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Life & Health

THE NATIONAL HEALTH JOURNAL

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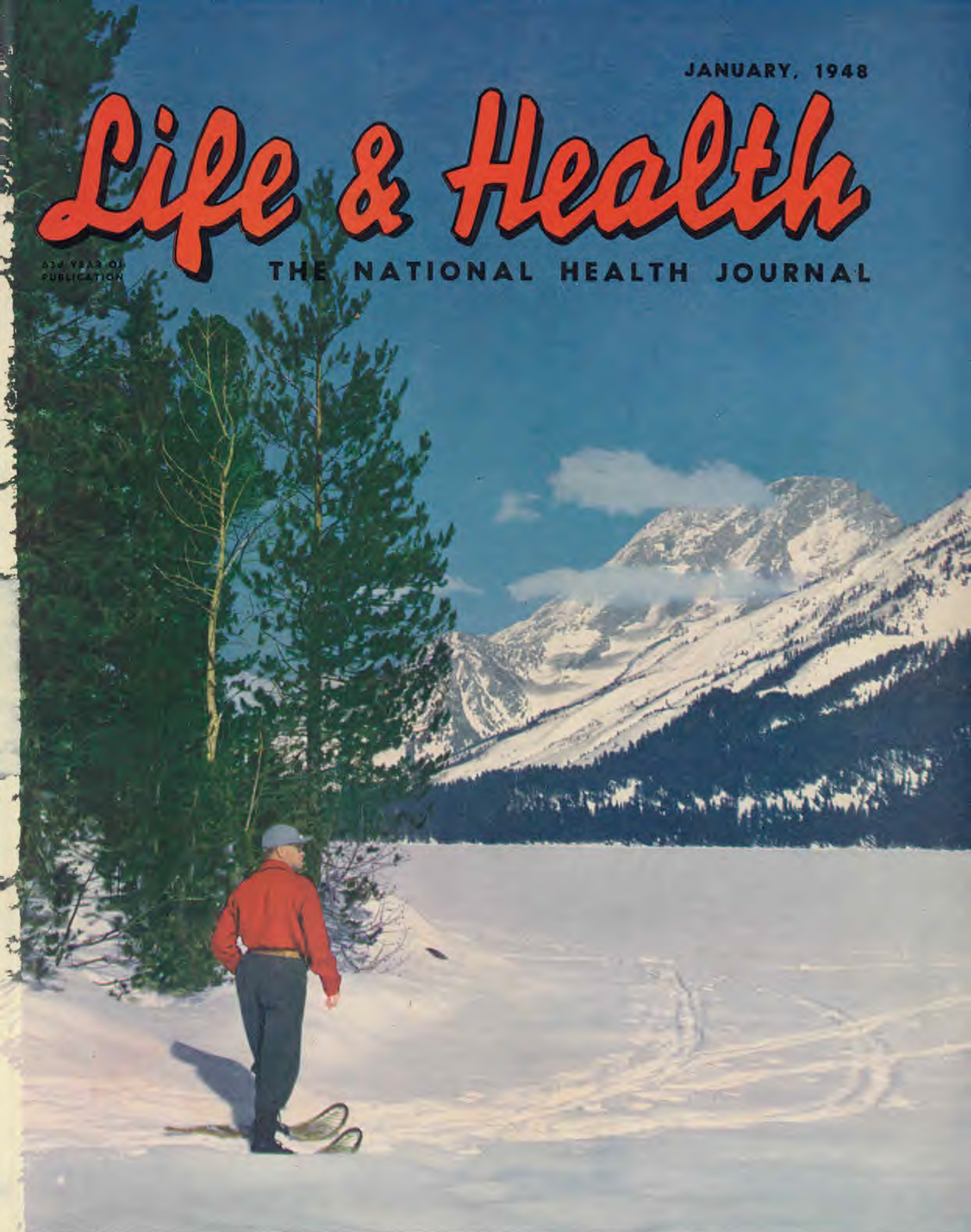


PHOTO BY JENNY LAKE

How to Choose a Doctor for That Emergency
Meatless Meals and Food Conservation

★ **Eyes—the Supercamera, and How It Works**
★ **Ailing Feet—Causes and Effects**

★ **No Place Like Home for Hazards to Life and Limb**

NEW 14-Ounce Size

*Choplets

"-just right for our family"



"The regular 19-ounce size is the one for my family"



The Familiar
19-Ounce
Size



Also in a
28-oz. container
—with 10 to 12
larger Choplet slices—
for those requiring larger quantities

The New
14-Ounce
Size

Now you can have these famous, *tastier* wheat-protein steaks in your choice of two convenient "family sizes."

The new 14-ounce container, with its *six to eight* delicious Choplets* slices, is ideal for smaller families, of two, three or four. And you'll still find the familiar 19-ounce size (ten to twelve slices) for serving up to six people.

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Worthington Foods Inc. • Worthington, Ohio

*Choplets is the Registered Trade-Mark of Worthington Foods, Inc.

Have you tried "Choplets in Swiss Gravy"?

3 tbsp. shortening	3 tbsp. flour
2 medium onions, chopped	1½ cups water
½ can CHOPLETS	2 tsp. soy sauce

Simmer chopped onions in shortening. Add CHOPLETS cut into small pieces and simmer until brown. Stir in flour and add warm water, CHOPLETS broth, soy sauce. Allow mixture to simmer until gravy is desired consistency.

Serve over mashed potatoes or boiled rice.

Worthington Foods Inc. • Worthington, Ohio

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Coming NEXT MONTH

ASTHMA and hay fever. How the allergy victim can learn to live with his problem. . . . Story of the new and largest peacetime program in all Red Cross history. . . . A look at jungle diseases under the bright lights. . . . Deep sleep—the story of anesthetics. . . . How to give a salt glow. . . . Citrus—queen of fruits. . . . Medical shoppers, the problem children of medical practice. . . . Cause of apoplexy.

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A "STEADY" Postum drinker



Easy does it. Uneasy flubs it. In threading a needle steady hands make the big difference.

Here are scientific facts you ought to know about caffeine in both coffee and tea: Caffeine is a drug! It is a stimulant that acts on the brain and central nervous system. Also, in susceptible persons, caffeine tends to produce harmful stomach acidity. For some people, drinking coffee results in indigestion, nervous hypertension, and sleepless nights.*

*See "Caffeine and Peptic Ulcer" by Drs. J. A. Roth, A. C. Ivy, and A. J. Atkinson—A. M. A. Journal.

Doctors agree: never give a child coffee. Serve Postum-with-milk instead. Children just love it!

Postum

A PRODUCT OF GENERAL FOODS



— ONE OF AMERICA'S GREAT MEALTIME DRINKS

Contains no caffeine—no stimulants of any kind

The Pulse of LIFE & HEALTH

- ▶ HEALTH habits established early in life determine the health and stamina of a nation. A systematic program of health education has brought a gradual lengthening of the life span in the last century. Page 6.
- ▶ Most folks wait to choose a doctor after the pain starts, or when the measles break out, or when a bone breaks. If a neighbor says a doctor's good, that's usually sufficient recommendation. First of a series on how to select a physician to suit your particular needs. Page 8.
- ▶ YOUR eye is the finest of cameras and is without a peer in automatic, precision performance. A part by part comparison of the human eye with a camera. Page 10.
- ▶ FEET hurt because your shoes don't fit? Instruction on proper care of the feet. Page 12.
- ▶ It takes a heap of planning for safety when you build a house. Surprising what can happen when a house is not planned for safety. Page 14.
- ▶ VITAMIN content of commercially canned foods. Page 16.
- ▶ EVERYBODY'S talking food conservation, but what one does about it is the thing that counts. Vegetarian menus are a blessing in reducing the food budget. Page 18.
- ▶ If you haven't taken a liking to cottage cheese before, try the tasty-sounding recipes on page 20.
- ▶ MUSINGS—and winter fun. Page 22.
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Chlorophyll and Wound Healing

AND now it's chlorophyll, the green coloring matter found in leaves, grass, and plants, that comes to the help of mankind in treating infections, skin ulcers, and wounds. From the report of researchers it is apparent we are to find not only some of our most important vitamins and minerals from green leafy plants but also some very potent healing agents.

Among the many interesting things discovered about these body-healing chlorophyll preparations is the fact that they produce no bad effects. In other words, they are nontoxic, whether placed directly on an external infection or taken by mouth. This cannot be said of all drugs, for frequently some produce damage to tissue cells which they are supposed to help.

Chlorophyll actually stimulates body tissue to produce new cells, and in this manner aids in healing. It has a powerful deodorant action, and thus is found useful in deodorizing badly infected wounds. It also has the ability to dry up quickly the drainage that occurs in these infected ulcers and wounds.

There is a very close chemical relationship between chlorophyll and the red coloring matter of the red blood cells, hemoglobin. Various investigators have shown that chlorophyll is effective in stimulating the production of red blood cells and hemoglobin. Chlorophyll is classed as a stimulant which aids the individual cells in maintaining peak efficiency. Although it is too early to state definitely, it appears that broken bones heal much more rapidly under the stimulus of chlorophyll extracts than when left to knit by themselves.

Here is an illustration of what this new remedy will do: A young man was admitted to the hospital with a nasty compound fracture and loss of bone. Extensive surgery was thought to be inevitable, but starting chlorophyll irrigations resulted in such rapid healing and new bone formation that the young man was saved the operation, and a fine, clean wound resulted.

Another incident showing what chlorophyll will do is that of an airplane crash victim who, upon admission to the hospital, was in a very critical condition. On the thigh the flesh had been torn away, leaving a gaping wound with the bone entirely exposed. In addition, there was a severe pelvic fracture, with hemorrhage in the tissues and interruption of vital arteries. It looked as if treatment would be long and difficult, and the results uncertain. Thanks to chlorophyll, in just two weeks' time "the wound had decreased fifty per cent in size, and foul discharge had ceased."

The other patients began to ask whether they could have some of that green medicine that was doing unheard-of things in healing wounds that had showed no signs of getting better for months.

One individual had been under treatment for a whole year. A nonhealing area existed on the lower end of his shinbone. Chlorophyll reduced the size of the draining wound by one half in just thirty days.

Physicians making further tests on chlorophyll have found it beneficial in eye infections, burns, ulcers, gunshot wounds, infections of the bladder, and in cases of acute head colds and chronic sinus trouble. For colds and sinus infections chlorophyll was used as nose drops. It reduced the congestion and drainage of the nose in a remarkably short time. In some unexplained way the obstruction that so often exists in nasal infections disappeared.

It is our belief that in nature there are probably remedies for many of man's ills of which we are totally unaware. And as usual, when these are discovered they are frequently far superior to any medicines that man can invent. The discovery of remedies such as chlorophyll should spur us on in the search for still other natural healing agents locked away in plant, herb, or shrub.

News in

SMALL DOSES

► **CHEMICAL** value of man is on the increase—now inflated to \$31.04 from a paltry 98 cents.

► **ONE** year ago the American people gave \$17,987,800.66 to the March of Dimes campaign, which was \$2,000,000 over what they gave in 1946.

► **DISEASES** of the heart kill four times as many people annually as does cancer. Sixteen hundred daily is the estimated mortality rate.

► **PEANUTS** are one of the ten most valuable field crops in the United States. Farmers have been getting more than \$150,000,000 a year for their crops, aside from what folks eat and what is used for seed.

► **ALCOHOLICS** committed to insane asylums or to psychopathic wards of general hospitals in the United States outnumber drug addicts more than twelve to one, states Mrs. D. Leigh Colvin, president of the National Woman's Christian Temperance Union.

► **VODINE OINTMENT** will soon be a must in your first-aid cabinet. It is a quick-acting antiseptic treatment for minor wounds and burns, developed after many years of research. No odor, no stain, and no sting.

► **COLOR** blindness is better termed "color confusion," says Prof. Selig Hecht, of Columbia University. A color-blind person is not blind to green, red, or yellow, he just confuses them. Some color-blind people confuse blue-green with white, and to them all blue-green traffic lights look white.

► **IF** you are interested in community organization to reduce accidents, you'll like the new 20-cent pamphlet, *Make Your Town Safe!* by Herbert M. Yahraes, the first in a series of popular, factual pamphlets issued by the Public Affairs Committee, Inc., 22 East 38th Street, New York 16, N.Y.

► **DURO TEST CORPORATION** of North Bergen, New Jersey, announces a new germicidal unit that will destroy air-borne bacteria. The direct radiation type unit will destroy germs, molds, and fungus on surfaces, and in liquids in food-processing plants, packaging plants, and liquid dispensers. The indirect radiation type unit will be useful in purifying air in schools, hospitals, homes, barns, eating places, refrigerators, elevators, trains, and other places.

► **TWO** projects will be undertaken by the Bureau of Dairy Industry to make more efficient use of the yearly output of forty billion pounds of skim milk and the ten billion pounds of whey. One project will be to develop new processes for using more skim milk and whey in both domestic and foreign-type cheese; the other will aim to find wider use for milk and milk by-products in evaporated, condensed, and dried milk and in other food products, according to the United States Department of Agriculture.

OUR COVER

THE great Teton Range in Wyoming is always beautiful. In summer its magnificent peaks are mirrored in the placid waters of the many lakes nestled at their bases. In winter a blanket of snow covers the icy surfaces of these waters.

Our cover for January shows Mr. T. P. Lake, the photographer himself, pictured as he snowshoes about these icy lakes on a crisp winter's day. In the background is stately Mount Moran, named after the famous pioneer painter, Thomas Moran.



HOME OF MILLER'S VEGETARIAN FOODS

YES, Miller's Cutlets are in the lead of all vegetable protein foods, BUT, if you have never tried a can of Miller's delicious Green Soya Beans, you have missed a treat, and shorted yourself nutritionally. These large, delicious, green-shelled Soyas are home grown and packed at their peak of tenderness, which gives you all the values of the complete protein which is known to be

in the Soya Bean. How they adorn and balance the vegetable plate! One fifteen-ounce can gives you the protein equivalent found in a pound of beefsteak, and it ranks high also in oil, at $\frac{1}{3}$ the cost.

