occurrence of disease.

◆ Heavy drinkers who think a good diet safeguards them from brain damage may be in for a disillusionment. Tests made at the University of Florida College of Medicine on two groups of mice gave these results: Mice fed an adequate diet plus alcohol learned more slowly and forgot more quickly than those fed an adequate diet without alcohol.

◆ Walking is considered to be one of the best exercises. It is as natural to the human body as breathing. It's a muscular symphony—all the foot, leg, and hip muscles and many of the back muscles are involved. The abdominal muscles tend to contract and support their share of the weight, along with the diaphragm and rib muscles.

Then other muscles step up their action automatically—in the arms and shoulders. The shoulder and neck muscles get play as the head is held erect; the eye muscles get exercise as you look about you.

## How to Make Young Addicts

Psychedelic wallpaper, competition for grades, and sexy mannequin dolls may have something to do with an increase in drug addicts between the ages of eight and twelve—the middle years.

That's the opinion of Dr. Charles Winick, director of the American Social Health Association's program in drug dependence and abuse.

The third- to eighth-graders are turning on with a variety of substances, from glue to heroin.

Dr. Winick says the dolls, loud wallpaper, and stress from the grade race overstimulate the boys and girls and fill them with tension.

He also nixed parents who push children into early dating, including some who encourage steady dating at age nine or ten. This practice contributes to the overstimulation which may make the child seek relief by turning on with drugs.

The sexy mannequin dolls call for play involving many changes of costumes and primping for a date with a boyfriend doll.

"Many children in this age group are not ready for this kind of sexual overstimulation . . . and may turn to drug abuse," Dr. Winick says.

"It probably is not a coincidence that increase in youthful drug use in the last decade has paralleled unwitting overstimulation during these [middle] years by many parents."

Also contributing to the setup for the drug scene: the great pill push by advertising and television. "Anyone who listens to commercials or reads drug ads knows he can calm down, perk up, fall asleep, lose weight, and ease any number of pains and discomforts by taking one or another pill," Dr. Winick says.

Once you get control of the overstimulation, then also take off some of the heat where grades are concerned.

"With half the population under 27, there are more young people than ever before. As a result there is more competition among youth at every age level than we have ever experienced before in this country."

"The tension resulting from undue stress on competition is a factor in the abuse of drugs by a goodly proportion of youngsters in their middle years."

"Whatever parents and teachers can do to ease such tension will

help to reduce drug abuse."

For the youngsters he recommended ego satisfaction from sports, directed play activities, skill training, and hobbies where there is the possibility of continued improvement in performance.

"A youngster who is expressing himself in sports, music, drama, or a hobby is not immersed or drowning in the fierce competition for grades, which we know to be related to drug abuse," Dr. Winick explains.

## High Life Isn't Good

Living way up in a high-rise apartment house may be hazardous to one's health, according to Dr. Dietrich Oeter, civic health officer in Hamburg, Germany.

Dr. Oeter is warning city planners that economic and technical factors far outweigh basic human physical and psychological needs in the trend toward high-rise building projects.

Studies have shown that housewives and children living on the fourth floors of apartment houses are twice as likely to be ill as those on the ground floor, he says. Working fathers who are out of the house much of the day are not as affected by what Oeter terms "upper-floor illnesses."

Housewives who live on upper floors are more prone to mental ills, and their children more susceptible to respiratory and circulatory ailments.

Apartment blocks, Oeter says, become barriers for children too small to use the stairs or elevators on their own. Their mothers often are too busy with housework to accompany them; so the children get out into the fresh air less frequently than their playmates on the ground floor.

"The healthiest living accommo-

modation for families with children . . . continues to be the one-family house with garden," Oeter concludes. He urges tax and other reforms to bring the costs of such homes more closely into line with the pocketbook of the average family.



Modern beehive apartment buildings give rise to "upper-floor" illnesses.



# ARE YOU PUZZLED?

NAME THE TOURIST STATE Frieda M. Lease

Name the states in which these well-known tourist attractions are located.

