

Herald of Health

Vol. 5

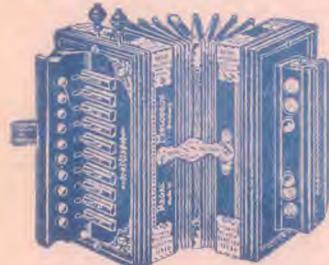
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General Articles

Hysteria---Causes and Symptoms

BY A. B. OLSEN, M. D., F. D. P. H.

HYSTERIA is a nervous disorder or neurosis of the mind, without mental derangement, which is characterized by lack of self control, chronic irritability, and the development of a long train of most varied symptoms, many of which simulate more or less other diseases and especially epilepsy, paralysis, and diseases of the sensory organs. There seems to be a condition in which the normal rhythm or functions of the mental, sensory and motor centres of the brain are interrupted or disturbed, producing a sort of arrhythmia of the nerves. It is most common amongst young women, but women of any age are liable to attack, also children, and, more rarely, men.

Causes

Hysteria is as rare among uncivilized as it is common among civilized women. Anything from ten to thirty per cent of the cases are due directly or indirectly to a bad heritage, the parents or grandparents giving a history of alcoholism, nerves, hysteria, epilepsy, insanity, or some form of nerve or brain degeneration. Accidents causing wounds of greater or less magnitude account for a very considerable number of cases. Alcoholism and toxæmias including autointoxication, are important causes of hysteria. Too much luxury and idleness, reading sickly sentimental novels, perverted habits of thought, secret vice, and sexual excess, are contributory and sometimes direct causes of hysteria, especially in susceptible individuals. Shock, and especially sudden shock, whether physical, emotional, or moral may bring on an attack. All diseases, and especially chronic disorders, which are accompanied by much pain and

physical and mental exhaustion, are liable to be followed by hysteria. In other cases, unwise education and training, and especially too much petting and coddling in childhood and youth, lead to hysteria. And then we must not forget that worry, anxiety, nerve strain, disappointment and grief, may provoke an attack of hysteria in those who are at all susceptible. Disappointment in love is not an infrequent factor in producing hysteria. Most hysterical patients suffer in varying degree from a lowered state of vitality, and sadly lack energy, vim and vigour. It is a notable fact that thoroughly healthy and sound people never suffer from hysteria.

Symptoms

It is well to remember that a patient who is suffering from some obscure nervous disease with complicated and perhaps typical symptoms, is sometimes treated for ordinary hysteria, but this, of course, is through a mistaken diagnosis.

The majority of hysterical patients lack vitality and strength in varying degree, though as a rule they are in the possession of sound organs and fair physical health. The chief trouble, and sometimes the only trouble, is in the mental outlook and the irritable state of the nerves. Although we may know that the patient is suffering from ills and aches that are more or less imaginary, still they are almost as real to the patient as genuine symptoms would be. This is particularly true of the chronic cases where many of the aches, pains, and nervous disturbances have become more or less deeply fixed through habit, and therefore still more real and genuine to the patient. There are few maladies

indeed that are not imitated by the hysteric, who no sooner hears or reads of symptoms, but imagines she has them all and can talk glibly about them.

The symptoms of hysteria are usually classified under three headings—psychic, sensory, and motor.

Psychic Symptoms

The most striking sign of hysteria is the obvious loss, more or less complete, of will-power and nerve control. The patient is extremely whimsical, emotionable, impressionable and excitable. Laughing or crying, gladness or sadness, smiles or tears, are readily forthcoming without rhyme or reason. The typical hysteric is very fond of sympathy and loves to be petted, coddled and coaxed. Her fondness for attention and caressing often causes her to feign symptoms that she does not have, for the purpose of attracting attention and obtaining sympathy. The patient is self centred, is given to introspection, and is supremely selfish and egotistic. She thinks that no-one suffers as she does, and that her complaint is unique and incurable. Lonely and unappreciated, sad and sorrowful, she imagines that the whole world is unsympathetic, and even her relatives and friends have forsaken her.

Irritability, more or less constant and chronic, with quick temper and a marked tendency to sulking when disappointed or crossed in any way, are cardinal symptoms of hysteria. The patient is constantly dissatisfied with almost everything, and is very peevish. She is quick to imagine slights or personal affronts when none were intended, and is equally quick to resent an insult, imaginary or otherwise. It is a most difficult thing to please an hysterical patient, and she never thinks that she receives sufficient attention and consideration. Hallucinations of one kind or another are rarely absent.

Hysterical patients are also subject to stupor, delirium, and may go into fits of ecstasy, or catalepsy, or a trance. Exaltation of feelings, is another symptom.

Sensory Symptoms

Most of the senses of the body are perverted one way or another. The senses of touch, temperature and pain are often dulled or may be completely absent. This loss of sensation is known as anaesthesia. The partial or complete loss of the senses is usually transient and ephemeral and takes place in various parts of the body alternately. These symptoms are often described as a more or less pronounced numbness or stiffness, as if a part were partially or completely dead.

Hyperesthesia, or an exaggerated sensitiveness of the sensory organs, is equally common, so that the patient complains of creepy sensations, tingling, stinging, pricking, cutting, stabbing, burning, and various other nondescript fixed or wandering pains and aches, either general or local. Peculiar sensitiveness to heat, cold, light, darkness, and certain sounds, not to mention noises, is almost characteristic of the hysteric. In women the breasts may be sore and tender and there is oftentimes a marked tenderness of the stomach, and the abdomen may become so sensitive and painful as to make one suspect peritonitis. A localized sharp pain of the head as if a nail were driven through the skull is one of the typical symptoms, and is known as *clavus*. Another typical symptom is the so-called *globus hystericus*, a sensation as if a ball were rising in the throat. This symptom is usually associated with some form of indigestion, which is a very common complaint, so much so that the majority of hysterics may be classed as dyspeptics. The joints become not only exceedingly tender and painful, but there may also be swelling with stiffness and limitation of movement.

Motor Symptoms

Tremors, usually of the vibratory kind, are commonly met with, and are sometimes very obstinate to deal with. There are contractures and deformities, and also numerous forms of paralysis. Hemiplegia is most often simulated. We also meet with para-

plegia, nonoplegia, and various local paralyses such as aphonia, or loss of voice, dysphagia, or inability to swallow, and retention of urine. Many of these symptoms are paroxysmal, but the patient easily becomes exhausted. The paralyses are frequently accompanied by diminished sensitiveness, or even loss of sensation in the skin. None the less the muscles do not waste, and one never gets the reaction of degeneration in these simulated paralyses.

* Epileptoid seizures, or fits that more or less closely resemble epilepsy, are commonly met with in hysterical patients. But there are no aura, that is, involuntary warnings, and consciousness is only apparently lost, although epilepsy is sometimes so closely simulated that it is most difficult to ascertain

whether the patient is conscious or not. Furthermore, the hysterical patient always contrives to fall conveniently and comfortably, preferably on a couch or upon some pillows or upon the carpet, and rarely suffers any injury, even from a bitten tongue. The patient screams or cries out, and there are more or less violent movements, but it is all obviously done on purpose.

Then there are local spasms galore, asthma in some cases, or hiccough, or the patient is taken with what appears to be a sudden and uncontrollable vomiting, and there may be phantom or imaginary tumours of the abdominal cavity which sometimes give rise to a great deal of worry on the part of the deluded patient.

(To be Concluded.)

Digestive Disorders—their Treatment

D. H. KRESS, M. D.

THE chief thing in the treatment of digestive diseases is *diet*. With proper diet, suited to the condition existing, nine tenths of the digestive disturbances disappear without medicinal treatment.

Without a corrected diet, medicines and other treatments accomplish nothing permanent. This is evidently recognized by the venders of patent medicines. On the labels of the bottles, directions regarding the diet are usually given, which, if followed, will often result in a cure. If recovery takes place, the glory, instead of being given to these wise directions, is given to the contents of the bottle.

Many of these preparations afford temporary relief from the disagreeable symptoms which may exist. They do so, not by lessening the irritation, but by their narcotic influence on the walls of the stomach. When the local narcosis passes away, the nerve terminals shriek out louder than before. This makes necessary a second dose. It is a very easy matter to establish the patent medicine habit. Many are as virtually slaves

to patent medicines as others are to whisky. In fact, it is usually the whisky in the patent medicines that these patients crave. If the changes in diet demanded on the label of the patent medicine bottles are made, recovery is more rapid and more permanent by placing the bottle on the shelf and keeping it corked.