In days when protein shortage over the world is so acute, you will find Miller Foods all high protein yielding. Look at the list.

Miller's Tenderized Cutlets

Sold in 14 oz., 20 oz., 30 oz., and No. 10 cans.

Miller's Cutletburger

In 20 oz. cans.

Miller's Soyalac, Spray Dried

One pound makes a gallon of liquid Soyalac with analagous composition to animal milk, plain or malted.

Put up in 1 lb., 4 lb., and 20 lb. containers.

Miller's Green Soyas

In 15 oz., 20 oz., and No. 10's.

Miller's other tasty Soya replacement foods are Vegetarian Chili con Carne, Soyas in Tomato Sauce, Chop Suey, Soya Spread, and Soya Cheese.

Write for descriptive folder and recipes if your dealer does not stock them.

INTERNATIONAL NUTRITION LABORATORY, INC., Mt. Vernon, Ohio



Increasing the

Life

▲ HENRY W. VOLLMER, M.D.



RUSSELL HARLAN,
ARTIST

IN RECENT years we have witnessed a most gratifying decrease in the death rate due to certain acute infectious diseases which in the past years have taken such a heavy toll of human life among infants and during early childhood. This is revealed in a report by the Metropolitan Life Insurance Company that appeared in a recent periodical under the caption, "Death Rate From Child Diseases Cut 93 Per Cent."

"The death rate from childhood diseases have been reduced no less than 93% during the past 20 years, the Metropolitan Life Insurance Company reports.

"There are 90% fewer deaths from scarlet fever and 80% fewer deaths from both whooping cough and measles, the statisticians found. The death rate from diphtheria among children of elementary school age, who were insured by the company, is only 1/26 what it was two decades ago. Only one-fourth as many die today from tuberculosis and pneumonia as would if the mortality rate of 20 years ago still prevailed.

"The death rate among children between the ages of five and fourteen from all causes combined was cut 65% between 1922-23 and 1942-43. For every two children who die under current conditions, more than five would have died if the death rate of two dec-

ades ago had continued, the company estimates."

A recent report from New York City shows that diphtheria in that city has dropped from a yearly average of 1,290 in 1910-19 to 7 in 1944.

These gratifying results have been accomplished in part by a systematic program of health education, by the practical application of the laws of hygiene and sanitation in the handling of milk and other foods, and in the housing problems.

Another important contributing factor is the constant increase in the knowledge of medical science and in health education of the people by physicians, nurses, and other educators. This has resulted in a more widespread use of other disease prevention measures such as isolation, quarantine, immunization, and the use of other physiological measures in the treatment of disease.

Judging from what has already been accomplished, we may expect that, with an even more widespread use of these measures, many of these much-dreaded diseases may be practically blotted out. However, if this is to be accomplished, an even more consistent program of health education must be carried on in the home and the school.

It is a responsibility that you as parents owe to your family to be informed regarding these disease prevention

measures that mean so much in protecting the health and saving the lives of your children. Your physician will give guidance and instruction in these important matters.

"A century ago only 40% of the babies born in America could be expected to reach the age of 65 years. At the turn of the century their number was increased to over 40% and in 1940 the number had increased to over 60%."

The control and prevention of disease in the first decade of life and the application of rational methods in treatment have been the principal factors in the increase in life expectancy of Americans from 35 years in 1800 to 65 years in 1945.

The question arises, What might be accomplished in adding years to the life if corresponding attention were given to the cause, prevention, and treatment of the so-called degenerative diseases, which are so prone to affect the heart, the blood vessels, kidneys, pancreas, and other vital organs of the body? There has been an alarming increase in these diseases during recent decades. The United States Census Bureau reports that death from heart disease increased from 137.4 per 100,000 in 1900 to 318.3 in 1943. The report of the New York City Health Commission reveals that deaths due to diseases of the heart, arteries, and kidneys have increased more than 30 per cent since 1930, and are still increasing year by year. Statisticians tell us that "under prevailing mortality conditions, one-half of the babies born today should eventually succumb to degenerative diseases of the circulatory system and kidneys."

It is just as important that you con-

Span



sult your physician for advice regarding the cause and prevention of this type of illness as it is for those of the acute conditions. We owe this to our families, as these degenerative diseases are prone to cut men off abruptly in the middle decades of life, at a time when, because of our responsibilities and our experience, we should be at the greatest period of usefulness to our Creator, to our family, and to our fellow men.

We all need to recognize that these diseases are caused largely by our wrong habits or by violation of the laws of life. Obviously then, to a large extent, we have it within our power to prevent them.

Dr. Herman L. Kretschmer, president of the American Medical Association, says, "Prevention of chronic (degenerative) illnesses begins with . . . proper personal hygiene, right living and suitable diet . . . an annual physical examination."

For emphasis, these pertinent remarks by Dr. Irving Fisher of Yale University, will bear repeating: "The essence of improving health for the so-called well is improving habits. Habits are slow to change. It is only in this way that we shall ever add greatly to the expectancy of life at the later ages."

By the application of these same principles in dealing with these diseases, if discovered early, their progress may be stopped or at least retarded. Here is where periodic physical examinations and systematic health education by your physician play such an important role in improving health and in the prevention of disease.

These chronic degenerative diseases come on so insidiously and often are

far advanced before they are discovered. Dr. Fish speaks of them as "silent sicknesses" or "unfelt ailments," as they may have already made serious inroads into your health before you are aware that you are ill. As a rule they may be detected in their early stages by examination of the heart, the blood pressure, and laboratory analysis of the blood and urine.

Dr. Nathan Van Etten, former president of the American Medical Association, has well said, "Physical fitness is an important step toward national fitness. 52% of Americans are said to be physically competent for hard work. These levels must be raised if medical horizons are to be viewed with satisfaction. . . . I believe that universal study of the school child added to the promotion of health through intelligent nutrition and sanitary housing are more important elemental defenses than guns or planes or tanks."

Dr. Van Etten has given us practical health counsel which, if followed, would bring about far-reaching results by way of health betterment.

It has been suggested that if the knowledge of medical science could be completely utilized, it would be possible to increase life expectancy to seventy-three years.

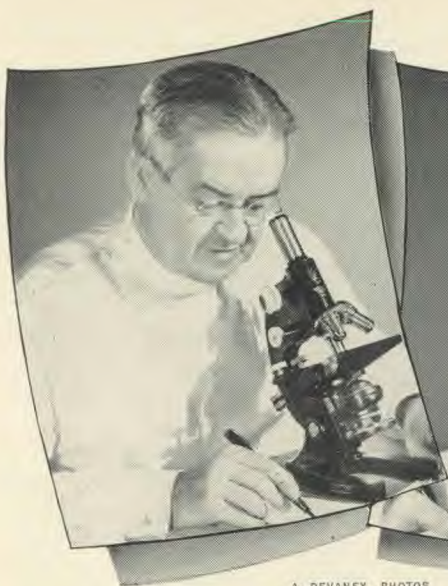
Health education to be effective must begin early in the life of the child. Even before the birth, parents

will do well to inquire as did Manoah, who as recorded in Holy Writ, even before his child was born inquired of the Lord, "How shall we order the child, and how shall we do unto him?"

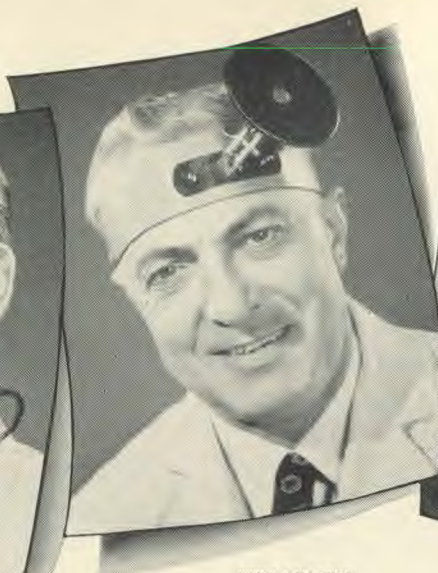
When planning for the birth and rearing of children, parents should see that their own health is as near ideal as it is possible to make it, by obedience to the laws of life, and thus secure healthy children.

Dr. Weston Price in his book, *Nutrition and Physical Degeneration*, reports the result of his study of the dietetic practices among certain tribes of natives who still maintain much of their primitive habits of life. Dr. Price observed that it was the practice among certain of these tribes that when a woman found that she was to become a mother, she reported her condition to the chief. The chief appointed someone to make it his responsibility to provide the food necessary to maintain the health of the mother and for the birth of a healthy child.

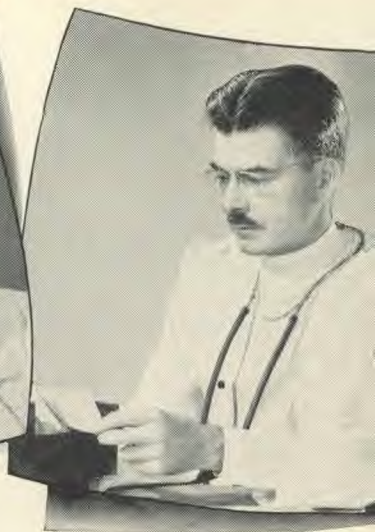
Other tribes are even more careful, and both male and female before mating give special attention to their diet so that they may beget healthy children. The results of these dietetic practices are seen in their nearly perfect teeth and the absence of facial deformities such as harelip and cleft palates. (Continued on page 21)



A. DEVANEY, PHOTOS



EWING GALLOWAY



A. DEVANEY

OH, MRS. STEVENSON, hello there!" Mrs. Turner waved her hand in a further effort to attract her neighbor, who was weeding in her flower garden on the opposite side of the hedge.

"Yes, Mrs. Turner, what is the trouble?"

"Walter woke up this morning with a pain in his stomach and couldn't go to work. Who is a good doctor in this neighborhood? We haven't needed one since we moved here."

"Well," replied Mrs. Stevenson, getting up from her knees and wiping her hands on her work apron, "Dr. Kincaide seems to be pretty popular around here. We haven't tried him yet, but the Harrisons called him when the children had the measles, and liked him very well. He seems to be so good-natured."

It was probably thus ever since doctors began to take care of people with pains and aches. They are so often called for the first time to see a patient on the recommendation of a neighbor or friend, regardless of whether the trouble be appendicitis or measles. Too little attention is paid to the specialty or particular practice of the physician in question, or whether he be a surgeon, an obstetrician, or a pediatrician. Someone simply liked him.

This physician-patient relationship is one of the most ancient of professional contacts, but one which is foisted upon us not by choice but by necessity. And this necessity may come like the alarm of fire at the dead of night, and action must be taken with little time to pick or choose. From birth to death, at some time or other, we come to need the services of a physician. Yet, it would seem as though we leave to chance the choice of who will give attention to our human woes and

ARTICLE ONE OF A SERIES ON "YOU AND YOUR DOCTOR"

Back of the General Practitioner Stands a Second Line of Defense—the Specialist—in the Warfare Against Disease. A Physician in Whom You Have Confidence Will Be Frank to Tell You When You Need the Help of a Specialist

ills. It is more than passing strange that our present-day civilization, with all its education, has found no time or place for the instruction of its votaries on this most important problem of what to do when we are sick. And then we wonder why it is that everything does not always work out smoothly in solving the problems of ill-health and disease.

It is a glowing tribute to the efficiency and training of the physicians who are entrusted with the health of our nation that, in spite of this hit-or-miss method of selecting our medical counselors, we get along as well as we do. Nevertheless, there is a proper way of selecting a physician, and those who are new in a community or who are compelled to change their physician because of one reason or another should go about it in a rational way. This is especially important at this time, since the upheaval of the war has necessitated many changes in the medical personnel in almost every community, and still other changes in this respect are expected.



"DICK" WHITTINGTON

Too often the choice of a physician is made simply on the basis of proximity, social contact, or business relationships. But it is to be remembered that the doctor on the next corner may not be the best one to solve all the family ills. The physician who may be a social light in the community may not be the one most able to perform a critical operation. The doctor who may be the life of the party at the Rotary, the Lions, or the Kiwanis clubs may not be the proper physician to call when the stork is expected. Nor does it necessarily hold that the physician with the best bedside manner is the most able to solve some of the baffling problems which occasionally face the profession.

How, then, shall I select the physician for my particular problem?

In the first place, a physician should be chosen *before* the need arises. Since one can never tell when illness will strike, it is important to make this

matter one of the first concerns of the family when it moves into a new community. This should be investigated as definitely as selecting the grocer, plumber, or laundryman. It should be done deliberately and systematically.

It is well to know that physicians may be classified into several groups on the basis of their professional practice. Most of the physicians in a community do what is known as *general practice*. They take care of most of the routine medical problems to which the flesh falls heir. They take care of the minor and the major medical conditions from colds to pneumonia, and do such surgical procedures as do not involve the too technical processes or the more important organs. They are prepared to handle the case of the prospective mother and father unless serious complications present themselves. They are the faithful watchmen of your community, and their assistance and help are not to be despised when you are in need of medical help.

Then there is a group of physicians

and those who treat skin diseases (dermatologists), tuberculosis, allergic conditions, or what have you. The long names are not important; it is important to know that back of the general practitioner stands a second line of defense—the specialist—in the warfare against disease. As a rule, these specialists should be consulted only when so recommended by the physician who is in charge of one's case.

There are still other groups of doctors such as those concerned with industrial medicine, the public health, or some technical branch of medicine, with which the patient is not directly concerned. These need not be considered further in this connection.

Then, if you are first to seek the aid of someone in general practice, how should this be undertaken? First, by inquiry of several individuals in your community you can learn what doctor has a local reputation for being "good at" children's diseases, obstetrical problems, or the problems of internal medicine. This may mean that you will

the laundryman, the electrician, or anyone else. It is a part of the American system of free enterprise that everyone who deals with the public must stand on his own merits. If we don't like some particular individual with whom we have dealt, we are perfectly free to go to someone else. So if your first choice of a doctor is disappointing, pay your bill and go to someone else. You may like the way he talks to you, the way he combs his hair, or the way he goes about his work a little better than the first doctor. All well and good. You are the doctor in this case.