1. Mount Rushmore Memorial \_\_\_\_\_
2. The Hermitage (Jackson Home) \_\_\_\_\_
3. U.S. Air Force Academy \_\_\_\_\_
4. Little Brown Church in the Wildwood \_\_\_\_\_
5. Mammoth Cave \_\_\_\_\_
6. Bok's Singing Tower and Sanctuary \_\_\_\_\_
7. Bellingrath Gardens \_\_\_\_\_
8. Taliesin (Frank Lloyd Wright Home) \_\_\_\_\_
9. Old French Quarter \_\_\_\_\_
10. Plymouth Rock \_\_\_\_\_
11. Grand Canyon \_\_\_\_\_
12. Isinglass Mountain (oldest mica mine in America) \_\_\_\_\_
13. Robert Burns Monument (of native granite) \_\_\_\_\_
14. Monticello (Jefferson Home) \_\_\_\_\_
15. Warm Springs Sanitarium \_\_\_\_\_
16. Crater Lake (deepest in U.S.) \_\_\_\_\_
17. Waikiki Beach \_\_\_\_\_
18. Sagamore Hill (T. Roosevelt Home) \_\_\_\_\_
19. Boys' Town \_\_\_\_\_
20. Liberty Bell \_\_\_\_\_

## More Heroin Now in Use

Youngsters across the nation are turning to heroin as an antidote to the "strung out" aftermath of amphetamine abuse, says Dr. David E. Smith, medical director at San Francisco's Haight-Ashbury Clinic.

The number of heroin addicts asking for help at the clinic has jumped 500 percent since the clinic was founded in 1967.

While nine out of ten heroin users used to be poor and members of minority races, 75 percent are now white and come from the middle and upper economic levels, he says.

A University of California at Los Angeles psychiatrist predicts that within five years society will be faced with the problem of dealing with dozens of new drugs with new mind-altering capabilities.

Dr. Smith says the clinic now sees 50 heroin patients a day—a dramatic change from only two years ago when heroin users were relatively scarce and the bulk of patients were victims of bad LSD trips or psychotic reaction from amphetamines or speed.

He says he believes the switch to heroin is directly related to the abuse of amphetamines, a class of stimulant drugs also known as uppers that can be taken either in pill form or injected. When injected it is called speed because of its fast action.

So-called speed freaks go on binges that last for as long as a week, during which their nervous system is kept at a highly excited level by the drug's constant stimulation.

Dr. Smith says these drug abusers have learned that heroin, which is a depressant, will calm them down and ease the feverish excitement that keeps them from either eating or sleeping.

Besides this pharmacological action, there is also a psychological explanation for the increasing popularity of heroin, he says.

"Heroin is a drug of despair. It fits in well with the growing pessimism of the radical youth culture. The optimism of the flower children is gone. The youngsters are moving from drugs that expand the consciousness to ones that constrict it."

## Rats Try to Find Drinking Cure

Turning rats into alcoholics may lead to a cure for alcoholism, says Dr. R. J. Senter, psychology professor at the University of Cincinnati.

"If we can cause the rats to become alcoholics, we will have a starting point in seeking a cure for alcoholism," Senter says.

He describes his latest method of inducing alcoholism in the rodents as "positive reinforcement."

The animals are kept in small, enclosed boxes with both water and an alcohol solution available. When the rat drinks the alcohol, the response triggers the release of a food pellet.

As the training progresses, the rats commonly bypass the water for the alcohol. It usually takes between fifteen and twenty minutes for the animal to become inebriated.

Senter says the rat, which normally has excellent balance, will fall off a table after about twenty minutes of drinking the alcohol solution.

Senter admits he cannot presently prove a direct link between the positive reinforcement theory for rats and the causes of human alcoholism.

"There's undoubtedly no single cause for alcoholism," he explains, "but the gaining through drink of a pleasure they can't obtain in their daily life may be a factor for some alcoholics."

Senter says he believes the alcoholic may get something from heavy drinking that the "normal" social drinker does not.

## Found: New Type of Addict

Compared with the attention being paid to alcoholism and drug abuse, very little is being done to halt the rapid rise of football "addiction" in this country.