When ulceration of the stomach exists, complete rest of that organ is indicated. Food should be withheld for from three days to that many weeks, depending upon the severity of the case. Later, non-irritating foods should be given. It is unwise to wait until an ulcer is formed and absolute rest of the organ is a matter of necessity for a period of two weeks or longer. The better way is to take this rest on the instalment plan, before this advanced stage of the disease is reached. As stated before, there are premonitory symptoms, which appear anywhere from one month to ten years before ulceration occurs. I refer to the gnawing sensation in the pit of the stomach, the voracious appetite, and later the pain which appears from one to

two hours after meals. All these indicate local irritation which if unheeded, ultimately may lead to ulceration. When these symptoms exist, foods that stimulate the production of gastric juice should be guarded against or used sparingly, also foods that tend to irritate the walls of the stomach. Among these may be mentioned the free use of salt, sugar, jellies, coarse vegetables, and brown bread. Vinegar, mustard, pepper, and such irritants must be avoided. The following foods may be used: Eggs, baked potatoes, curd cheese, milk, cream, white bread (in form of toast preferably), ripe olives, nuts (if well masticated). Olive-oil is [in some cases, perhaps.—ED.] more beneficial than butter.

When the gastric juice is deficient, it will be indicated by the coated tongue, bad breath, and symptoms of auto intoxication, as headaches, insomnia, and nervousness.

Foods that are rich in protein material and foods that readily undergo decay should be guarded against. Among these may be mentioned meats of all kinds, fats, especially butter, free use of eggs, nuts, beans, and peas. The foods which are especially indicated¹ are, wellbaked cereal foods; sweet fruits, as figs, prunes, raisins, grapes, well ripened bananas, dates, also subacid and acid fruits (these are best taken at or near the close of the meal); baked potatoes, French beans, green peas, corn, raw celery, lettuce. It is best to use the vegetables at one meal and

¹ In many cases the doctor finds it necessary to prescribe the dietary suited to the individual patient. Some of these foods would, in some cases, make the patient swell up like a balloon.—ED.

the fruits, cereals, and breads at another. A day occasionally given up to the exclusive use of fresh fruits is helpful in these cases.

It is important that foods should be relished; for a keen relish is one of the best means of stimulating the production of a superior quality of gastric juice. More attention should be given to attractiveness than to the use of coarse foods, which merely cause local irritation and the production of an inferior quality of gastric juice at best.

When there is an excessive amount of gastric juice due to stomach irritation, a certain amount of liquid at meals is beneficial,

since it dilutes the acid and lessens irritation. There is no liquid better than cold water. When there is a deficiency of gastric juice and digestion is slow, it is best to drink very little at meal-time. [Not always.—ED.] The use of an orange, some pineapple, pomelo, or some other subacid or acid fruit at or near the close of the meal quenches the thirst and at the same time supplies the acid which in the presence of the

pepsin is an aid in the digestion of the proteins.

In all forms of indigestion or dyspepsia time must be taken to thoroughly masticate the food. The saliva is a valuable digestive agent. It aids in the digestion of starchy foods and also neutralizes the acidity of the stomach contents in cases where there exists an excessive production of gastric juice. Improper mastication is probably a chief dietetic cause of all forms of indigestion and dyspepsia. It causes mechanical irritation of the walls of the stomach, delays digestion, and favours fermentation and putrefaction.



"It is very easy to establish a patent Medicine habit."

It is also responsible for overeating. Without proper mastication there is insufficient digestive stimulus.

Food should not be eaten between meals. It is frequently taken when there is not sufficient energy to carry forward the process of digestion. When fatigued or tired it is best to rest and recuperate before eating, or else eat only that which will be a very little tax to the organs of digestion. When exhausted after a hard day's physical or mental work, it would be wiser to give the system the rest needed by retiring than to force upon it a load which it is in no condition to utilize. The dull headaches and other ill feelings experienced on rising in the morning, resulting from the decay of undigested food, may thus be avoided. Moderate exercise in the open air is an aid to digestion, but violent exercise should be avoided. Care should be taken to keep the extremities warm at all times, but especially at meal-time.

It is a duty to cultivate cheerfulness.

When seated around the table spread with the bounties of life, thanks should be offered, not merely at the beginning of the meal, but all the way through. Nothing of a depressing nature should be discussed. It should be the most enjoyable occasion of the day. If you are inclined to worry after meals lest you have eaten too much, overcome this by making a mental selection of the food that is before you before beginning the meal, then eat accordingly; and when you leave the table, think no more about it; it will digest better, even if a mistake has been made in its selection or in the quantity eaten.

I have sometimes thought that those who are well-to-do and are constantly worrying about what they will eat or drink would greatly improve if more thought could be given by them to the poor who are worrying because they have not sufficient to eat. The satisfaction which comes by supplying the needs of the poor and afflicted is a wonderful tonic to the organs of digestion.

Health

BY CHARLES HENRY HAYTON, B.A., M.D.

WHAT is health? Are all the readers of this magazine enjoying the best of health? Stop and consider the importance of this matter, and along with other improvements you are apt to make at the beginning of the new year, 1915, make a few with regard to your health. Come and join the disciples of the simple life. It is conducive to the best of health.

One is inclined when looking at a robust farmer to say that he is a healthy-looking man. Why? Because he is ruddy of complexion, of good muscular build, and of splendid chest expansion. His laugh is clear and strong; his eye is bright; he has a good appetite and enjoys his food; he knows no fatigue nor pain; he is up in the wee small hours of the morning to begin his work; he enjoys perfect sleep; and from the cradle he has always enjoyed good health. One goes

into the city and sees a pale, thin, careworn-looking woman, perhaps carrying an infant, and one or two small children clinging to her skirts. One finds upon questioning that her appetite is poor, or, to use a familiar expression she is "off her food." "Tea and toast" constitute her main diet. Pain is a constant visitor; she drags through the day with the trouble and care of a large growing family, with scarce enough strength left at night to prepare for bed. She passes a restless, sleepless night. Each day is the same. Then 'tis said she has poor health. So we use the term "Health" in a number of different ways, and apply it to a number of different conditions.

What then constitutes health? wherein does the health of the farmer differ from that of the city mother?

What Is Health?

From personal observation it can be said that health is a result, an "end product," if you please, of a combination of causes. It is the effect of the continual and harmonious functioning of the whole human machinery. In other words the characteristic feature of a healthy individual is that every organ of the body is working in harmony with its neighbour and performing its separate function to the good of the whole body. Every organ also is in perfect communication with that particular part of the environment to which it is related, and the whole machinery is under the perfect control of the mind.

A man is living in contact with the earth from which he was made and from which he also derives his food and drink. He is in healthy contact with the air. He derives warmth from the sun and vigour from the wintry blasts of the North. He delights in the beauties of nature, the music of the birds, in family ties and associations. He thus is in living contact with the countless influences and actions of the world about him. He is a living, healthful part of everything he meets. Such is health. Such is the best of health. From this plane of living there is a sliding scale till we reach the bedside of the sick.

The body is composed of a great number of important organs bound together in harmonious action by the lower division of the nervous system. Each of these organs has a definite function to perform. The lungs, as the chief organs of respiration, are in close contact with the air. The stomach and intestines as the chief organs of digestion and absorption, dispose of the food and drink coming into the body. The heart and its vessels, with the fluid it bears, is in vital connection with food, water, and air. The skin, as the chief organ of excretion, is giving off twenty ounces of waste matter every day. Then there are the kidneys which secrete the urine, the liver which secretes the bile, the pancreas the pancreatic fluid, the spleen,

the thyroid gland and a host of lymphatic glands and vessels, all of which are working in perfect unison and harmony with one another.

The wonderful complex framework of the body comprises over two hundred bones of every size, shape and thickness, with the numberless ligaments, capsules, bursae, and synovial sheathes binding them together in a compact whole, especially for the support of those delicate functioning organs. Attached to this framework are the muscles of the body, the chief organs of locomotion, which enable us to transport the body whithersoever we desire.

In addition we possess the most wonderful, the most delicate and intricate nervous system of the whole animal kingdom. The cerebral hemispheres are the chief centres of the system, the cerebellum, and the basal ganglion, associate centres, the spinal cord with its grey matter, and the great nerve trunks and branching fibres scattered over the whole body, the great chain and plexuses of the sympathetic system. As a part of this great complex nervous system we have tactile, temperature, pain, muscular and articular sensation, also the special senses of smell, taste, hearing, seeing, and feeling, all of which are under the direct control of the centres and used for adapting and adjusting the body to its surroundings. Surely we are "fearfully and wonderfully made."

The question naturally arises, how best may we maintain the harmonious functioning of the bodily organs so that we may enjoy the best of health.

The axe must be laid at the root of the tree, for it is said "if the root be holy so are the branches." Therefore the first and all important duty is to guard carefully and vigilantly the different avenues of approach to the body. Nothing but plain, wholesome food should enter the stomach. The "tea and toast" diet is a starvation one. The water to quench the thirst should be pure and clean. Alcohol and tobacco taken in

any form hinder good functioning of the organs. The air one breathes should be fresh, both day and night. The ups and downs of our health have much to do with the ups and downs of the winds. The clothing in damp or wet weather should be warm and dry, and care should be taken to provide for the numerous sudden changes in the temperature at this time of the year. The mouth should be thoroughly cleansed, the teeth brushed three times daily; the hands should be frequently washed throughout the course of the day, and the whole

body given a daily bath. Daily exercises to keep the muscles in proper trim should be taken, and thus in a hundred different ways one should study to keep the internal organs in harmonious working order.