But in arriving at a conclusion, do not judge too hastily! It is by no means necessarily true that the most affable, most talkative physician is the most capable of arriving at a correct diagnosis, which is the first step in any problem. It is the policy of smooth talk and salesmanship which makes the charlatan and the quack a financial success. Solving medical problems takes time, thought, and study, not just

a lot of talk. Stay with a physician who is careful, conservative, and honest in his dealings with you regarding your condition. Such a physician will likely tell you frankly when your particular problem demands the help of a specialist in that field, and will help select such a specialist who will give

you the attention you need.

And do not think that it is necessary to go far afield to find this suitable doctor. Some are overly impressed with the large and imposing offices of the city doctor. It is true that a doctor with a large practice in the city is very likely successful because of his ability; however, very capable doctors are also to be found in the smaller communities and rural districts. Many of our finest physicians, who stand high in the professional esteem of their fellows, prefer the quieter life of the less populous districts. Such a physician may be just around the corner from you, and when such has proved himself, he is entitled to your confidence and esteem.

It is not too much to ask of a physician that he be upright in his dealings with his patients. It is not too much to ask of one who may have the lives

(Continued on page 35)

to Choose a Doctor

Do You Need a General Practitioner or a Specialist?

PHILIP A. CARPENTER, M.D.

who are concerned with the technical problems of medicine. Some of them do laboratory work or supervise the making of X-ray studies. These men serve the community indirectly through the other physicians, for it is ordinarily not advisable for an ill individual to make up his own mind when an X-ray or other laboratory test is needed.

While these laboratory physicians are in every sense specialists in their field, this term in a lay sense is ordinarily reserved for still another group of doctors who confine their interests to some particular part of the body or group of diseases. For instance, we have those who deal with the bones, joints, and muscles (orthopedists); the eye, ear, nose, and throat (otolaryngologists); the specialists in the heart (cardiologists); the gastrointestinal tract (gastroenterologists); and the nervous system (neuropsychiatrists);

not necessarily have the same doctor for all the family problems. However, not infrequently there is a physician in the community not far away upon whom you can call in all emergencies, who will be glad to refer you to a specialist when necessary, or who is prepared to handle the problem with wisdom and dispatch. Such individuals are well known in the community for their ability, honesty, and availability. If in doubt, especially in the larger communities, the local County Medical Association will help you in the selection of a competent doctor.

"But," asks someone, "what if I don't happen to like the doctor that attends the Jones family, particularly after I have called him two or three times?"

Well, we all have our likes and dislikes. The grocer who proves perfectly satisfactory to you may not suit your neighbor. This is true of the milkman,

Since the Days of the First Crude Camera Great Strides Have Been Made in Photography, Particularly in the Construction of Fine Precision Cameras and Lenses. Any Accomplishment in Mechanical Craftsmanship, However, Had Its Origin in the Human Eye

A DISCUSSION OF THE HUMAN EYE AND HOW IT WORKS

EYES—

the

Supercamera

▲ ROBIN E. SIMMONS, M.D.

IN THE sixteenth century Leonardo da Vinci wrote about the camera obscura, a device used by artists of that time to make accurate sketches, a sort of fake artistry. It consisted simply of a box with a pinhole in it which served as a lens. The size of the image varied with the distance the screen was from the pinhole. The artist would then trace over the dim image formed. Thus was laid the foundation of what was later to become the great science of photography as we know it today. Since the days of the crude camera obscura great strides have been made in photography, particularly in the construction of fine, precision cameras and lenses. Now it is possible for us to choose our camera, lens, and film in accordance with the assignment at hand.

We can be justly proud of our accomplishments in mechanical craftsmanship, and it seems incredible that any greater improvements could be made in photography. But let us not be too hasty to claim patent rights nor be too elated over a makeshift copy of a camera which had its origin at the beginning of time—the human eye.

The average camera has five fundamental parts—the box, the lens with which to focus the light, the diaphragm to control the amount of light entering the box, the shutter to control the duration of exposure, and the screen or point at which the light comes to focus on the sensitive film. (Fig. 1.) There are myriads of accessory gadgets which one may attach to the camera in order to facilitate picture-

taking and by which to elaborate on the procedure, but the fundamental parts remain the same.

The eye is the finest of cameras, and it is without peer in automatic, precision performance. Let us compare it part by part with the man-made product.

The eye, about one inch in diameter, is strategically located in a bony socket, somewhat pyramidal in shape, called the orbit. It is formed by the union of seven bones and constitutes a rigid protection for the eye and its accessory parts. Though the orbit does not completely surround the eye, it offers protection from all but direct blows because of its protruding upper border, the ridge just under the eyebrow. The nose and cheekbones offer additional protection from assaults coming from an oblique direction.

Between the eyeball and the wall of the orbit are found the six muscles which control the movements of the eye.

much in the manner in which a camera may be tilted on a tripod. These muscles are so arranged that they can turn the eyeball in any direction, up, down, sideways, or roll the eyeball in a circle. Just under the upper outer border of the orbit is located the lachrymal gland, which furnishes tears when the eye is being subjected to trauma or the individual to emotional stress.

Comparable to the shutter of a camera are the eyelids. They are much more than loose folds of skin fringed by a few lashes. They act not only as shutters to protect the eye from bright light, but as a cleaner and moistener for the exposed surface of the eye, and as a sealed cover when the eye is closed in sleep.

Between the two surfaces of the eyelid is a little half-moon-shaped piece of connective tissue. This helps to give some rigidity to the lid. On the inner side of this connective-tissue plate are imbedded some very interesting glands, which have minute openings

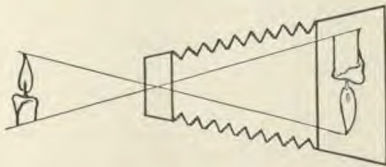


Fig. 1. Cross Section of Camera

on the edge of the lid. The secretion from these glands serves to seal the lids during sleep. Along the free edge of the lid are two or three rows of eyelashes. Near the attachment of the eyelashes are the openings of some more glands. When one of these glands becomes stopped up and infected we have what is commonly known as a stye.

So much for the box and shutter of our camera. Now let us consider it from an optical standpoint.

A ray of light must pass through four substances before it reaches the light-sensitive screen of the eye—the cornea, the aqueous humor, the lens, and the vitreous body. (Fig. 2.) The cornea is the dome-shaped, transparent structure through which we see the colored portion of the eye. The greatest bending or refraction of light rays occurs at the surface of this structure. Any irregularities in the cornea surface result in the condition known as astigmatism. (A good illustration of the optical effect may be seen in a window which contains a ripple or an irregular-

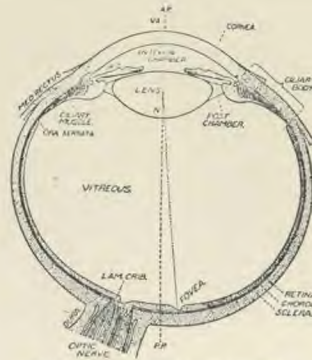
ity. Things seen through such a window seem distorted.)

Just behind the cornea is a small chamber called the front or the anterior chamber, containing a clear, watery fluid. It has the same light-bending properties as the cornea.

The lens and the iris separate the anterior chamber from another chamber called the vitreous body. The iris is the colored portion of the eye. It functions comparably to the diaphragm in a camera. When the light is dim, the opening in its center, the pupil, automatically dilates to allow sufficient light to enter. In bright light it contracts to prevent overexposure of the sensitive plate, the retina.

Suspended just behind the iris is the lens. It is of the biconvex type. In the best six- and seven-element lenses found in our cameras today, an attempt is made to imitate this design. Instead of being a single homogenous structure, it is a series of lenses joined together. Thus the optical errors which take place in a single, solid lens are corrected.

If the lens were rigid it would be difficult for us to focus upon objects at variable distances without adding lenses of different shapes. But to accommodate for near and distant vision the eye has an extremely efficient action of a remarkable muscle which changes the shape of the lens. For distant vision, the muscle becomes tight and flattens the lens, then allows light



FROM WOLFF, MODIFIED FROM SALZMAN. COURTESY OF THE WILLIAMS AND WILKINS CO.
Fig. 2. Cross Section of Eye

rays coming from a distant source to pass through the eye without being too sharply bent. For near vision the muscles of the lens relax and the lens become more convex, of course, bending the light rays so that proper focus of the image is made. This is a unique automatic mechanism which man, so far, has been unable to duplicate.

With advancing age the lens becomes less pliable, and thus less and

less able to accommodate for near objects. For that reason it is necessary to wear reading glasses as one advances in years or hold the newspaper at arm's length.

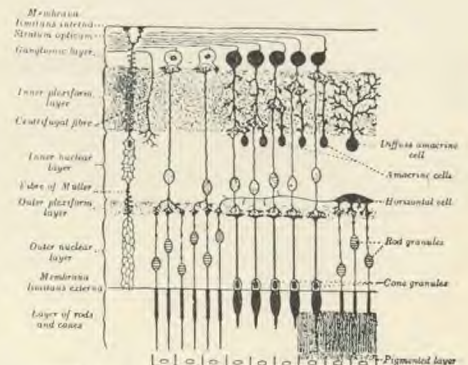
Filling the large chamber behind the lens is a vitreous body, a jellylike substance, the last material through which the light passes before striking the sensitive screen, or retina, of the eye.

Probably the most remarkable part of this human camera is the film, or retina, which covers the entire inner surface of the larger chamber of the eyeball. Though only about one-hundredth of an inch in thickness it is composed of ten layers. (Fig 3.) We shall concern ourselves, however, with only the layer of cells called rods and cones. If we are to perceive light, it is necessary for us to have some sort of receptor analogous to a photoelectric cell which can be excited when light falls upon it. The rods and cones perform this function.

The film of this human camera is unique in that it is both black-and-white and color film at the same time. Rods are for the perception of white light, and cones are for the perception of color. We have over 100,000,000 rods and 6,000,000 cones in each retina, distributed over the retina in the most advantageous manner. Furthermore, the retina is able to change its "film-speed," or light sensitivity, to meet the occasion.

When one goes from a light to a dark room, temporary blindness results, but soon sight is restored as the eyes become adapted. During this adaptation a great deal more is taking place than the mere enlargement of the pupil in order to take full advantage of what light is present. The retina becomes more sensitive, and shifts its sensitivity from the yellow to the blue end of the color spectrum.

(Continued on page 29)



AFTER CAJAL. COURTESY OF THE WILLIAMS AND WILKINS CO.
Fig. 3. Cross Section of Retina



H. A. ROBERTS

PROPER CARE for BETTER FOOT HEALTH

FOOT ailments are constantly increasing and the sufferer can help to alleviate some of his distress by following some healthful suggestions on the care of the feet.

Faulty footwear is undoubtedly the cause of many of our modern foot disorders. What type or style of shoe should be worn is a much-discussed question. A health shoe must give length and width, and the toes should be free from pressure. "Pride goeth . . . before a fall" and ruineth a normal foot. Shoes should be chosen for health and comfort, not for style and show. There is no such thing as a cheap shoe, for it eventually becomes very expensive. One pair of cheap stylish shoes can ruin a normal healthy foot. A lace oxford, orthopedic type, is the ideal shoe for foot health. This gives the support which is so essential and is ideal for standing and walking.

The heel should be low and broad. Some orthopedists advise for growing girls one-and-one-half-inch heels and for women the same. Shortened heel cords result from wearing high heels over a period of years. Persons with this deformity can not wear low heels unless the change is made gradually. A Thomas heel, one which is longer on the inner side, gives added support to the main arch of the foot.

Many women have a dropped transverse or front arch. Pain is common and this condition is called metatarsal-

gia. It is largely due to high heels. Extreme high narrow heels are a foot menace and may cause sprains and swelling of the ankles.

Shoe materials are important. The covering of the shoe should be soft and porous. For this reason kid leather is satisfactory and widely used. Calfskin is more durable but not as soft and porous. Therefore people with sensitive tender skin do not find it a desirable leather. Many materials are used in the making of shoes, but kid and calf are the most acceptable and the most widely used.

The selection of proper hosiery is also necessary to maintain foot comfort. Stockings should be long enough to avoid crowding the toes. Some materials irritate, and one learns from experience which to avoid. Tight stockings and garters should not be worn, especially by persons whose circulation is poor.

Foot hygiene is essential. The feet should be washed daily in warm water and mild soap, and hosiery should be changed frequently. A foot massage, using a mild cream, increases the circulation. If the skin is dry apply lanolin two or three times a week. Diabetic patients should never use iodine or strong antiseptics. Alcohol has a tendency to dry the skin if used frequently. Never use a razor blade or cutting instrument on the feet. Corn remedies contain strong acids and may

destroy good tissue, thus causing infection and serious results. There is no known cure for corns. If the pressure or friction is relieved by a change to proper shoes a cure may result. Plain pads that relieve pressure can be worn with safety.

TEN BASIC RULES for FOOT HEALTH

TAKE CARE OF YOUR FEET

The care you give to your feet and to the selection of your shoes for every occasion is essential to your good health, efficiency, and physical activities in all walks of life. Good feet are a sure step to help prevent accidents.

I. WASH FREQUENTLY!

Bathe your feet once or even twice a day, dry them thoroughly and use foot powder afterward.

II. CHANGE OFTEN!

Never wear the same pair of shoes two days in succession, and change socks or stockings once or twice a day.

III. TRIM RIGHT!

Cut your toenails straight across and not shorter than the flesh.

IV. WEAR RIGHT!

Wear all-leather shoes, both soles and uppers, and pick the right shoe for the right occasion.