Many Americans persist in the naive notion that football addiction is just another bad habit, such as chewing gum or cracking your knuckles. Consequently there is no great public demand for counter-measures.

Yet it is becoming increasingly clear that in terms of wasted lives and broken homes, football addiction now probably ranks as our No. 1 social problem.

"Heathcliff is like a zombie during the weekends," the wife of one football addict told me. "He just sits there vegetating in front of the television while crabgrass overruns the patio and paint flakes off the carport."

"I've tried to get professional help, but nothing seems to do any good. I don't know how much longer we can go on this way."

"Most guys don't realize how easily they can get hooked," an ex-addict says. "They think they can watch an occasional college game without becoming addicted."

"Then the next thing they know they're watching doubleheaders every Sunday, plus post-game and pre-game shows and filmed highlights of the previous week's games."

However, when I asked an official at the Justice Department whether any Governmental action was planned, he was dubious:

"The only way to deal with a situation like this is to strike at the pushers—that is, the television networks. But as long as they are protected by the 'free press' provisions in the Constitution, our hands are tied."

Is there anything that you as an individual citizen can do to show your concern? Yes. You can memorize the "five warning signs of football addiction":

- Watching more than one game within an eight-hour period.
- Watching games alone.
- Staying up past your usual bedtime to watch a game.
- Refusing to stop watching long enough to join the rest of the family for dinner.
- Buying an extra TV set so you can watch two games simultaneously.

## Graham Defends Rock, Long Hair

Young people who favor long hair and rock music have a staunch defender in a person many of them regard as a super-square.

He's evangelist Billy Graham.

"I think it's ridiculous for parents to engage in bitter battles with their children over the haircut issue," Graham says.

"Long hair or short hair is a matter of personal taste, not a basic moral question. We shouldn't judge a person by how he chooses to wear his hair."

"My grandfather had a beard down to his chest and a moustache and very long hair. His whole face looked hairy. But he was one of the most wonderful Christian men I ever knew. Hairiness was the style 75 years ago—and we're obviously back to that style now."

The Baptist evangelist, who has five children of his own, also suggests that parents listen to the lyrics of rock songs before entering a blanket condemnation of them.

"I was frankly surprised to find that a lot of rock music is deeply religious. Not necessarily religious

in the sense of referring explicitly to God or Christ. But they're asking in these songs, 'What is the purpose of my life?' 'Where did I come from?' 'Where am I going?' And those are religious questions."

Graham says it is a serious judgment on church, home, and adult society in general that so many young people have despaired of finding answers to their deepest questions about life and death.

"We are educating their minds but letting their spirits starve," he says. "We have failed to give them a faith, a creed, a philosophy that will enable them to endure the vicissitudes of life."

### Answers:

1. South Dakota; 2. Tennessee; 3. Colorado; 4. Iowa; 5. Kentucky; 6. Florida; 7. Alabama; 8. Wisconsin; 9. Louisiana; 10. Massachusetts; 11. Arizona; 12. New Hampshire; 13. Vermont; 14. Virginia; 15. Georgia; 16. Oregon; 17. Hawaii; 18. New York; 19. Nebraska; 20. Pennsylvania.



Dr. Leon Smith, animal psychologist, holds a cigarette, in holder, for a carp fish to puff on. Smith has trained many species of animals, some in his home laboratory.



# Man in a Rattrap

T. Casey Brennan

Somewhere there is a voice. I can hear it now, echoing hypnotically against the steady clap-clap of my heels on the sidewalk. It's not a real sound; it's coming from somewhere in my head, and at first I try to drown it out with other thoughts.

At last I have to listen. I can't escape those words; they are too much for me, too much for anyone. First it's a shrill, hysterical scream, then a gentle whisper, calling, always calling.

"Come to me!

"Come to me and I'll show you the way! I'll show you the way to truth—I'll show you the way to love! I'll show you the way—LSD is the way! It's God's way, it's my way, it's your way, it's our way!

"If you're weak, I'll make you strong! If you're strong, I'll make you gentle! If you're in chains, I'll make you free! If you're blind, I'll make you see! If you're sad, I'll make you happy!