Health is simply an effect of good functioning, and good functioning is the result of a simple life. Bad functioning follows a life of excesses and results in disease. The proposition is a simple one, dear reader. Will you make the trial for the new year? Are you willing to pay the price for the best of health?

“Nothing but a Cold”

BY JOHN B. HUBER, A.M., M.D.

A ROGUE elephant must be rather an uncertain thing to get in the way of; and the chances of surviving an encounter with one should be very slight indeed and such as almost anybody had rather not take. It may be recalled, in one of Kipling's delicious memoirs of Terence Mulvaney, in the Indian service, how that illustrious fighting-man heard of a rogue elephant devastating the neighbourhood. Mulvaney, unexcelled in courage though he was, had no more desire than another to cope with the mastodon. But having gloriously steeped his soul in alcoholic stimulants he went forth quite happily and sought the beast; for his inhibitions had made him “schornful of elephants.”

Now we, in our Occidental civilization have to deal with a phenomenon considerably more dangerous than any rampant elephant—and that is the common cold. And many among our people have themselves become so steeped in certain nepenthe inducing habits (some of which will presently be enumerated) that they have become oblivious to the deadly possibilities—nay, probabilities—lurking in this “minor malady.” It's “nothing but a cold,” says he who is snivelling and snorting and coughing; yet in a dreadfully large number of cases one's hope of escaping unscathed a beast of the jungle had been better

than to have chanced the tragic consequences of the neglected cold.

To be concise: More people suffer from the common cold than from any other single ailment; and certainly there is none more likely to result in serious disease. From the common cold itself people do not come down gravely sick, nor do they die; yet “could the sum total of suffering, inconveniences, sequelæ and economic loss resulting from common colds be obtained, it would at once promote this affection from the trivial into the rank of the serious diseases.”

Among the sequelæ of the common cold (that is, the disease of which the common cold is frequently the forerunner), there are two which claim half of all the human mortality in the civilized world. These diseases are pneumonia and tuberculosis.

Beginning with the low temperature weather, pneumonia, the most seasonal of all important diseases, takes its greatest toll. Its death rate oftentimes equals, and in some communities has even exceeded, that of tuberculosis. I will here just note, to emphasize later, that merely cold weather does not yield a large number of pneumonia cases, but the changeable weather, the alternately cold and warm day, the swift meteorological changes, and the germ-harbouring dust are

not only the ideal conditions for the development of the common cold, but also those most provocative of pneumonia.

Nevertheless the record of greatest disaster lies not with pneumonia, but with tuberculosis. Pneumonia counts its victims in all life periods—infancy and childhood and old age, when it becomes a “terminal infection”; on the other hand, tuberculosis destroys pre-eminently the youth, the wage-earner in the prime of life, the mother—men and women who are doing the world's work. From adolescence up to the forty-fifth year tuberculosis has from time immemorial up to our day and generation been claiming every third or fourth adult white life, and for several centuries past every other negro adult life. Is this, then, a slight, a negligible thing to which the common cold so frequently leads?

Such a cold is itself generally (though not always) an infective process: in most cases the congestion (or the catarrh) and the accompanying symptoms are occasioned by the germ, the infective agency, making itself at home in the predisposed mucous membranes of its host. Sometimes this catarrh is not dependent upon bacteria; it may have been induced by some food irritant, or by exposure to fumes in certain trades; or one may have a psychic catarrh, merely from the apprehension of taking cold. But in most cases colds are the result of infection; in examining catarrhal discharges from the mucous membranes of the nose, throat, tonsils, trachea, and larger bronchial tubes, several germs have been isolated—the influenza germ, the micrococcus catarrhalis, and the bacillus septicus. When later the pneumococcus or the tubercle bacillus finds implantation upon soil thus made fertile, pneumonia or tuberculosis becomes the logical result.

As in all infections, there must be two factors in the evolution of most colds: the presence of the essential germ, and the predisposition. And again, as in all infections,

individuals differ greatly in susceptibility to catarrh. Many are absolutely immune; they never catch cold however much they may be exposed. Others show intense susceptibility, blowing their noses incessantly and making both themselves and their fellow-creatures miserable on the slightest provocation.

Cold weather in itself is ever salutary—provided always one is appropriately (not superabundantly) clad. I do not for a moment counsel reckless exposure to draughts (by which the body surface gets chilled) and to sudden temperature changes; yet these are but predisposing conditions, and will in most cases “bring on a cold” only in the presence of a specific germ. Arctic explorers endure for months and years sub-zero temperatures; yet they never catch cold in the Arctics, because the air there is germ-free. But when they come back to civilization, where the germs are, they not infrequently succumb.

Most people know what the symptoms are: they vary somewhat according to the seat of the trouble, whether it be in the nose, the pharynx, or the throat. Nasal obstruction, sneezing, coryza, difficulty in swallowing, loss of voice, chills and feverish sensations, pains in the bones and the joints (from the infection, or “toxemia,” in the blood). Again, it is a matter of obvious experience, and one “well-understood” of the laity that there are epidemics of colds. Colds are caught from others suffering with a cold, just as in diphtheria or any other infection. House infections and outbreaks in schools, factories, and public buildings where many people are closely associated, frequently occur and result in much suffering and loss of time and money. They are not generally fatal in themselves, these colds; but they lead not only to pneumonia and tuberculosis, but to many other organic diseases as well—rheumatism, kidney lesions, and the like.

Colds seem to be the exclusive privilege of civilization. The human race probably didn't snuffle much until it began to build houses

and to wear clothes. Next after building the houses our forefathers learned how to heat them. Then, instead of a wholesome coping with environment, instead of a healthy, hearty grappling with the elemental forces of nature, people preferred to crowd into superheated rooms. Thus began the human experience with "colds," and a lot of concomitant maladies, with a corresponding development in the science and art of medicine. For while staying overmuch in these too comfortable and superheated houses people were getting sick through constantly rebreathing their own poisonous breaths, mingled with the exhalations of the rest of the family, of the boarders, and of such animal friends as they could not bear to see suffer in the raging storms without. A very essential element in the "catching of colds" has been the disturbance of equilibrium in the body through constantly passing from the superheated house into the low outside temperatures, and *vice versa*. Here is a very important point when we consider the pathology of catching cold. Healthy living is the right adjustment of internal relations to external relations. When we speak of internal relations we mean the proper functioning of the organs and tissues of the body; by external relations we mean the part which environment plays in our lives. In a superheated room we incur a congestion of that vast "peripheral circulation" beneath the

skin. Then when we go out from such a room into a freezing temperature these peripheral capillaries are at once contracted, and the surface of the body is chilled. The blood in the body must go somewhere: and being crowded out of the capillaries it must become superabundant in the internal organs and tissues. Here is an upsetting of one's internal relations that is very predisposing to disease. Thus "catching cold" is oftentimes really catching heat. While the bodily surface is cold, its interior is unduly hot by reason of the congestion, as the clinical thermometer will demonstrate.

Our forebears, having now got themselves cosily (but enervatingly) housed, proceeded to clothe themselves more than was necessary. Then, as blessed civilization advanced the people congregated in man-made towns and cities, infectious diseases came more and more to be contracted. Clothing aided the process generously by harbouring germs, which were regularly brought into the house.

And now came that amazing superstition about poisonous night air, which led to the windows of sleeping-rooms being hermetically sealed at night (or for that matter throughout the winter). "No wonder," observed one of my colleagues, "the country air is pure, for the people keep all the bad air confined in their houses." —*In Journal of the Outdoor Life.*

(To be concluded next month.)

Tendency Toward

Fewer Prescriptions

DR. HENRY BEATES, president of the Pennsylvania State Medical Examining Board, addressing the Philadelphia branch of the American Pharmaceutical Association, said that one reason why physicians now give so few prescriptions for Galenical preparations is that they do not know how to write prescriptions; that they are ignorant of the exact action of drugs, and that this ignorance has caused the profession to resort largely to the use of ready-made proprietary mixtures. He further states that when a physician pre-

scribes a drug, he rarely knows exactly how it acts, but knows only that the patient gets better or worse. The *New York Medical Journal*, March 8, 1913, commenting on this, says:—

"This is a severe arraignment of the present-day curriculum, but it is one for which we fear there is more than a modicum of justification."

Considering the prominence of the man who makes this assertion, we think it is well worth considering, and would ask, If the

practise of medicine is so open to criticism by its own strong men; if the pharmacopœia is so untrustworthy that scarcely any physicians depend upon it, but use proprietary drugs furnished them by the houses whose main interest is to push the drugs, why in the name of sense drive to the wall those who use non-drug methods? The *Journal*, speaking of the medical colleges, says that "in many cases the tendency toward drugless therapy is reflected in the relegation of the study of *materia medica* to a less important place than it is entitled to."