V. FIT RIGHT!

Be sure you have the proper size of shoe, the proper last of shoe, and the proper size of sock or stocking (half-inch longer than longest toe).

VI. EXERCISE!

Limber up your feet at intervals—they have muscles too, remember. Wiggle your toes!

VII. KEEP DRY!

Don't needlessly get your feet wet and don't let them stay wet from perspiration.

VIII. WALK RIGHT!

Cultivate good posture and give your feet proper support with all-leather shoes.

IX. DON'T NEGLECT!

Examine your own and your children's feet at frequent intervals to guard against ailments.

X. TAKE CARE!

Don't be a "bathroom surgeon." If your feet need attention, consult a qualified chiropodist or podiatrist.

National Foot Health Council,
Rockland, Mass.

The so-called gym itch, or athlete's foot, is highly infectious and easily spread. It is very prevalent, especially during hot weather. Hundreds of preparations are on the market. Beware and seek professional advice if the condition is serious. Many of the preparations on the market are too strong and irritating. They may do more harm than good. There are at present several preparations which are giving excellent results. Seek professional advice, and you will be advised according to your condition.

To avoid reinfection, boil the hosiery daily and fumigate the shoes. This will kill the fungus that causes the disease. Wear some protection on the feet when you visit beaches, swimming pools, or gymnasiums, especially during hot weather.

Arch trouble is very common, especially among women. It may be mild or severe. There are two important arches in the foot: the main arch, which is located on the inner side of the foot, and the transverse arch, which is just in back of the toes. Arches can be strengthened by exercising daily. In severe cases massage, strapping, and the wearing of supports may be necessary. Steel and flexible supports are both used as may be indicated. Corrective shoes, again, play an important part in relieving these conditions. A brisk walk daily in the great out-of-doors tends to strengthen the muscles of the feet.

It is a known fact that a general physical increase of body health affects the feet. Because of the constant increase of foot disorders, intelligent knowledge is necessary.

For feet that tire easily two exercises taken at night will be found very beneficial. Place a book or a board a foot square and one inch thick on the floor. Place the stockinged foot so that the toes protrude over the edge of the board. Try to touch the floor with the toes. Repeat this exercise several times. This will strengthen the front arch and make it flexible.

In stockinged feet rise on the toes. Come down on the outer side of the foot to the heel. Then place weight on the inner side of the foot. Repeat this several times every night, and this will give strength and flexibility to the main arch.

It may be necessary to obtain skilled medical attention if you neglect a trifling foot ailment. How much better to avoid this by proper daily care of your feet.

Home Treatments



HYDROTHERAPY—PARAFFIN BATH FOR THE HANDS

By Stella C. Peterson, R.N.

WATER, in its various forms, is an extremely versatile agent to use for conveying heat or abstracting heat, because it has a high heat conduction. Because paraffin has a low heat conduction, it can be used as a medium for applying heat for a longer period of time to a local area. The adherence of the paraffin to the skin does not allow for evaporation or heat elimination; therefore, the local skin temperature can be elevated even more than can be tolerated by means of water.

In cases of arthritis in which the points of the hands or of the feet are involved the paraffin bath is especially valuable. The circulation to the joints is greatly increased, because even the smallest blood vessels are dilated. The temperature of the surrounding tissues is also elevated, which increases their resistance to the disease.

ARTICLES NEEDED

1. Two to four pounds paraffin wax.
2. Double boiler.
3. Bath towel.
4. Piece of oiled silk.
5. Thermometer.

PROCEDURE

1. Melt the paraffin in a double boiler and let it cool till a thin film begins to form on top.
2. Wash and dry the hands carefully.
3. Dip one hand quickly into paraffin keeping fingers separate. If the wrist is involved have container deep enough to dip the wrist too.
4. Remove hand until paraffin hardens, then dip and remove again.
5. Repeat until a thick glove is formed.
6. Immerse the hand for 10-15 minutes or wrap in oiled silk and towel.
7. Remove the wax by peeling off the "glove."
8. If exercise is prescribed, squeeze and mold a piece of warm paraffin in the hand.
9. Massage and exercise may be applied.

PRECAUTIONS

1. Paraffin is inflammable. Do not spill it on the stove.
2. Check temperature with thermometer; 126° F. is safe to use.
3. If an unmelted piece of paraffin remains or if it begins to congeal on the surface, it is safe to use.
4. A small amount of mineral oil added to the paraffin makes it melt more readily.
5. Keep bath covered when not in use.

INDICATIONS

1. Arthritis.
2. Gout.
3. Sciatica

In cases of sciatica the paraffin may be applied rapidly with a brush, ten to twelve coats, then covered with oiled silk or wax paper, then a towel or flannel. It may be kept warm with a heat lamp for ten minutes to half an hour.



CHARLES CAREY

The Injured Member Is Immersed in Warm Paraffin (75°-80° C); Withdrawn; Immersed Again; Withdrawn. Repeat Until It Is Encased and the Warmth Is Retained

No Place Like Home for HAZARD to LIFE and LIMB



By **THOMAS FANSLER, M.A.**

Director, Home Division National Safety Council

IT TAKES a heap o'livin' in a house t' make it home," wrote the poet. But what he left unsaid is that it takes a heap of *safe* living to make a home safe for the family. And safe living means *planning* for safety.

Lack of safety planning, for example, caused the death of a ten-month-old baby who was fed dangerous tablets of medicine by an older sister who found them in the bathroom medicine chest. The baby died of shock caused by a massive overdose of the tablets and hemorrhagic pneumonia.

A twenty-two-month-old girl was scalded to death because of the absence of planning for safety. She was being bathed by her mother in the bathtub, and at a moment when her mother's attention was elsewhere, reached the hot water faucet and turned it on. The scalding water caused burns resulting in the child's death.

The everyday habits and customs of family living are so taken for granted that little thought is given to their

safety value. And this laxity toward home safety is one of the greatest causes of accidents.

Look at the bathroom.

The bathroom is *not* the most dangerous room in the house, as is frequently supposed. The largest number of accidents within the home take place in the kitchen. But the bathroom, nevertheless, stands out as a menace to safe living, especially in view of the relatively small amount of time spent in it. So let us consider the hazards it offers.

Bath water can scald you fatally, and the prudent person will make sure it is the right temperature before stepping into it. Warm water from 90° to 100° F. is best for cleansing purposes, and hot water much above 100° F. should not be used.

There are three ways to regulate both the temperature and volume of bath water:

1. The conventional two-valve system in which the spout of the tub is equipped with a diverter valve

to enable the flow of water to be switched to either the tub or the shower. The water flow is automatically diverted to the tub after shower has been used, a safety feature that prevents unexpected showers of scalding water.

2. The mixing valve which is especially convenient, as a turn of the single handle produces the proper water temperature.
3. The thermostatically controlled mixing valve which automatically cuts off the flow of water if safe temperature is exceeded.

Grab bars or hand rails should be firmly anchored in the wall to give support when stepping in or out of the tub or shower. If the bathroom has a combination tub-shower installation, the best type of hand rail to use is an L-shaped one which gives both vertical and horizontal support.

The tub should have a flat bottom and straight sides to lessen the chances of slipping, and it should be provided with a vacuum-grip-rubber mat. The shower stall and the bathroom floor should be equipped with a nonslip surface material. Finally, the shower curtain rod should be securely fastened with long screws into the wall studding, not merely into the lath and plaster.



ROBERT ELDRIDGE, ARTIST



NATIONAL SAFETY COUNCIL, INC.

Electric Shock Is One of the Greatest Bathroom Hazards. A Safe Outlet Is Located More Than an Arm's Length From the Tub or Shower, and Is Controlled by a Wall Switch Rather Than a Pull-Chain

Porcelain handles are a definite safety hazard because they can break easily and cause serious cuts. Metal or satisfactory plastic handles should be used instead. Soap holders should be conveniently placed and built into the wall. And the soap should be kept in them!

Electric shock is one of the greatest bathroom hazards, for 110-125 volts can prove fatal when coupled with water. Outlets should be located more than an arm's length from the tub or shower, as the temptation to the bather is to reach out from the tub, or while still wet, to turn on electrical appliances such as radios, heaters, shavers, or hair driers.

All lights should be controlled by wall switches instead of metal pull-chains. If pull-chain switches are necessary, insulating links should be installed. Only the finest grade extension cords should be used in the bathroom, for excess humidity can readily convert an inferior cord into a live wire.

Storage space and closets in the bathroom should be planned with a view toward both utility and safety. Poisons should be kept in separate, preferably locked, cabinets away from children's reach. Many of the new medicine cabinets now available have a special locked compartment for dangerous medicines. All medicines should be clearly labeled, and poison containers should be marked in such a way as to distinguish them from any other containers—not only with POISON labels, but with adhesive strips over the caps or even tacks or pins stuck in the corks as well, to warn groping fingers in the dark.

One of the most common storage procedures is to keep medicines in the mirrored cabinet above the wash basin. This is not advisable, and medicines should be kept in a small separate cabinet accessible only to adults. Moreover, old medicines which have outlasted the particular illness for which they were prescribed should be destroyed.

Many modern homes are planned with enough bathrooms to ensure privacy to most members of the family, and this should do away with the need for a lock on the bathroom door. But if a lock is deemed absolutely necessary, it should be of the type that can be opened from the outside in the event of an emergency.

Finally, here is a special



word of warning to parents of small children. A small child should never be left in the tub by himself, or even in the bathroom alone. Remember the little girl who died from scalding herself. Remember the little child who was inadvertently poisoned by her older sister.

A TIP FOR TODAY

If a fire started in your home today, what would you fight it with? Do you have a suitable fire extinguisher in a convenient place? Have you a ladder so that you can reach the roof in case of a fire there? If you have a pressure water system, do you keep enough hose on hand to reach all parts of your home in case of fire?

Homes are burning every day. A little forethought and preparation may save your home.

—Extension Information Service, Department of Public Relations, Michigan State College.



This department serves as an aid to our readers in their dietetic problems. For information regarding some particular food or diet, address: The Dietitian, LIFE AND HEALTH, Takoma Park, Washington 12, D.C. Enclose stamped, addressed envelope for reply. This service is available only to subscribers.

Harmful Effects of Milk and Sugar

I have heard that milk and sugar should not be used together in large amounts. I wonder why.

For many years cases of so-called food poisoning and acute indigestion have been reported, with some deaths from eating creamed mixtures during warm weather or after they have stood in a warm place too long. Tonight's paper reports five of one family in a serious condition from eating cream pie. Others in the family who ate no pie were all right, so it was the milk-and-sugar-and-egg combination that became a culture for injurious germs that caused the poisoning. Fresh fruit, fruit puddings, fruit pies, and sherbets are more wholesome than the creamy desserts, unless they are well prepared and cared for. Little sugar or else honey makes them more acceptable, and of course they should be well refrigerated.

Cost of Food

I wonder how much a person should spend in a week for groceries in order to have everything needed.

A survey in Pennsylvania of families who bought all they ate showed that in these inflationary times it takes about six dollars to feed an adult. By eliminating nonessentials it could be done for a little less.

Buttermilk vs. Fruit Juice in Reducing Diet

I am on a reducing diet, and my doctor said to take buttermilk. Would fruit juices be all right in its place, as I do not like buttermilk? Which juices are lowest in calories?

Fruit juices do not replace buttermilk in food value. Buttermilk is rich in protein and calcium, and it has a mild laxative effect often helpful while reducing. Skim milk is much like buttermilk in food value. You could ask the doctor if it would be all right for you to substitute skim milk for buttermilk. Usually the same amount is taken. Tomato juice is lowest in calories of the juices, then comes grapefruit juice, orange juice, and pineapple juice. Apple juice is about the same as

pineapple. The juices are of course very valuable, but in different ways than the milk is.

Vitamins in Canned Foods

I work in an office and have so little time to prepare food that I naturally fall back on the use of canned foods more than some. I keep a good supply at all times. How do they rate for vitamins?

Canned foods are often prepared near the gardens and frequently show, on testing vitamins, values equal to and above shipped fresh food, especially if the fresh food has been on the market too long. The National Canners Association has prepared a chart showing vitamin values for their foods. It is quite interesting.

Spinach—Folic Acid and Oxalic Acid

I have read that spinach is rich in oxalic acid, which makes it undesirable; then I read that it is rich in folic acid, for rich red blood. What do you think? Shall we eat it?

Spinach is very rich in several nutrients. It contains much iron and calcium, but because of the oxalic acid in it these are not used by the body fully. It is very rich in vitamins A, B₁, B₂, and C, besides the newly discovered vitamin B called folic acid. Then, too, it has much chlorophyll of high quality. Because there are other greens that have all the elements spinach possesses, it would at least seem wise to alternate the greens and not eat spinach regularly.

Vitamin Content of Commercially Canned Foods

The following chart shows what four-ounce servings of food will contribute toward the daily allowance of vitamins recommended by the National Research Council.

- 0—to 1%
- *—1% to 5%
- **—5% to 10%
- ***—10% to 20%
- ****—20% or above

Food	A Ascorbic Acid	C Carotene	B ₁ Thiamine	B Niacin	B Riboflavin
Apricots, unpeeled halves	**	****	*	*	*
Asparagus, all green	****	**	*	**	*
Asparagus, white	****	*	*	*	*
Beans, baked New England style	*	0	*	*	*
Beans, with tomato sauce	*	*	*	**	*
Beans, green cut	*	**	*	*	*
Beans, Lima, green	***	*	*	*	*
Beets	*	0	0	0	*
Carrots	*	****	*	*	0
Corn, white, whole kernel	**	0	*	**	*
Corn, yellow, whole kernel	**	*	*	*	*
Grapefruit juice	****	*	*	*	0
Grapefruit segments	****	0	*	*	0
Orange juice	****	*	*	*	0
Peaches, clingstone, halves	**	**	0	*	0
Peaches, freestone, halves	*	**	0	0	0
Pears, halves	*	0	0	0	0
Peas, Alaska	***	**	**	**	*
Peas, sweet wrinkled varieties	***	**	**	**	*
Pineapple juice	***	*	*	*	0
Pineapple slices	**	*	*	*	0
Prunes, Italian	*	****	*	*	*
Spinach	***	****	*	*	*
Tomatoes	****	****	*	*	*
Tomato juice	***	**	*	*	*

Kale, chard, turnip, and mustard greens are three of the best-cultivated greens. Dandelion and dock are two of the finest wild greens. Foods very high in folic acid, found to be most important for blood building, are fresh deep-green leafy vegetables. Medium rich sources are wheat breakfast cereals. Many other foods not yet tested are no doubt worth-while sources of this newly discovered vitamin.