"And if you're lonely, I'll give you the greatest friend a person could ever have! LSD is the way! Come to me and I'll teach you—come to me and I'll reach you! Hear my voice, hear my words, hear my love and come . . . come . . . come!"

Everything is so hazy right now. I try to track down the source of that voice, somewhere in the corridors of my mind. Then I realize it was me.

I was the one—screaming, raving, ranting, pleading, begging.

I was the one.

I stop a moment and lean against a building. It is night now; no one will notice. I reach up and brush the hair from my forehead. It's strange to feel my hair so short now, to run my hands over my face and find it beardless. The suit, the white shirt, the tie—all that is strange too.

My mind is going two ways now. Part of me is thinking: I wonder if I'll ever be able to forget. And the other part is thinking: It's going to happen soon, the thing I fear most, the thing I've dreaded even through these long months of anonymity. The thing I can never escape, no matter where I go, no matter what I think, no matter how much I curse myself for what I've done.

Recall.

The trip that never fails. The LSD that circulates through my body even now, and that will stay there till I die.

No.

I am the captain of my own soul. This time I'll stop it; this time I'll control it.

I keep telling myself that as I turn into an all-night restaurant. The waitress comes to me to take my order, a girl of maybe sixteen with scrubbed cheeks and glistening blond hair.

She smiles at me—a teen-age smile—a beautiful smile.

"What would you like?"

I try not to look at her. Then I know I must. She won't lose her smile; I have a kind face. People like me. I'm a gentle man, I am, but I didn't know . . .

I wonder if I'll ever be able to tell the whole world that I thought what I was

doing was right and just and beautiful? God help me.

"Hamburger and a glass of water, please."

And she's gone—tip-tapping away happily. Maybe I never reached her, not with all those songs, all those speeches. Maybe she was one who didn't listen. For that at least, I'm happy.

Then I remember that premonition I had. That soon I'm going to be back inside my own private hell, the hell of a recurring acid trip. They say you don't know when it will happen; but I do know, somehow.

Maybe that's the special punishment reserved for me.

The waitress returns with my order.

I try to hold my face in its same expression, not to let my eyes go wild. I grip the table firmly.

"You like me, don't you?" she asks.

"Yes," I say weakly, humbly. "Yes, I do."

"Do you think I'm beautiful? Do you think I'm innocent? Really, I'm only a child. You know that, don't you?" she asks.

I nod in response to her questions, looking downward.

"How many girls like me did you kill?"

I jerk in my chair.

"What?"

She sighs and repeats her question slowly.

"How many girls like me did you kill? How many actually died? How many are insane now? How many are ugly now, their souls and their beauty torn from them—by you?"



"I don't know how many," I gasp.

I pause, feeling her accusing eyes on me.

"I'm sorry! Look, I'm sorry! Please—please—"

There are tears running down my cheeks. I try to rub them from my eyes. It seems to help. I look around. The waitress eyes me questioningly.

"Is something wrong, sir?"

It hits me in a flash. Our conversation never happened. I said nothing; she said nothing. It was only the recall, and my guilt.

I smile up at her apologetically, and then she becomes a giant eel. There is only one thought in my mind: kill the eel. I knock it to the floor, and run out screaming, hoping it will not pursue me.

I keep running till I reach a bridge, then I stop. And realize. I'm so sorry. I hit her. I didn't want to hit her. She was so beautiful and so sweet, the last thing in the world I would have wanted to do was hit her. Why?

I'm trapped. A man in a cage. No, a rattrap of my own making. I deserve it, I think. Even if I didn't know the damage I was doing. I guess I couldn't cause all that evil and just go back to being a kind, gentle, likable man again. So it goes.

I know now there is no turning back.

I lean over the bridge and stare down at the water so far below me. I start to lose myself in my thoughts and then—

Then I realize that I am a supernatural being with the power to float through the air to the cool, comforting waters below.