If the doctors have shown a distrust of the pharmacopœia, if the schools themselves are more and more tending toward non-drug methods, can we not be assured that this is the inevitable tendency of the age? As the regular school was compelled to give up some of its earlier and cruder methods by rubbing

up against homeopathy, as it has been compelled in self-defense to take over hydrotherapy and other non-drug treatments, will not the process continue to the eventual practical overthrow of the pharmacopœia and all-drug practise as the main dependence of physicians? and would not the fight of the physicians against nostrums be much more forceful if they themselves were more completely divorced from the use of drugs, the effects of which they themselves are in ignorance?

The writer believes that eventually the regular school must choose between substituting drug therapy by non-drug therapy, or surrender the field to some competitors. Note, for instance, the astounding growth of osteopathy within the past twenty years, despite all attempt to regulate it by legislation and otherwise.

Worth While

MOST of us dread illness and suffering. But we forget that no other elements in human life so surely put a certain refining touch into our characters, provided we accept them with a smile. Then they leave their unmistakable marks of worth on our lives.

Those who rebel against sorrow, who complain, never reap its richest reward. The blessing that comes with sorrow becomes the greater only when we take the key of suffering which God Himself puts into our hands to unlock other sorrowing, suffering hearts and share with them the comfort we ourselves have received. It is easy enough to be bright and happy when everything is full of sunshine, and we are strong and vi-

gorous. But then we deserve no credit for our cheer. It is after we have been disappointed, and one thing after another has been taken away from us—our dear ones perhaps, our home, our everyday comforts, and our health and strength—it is then that God listens to hear who is singing and who is whistling cheerily. Then He picks out this man, this woman, this child as "worth while," and He works over them and watches them and caresses them with His love, for they are His chosen children—made "perfect through suffering."

"He gives His angels charge o'er them that sleep, but He Himself watches with them who wake."—*Ladies' Home Journal*.





Editorial



The Prevention of Lock-jaw (Tetanus)

This is an acute disease caused by a disease germ and characterized by a tonic spasm of the involuntary muscles of the body. Not all jaws that become locked indicate true lock-jaw, or tetanus. The germs causing true lock-jaw liberate into the system poisons which irritate the involuntary muscles holding the jaw shut. The irritation causes a spasm of the muscles, and for this reason the jaw cannot be opened. This condition existing in the muscles of the jaw is only a local manifestation of what takes place in the muscles over the whole body. Anything that would locally irritate the muscles of the jaw would bring about the same condition in the jaw, but it would not be the lock-jaw caused by tetanus. A severe attack of quinsy, a suppurating inflammation of the tissue surrounding the tonsil, will cause a locking of the jaw. The cause is about the same as it is in tetanus, only the trouble is entirely localized. The suppuration in the throat liberates poisons which are absorbed by the muscles of the jaw, which again are held in a spastic condition of contraction. Other conditions about the mouth and throat will bring about similar results; the tonsil, a filterer of disease germs, on becoming diseased allows the various germs frequenting the mouth to pass on and find their way to the muscles of the jaw where they set up an irritation. A decayed tooth with an abscess in the cavity only repeats the story. All of these conditions must be separated from the lock jaw caused by the germ, the tetanus bacillus. Nor can we take it for granted that every condition bringing about a general tonic spasm of the involuntary muscles of the body is tetanus. For example strychnine poisoning behaves very much like the poison-

ing of the toxins set free by the tetanus organism, but there are differences noticeable to the trained man that enable him to distinguish between the two conditions.

The tetanus bacillus, the primary cause of tetanus, is a rod-shaped germ, that is, it is longer than it is thick through. After the organism has been enlarged one thousand to twelve hundred times, its thickness seems to appear about size of the shank of a pin, and its length about three or four times its thickness. It is a very hardy germ as it may be deposited upon the ground, and years after is capable of giving the disease to one on gaining access to the system. Moisture seems to be all that is necessary to keep it alive. For this reason the ground is the chief source from which infection occurs.

Tetanus, like diphtheria and rabies, is a disease that carries a high mortality, but also like the above diseases is easily prevented.

This has been made possible by the untiring efforts of the scientist who has discerned that an antitoxin when given practically reduces the mortality of the disease to nil. This is only one of a many hundred instances of what animal experimentation has done for the human race. Some people would rather (apparently so at least, see their children die of small pox, diphtheria, rabies, typhoid fever, infantile paralysis, tetanus and similar diseases than to hear of a dog being used once in while for the perfection of these remedies before using them on the human being. We are glad that there are not enough of this class of people to stop the good work, and that the large majority of people can see the rationale of the procedure. From among the preventable diseases the scientist has saved thousands of lives from

infancy to old age that formerly the monster death exacted as his toll. In the future we may expect just as great an advance in this line. Diseases that we know very little about today in the future will be entirely preventable.

Tetanus is almost entirely contracted by open wounds coming in contact with the ground, all wounds that may contain ground contaminated by manure from the street, stables for animals, and even in the fields. This is why a sliding, grinding wound caused by an accident in the street is commonly followed by tetanus. Crushing accidents in machinery, wounds from blank cartridges and crackers are liable to be attended with the same disease. Old boards in which are rusty nails with the sharp points sticking upward offer a serious offense to the one who goes without shoes. A nail thus piercing the bottom of the foot is very productive of tetanus. The feet and hands are especially prone to the inflection. An old sickle which has been used for cutting grass from ground fertilized with manure, when causing a laceration in the flesh will produce similar results. An injury like any one of the above may not show any local disturbance, but break out in full force in the nervous system. Again after the injury the infection may remain dormant for some time when because of lowered vitality or some other cause the body will begin to absorb the poisons of the apparently dormant germs and manifest all of its symptoms. The circulating blood catches the toxins from the germs carries them to all parts of the body poisoning the nervous system especially. It is carried to the spinal cord when the tonic contractions of the voluntary muscles take place.

In the earlier days of surgery when catgut (The intestine of a sheep) was just beginning to be used as a suture material in operative surgery a great deal of infection was experienced as a result of its use. Upon closer investigation it was found that the sheep

whose intestines were used to make the catgut were harboring the tetanus bacillus. The catgut not being sufficiently sterilized before its use, in sewing of the incisions made in the body, started up the infection in the patient whose vitality was low because of sickness and the effects of the operation. The cause having been unearthed methods of complete sterilization of the catgut were undertaken so that now we have no trouble in this line now a days.

The symptoms of tetanus do not necessarily run a regular course. As a rule one or two weeks after the wound the disease sets in. Locally the wound suppurates and the muscles become spastic. Outside of the muscles around the wound those higher up become effected first. This gives us lock-jaw (trismus) first. Then as the process goes downward the muscles of the neck become effected and eventually the muscles of the back. By this time the body becomes so rigid that it rests itself only on the head and heels with the back bowed or curved upward from the floor. That is, the back does not rest on the floor. The arms are unaffected. Fever and sweating are marked features.

The patient is apprehensive. When the muscles of the chest are involved the patient is liable to suffocate. Like strychnine poisoning a breath of air or a noise will excite spasms. It is therefore necessary to keep the patient in dark, quiet surroundings.

Tetanus may be prevented before any symptoms put in an appearance, as well as after some of the symptoms have manifested themselves or it may be cured after the symptoms have burst forth in full force. All wounds caused by machinery, that are ground into the dirt of the street, lacerations caused by old rusty instruments that may have become contaminated by the ground containing manure, or rusty nail injuries should be immediately cleaned. All dirt should be thoroughly removed. If the wound is deep and because of its shape it is hard to get at to

clean, the wound should be enlarged and laid open so that it can be thoroughly cleaned. The dirt is nicely removed by douching the wound with hot Potassium Permanganate solution 1 to 1,500. After this has been done, several things can be done that are equally effective. Tincture of iodine, which seems to be at its maximum curve in the treatment of disease, can be used to paint not only the wound, but skin surrounding the wound. This would be the handiest thing in India. A 25 per cent. carbolic acid solution can be used to cauterize the wound. Nitric acid is also useful for the same purpose. The wound may now be dressed in one of two ways, a dry or a moist anti septic dressing. For the former a bismuth formic iodide powder, or a dusting powder made of boric acid 2 parts salicylic acid 1 part dusted over the wound and a sterile dressing applied; for the latter moisten a sterile dressing in a saturate solution of boric acid, or 70 per cent. alcohol and apply in the form of a moist dressing; the wound should not be closed. If a physician is on the scene, after the use of the tincture of iodine, it would be well as an extra precaution to inject with a hypodermic in several places into skin surrounding the wound two syringes of 1 to 1,000 Potassium Permanganate solution made up in sterile water.