The Need for Vitamins

I believe I am what anyone would call a well-nourished person, but sometimes I wonder if it would help if I took some vitamins. Do you think so?

There are different levels of good health according to some, and no doubt we can continually improve by taking advantage of the research in nutrition and other branches of science. Many healthy individuals experience a more buoyant feeling and remarkable freedom from fatigue by eating more protein foods than they are in the habit of taking. A liberal protein ration consists of a quart of milk a day and in addition a half cup of cottage cheese, an egg and a serving of nuts or legumes.

Dr. Henry C. Sherman, of Columbia University, has found in experiments on rats that by taking four times the normal amount of vitamin A they lived 10 per cent longer. The rats grew better, and at all ages they were more vigorous, and there were fewer deaths. Nutritionists think this valuable research shows that we may be able to add ten years to our lives by taking more vitamin A. For a long time vitamin A has been known to be very important. It has to do with the integrity of every body cell, whether it is a nerve cell, or the tiny cells called dentine that cover the teeth. It is well to refresh our minds as to the best sources of vitamin A. The excellent sources are broccoli, carrots, collards, kale, peppers, spinach, yellow squash, sweet potatoes, and turnip greens. Good sources are apricots, asparagus, green beans, butter, cantaloupe, yellow corn, eggs, ice cream, whole milk, peaches, green peas, prunes, pumpkins, soybeans, and tomatoes. Many other foods also contain the vitamin in worth-while amounts. Greens are such a wonderful source of vitamin A that one serving of a generous four ounces will give two to three times the daily vitamin A requirement. Greens every day could assure you of the four times normal amount, for the rest of your food would easily add up to this goal. Remember, though, that greens mean leaves like collards, chard, kale, turnip greens, mustard greens, and similar foods.

+ + +

BLESSED is the man who, having nothing to say, abstains from giving us wordy evidence of the fact.—
GEORGE ELIOT.



HOBBIES

By GRACE FIELDS

METALCRAFT

JUST to make sure we don't get beyond our depth, let's confine our first venture into metalcraft to working with sheet metal—copper, aluminum, or brass, as you like. And let's not get involved with a lot of high-brow machinery and tools for experts. A pair of tin snips, a jeweler's saw blade, a drill and drill bits, a ball peen hammer, and a small file or two are the essentials.

Take it easy on the first project. Try a letter opener, a wall plaque, a letter holder, or some other simple object, for every hobby requires a little patience at first, and there's no use to tax yourself unduly.

Once you've decided what to make, and have traced or sketched the pattern on paper, you'll cut it out of the metal with tin snips. Your inside design is cut out with the jeweler's saw, which works like a coping saw. You'll work on a V-board, which is nothing more or less than a small, solid board with a V-shape cutout to allow up-and-down movement for your saw. To give your tiny saw a starting point, make an opening with your drill and a small bit. After the sawing, smooth the edges with a file, and step back and admire your handiwork.

Now, if these operations sound like something you thought went on only in full-blown machine shops or blacksmith establishments, don't be intimidated. They're really very simple, and the tools involved aren't heavy, or dangerous, or dirty, or difficult. Metalcraft is a unique hobby, and though the equipment may be unfamiliar to you, it's easy to get acquainted with and altogether worth while.

So if you like the mellow loveliness of copper, brass, or aluminum pieces, if you like to look deprecatingly modest when friends gasp, "You don't mean you made it yourself," then have a fling at metalcraft!

Clear diagrams and explanations covering every basic process of this artistic and intriguing hobby are to be found in Edwin T. Hamilton's book *Tin Can Craft*, published by Dodd Meade. Though Mr. Hamilton makes a multitude of ingenious suggestions about the use of the humble tin can (which may be used instead of metal sheeting) in creating many beautiful objects, the processes and techniques are equally well adapted to copper, brass, and aluminum. As a source of materials and equipment, we suggest American Handicraft, 45-49 S. Harrison Street, East Orange, New Jersey. Their catalog is free on request.

Thank you, hobby fans, pear soon in our columns. your hobby yet, drop us a

for your letters. *Your* hobby may appear soon in our columns. And if you haven't told us about line, won't you?



CHARLES CAREY

Meatless Meals and

A NATIONAL APPEAL

Try These Vegetarian Menus

By **DELLA REISWIG, M.A.**

Dietitian

PRESIDENT TRUMAN'S food-conservation program requesting American housewives to observe meatless days in their menus, is only limping along," say the reporters.

It cannot be that we deliberately want to be selfish with our food; we are as a rule a very generous people. It is not because we are not aware that people in other parts of the world are starving to death; for most Americans are well informed of world events. Perhaps we are fearful of the work involved in vegetarian menus, or wonder what it will do to the food budget or perhaps we are doubtful as to the nutritional value of these menus.

A glance at the Meal Pattern reminds us that we have been advised by the Food and Nutrition Board to follow such a pattern. That makes it simple, for we are already familiar with the plan.

Let's study the menus suggested for the first week. If dinner is served in the evening at your home, then exchange the dinner and supper menus.

It is immediately apparent that since you have been providing your family with balanced meals, you have been using these menus every day. But there is one exception. It is the entree, walnut timbales, suggested in place of the meat for Monday dinner.

This recipe says to mix together the eggs and milk and pour over the stale bread. This is a painless way of utilizing old stale bread. Allow the bread to soak for a few minutes while the onion is braised in the skillet. Add seasonings and bring to a boil. Now add the rest of the ingredients and bake in muffin tins. In a half-hour's time there are eight timbales to be served with mushroom gravy. How delicious they are, yet so simple and easy to prepare!

The other suggested entrees are equally simple and entail no more work. Before starting to prepare any one entree, however, be sure to provide yourself with the necessary ingredients to make the recipe.

What does a vegetarian menu do to the food budget? This is a vital question when food prices soar higher and higher each day.

In the walnut timbale recipe the cost of each item is approximately the following: eggs 12c, milk 10c, bread 2c,



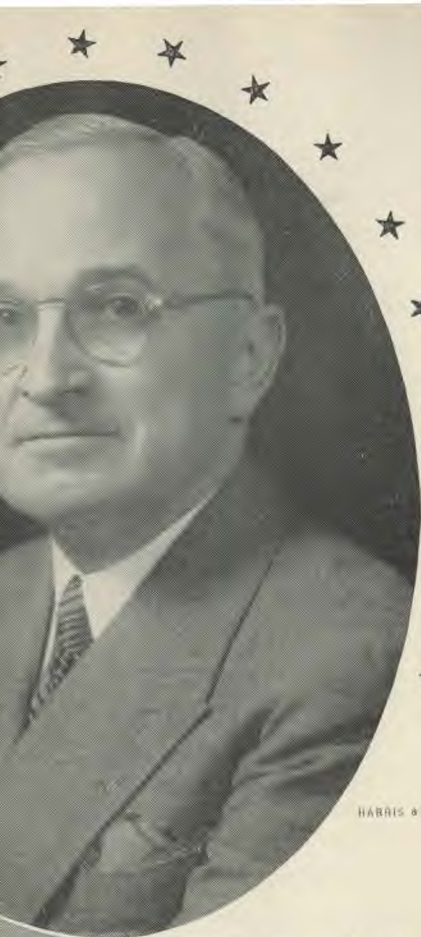
EWING GALLOWAY
Many People Today Wonder Whether or Not Vegetarian Menus Are Adequate Nutritionally. Food Authorities Say They Are, and in Addition They Are Kind to the Food Budget

onion and other seasoning 1c, tomato juice 5c, and walnuts 20c. In other words the eight timbales would cost about 50c.

Meat prices at this writing on the market today, while on the increase, in some parts of the country are about as follows: short ribs, 38c a pound; lamb stew, 25c; hamburgers, 42c; pot roast, 55c; boneless beef stew, 69c; and ground round steak, 69c. More expensive meat is club steak, 83c; T-bone steak, 85c; and porterhouse, 89c a pound. To make a true comparison we must consider 12 per cent less for

shrinkage and 20 per cent less for bone. In order to feed eight people it would require several pounds of some of these cuts of meat. From these figures it is evident that the average cost of vegetarian recipes is considerably less than meat.

Do vegetarian menus add up nutritionally? We could add up the nutritive value of each of these menus and find that as far as figures go they are adequate. This does not necessarily prove that a menu is balanced, however. There is much more to it than that.



HARRIS & EWING

Food Conservation

"Such investigations of the data of actual food consumption viewed in the light of the findings of recent nutritional research make it clear that the average typical American food budget can be improved by giving greater prominence to milk, vegetables, and fruit. The money needed for this being obtained if necessary by reducing the expenditure for meats and sweets."¹

"It becomes apparent that a dietary made up, as so many American dietaries are, too largely of breadstuffs, meats, sweets, and fats, may be satisfying to the palate and to the traditional demand for variety, may furnish ample protein and calories with fats and carbohydrates in any desired proportions, and yet may fall far short of furnishing optimal amounts of some of the mineral elements and vitamins. We now understand how it is that liberal allowances of fruits, vegetables, and milk in its various forms, serve, in ways which until recently could not be fully appreciated, to make an ordinary dietary or food supply more conducive to optimal nutrition and health."²

Jean Bogert, another nutrition authority, says: "Milk and eggs are not only adequate substitutes for meat, but they carry in addition a rich supply of minerals which will have to be added to the meat ration to make it equally valuable with either of the other two. The housewife who provides a somewhat varied diet, ample in fuel value, including milk and eggs, need not feel

that she is depriving her family of any essential if she furnishes a very small amount of meat or none at all."³

An equally noted authority, E. V. McCollum, says, "It is evident from both human and animal experience with the fleshless diet and the results of modern scientific studies on foods and nutrition, that meats are not necessary in the diet."⁴

It has also been learned that when sugar is the carbohydrate eaten for energy in the diet the vitamin requirement is much higher than when carbohydrate in natural food is eaten. Since sugar contains no vitamins at all, yet requires more vitamins than any other carbohydrate to burn it, naturally it becomes a burden to the body.⁵ Therefore it is wise to keep sugar at a minimum.

"Wherefore do ye spend money for that which is not bread? and your labour for that which satisfieth not? hearken diligently unto me, and eat ye that which is good, and let your soul delight itself in fatness."⁶

From this discussion we can conclude that vegetarian menus are nutritionally adequate and even better for you; they are kind to the food budget and really are not difficult to prepare.

Why not surprise the family with a vegetarian menu today. It is possible that, with a fair trial, these menus will prove so advantageous that they will become the order of the day.

(Continued on page 32)

President Truman Appeals to All Segments of Our Population to Make Their Contribution Toward Saving Grain in Order to Share Their Food With the Hungry People of Europe



It is indicated that there is a multiplicity of complex relationships which exist between vitamins, and between vitamins and the other nutrients, and between hormones and dietary constituents. Some of the results noted by Henry C. Sherman, noted U.S. nutrition authority, can only be explained in this way. He says:

"When 224 dietaries were grouped according to the prominence of fruit and vegetables in them, it was found that as vegetables and fruit became more prominent there was increase in the energy, phosphorus, calcium, and iron values, and, we may infer, in the vitamin A, C, and G values also, of the diet, while the protein remained practically unchanged. Thus increasing use of vegetables and fruit seems to improve the food value of the diet at every point at which the American dietary is likely to need improvement.

"The dietaries in which milk, vegetables, and fruit, together, were prominent averaged lower in cost and higher in energy, protein, phosphorus, calcium, and iron; and undoubtedly they also had higher vitamin A, C, and G values.

MEAL PATTERN—VEGETARIAN DIET

Milk.....	2 or more glasses daily for adults; 4 daily for children.
Fruit.....	3 or more servings daily, one citrus or tomato.
Vegetables.....	3 or more servings daily in addition to potatoes. One leafy green or yellow; use one raw every day.
Eggs.....	2 or 3 a week; may be used in cooking.
Cheese.....	Cottage and other uncured cheese.
Nuts.....	Also nut food products.
Legumes.....	Soybeans, Lima beans, navy and other beans, peas, lentils, and garbanzos. One or two from this group each day.
Cereal or bread.....	Whole grain or enriched, or with added wheat germ or soy flour. 3 slices daily.
Fats.....	One or more tablespoonfuls daily. Margarine may be used if vitamin A has been added, peanut butter, olives, and avocados.



By JANICE RIFENBARK, B.S., Dietitian

IN THE meatless dietary cottage cheese assumes a prominent place as a source of high-quality protein. One-half cup of dry cottage cheese contains twenty grams of protein, which is equivalent to the protein value of a three-ounce serving of medium fat meat. One-half cup of creamed cottage cheese contains about fourteen grams of protein.

Cottage cheese is also a relatively good source of calcium and phosphorus. The cheese made by heating milk which has become sour contains less calcium than the cheese coagulated with rennet. In acid coagulation some calcium is lost in the whey, whereas it is retained in the rennet curd.

Since cottage cheese is usually made from skim milk, fat and fat-soluble vitamins present in the fat of whole milk are absent in the dry curd. These factors are made up by the customary practice of adding cream before the cheese is served.

Cottage cheese can be used in recipes to suit almost any course in a meal. Here are a few ideas for using cottage cheese in various ways. Try some of them, and you will see how delightful cheese dishes can be.