# Leave the Dropouts Behind!

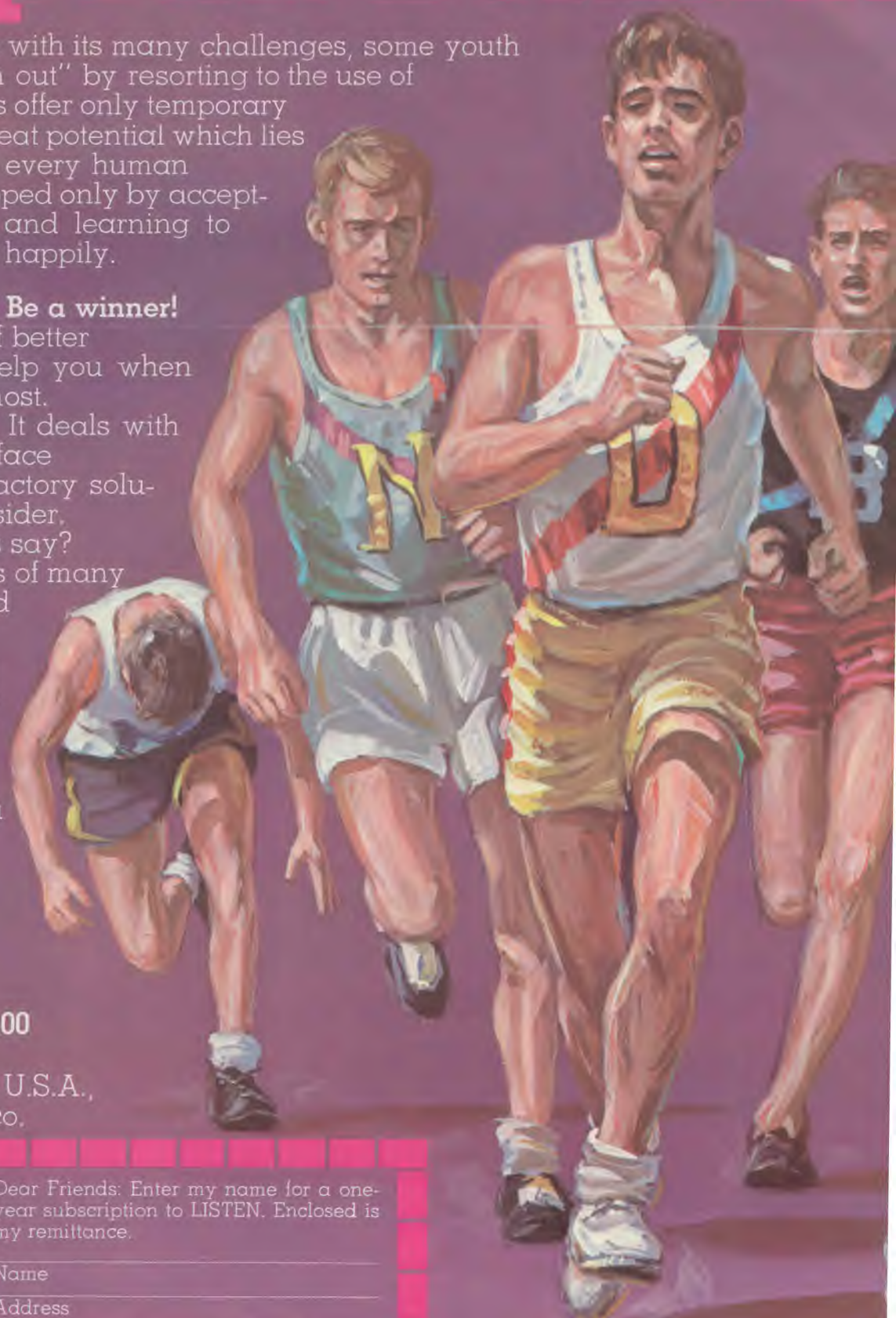
Rather than face life with its many challenges, some youth and adults "chicken out" by resorting to the use of drugs. At best drugs offer only temporary advantages. The great potential which lies within the breast of every human being can be developed only by accepting responsibilities and learning to live healthfully and happily.

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