The next step in the treatment, and no doubt the most important one is the use of tetanus antitoxin. It is this that has reduced the mortality of lock jaw to practically nil. It should be given by a physician although in India in places where physicians are not located, an exception might be made to this

rule. The antitoxin is made by injecting a horse with the antitoxin in increasing doses until the animal is immune to the disease. During this process the horse develops antitoxins to the disease. After the horse has become immune to the tetanus organism, blood is withdrawn from the horse. The corpuscles in the blood are separated from the serum which contains the antitoxin material. The serum is standardized according to the unit which is measured in terms of the minimum fatal dose against a guinea pig of certain gram weight. 1,500 units are injected, and, if the symptoms of the disease still progress, the dose should be repeated until the symptoms ameliorate.

According to investigation the immunity conferred upon one by the use of antitetanic serum lasts only for a period of two or three weeks. Like diphtheria its immunity is for only a short period and in the case of another accident the treatment has to be repeated. In conclusion tetanus is prevented by,

1. Thoroughly removing the dirt from wounds received in crushing accidents especially if contaminated with ground containing manure.
2. Painting the surrounding skin and wound with tincture of Iodine.
3. Two hypodermic Syringes of Potassium permanganate 1 to 1,000 solution injected into the tissues surrounding the wound.
4. The application of a dry or moist anti-septic dressing.
5. The injection of 1,500 units of antitetanic serum.
6. Avoiding closure of the wound.



Diseases and Their Peculiarities

How the Hookworm Lives and Works

THE hookworm in adult life is a small, round intestinal parasite about $\frac{1}{8}$ inch in length, and about the size of No. 30 sewing thread. As a type it is found to infect man and numerous animals, such as the dog, the fox and the cow; but the particular species infecting man have not been found in animals, nor those of the lower animals in man. Only the type infecting man will be discussed here.

The life of the hookworm is made up of two periods. During the first period the worms are microscopic in size and live in the soil. It is in the soil that they hatch from microscopic eggs (Fig. 4) which were deposited there with the excrement from some person having hookworm disease. Neither the eggs nor the larval worms hatching from the eggs can be seen with the unaided eye. These minute worms will live for perhaps ten or twelve months under favourable conditions of warmth and moisture; but they cannot develop beyond this point unless they gain entrance into the body of some human being and find their way into the intestinal canal, usually the upper portion of the small intestine. The drying heat

of the sun and the freezing weather of winter are destructive both of the development of the hookworm eggs and to the life of the larvae. For this reason the disease is rare in deserts and in countries having protracted cold weather. A porous, sandy loam soil, having reasonable shade, affords the most favoured habitat for the hookworm larvae. Though in stiff clay soil conditions are much

less favourable to these little worms, we often find that enough of them have lived and entered into the second period of their life's existence to cause heavy infection.

The second period of the hookworm's life is spent within the body of a human being. The great majority of the worms never reach this stage in their develop-

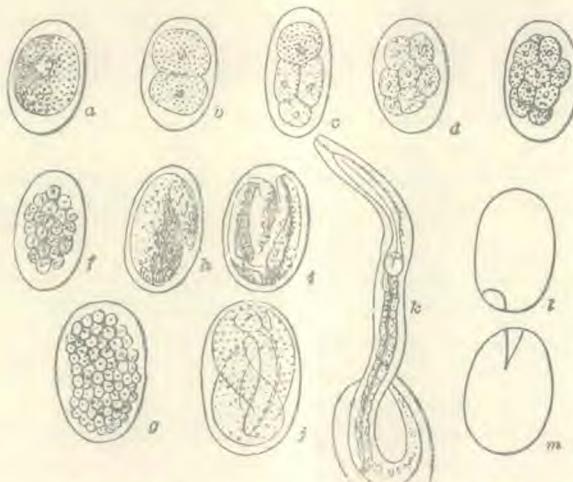


Fig. 4.—Development of Old-World hookworm: a-g, changes occurring in egg preparatory to developing of little worm; h-k, stages of the worm's development until it emerges from the egg-shell; l, m, empty egg-shells; greatly enlarged. (After Peroncito. Courtesy of C. V. Mosby Publishing Company.)

ment. In fact, many of the eggs never hatch. Yet when we stop to consider that in some localities 90 per cent. of the people are severely infected, and that each infected person will daily cast off with the excreta from one to four million eggs on the soil, we can appreciate that even with this loss it will be almost impossible for one to escape infection in a section where wastes from the

human body are not properly disposed of.

With these facts before us we at once want to know how these invisible filth-borne pests find their way to our small intestines. The answer may be a short story, but generally it is a long one.

It may be short because the little worms may cling to food which is swallowed by the unsuspecting victim. They may be carried on soiled hands; or, perhaps more frequently, may be swallowed along with uncooked foods, such as strawberries, plums, celery and lettuce, grown in or left to lie on ground polluted by human exceta.

Though some infection is thus taken through the mouth, the most of it is acquired through the skin in a very interesting way. In brief, this is the story of the hookworm's most common progress: Within a week of the hatching of the larvae they molt and shed their skin twice. They are protected by the second sheath, and are very tough. In this stage they possess the wonderful ability to burrow (Fig. 5) in a few minutes through the skin and to enter the tiny blood capillaries, where, carried along by the blood current, they make a long journey through the body to the heart and to the lungs. In the lungs the blood vessels are too small to permit them to pass through, so they begin to burrow again, and soon find themselves in the air-spaces of the lungs. Crawling along these they reach the wind-pipe and then the throat. Once there the worms are swallowed with saliva and food, and thus by this long journey find their way to the intestine,

where they fasten on its walls and begin their blood-sucking.

One would think that the hookworms would have great difficulty in penetrating the skin and the blood vessels in the lung, yet they do it. The fact can be easily demonstrated by experiment. If the polluted soil in which the larvae are known to be is moistened and applied to the skin, the point at which they enter will become inflamed and an eruption will appear, which is commonly known to the barefoot boys and girls as "ground-itch." Moreover, by the end of eight weeks, examination and treatment will show the person to be harbouring adult hookworms, even though it may have been demonstrated that he was not infected up to the time he was brought in contact with the polluted soil. It should be remembered that the presence of "ground-itch" or "dew-itch," even though the skin may heal quickly, usually means that hookworms have entered the body and are beginning to rob the victim of his blood and vitality.

The second period in the life history of the hookworms begins with their entrance into the intestinal canal. There the male and female worms, after molting twice again, develop to adult life. From five to eight weeks is usually required for their growth. When grown they may usually be seen with the unaided eye. At this stage they fasten on the wall of the intestine, live for many years, and do the harm to be described next. Besides this the females deposit thousands of eggs, which, being mixed with the excreta pass out on the ground to spread the disease.



Mother and Child

"TARLEY'S MAMMA"

A BABY came into our lives one day—
An orphaned baby not yet two—
And because he worshipped my brown-eyed boy,
He, mimicking, called me "Mamma" too.
"Stop that!" the Heir Apparent cried,
As he knitted his brow in a fury fine;
"I gave you my crib and my hobby horse,
But you can't have my Mamma: SHE'S all
mine!"

The soft lips quivered, the bright eyes filled,
And "TARLEY's Mamma," he whispered low,
Learning the lesson his idol set
And holding it stoutly through weal and woe,
So whether he ravaged the strawberry bed,
Or chased the chickens in impish glee,
Or played like a cherub new-fledged, the call,
"Tarley's Mamma," rang up to me.

I made no protest; Love is a flower
That with forcing dies, and I knew my own:
So I bided my time through the summer hours,
While the breezes sang and the bright sun
shone:
And just at the end there came a day,
When the merry baby lay hot and still
And the doctor talked in a solemn way
And looked solemn yet—as doctors will.

Close to my knee crept my little lad,
With a piteous, tear-choked tale to tell:
"I'm sorry I ever was mean to him,
And him so little. If he'll get well
I'll give him my soldiers, my very best,
And my truly gun and my fish-pole too.
And—I said I wouldn't, but now I will—
Mamma, I'll give him HALF of you!"

Who can measure Love's power? In his little
crib
The languid baby stirred and smiled,
And the flame of the fever flickered low
As he held out his arms to the older child;
Then, holding him close with one dimpled hand,
"Tarley, Tarley, me loves you!"
He stretched the other to me and smiled.
Tarley's Mamma MY Mamma too!"

—By Eleanor Dungan Wood.

"In crises, decisions are made quickly. Many fail at such times, because they do not have independent Christian characters."

REMEDIES FOR THE BABY

For a Burn

CARRON OIL should be kept on hand for burns. Make it by shaking equal parts of lime-water and olive-oil together until they form a milky-looking emulsion. Apply on a clean cloth. Vaseline, olive oil, butter, or lard can be used until the other is ready, or for a slight burn.

For a Cut

Bathe a cut with hot water; if bleeding much, pack on baking-soda and bandage rather tightly; if blood comes in spurts from an artery, tie firmly between the cut and the heart, bandage the place, and send for a doctor.