Cottage Cheese and Celery Sandwiches

- 1 cup cottage cheese
- 2 tablespoons butter
- 2 tablespoons diced dill pickles
- $\frac{1}{2}$ cup very fine diced celery
- Salt
- 2 tablespoons mayonnaise

Beat cheese to a smooth paste. Add softened butter, dill pickles, celery, salt, and mayonnaise. Spread slices of bread thickly with this mixture. Approximate yield: 8 portions.

Cranberry Cottage Cheese Salad

- 1 quart cranberries
- 2 cups sugar
- 1 cup whipping cream
- 1 tablespoon sugar
- 3 cups dry cottage cheese
- Lettuce leaves

Wash cranberries and put through a food chopper. Arrange cranberry purée and the 2 cups sugar in alternate layers in a saucepan and allow to stand for 10 minutes, or until some juice is drawn out. Then place over a low flame until the juice flows freely. Increase flame for 6-8 minutes, stirring constantly. Turn into a shallow pan, cool, and place in refrigerator to stiffen. Half an hour before serving time, whip cream until stiff, add 1 tablespoon sugar, and fold into cottage cheese. Spread mixture evenly over the cranberries and return to refrigerator to chill. Cut in squares and place on leaves of lettuce. No salad dressing is necessary. Approximate yield: 8 salads.

Cottage Cheese Souffle

- 3 eggs, separated
- 4 cups cottage cheese

- 1 medium-sized onion
- 2 tablespoon fat
- 2 teaspoons salt

Braze the finely chopped onion in the fat. Beat egg yolks and add cottage cheese and salt, mixing well. Add stiffly beaten egg whites. Bake in moderate oven (350° F.) until eggs are done. Pour cream sauce over soufflé before serving. Yield: 6 to 8 servings.

Cream Sauce

- $\frac{1}{2}$ cup butter
- 2 cups medium cream
- 3 tablespoons flour

Brown the butter and flour slightly. Add cream, bring to a boil, and pour over soufflé.

Cottage Cheese Rice Loaf

- 2 eggs, beaten
- 1 cup cottage cheese
- 2 cups canned peas
- 1 cup cooked brown rice
- $1\frac{1}{2}$ cups bread crumbs
- $\frac{1}{2}$ cup cooked chopped celery
- 2 tablespoons minced onion
- $\frac{1}{2}$ teaspoon paprika
- 2 tablespoons melted butter

Add the beaten eggs to a mixture of all the other ingredients. Bake in an oiled and lined baking dish one hour at 350° F. Serve with tomato sauce. Yield: 6 to 8 servings.

Fruit Cheese Pie

- $1\frac{1}{2}$ cups raw apples, thinly sliced
- 2 eggs
- $\frac{1}{2}$ cup creamed cottage cheese
- $\frac{1}{2}$ cup sugar
- $\frac{1}{2}$ cup cream
- $\frac{1}{8}$ teaspoon salt
- 1 teaspoon grated lemon rind
- 3 tablespoons sugar, cinnamon, and nutmeg mixed

Line a pie pan with pastry and cover the bottom with the sliced apples. Beat the eggs slightly; add the cottage cheese, sugar, cream, salt, and lemon rind. Sprinkle the apples with the sugar, cinnamon, and nutmeg mixture, then cover them with the cottage cheese mixture. Bake in a hot oven (425° F.) 10 minutes, reduce heat to 350°, and bake 30 minutes longer. The sugar, cinnamon, and nutmeg mixture is $\frac{1}{2}$ cup sugar, 1 teaspoon cinnamon, and $\frac{1}{2}$ teaspoon nutmeg.

METHODS OF PASTEURIZATION

Two methods of pasteurization are used commercially, the holding and the short-time high-temperature methods. The first is done by heating the milk to 143-145° F. and holding at this temperature for 30 minutes. The second method, which is accepted by most authorities, consists of heating the milk to 161-162° F. and holding for 15 seconds. This method is used in plants where large volumes of milk must be processed. The operation is a continuous one.

Pasteurization kills all of the disease-producing bacteria that may be in milk. Even the organism causing tuberculosis, which is the most heat-resistant disease-producing bacterium found in milk, is killed by the holding method by the time the product has been at the pasteurizing temperature for 20 minutes. The full 30 minutes of exposure time required gives a 10-minute safety margin.

—Extension Service, University of Illinois College of Agriculture.

Increasing the Life Span

(Continued from page 7)

These people, as long as they follow these dietetic practices, have almost perfect teeth, and there is very little if any decay in the teeth even among adults. There are other evidences of healthy bodies, and among these women childbirth is comparatively easy.

In a way pregnancy and childbirth may be regarded as a physiological process, yet because of the wrong habits of our modern civilization, conditions have been brought about in the human body so that pregnancy and childbirth are attended with certain hazards to life and health. For this reason every expectant mother should have the counsel and care of a physician from the beginning of the pregnancy.

Because of certain diseases which you may have had or other conditions which may complicate pregnancy, your

Statistics reveal that after a person leaves his teens the eyes begin to slow down greatly. At 30 years, 39 per cent have visual shortcomings. At 40 years, 48 per cent have faulty vision. From then on eyesight fails rapidly. At 50 years, 71 per cent have errors in vision, and at 60 years, 82 per cent.

—Better Vision Institute.

physician will follow much the same program as in dealing with disease. He will take a careful health history of both parents. The knowledge of certain diseases which you may have had, and which may have impaired the function of your heart or kidneys, will aid your physician in giving you the right counsel and care.

He will measure your pelvic bones to see whether there are any deformities that might interfere with normal childbirth. He will watch your weight, make periodic examinations of your blood pressure and urine in order to detect any signs of impaired kidney functions, which if not properly dealt with might lead to serious results.

As an expectant mother you will get advice from your physician regarding your diet, exercise, rest, recreation, dress, elimination, and other hygienic measures including mental hygiene.

All this may seem like a formidable array in dealing with what should be a normal process in life. But when we consider the toll of human life resulting from neglect of these precautions,

a toll which might have been avoided if the right course had been followed, it makes it all very much worth while. The confidence and assurance with which the expectant mother may, because of such care, approach this wonderful event in her life, is sufficient compensation in itself.

By the application of the modern knowledge of nutrition, much can be done to build up the reserves of the expectant mother. As a result the baby will be better nourished and more nearly perfect at birth.

The mother may avoid many of the disagreeable symptoms and dangers so common to pregnancy, and there will be few complications. She will feel better in every way and will regain her normal strength in a shorter time.

If a child has a good start in life because his parents were willing to adhere to a good health program, then he will have a good foundation to build on in increasing the life span. This is the time to begin; the health of the future depends on the application of good health habits early in life, persistently followed through childhood, youth, and adulthood. This will determine the health and stamina of a nation.

BACK FROM THE WAR



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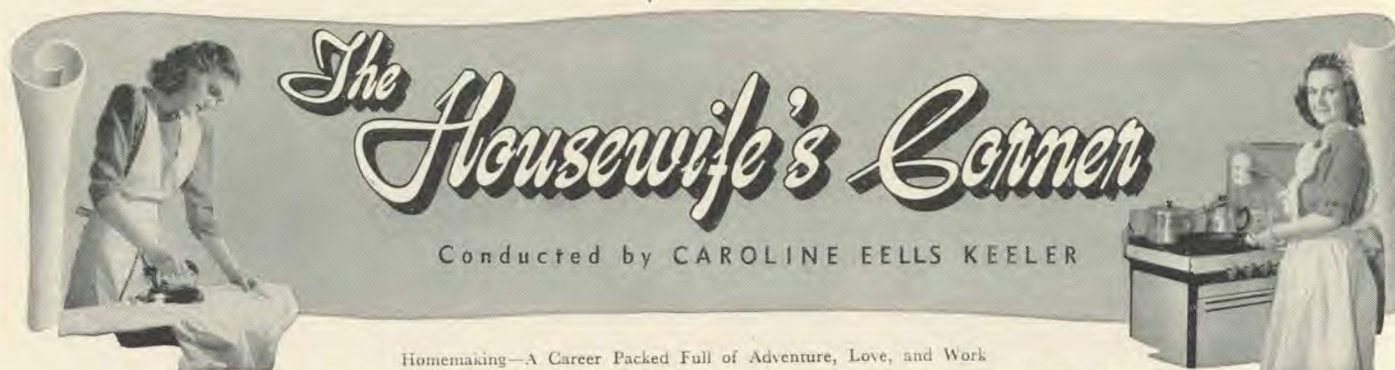
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Please enclose a stamped addressed envelope when writing to this Department. Address Housewife's Corner, LIFE AND HEALTH, Takoma Park, Washington 12, D.C.

HAPPY NEW YEAR to you all. Perhaps it has been a white Christmas for many of you—it has for us, and a very lovely one—and many may have been eating strawberries in Florida, right out of the garden! I do wish every good thing for each housewife as she ministers lovingly in the home. May we be more conscious than ever of the sacredness and the privilege of the work that is ours to do. May we distill from the tasks that “prick us sore” as did Shapur in “The Desert of Waiting,” some precious attar to sweeten our lives and those around us.

MUSINGS—One time I had the pleasure of teaching a literature class of girls. One day each week we had a little club meeting at which we presented something from the pen of our favorite author or poet, who we pretended to be. One girl represented Alfred Lord Tennyson, and she herself could produce some beautiful bits of poetry. There was Bobby Burns, who was whimsical and had “long, long thoughts.” Another, with her gentle, homey ways, was Edgar Guest. And there were Whittier and Wordsworth and Browning. I can’t remember all the poet’s names now. And I, well, I was Henry Wadsworth Longfellow, with my favorite “And the night shall be filled with music, And the cares, that infest the day, Shall fold their tents, like the Arabs, And as silently steal away.” We had some fine times together, and for our club meetings, we took this motto: “I Will Learn Something Beautiful, See Something Beautiful, Do Something Beautiful, Each Day of My Life.”

I do not know how we have kept this pledge during all the years that have passed. It may sound a bit Boy Scoutish to you—this doing something beautiful each day. But a kindness is always beautiful, and perhaps if we keep doing a daily kindness, being kind will become our chief characteristic. There is nothing in the world so beautiful and wonderful as being kind. There is so much unkindness, so much harshness, and so many angry voices, selfish motives, that kindness is a real jewel that glows and glows and is very precious. Let us this new year be more kind and strive for better understanding of our friends and families and

those whom we meet. Not long ago I was reading aloud the lovely story of the cross and the resurrection, and I know there were tears in my voice. I am not ashamed of those tears. When the story of that matchless love fails to move one, that is the time to be ashamed.

And if we learn something beautiful each day, our minds will be stored with beauty; there will be no room for ugliness. I would recommend to you the tender shepherd psalm; the charity chapter, 1 Corinthians 13; the salvation chapter, Isaiah 53; and those beautiful chapters that picture the new earth, Revelation 21 and 22. That’s a good bit of memorizing, but if we try to learn one verse a day, it will be no time before we will have stored in our minds these treasures to repeat as we work, and they will become more precious to us.

RECIPE OF THE MONTH

Baked Beans

Pea beans, cooked
 $\frac{1}{2}$ cup brown sugar
 $\frac{1}{2}$ cup top milk (cream)

Boil beans until soft enough to eat, put in quart casserole. On top sprinkle the brown sugar and add cream. Bake until flavors are well blended.

—From Mrs. Thomas Wetmore, Penn Yan, New York

As we daily read the Word of God we will not only be thrilled with the story of redemption but delight in the beautiful expressions. Last summer I was reading in Jeremiah, and I came across this very brief but realistic—to me—description of the sea: “There is sorrow on the sea, it cannot be quiet.” I have thought about this myself as I have stood by the ocean and watched the waves beat restlessly on the shore, and wondered if the sea were not sad because of the many tragedies buried in its depths. This is purely imaginative thinking, but as my little boy used to say, “Mamma has a great imagination.”

Then let us see something beautiful each day. No one can fail to achieve this it seems to me, and something beautiful does not mean merely exquisite crystal or china, or fragile laces, or lovely sunsets

and paintings. It means seeing the beauty in someone not especially blessed with facial beauty but with a loveliness of character. It means seeing the beauty of sacrifice in our fathers and mothers, to try to find the beauty in someone who hasn’t many beautiful traits but who might have one that could be developed until it became the dominant trait in his life.

WINTER SKIES—How still and vast and wonderful are the winter skies! We take our little book out with us and try to locate the different constellations. Of course, the Big Dipper and Little Dipper and Orion are well-known to most everyone, but now we have become acquainted with Cassiopeia, that *W* of the skies, and do you know *Draco*, the dragon, and *Gemini*, the twins? Orion is very easy to find, and when you have found this sky hunter, it is simple to find his dogs, *Canis Major* and *Canis Minor*. Bundle up at night and go out with a little star book and a flashlight, and you will be thrilled as you find the stars. We obtained a fine little guidebook at the five-and-ten-cent store called *Seeing Stars* by W. B. White, published by Rand McNally.

WINTER FUN—Too many of us huddle about the stove or the register these days. We ought to get out more in the wintertime, dress warmly, and just go out and have a winter adventure. Have you seen the fairy tracks of the birds as they search for seeds on the weeds that protrude through the snow? Have you made snow angels? Have you made a feeding station for the birds? Oh, there are so many interesting things to do in the winter.

There are cozy winter evenings when we pop corn and bring up a bowl of apples from the basement and play some games or read some good book. Do you have the games “Goldfinch,” “Monarch,” or “Larkspur”? These will acquaint you with many birds and butterflies and flowers. We like sometimes to drill on the vocabulary pages in *Readers Digest* or *Your Life*, and learn new words. You could see who makes the highest score in “Healthwise.”

This winter we have some new members in our family. There is Topsy, the

black horse. John and his friend Robert have many a merry canter on her. Then there is Chocolate, Queenie's little heifer calf. She has a white star in her forehead and is just the color of a rich chocolate cream. There is Fiddlefoote, the new puppy who is just a dog, but a very cute one at that.

The boys are learning to ski, and then there is coasting, with the thrill of going down a hill like the wind.

When putting on snow suits or other winter wraps that have zippers, often we are annoyed by sticking zippers. This trouble can be avoided many times if we rub the zippers with wax.

You can obtain colorless pomade and apply to your lips these cold days to keep them from chapping.

VACUUM BOTTLES are not to be washed like dishes—I hope you haven't made the mistake I have in washing the vacuum bottle that your husband carries with his lunch. If you put one in the water the insulation is injured. You have to rinse and shake them and use a soft bottle brush for getting any clinging particles and then rinse again.

When you first buy a vacuum bottle, rinse it with lukewarm water before using it. If you are going to put something cold in the bottle, condition it first with cold water, and do likewise with hot water before you put hot liquids in.

After you wash your bottle and rinse it with hot water, turn it upside down in your dish drainer so it can dry and air thoroughly. We can scrub the tops and corks with soapy water and then rinse and dry. We can always get new corks at the drugstore when the old ones get chipped.

BOTTLES AND JARS—If you are one of these people who must put the covers on all jars and the tops or corks on all bottles when not in use, try to get over this; you can put the cork right by the bottle and the cover by the jar, but if you close a bottle or jar, it will have a musty odor when you want to use it.

LINENS—The January white sales are here again, only they aren't simply white sales any more, for linens now come in many colors—green, peach, pink, blue, beige, and even gray.

Perhaps you think you can't afford percale sheets, but you must buy the cheaper, more coarsely woven types. This is a mistake. The smooth texture and the lasting quality of percale sheets more than make up for the extra cost. If possible buy the 108-inch sheets, then you have plenty of sheet to tuck in. These short sheets are not practical, and they are provoking.

Feel the sheet to test its quality. Oftentimes loose weaving is covered up with sizing, but this can be detected by a powdery film appearing if you rub the material. A sheet will last a long time if you buy a quality sheet and launder it before it gets really soiled, and look to its mending when rips or weak places are apparent.

POEM—A reader asked me if in my collections of poems I had one that went something like this:

"How sweet is the air!
I wonder what's in it.
Tweedle dee, tweedle dum, tweedle doo."

The poem has an Aprilish sound, and I'd love to know the rest of it myself. Does anyone have this particular poem?

EASY IRONING—I have recently received from General Mills the *Betty Crocker Guide to Easy Ironing*. It is a complete manual of instruction on how to do perfect ironing. It is well illustrated and our readers can obtain this booklet by sending fifteen cents in coin to Betty Crocker, General Mills, Minneapolis 1, Minnesota. Do not send requests to me, but to Betty Crocker as addressed above. This book will tell you how to hang clothes on the line, how to dampen clothes

for ironing, what your ironing equipment should be, and ironing procedures on just about everything from blankets to veils. There is also information on pressing and starching. I hope all of you will take advantage of this offer.

CURTAIN RODS catch on your sheer curtains when putting up clean curtains. Some say that to dip the ends of the curtain rods in melted paraffin will prevent this. Others say to use a clothespin on the end of the rod as you slip the curtain along.

We Apologize

for omitting the name of Mrs. Henry W. Bass of Syracuse, New York, as the one sending in the Recipe of the Month (savory gluten roast) which appeared in the November, 1947, LIFE AND HEALTH.

White



Vows

By D. A. DELAFIELD

"The New Year begins in a snowstorm of white vows," wrote George William Curtis. But for most of us it is as distasteful to make new resolutions on January 1 as it is to get out of bed at 5:30 on that cold, winter's morning. And it is as easy to break these vows of good faith as it is to forget to bring the wife a gift on your wedding anniversary.

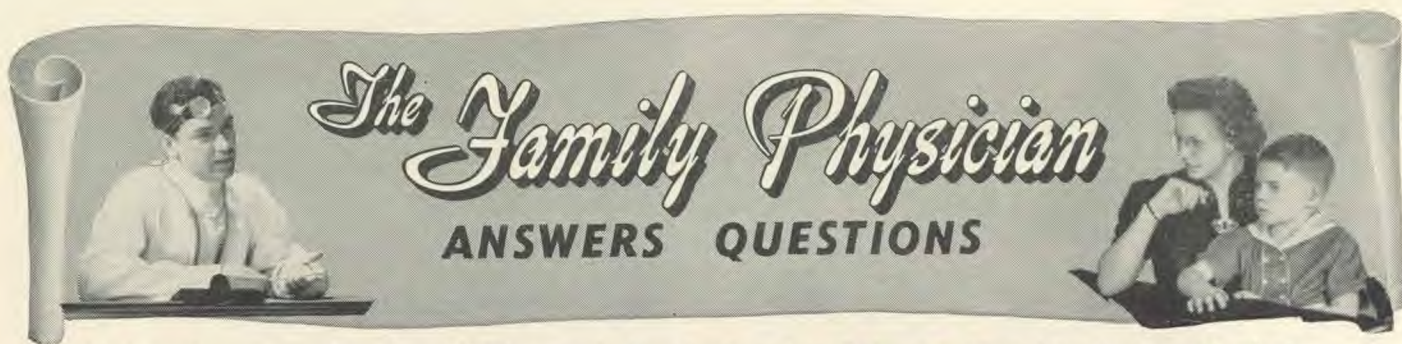
John resolves that he will stop smoking, and burns his box of cigars or buries them in the backyard. Bill vows that he will not drink another drop as long as he lives. Tom is certain that he will never fly off the handle again, and Bob is done with swearing. Mary is determined that she will never punish the children in a fit of temper again. Phyllis is through with night life and hilarity. Joanne is getting too fat and has decided to reduce, but it is New Year's Day, and she will begin dieting tomorrow. With Virginia it is different. She is losing weight; and although it annoys her to tears to eat a large breakfast, the doctor has given orders, and she has purposed halfheartedly to obey.

What a snowstorm of white vows! And every resolution, like every snowflake, is a perfect pattern of human determination. But how quickly do these good intentions of ours lose shape and form. Under the heat of contest and trial they melt and run away like the snow in the sunshine. What is the trouble? How can we be true to our best resolutions and our better self? The answer is found in the will of man and in his consciousness of divine assistance. Few of us recognize the tremendous potentialities of will power unused and waiting for release that all possess. The true force of the will is not understood or appreciated. This faculty, upon which all right action depends, is the ruling power in man's nature.

But most people have their will wrapped up in a sling. It is weak and useless. In this sorry condition it has slumbered for years. But it is still alive. It must be called into action. Amazing results will follow if we will try hard enough. If we choose the right, with a prayer for help, God can and will make our weak and untried wills virile and strong.

It is a physiological truth that the exercise of the will to recover health, to live, to achieve, to accomplish, releases from the brain through the nervous system electrical impulses that stimulate every organ of the body to new and vigorous life. Man is a creature of God, and dependent upon Him for life, yet he is also made in God's image and endowed with the faculties of reason and volition. He may think and choose and decide. The exercise of these faculties will cause the whole man to thrill, and throb with health. Old habits may be corrected and new habits of life formed. There is no limit to the growth and development of the man or woman who discovers this new and potent way to better living. With a prayer for help, with faith in God, with fists clenched and faces set like flints, let John and Bill, Tom and Bob, Mary, Phyllis, Joanne, and Virginia go forward to new and abundant living. And no matter what happens be sure to set the will in the right direction, for the man who rules his own spirit, is, as the Good Book says, "better than . . . he that taketh a city."

You can and must make a glorious year out of the span of twelve months ahead. Resolve to be true to those "white vows," and you will.



We do not diagnose or treat disease by mail. Enclose stamped, addressed reply envelope. Replies made only to letters from bona fide subscribers. Address Family Physician, LIFE AND HEALTH, Takoma Park, Washington 12, D.C.

Eyewash

Kindly advise if an eyewash of diluted boric acid is beneficial. My right eye is somewhat weaker than the left, also a little smaller, because of an operation I had some years ago. I bathe my eyes with warm water every morning before washing my face, as I am sure that will not harm.

We would advise against washing the eyes in a water solution unless it is standardized as a normal saline solution. Plain water is irritating to the eyes. A saturate solution of boric acid in water is an acceptable eyewash if one is needed. However, if there is no inflammation in the eye, we would not advise the regular use of even this type of wash. Some recent workers prefer other solutions.

Weakness of the eye will probably not be helped by drops, as the weakness exists more in the muscle control or structural make-up of the eye. If you have infection of the eyes, the saturate boric solution may be used as drops several times a day, or a small amount of an ophthalmic ointment containing yellow oxide of mercury or sulfathiazole may be squeezed into the eye space two or three times a day and be allowed to spread over the eyeball. In this way all exposed surfaces will be reached.

Ulcers of the Mouth

For the past two years I have had white ulcers breaking out on my tongue and inside my mouth. They get very sore and go deep into the flesh. I can cure them in a few days with powdered alum, but they come back again. Can you tell me the cause?

From your description I judge that these are the whitish ulcers that appear from time to time in many persons' mouths, frequently called canker sores. Sometimes these are due to local irritation, but more often perhaps to states of health affecting the nervous system or peripheral nerves, and thus the nutrition of the mucous membrane at the point where certain nerve fibers are distributed. Vitamin B in large quantities would be thought of in treating lesions of this kind. Local applications such as mild disinfectants, or an astringent such as alum, serve a useful temporary purpose. A well-

balanced diet, with abundant minerals and vitamins, should be planned. Also any acute infections anywhere in the body, particularly in the upper respiratory tract, should be cleared up. If you are recovering from an acute illness, give close attention to suitable rest and nutrition.

Osteochondroma (Bone Tumor)

My son had an X-ray of his leg and was told he had osteochondroma (at upper end of right fibula). Kindly tell me the cause of this swelling, or lump, in his leg and should he have medical attention?

An osteochondroma is a type of tumor commonly found where tendons insert into bones, or near the end of bones where there is a small cartilage layer of tissue uniting with the bony structure of the main shaft of the bone. The tumors are usually classed as soft-tissue tumors, but the bony element in them may make them feel rather firm at times. Most of them are not serious, but a few have been known to assume malignant tendencies. For this reason it is generally felt advisable to remove the tumor so as to forestall the chance of malignant changes. The cause of these tumors is not known. In some instances it is believed that they tend to run in certain families. In other cases quite likely they are the result of a blow or injury at the site where they grow. We would suggest that you get in touch with some physician who specializes in the treatment of bones (orthopedic surgeon), so that the best of care may be given.

Correct Posture and Prolapsed Stomach

How can I attain a correct posture for standing, walking, or sitting? Does an incorrect posture bring on a prolapsed stomach? Someone told me it does. Your help would be very welcome.

The simplest suggestion we can offer with regard to posture is that you stand against a wall with your heels, hips, shoulders, and back of head touching the wall. Then move away from the wall and maintain this position as nearly as possible in walking. When you sit, bend the body at the hips and knees, but retain essentially the same position with respect to the relation existing between the hips and shoulders and head.

Incorrect posture, particularly that leading to a stooping of the shoulders, and relaxing the abdominal muscles may tend to prolapse or cause the falling of the stomach to some degree. In standing erect, one should hold the muscles of the abdomen more or less taut in normal health. At any age the contour of the abdomen should be essentially a straight line from the tip of the breastbone to the bones in front of the bladder. The large forward bulge that many people have is not normal.

Cause and Treatment of Spastic Colon

What is a spastic colon? What kind of diet should one have for that condition?

A spastic colon is one that is in a more or less irritable condition and tends to close down and prevent the passage of material through its lumen. When an individual is afflicted this way, it is common for the fecal matter to appear in small round lumps or balls. Usually in dealing with this condition it is best to use a diet that is bland in its make-up. Avoid coarse, rough foods, or irritating foods, and condiments. Sometimes a small amount of mineral oil with the diet may prove of benefit, or the use of warm packs externally over the abdomen once or twice a day. Plan a regular habit and time for bowel movements. Furthermore, it is commonly observed that those suffering with spastic bowels are those with a high-strung temperament. Control of one's emotions may go far toward giving relief.



**FIGHT
INFANTILE
PARALYSIS**

Join the
**MARCH
OF
DIMES**

JANUARY 15-30



In the Doctor's Office

By Amy Klose, R.N.

Dalton City Has a Siege of Contagious Diseases

THE Kane County Health Department today reported two more cases of diphtheria, the fourth and fifth reported in the county this year. Mild cases were indicated.

"Stricken by the disease are Donna Marshall, six-year-old daughter of Mr. and Mrs. Sam Marshall of 53 H Street, and Harold Howell, son of Mr. and Mrs. H. J. Howell of 64 L Street. Harold Howell is a patient at the Dalton General Hospital. Both children attended the Lincoln school. The health department reported a minimum of contact with other children in both cases, but an extensive program of testing and prophylactic treatment is being done at the school in order to prevent further spread of the disease."

Mrs. Thompson put down the paper and looked across the street at the diphtheria sign on the Marshall's house. "What a pity. She wouldn't have needed to take diphtheria if they had done for Donna what I did for Tommie and Alice." Mrs. Thompson was a wise and good mother to have Tommie and Alice immunized against diphtheria. The Marshalls were new in Dalton, and their child had never been immunized. Dr. Hamlin now treated the child with antitoxin, furnished by the health department. First he made a skin test to see if Donna was sensitive to the serum. He injected a drop of this antitoxin between the layers of the skin. In fifteen minutes he observed that there was no reaction so he knew that it was safe to give the antitoxin in the usual way. An elevation at the site of the injection surrounded by a reddened area would have meant that Donna was sensitive to the protein in the antitoxin serum. Other members of the family were given prophylactic doses of antitoxin to provide immediate immunity and were asked to report to the office for toxoid injections to secure a more lasting immunity. They were told that the antitoxin would give immunity for about three weeks only.

The other case of diphtheria which had developed in Dalton was Harold Howell. After an examination of the child and the home conditions Dr. Hamlin sent the boy to the hospital, where the nurses were well-trained to care for communicable diseases. A separate room was set up. Each time a nurse went to give care to the patient she covered her uniform with a gown which was hung conveniently near the door. After giving the care she removed the gown, hung it up, and carefully washed

her hands before leaving to care for other patients.