For Sick Stomach

If sick stomach comes from overeating, stop all food, and give a teaspoonful of lime-water in milk every half-hour. Feed thin milk two hours after vomiting stops. If there is diarrhoea and vomiting, send at once for the doctor.

For Loose Bowels

Give a teaspoonful of castor-oil; but if it is possible to do so, get the doctor at once, especially in the summer, for a diarrhoeal condition may in a few hours get so serious that even the doctors may not be able to do anything for the child.

For Constipation

Feed between the regular feedings sweet cream, orange-juice, prune syrup, or strained oatmeal gruel made from long-cooked oats.

For Eczema

Avoid all soap over eczema spots, clean with olive oil, and if the surface is moist and angry, dust with talcum powder, preferably the borated talcum. Keep the child from scratching the spots. In case of eczemas, one can almost be certain that there is something in the diet that needs correcting.

For Heat Rash, Stomach Rash, Hives

For any such eruption first give a dose of castor-oil, then dab moist baking soda over the irritated skin and let it dry on. Repeat this often if there is itching. Give orange-juice between feedings.

To Remove a Splinter

Heat the end of a needle red hot; when cold, pick out the splinter with it. Drop a little peroxid of hydrogen on the place.

For a Dog or a Cat Scratch

Wash the wound and drop peroxid of hydrogen on it. Always keep this in the house (and bandages, too), as it is very cleansing and healing. A four ounce bottle costs but a few annas.

Contagious Diseases

Mothers should know how to distinguish contagious diseases from ordinary heat rash or a rash caused by indigestion. If there is any doubt, call a doctor. Some grow worse so rapidly that the patient gets beyond help before the doctor sees him. I have personally known two lovely girls to die because the parents did not know for a week that their daughters had diphtheria.

Diphtheria

This comes on suddenly, with fever, sore throat, vomiting, and pains in the back and limbs. On examination the throat shows white spots. Children less than a year old or nursing babies seldom contract the disease. It is very contagious and one should step aside when the patient coughs. The eyes as well as the mouth take the germs. In severe cases of croupy cough, examine the throat for white spots. Membranous croup is one of the worst forms of diphtheria.

If a child has been exposed to diphtheria or the disease is present in the neighbourhood, have him gargle his throat every day with peroxid and water or salt and water; if the child is too young to gargle, wash the mouth with a clean cloth dipped in a peroxid solution.

If the baby is already sick from diphtheria, send for the doctor, and get a room ready to keep the child separate from the rest

of the family. Remove all unnecessary furniture. Make a pail of water milky looking with creolin, and go over the floor and furniture with a damp cloth wrung from the water. Washing-soda or soap can be used if creolin is not at hand. While waiting for the doctor, inject warm water into the bowels to clean them out.

Scarlet Fever

Scarlet fever is also very serious and very contagious; sometimes the case develops so fast that the patient dies in a few days. Others have it very lightly. All should be kept isolated, and stay in bed while the rash is out. Later the skin dries and peels, and the child should stay alone until the doctor says it is no longer likely to transmit the disease.

Scarlet fever comes on suddenly; the child complains of sore throat; sometimes this symptom is very severe. Vomiting usually is severe at first. The rash appears in fine, bright-red pimples about the third day, first on the front of the neck and around the armpits. The chin, nose, and mouth are free from rash. A physician should always be called, as dangerous complications occur.

Measles

The disease is usually considered mild, but often there are complications that make it dangerous, and even fatal. The patient should stay in bed, in a partly darkened room, with the eyes shielded from the light, until the rash is gone. The purplish-red rash appears first on the face, the spots being about the size of a split pea. The eyes and nose run, and there is a cough.

German Measles

The rash of German measles resembles that of measles, but is rose-coloured and disappears a minute after pressure. The glands back of the ears and under the chin swell about the time the rash appears. It is the mildest of all these diseases, and needs no treatment. Keep the child indoors while the rash is out.

(Concluded on Page 306)



A Few Wholesome Breads

GEORGE E. CORNFORTH

BREAD is such a valuable article of diet, and fills so important a place in the diet, especially of those who do not use flesh foods, that I venture to write again on the subject; and another reason for writing again on this subject is that I may tell about several new breads which we have discovered since the previous articles were published. I say "we have discovered," because I did not originate all the recipes that I shall give. Some of them came from the fertile mind of one of my valued helpers. In this article I shall confine myself to explaining the making of beaten biscuits, and variations of beaten biscuits, and in the article following shall give recipes for a variety of other breads.

Maryland Beaten Biscuits

For several years I desired to know how to make Maryland beaten biscuits. I had known of such biscuits by reputation and had read recipes for making them, but knowing neither what they looked like nor what they tasted like, nor whether they should be hard or soft, solid or spongy, I did not know what to make from the recipes. But one day a circular came to me advertising some foods of which the shop that sent out the circular made a specialty, and among the things advertised were Maryland beaten biscuits. I at once determined that I would have some of those biscuits, and at my first opportunity I visited the shop. On inquiring their price I was told that they were Rs. 1-2 a dozen, that is, six pice each; and when I received them, I found they were a little larger around than an eight anna piece, and a little more than half an inch thick. Then I realized that they had a reputation. And when I got home to further test them, I

ate one (for "the proof of the pudding is in the eating"). Then I went to experimenting, knowing what I wanted to produce, and was not long in making something which was fully equal to the sample, and now I shall give my readers the benefit of my experience. For fifteen biscuits the ingredients are as follows:—

1 pint sifted bread flour
¼ cup cold cooking-oil
½ cup ice-water
½ slightly rounded teaspoon salt

A smaller proportion of oil and a little more water may be used, if desired, but the biscuits will not be quite so tender.

And this is the method of making the dough: put the oil and salt into a mixing bowl and beat the oil vigorously with a batter whip while the ice-water is slowly poured into it. As the water is beaten into the oil, the mixture turns white and becomes somewhat thick. Have the flour all ready, sifted and measured, in another bowl. Pour a little of the oil-and-water mixture into the flour and mix into a dough with a fork. Then pour on a little more of the oil and water, and mix to a dough. Continue thus till the oil and water are all added and you have a ragged dough formed. Gather these pieces together and knead them into a ball. This makes a very stiff dough, which is as it should be. The dough must be just as stiff as can be worked, and it will make very good biscuits if it is thoroughly kneaded and then rolled out and cut into biscuits, pricked with a fork, and baked in a slow oven. The dough may also be kneaded, by grinding it several times through a food chopper. By the original method of working, the dough was beaten with a wooden mallet, and I think this gives the nicest texture to the biscuits. The dough is placed on a solid block and with a mallet, wooden potato masher, or rolling pin, beaten out into a sheet. It is then folded up, beaten around the edge to hold the

air in, and then beaten out flat again. This process is continued till the dough is thoroughly kneaded and will snap when a little piece is quickly pulled off. The dough is then rolled out one-third inch thick and cut into small biscuits, pricked with a fork, and baked in a moderate oven. If they are baked in too hot an oven, they will be done on the outside before they are baked through, and will be soggy inside.

When properly made and baked, they will be hard but tender and crisp and easily masticated. Their hardness is a quality that is in their favour, because it compels mastication. But before one has tried them, they may seem somewhat formidable and not very inviting, especially to one who has long been used to eating soft bread. They drop on the table with a thud, which suggests that their interior can hardly be worth the effort required to explore it, but once one has "broken the crust," he finds something which invites him to masticate and taste still further. While we were experimenting on the making of these biscuits, some were made which did require some effort in order to get at their contents. One of our young men found some of the biscuits lying on a shelf, and after several efforts at cracking one, said, "Where are the directions that go with these things?" But we soon learned to make them so that they would invite one's investigation rather than repel it, especially after one once gets a taste. If this recipe is followed, no fears

need be entertained that the results will be anything but satisfactory.

To make whole-wheat beaten biscuits use a scant pint of sifted whole-wheat flour in place of the white flour. To make oatmeal beaten biscuits, grind rolled oats through a coffee-mill or a food chopper with a sufficiently fine cutter to pulverize the oats. Use three-fourths cup of the ground oats and one and one-half cups of sifted pastry flour. If these mixtures seem very dry and crumbly, do not think something is wrong. With a little kneading, they will stick together into a dough.

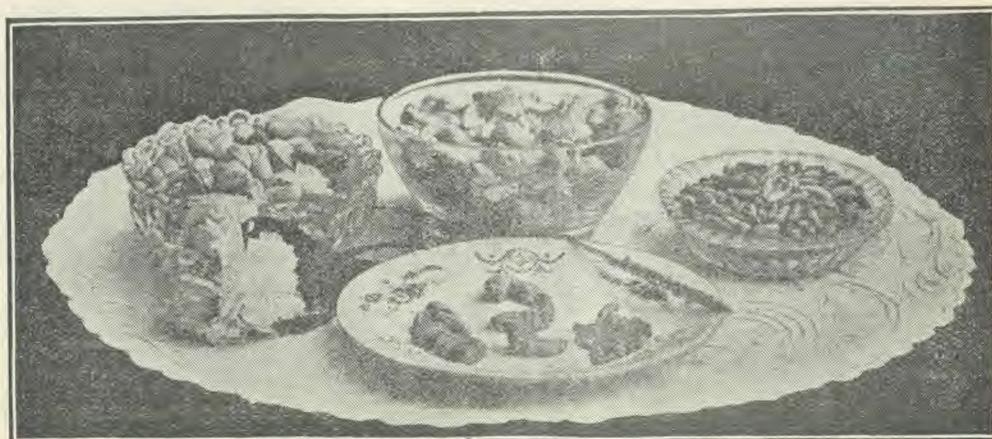
In the factories where rolls of this kind are made, what is called a "dough brake" is used to knead the dough, which is a set of rollers through which the dough is rolled several times, the dough being folded up after each rolling.

The unleavened bread, or "cakes," of Old Testament times was, no doubt, a bread after the order of beaten biscuits. We read of the "barrel of meal" and the "cruse of oil" which sustained Elijah and the widow of Zarephath during a famine.

Cocoanut Rolls

$\frac{1}{2}$ cup ground cocoanut
 $\frac{3}{4}$ quart sifted pastry flour
 $\frac{1}{4}$ cup oil
 $\frac{1}{2}$ cup ice-water
 $\frac{1}{2}$ teaspoon salt

Grind the shredded cocoanut through a food chopper. Proceed as in making beaten biscuits



kneading the dough well, not beating it. With the hands roll the dough out into a long roll three-fourths inch in diameter. Cut into pieces two inches long and bake.

Date or Fig Rolls

For the dough use—

- 1 1/4 quarts sifted pastry flour
- 1 slightly rounded teaspoon salt
- 1/3 cup oil
- 7/8 cup ice-water

Combine the ingredients as in making beaten biscuits. Knead the dough well. Roll out into a sheet one-eighth inch thick. Cut into strips two and one-half inches wide. Lay stoned dates along the middle of the strips of dough. Moisten one edge of the strip. Roll the dough around the dates. Press the edges together. Cut into two-inch pieces and bake.

For fig rolls place the following mixture along the middle of the strip of dough in place of the dates:—

- 1 1/2 cups fig marmalade (made by putting steamed figs through a food chopper)
- 1/4 cup brown sugar
- 1 cup water
- 1 tablespoon rice-flour or corn-starch
- Few grains salt

Cook the fig marmalade, sugar, water, and salt in a double boiler till the figs are well softened. Stir in the rice-flour or corn-starch, and cook fifteen minutes. When cold, it is ready to use in making the rolls. Or plain steamed figs cut into strips may be used in the rolls instead of this marmalade mixture.

By using rich cream instead of water and oil in these recipes, biscuits and rolls can be made which are even nicer, and thin cream will make them fair, though not so tender. Pastry flour can be used, the following being the proportion of ingredients:—

- 1/2 cup thin cream
- 2 1/4 cups sifted pastry flour
- 1/2 teaspoon salt

These may be made in the form of rolls, thus making "cream rolls," or if made smaller they will be "cream sticks."

Instead of using cream in this recipe, one-fourth cup of cold oil and one third cup ice-cold milk may be used, beating the milk into the oil according to the directions for beating the water into the oil.

Nostrums

Death in a Mask

BY HARVEY W. WILEY, M. D.

Patent medicines to right of us, patent medicines to left of us, patent medicines inside of us—patent medicines for everything! Tennyson once wrote a poem in which he spoke a good word for "simple faith." He could not have had in mind the same brand of faith that leads us to believe the preposterous claims of the manufacturers of cure-alls, though that faith is exceedingly simple. We dose ourselves and our children with everything under the sun—pinning our faith on the labels. We feel a pain, and take something that somebody unknown to us is selling for profit. The "something" deadens the pain, and we are converted to drugs. The curse of most of them is in just that—they give a false sense of security. Others contain dangerous ingredients. Parti-

cularly objectionable in this class are those known as headache remedies, for a headache is from nerves, and these "cures" deaden the nerves. Read the following article, even if you do lose a little of your faith—in drugs.

NOT long ago, at a chemist shop a woman gave away to all customers a package containing one of the headache powders known by the misleading name of Orangeine. These powders contain 2.4 grains of acetanilid, 1 grain of baking-soda, 0.6 of a grain of caffeine, and 1 grain of a homeopathic trituration of blueflag, mandrake, and nux vomica. This list of ingredients is given on the envelope containing the powder, it is true, but what

does the average man, woman, or child know of acetanilid? The natural inference would be that it is a substance derived from the orange; yet after naming the product "Orangeine," putting it up in an orange coloured cover with a circular disk to represent an orange, the label coyly confesses that the powder "contains no orange derivative."

In another chemist shop the windows were for a week ablaze with a mass of great, yellow packages which did not carry even a statement of the fact that the product so advertised contained this deadly drug. These giant cartons, marked "Orangeine," do not contain any of the material. They are simply for a window display. Evidently something is happening to the Orangeine trade. The people, warned as they have been against the dangers of these headache-powders, are, perhaps, becoming slow to buy, and these unusual efforts may be a last despairing attempt to increase trade. At any rate, the free distribution of such deadly remedies is an even worse threat to life than their sale. For aught I know, these packages may be given to children, and might produce fatal effects.

The booklet that accompanies this free gift is full of the most misleading statements concerning the effect of the powders. They not only make you well: they "keep you well." "Seven well-known remedies are contained in one perfect prescription. They correct the cause, and prevent serious sickness." This is exactly what they do not do. The acetanilid "dopes" you into temporary insensibility to pain, while nature is endeavouring to restore normal conditions.

The drug is not curative, though it may have its legitimate use as a relief, when used scientifically by a physician, the dosage being carefully controlled. A moment's serious thought would tell any one that no combination of materials could be a cure for all the ills enumerated in this yellow literature.

"It stops headache and other pain," and "almost invariably prevents seasickness and

car-sickness," so we read. It is recommended for hay-fever and asthma. It is to be taken in cases of brain-fag and biliousness. It is a specific for colds, catarrh, and gripe. For these purposes, a teaspoonful of powder in a teacup of hot water or hot lemonade is to be taken at bedtime. Diarrhoea and dysmenorrhœa yield at once to its seductive influences. Dyspepsia is put to rout. Indigestion, which, apparently, is a different disease from dyspepsia, is also immediately relieved. Influenza, which possibly is another name for gripe and colds, is cured at once. Insomnia is easily disposed of—if the patient would only take enough of it he would easily fall into an endless slumber. Neuralgia is treated the same as headache. Rheumatism and sciatica fall like grass before the sharpened scythe, et cetera. The claims made for this dangerous compound, and the facts concerning it, are so utterly at variance that it is worth while to put them side by side.

In addition to these plainly misleading statements, Orangeine is especially recommended for children. For infants under one year, one Orangeine powder is to be dissolved in twenty-four teaspoonsfuls of water, and one or two teaspoonsfuls given at a time. For children from one to ten years of age, from one-eighth to one-half of a powder is to be dissolved on the tongue. A nice use to make of a heart-depressant, habit-forming drug of no curative value!

Practically all alleged headache remedies are of the same nature, and deceptive. Orangeine is not the only one, but it is a typical example, merchandised in an especially dangerous and misleading way. Bromo-seltzer, Antikamnia, Shac, Kohler's Antidote, Harper's Headache Remedy, the whole family of headache cures, depend upon acetanilid, or some related drug, for their effect. The use of such drugs temporarily, under the advice of a physician, when their administration is carefully controlled, may be permissible; their promiscuous use by the public is both

unprofitable and dangerous. We have laws which prohibit the carrying of concealed weapons, yet we permit a dangerous drug, that may stop the action of the heart as surely as a bullet, to be given away under the guise of a citrus fruit—and even thrown freely into our houses or about the streets.

For fear some one without a specific ailment might escape, "tired men and tired women" are urged to revive themselves by dosing with acetanilid, instead of by taking proper rest, recreation, and food. "Perhaps the most frequent every-day usefulness of Orangeine is found in the power of reviving, normally and healthfully, from physical and mental fatigue." Heaven forbid! Such

"daily dosing" is debilitating, abnormal, and health destroying. More specific advice for undermining the health could not be imagined. Live, eat, and sleep, or fail to sleep, under the most unhygienic conditions possible, then dose, dose, dose the tired nerves with a dangerous drug, suffer the unescapable reaction, and do it over again.

What we need is a revival led by some medical Billy Sunday, who is as intimately acquainted with the ways of the patent-medicine devil as the famous evangelist is with the machinations of Satan. Such pandering to the Demon of the Mercenary Exploitation of Suffering Humanity is one of the greatest moral and physical threats of the day.

Household Hints

Cleaning Silver

THE method of cleaning silver by immersing it in an aluminum pan of boiling water to which a spoonful of washing soda has been added, or, better still, in a granite-ware pan with the water, soda, and a rod or sheet of aluminum in contact with the silver, is most satisfactory, providing the silver is not decorated with designs that have been artificially oxidized. I found upon trying this simple method of cleaning my flat silver, which is of the Gorham buttercup pattern, that the electrolytic action between the silver and aluminum removed all tarnish in a few moments, but it also removed the beautiful gray satin finish and the artificial oxidation of the flower designs, leaving the silver an ugly dead white.

Utilizing Lemon Rinds

Every thrifty housewife will no doubt be glad to know of a use for rinds when preparing lemonade or using only the juice of lemons. Remove as much as possible of the pith and cut the rinds into strips about one-fourth of an inch wide. This can be done

easily with scissors. Purchase one pint of pure grain alcohol and put in a glass jar; into this drop the strips until you have used up about fifteen lemons. They may be put in gradually. The whole amount should stand at least a week, or even longer, to steep before being used. Then strain through fine muslin, and the preparation is done. The alcohol will not cost a great deal, and will yield at least fourteen ounces, even allowing for evaporation, etc. So when one remembers that a two-ounce bottle of essence of lemon costs about a rupee, it is seen that the saving is appreciable. Besides, this is a pure article with no colouring or flavouring.

Taking Spots from Varnished Wood

Other housekeepers may be as glad as I was to learn a sure way of removing white spots from a varnished surface. Have ready three flannel cloths, one moistened with linseed oil, one with alcohol, and one with furniture polish. Rub briskly with the oil first, then with the alcohol, being careful not to use enough to take off the varnish, and

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finally apply the furniture polish. The spot will disappear entirely.

Mixing Salad Oil

You can economize greatly on your salad oil if you mix a quart of good olive oil with a quart of cotton-seed oil. The pure food laws objected to such a use of cotton seed oil solely because some manufacturers who mixed oils in this way were deceiving the public, and selling their products as pure olive oil, at pure olive oil prices. As a matter of fact, however, the difference in food value between the two is negligible, so that, mixing them in this way, you retain all the rich flavour and colour of the olive oil with no nutritive sacrifice. It simply means that hereas, a few years ago the manufacturer saved money, to-day the saving is on your side.

REMEDIES FOR THE BABY

(Concluded from Page 299)

Whooping-Cough

starts with an ordinary sounding cough; after the disease progresses, there are a number of short coughs followed by a prolonged whooping sound. In light cases there is little of the whooping, but it is just as contagious as in severe cases. If there is much vomiting, feed a few spoonfuls of milk between coughing spells. Keep the child out-of-doors as much as possible, bundling him well when the weather is bad. Avoid heating exercise, for this is sometimes fatal.

Mumps and Chicken-Pox

Mumps, with the swollen glands under the angle of the jaw, and chicken-pox, with its watery-looking blisters, are both mild diseases. Keep the child indoors.—*Edythe Stoddard Seymour.*

WHEN little Bob bumped his head, Uncle Jim gathered the youngster in his arms and said: "There! I'll kiss it, and the pain will all be gone."

Cheerfully smiling, the youngster exclaimed: "Come down into the kitchen; the cook has the toothache."—*Judge.*

Food for Thought

There is food for thought in the fact that physicians tell us that the vast majority of people in moderate or affluent circumstances eat too much; that white flour products are at least in part to blame for the prevalence of cancer, owing to their lack of mineral salts; that tea and coffee are stimulants only, not foods.

And there is food both for the mind and for the mistreated or overtaxed body in the foods offered by the **Sanitarium Health Food Co., 75 Park Street, Calcutta;** "Granola" and "Granose" fully cooked, whole wheat products, and "Caramel Cereal," a cereal food coffee, non-stimulant and yet strength giving. Try them for a time and note the increasing strength and happiness.

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NEWS NOTES

ENAMEL WARE AND APPENDICITIS

Owing to the fact that in cases of appendicitis, small pieces of enamel ware are often in evidence, the Council of Hygiene of the Department of the Seine (France) asked the chief of police to prohibit the use of enamel ware utensils. But it was found that as the law now stands, such a prohibition cannot be made.

ALCOHOL FORBIDDEN TO RAILWAY MEN

The management of the French state railways has prohibited the sale of liquor to railway employees. Officers of the railway are expected to keep watch and prevent employees from going to saloons during work hours, and to prevent the bringing of liquor on to the railway property.

OXYFAKERY

Public Health, the bulletin issued by the Michigan State Board of Health, has in the November issue the *Collier's* article "Oxyfakery," written by Samuel Hopkins Adams. This article, dealing especially with the "oxypathor," shows up the miserable quackery that is behind all these insults to common sense. Until the laws can put behind prison bars the men who thus prey upon the credulous, every possible means of publicity should be used to show up the wicked character of these gas-pipe frauds.

REFORM OF THE FINGER-BOWL

A Western hotel proprietor has been carrying on a crusade against the finger-bowl evils. It is notorious that finger-bowls are often used from one table to another without any attempt at cleaning, much less sterilizing, and without even a change of the water; and, moreover, some make use of the finger-bowl for purposes that are disgusting. The proposition of this gentleman is not to abolish the finger-bowl, but to substitute a paraffin-paper bowl in a silver container, a new bowl to be furnished for each guest. At the hotel keepers' convention in Duluth, a resolution was passed favouring the innovation. Since then there has been much adverse discussion of the subject, which we should prefer to believe was due rather to ignorance of the intention of the reform than to a determination to stand by the present filthy practices.

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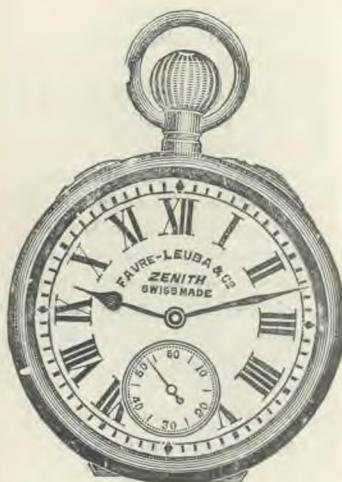
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PATIENT SWALLOWS RADIUM

A patient in a Vienna hospital for cancer of the tongue was given a radium tube to hold in the mouth, with instruction not to eat anything while the tube was in the mouth. At the end of a four-hour sitting, the tube could not be found. The woman denied having swallowed it. The X-ray was brought into requisition, showing the \$3,000 tube in the woman's duodenum. As it was feared that the radium might do considerable damage to the mucous membrane and the abdominal organs, if left to take its own course, the woman was immediately operated upon, and the radium tube removed. She made a good recovery, and will probably be more careful in the future to not swallow a tube of radium.

PREVENTION OF HOOKWORM.

A friend living in low marsh-land next to the Gulf of Mexico got her feet wet, and the children went barefoot. As a result of wet feet, they all had itching feet, which she was unable to remedy until she used a teaspoonful of turpentine in the water with which she bathed their feet. This cured the itch, she says, and prevented its return. She thinks they had the regular ground itch, and that if it had been permitted to develop, they would all have been afflicted with hookworm. This is worth trying by those who have contracted ground itch, but a better preventive is to avoid contamination from the ground, by always wearing thick shoes, and by avoiding such practices as contaminate the ground.

ABOLISHES LIQUOR TO BETTER SERVICE

WHEN Secretary Daniels of the United States Navy issued the order abolishing liquor from the navy, it was for the purpose of increasing the efficiency and the reliability of that branch of the government, on which the nation willingly spends millions of dollars annually. He said that he feels sure that the efficiency of the service will be greatly improved by the order.

"If I had not felt so," he is quoted, "I should never have issued the order. The fact is that on the modern battleship, in particular, there is so much machinery, electrical and steam, that it is of the greatest importance that those in charge of it be not exposed to any opportunity of being in the slightest degree influenced by alcohol."

Since scientists, by precise laboratory methods, have shown that the small minimum dose of alcohol, supposed generally to have no effect, unless perhaps a temporary stimulating effect, has a determined detrimental effect on muscular and mental control, such an order from the head of the navy is strictly in accord with the latest pronouncements of science. In proportion as this order is carried out, we may expect a lessening of accidents and an increase in efficiency in an already efficient navy.

TANGO FOOT

A New York physician reports a number of cases of what he calls "tango foot." The patients all complain of similar symptoms, such as pain in the lower leg on awaking, which they suppose to be the result of a bruise or "rheumatism." There is considerable stiffness, and the patient complains of pain on going up and down stairs. There is usually a slight limp. The doctor in all cases traced the trouble to the new dances, in which there is excessive and intricate movement,—extension, flexion, abduction, and adduction—of the foot. He found that a necessary part of the cure in all cases was rest, that is, cessation from dancing, together with local applications, massage, dry heat, etc.

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