Harold was a sick boy. His throat was covered with a gray membrane, which looked characteristic of diphtheria. In order to make a more definite diagnosis Dr. Hamlin ran a sterile swab over the membrane and transferred this to a test tube. This would be incubated for a time at body temperature and then a slide prepared for examination under the microscope. The doctor did not wait for the report of the culture before he gave the boy an injection of diphtheria antitoxin.

Dr. Campbell, the health officer, was determined to prevent an epidemic of diphtheria. He ordered an intensive program of testing for immunity by means of the Schick test with booster injections of toxoid to the children. Birthday greetings from the health department to all children born in the county included reminders to parents to have their children immunized. He was very anxious to get all children immunized by the time they were one year old.

The sound of whooping cough in the children's ward at the hospital reminded Dr. Campbell that a whooping cough case had been reported. He was glad the child had been sent to the hospital. He knew that so often whooping cough is considered a routine childhood disease, and very little precautions are taken to prevent it, yet he had always stressed the importance of immunization by the time the child is six to nine months old. Whooping cough itself may not be very serious, but the complications following the disease are frequently severe. Bronchopneumonia or undernourishment due to persistent vomiting are fairly common. Later tuberculosis or heart diseases may develop. He knew he must give more publicity to the importance of prevention of whooping cough by immunization and quarantine.

A smallpox case had been reported in a neighboring county. What a terrible thing it would be if it spread to Dalton. Dr. Campbell knew that all school children not previously vaccinated had been vaccinated at the beginning of the school year. Some children may have been transferred to the schools of Dalton since then. He would ask the school nurse to make a careful check. He would ask Dr. Hamlin and the other physicians of the community to remind their patients of the importance of vaccination.

(Continued on page 27)

Scientific Support Helps HEAVY FIGURES

Through a unique system of adjustment about the pelvis, CAMP Scientific Supports help hold those extra pounds in truer anatomical alignment. General muscular strain and that fatiguing pull on the back are reduced as the bony framework is gently induced to bear a more normal share of the load. Added comfort,

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World's Largest Manufacturers of Scientific Supports.

The Mother's Counselor

Conducted by BELLE WOOD COMSTOCK, M.D.



Questions for this department should be addressed to the Mother's Counselor, LIFE AND HEALTH, Takoma Park, Washington 12, D.C. Always enclose stamped, addressed reply envelope.

Helping a Poor Appetite

My four-year-old girl is a very poor eater—only one or two bites and that's the end of the meal. She is a very active child and very bright, but she will not eat. She eats a good meal about every fourth day. She does not drink much milk—about one quart in three days. She is very thin and has quite a temper. We have had her to doctors, and they say she is in perfect condition. We do give her a vitamin tablet every day, but the doctor did not recommend it. She has a tiny cough as if she were clearing her throat all the time. The doctor said her tonsils are good and also her lungs. I do hope you can help me solve this problem.

It is evident that your little girl is very nervous. Nervousness can make a person lose all desire for food. And then too, if one is emotionally upset at mealtime it tends to take away one's appetite, no matter how hungry one might have been before. I am sure that your anxiety in regard to the little girl's eating has been a big factor in her not wanting to eat. I suspect that there is hardly a meal when there is not emotionalism and argument sufficient to drive away any desire for food the child might have had. Neither you nor I could eat under such circumstances, so these are my suggestions:

- (1) Don't expect her to eat very much. Place before her a small serving of one or two foods with her glass of milk.
- (2) Don't appear to care whether she eats or not. Let any conversation that is carried on be concerning something pleasant which has nothing to do with food or eating. When mealtime is over, do not appear to notice that she has not eaten all her food. Let your attitude be one of happiness and cheer.

(2) The two foods that are most important are fruit and milk, so a meal may be just as simple as that—a serving of fruit and a glass of milk. And this milk should have most of the cream removed from it. It is the protein and calcium in the milk rather than the cream that is important in a child's development. Another meal could be a baked potato or any other vegetable, and a glass of low-fat milk. Following such a program, two things will happen. The little girl will begin to relax at mealtime. And it won't be many days before she will be ask-

ing for more food, or at least will express a great willingness to eat more. The nervous tension this child is revealing and its effect on her development and personality are far worse than not getting enough food. If the nervous tension is relieved it will be very easy to manage the food program. But never should mealtime be anything but an occasion of happiness and delightful sociability.



Finger Sucking

We have a girl of eight years of age who is still sucking two of her fingers during the night. She does not want to do this, but in her sleep she automatically puts the fingers into her mouth. We tried different things to stop this but without success. During the last few weeks she has been putting a glove on her hand. Could you give me some advice about this habit?

I do not believe you have much to worry about in connection with your little girl's sucking her fingers. Especially since she is quite willing to be co-operative. Having had this habit for many years, of course, makes it much more difficult to cure. It seems that it would be possible to put a glove on her hand so securely that she could not remove it in her sleep. (A mitten might be better than a glove.) The upper edge of the glove or mitten could be firmly secured by adhesive tape. This glove or mitten could be soaked in a bitter solution of some sort and then dried, of course. A bitter taste would certainly be a deterrent. If in spite of all this she sucks her fingers right through the mitten, it is possible I believe to get an aluminum guard that covers the entire hand. I used this for one of my children. As time goes on and you persist in your efforts, I think you and your little girl will finally win out in your attempt to correct the situation. In the meantime do not let this

be a matter of anxiety or worry, but act as though it is a sort of game and laugh about it when you are not always successful.

Fingernail Biting

My boy, age nine, bites his fingernails. I tried manicuring them, but it didn't do much good. He is a nervous child and is thin, although he is very active. Now my youngest boy, age two and one half, has started biting his nails. What can I do to stop them?

Children bite their fingernails because they are nervous. A nervous child is almost invariably made so by his environment. The most important thing in the treatment of fingernail biting is the overcoming of conditions that cause nervousness. Continually reprimanding the child about fingernail biting tends to increase his nervousness. Talking about it continually never accomplishes anything. So one important thing is to pay no attention to it. As a mother relaxes, her children tend to relax and become less tense.

There is always something wrong somewhere in a mother's attitude if she is continually trying to get her children to do, or not to do something, without success. If her efforts are futile she might just as well discontinue them. So first be sure that your own nervous system is at ease. Cultivate a serene, happy atmosphere around the children, and let them learn to a great extent by the example of their elders. Happiness and contentment can do more to correct a nervous habit than anything else. Overanxiety on the part of a parent almost invariably does harm to the entire family.

You should, of course, give careful thought to the children's nutrition but not to the point of nagging them about the kind or amount of food they eat. The conditions of nervousness are often improved by the giving of vitamin-B complex with each meal. Pancreas compound has also a relaxing effect on the nervous system and may be given at mealtime to an advantage. The contents of the pancreas capsule may be emptied into the children's food. It is, of course, wise to keep the children's fingernails nicely manicured. This should be done whether they bite their fingernails or not.

How to Grow House Plants

MOST people like to grow at least a few house plants, especially in winter. Our grandmothers all knew just how to do this, but many of the present generation are not skilled in house gardening.

In order to succeed well, we must have the soil right. Tin cans and pails are just as good as clay pots insofar as the requirements of the plant go, but whatever container is used, there must be one or more holes in the bottom for drainage. Several small holes are better for containers more than six inches in diameter. These holes may be made in the bottom of cans by driving a fair-sized nail through the bottom, but the nail should be driven from the inside out, for this lets the water escape more readily.

For most plants, a good rich garden loam that will not settle into a hard ball in the pot is all that is needed. Before putting any soil in the pot, lay a few pebbles or pieces of broken pots over every hole in the bottom in such a way that it will not allow the soil to stop up the holes and so prevent the escape of surplus water through them.

The first requirement of plants is plenty of daylight, especially during their growing season. Most plants want direct sunlight, and for this reason a south window is the best place to grow them. If a south window is not available, an east window will do for many plants.

The plants that require direct sunshine even at noon are coleuses, geraniums, flowering callas, the bedding types of begonias, Christmas cactus, sweet sultans, and most of the annuals like dwarf marigolds, and nasturtiums. Ferns, palms, umbrella plants, ivy of all kinds, rubber plants, and Chinese evergreens all do better in only a short period of direct sunlight, and so do well in an east window. Most of these can be grown without direct sunlight if the room is a light one. Those plants that require the least direct sunlight are usually the best and easiest to grow.

Do not set plants in pots that are too large unless vigorous plant growth rather than flowers is desired. Plants bloom best when they are pot bound, which means that the pot is full of roots and little room is left for more. Of course this can be overdone, but too much pot room encourages the formation of a large plant and delays the production of flowers.

The second requirement of all plants is a plentiful supply of water within reach of the roots, but it is also important to most plants that the soil not be so wet that there is not room left for the circulation of air

about the roots. Do not water plants every day, but watch the soil, and water them when it is needed. When a pinch of soil from any pot crumbles readily, that pot is ready to be watered. When you water, do a good job of it, lest the inside of the pot remains dry while the top seems wet. Do not try to save yourself trouble by setting the pot in a container of water so the soil can take up its own water. Usually this means that the soil in the pot is too wet, though the top seems dry, and the final result is death to the plant.

Watering plants slowly leaches away the fertilizer, especially the nitrogen. Besides, the soil occasionally needs to have a little cultivation. Most plants will appreciate a level teaspoonful of a good complete fertilizer worked into the top inch of the soil, followed by a good watering. This should be done about every two months.

If the leaves on a pot plant begin to lose color, turn yellow, and fall off, know that something is wrong. If the plant has been in the same container for a year or more the roots have either become too crowded or the plant needs feeding. The remedy is to repot the plant. Even though you intend to repot in a little bigger pot, it usually pays to break off a little of the soil from the outside of the ball of earth holding the roots before putting it in its new home.

Another cause of yellow leaves and kindred troubles is too much water. And this is usually accompanied by more or less decay of the leaves. Of course, the thing to do to remedy this is to stop watering so frequently or so copiously.

If the room is heated by gas, or contains a gas cookstove, many plants are injured,

even though so little gas escapes that those living in the room would not notice it. To thoroughly air out such a room once or twice a day often makes it possible to keep plants there and certainly benefits those who are there in the room, for if the air contains enough gas to injure plants, it certainly is not good for a human being.

Most plants do best in a room where the temperature does not go above 70° F., and many people like to have their living room several degrees warmer than that. For this reason, where it is possible, keep the plants in the window that is in the coolest part of the room.

Insects sometimes get on the underside of the leaves or on the stems of the plant and do their damage. But we do not have room to discuss insects at this time.

+ + +

Contagious Diseases

(Continued from page 25)

Miss Eaton, Dr. Hamlin's patient, had recently returned from a vacation trip out of the State. About a week after her return she complained about headache, chilliness, aching, and a slight fever. She told the family she felt as if she were getting the flu. By the fifth day she felt much worse. Her fever went higher each afternoon. The pain in her back and legs was severe, and her abdomen became much distended. About this time Dr. Hamlin was called. No case of typhoid fever had been reported, but from a description of her symptoms, especially the variation in the forenoon and afternoon fever, and the distention of the abdomen, he suspected typhoid fever. He removed a small amount of her blood into a sterile test tube and took it to the laboratory, where a culture was made. The second week of the disease the symptoms became more aggravated. The fever was high and peculiar spots called "rose spots" appeared on the abdomen and chest. He told the family that in no other disease was intelligent nursing as important as in typhoid fever. Miss Eaton's sister had taken the Red Cross nurses' aide training and had given much volunteer time at the hospital. With daily supervision from the community nurse it was decided this sister was to nurse the patient at home, thus saving the hospital rooms for less fortunate patients. The nurses' aide was given special instruction on the disposal of wastes to prevent the spread of the disease. Members of the family were given vaccine to prevent typhoid fever. The case was reported to the health department in the county where Miss Eaton had vacationed. Dr. Campbell used the occasion to publicize the need for protection by vaccination.

Back at his office Dr. Campbell made a note of the communicable diseases in the county: diphtheria, 5; whooping cough, 2; measles, 4; and last of all the case of typhoid fever reported by Dr. Hamlin.



Burpee's New Early Flowering Sweet Pea, the Mrs. Thomas Edison



JUST FOR BOYS AND GIRLS

Conducted by VEDA S. MARSH, R.N.



Benny, the Nursemaid

MOTHER, tell us a true story," said Joan, as it was nearing bedtime and the family sat before the fireplace.

"A story about one of your pets."

"Mommy, tell us about Benny and Blackie."

The Little Jays and Tommy sat on the floor, expectantly waiting for Mother to begin.

"When I was a little girl, we had a very fine mother cat named Blackie. She was very strict with her kittens and very careful to keep them clean and keep their fur shining and lovely. Every morning she would take them behind the kitchen range and give them a thorough scrubbing. She scrubbed their ears so hard they usually cried a little.

"One winter she had three little babies, and Grandma let us put a box in the kitchen for the baby kittens. Mother Blackie appreciated that comfortable bed where the sun could shine in on her family and keep them warm and comfortable.

"At this time we had a friendly, lovable, brown water spaniel dog named Benny. He was something like a cocker spaniel. Benny and Blackie were very good friends, and Benny was always interested in Blackie's families. So Blackie decided to have Benny help with her kittens. She liked to go to the barns in the neighborhood mousing. She was a good mouser, and kept the house and barns free from mice.

"One day when the baby kittens were still quite small, Blackie decided it was time to go on a mousing trip, and she decided she would have Benny play nursemaid while she was away. She found Benny in the library and began a special little call, 'Pur-r-r-r-t, Pur-r-r-t', as she rubbed and rubbed against him. Benny understood immediately what she wanted, but even as interested as he was in her kittens, he did not like to play nursemaid. However, Blackie would not give in; she kept coaxing and coaxing, and soon Benny got up reluctantly and followed Blackie out to the kittens' box in the kitchen.

"Blackie showed Benny how she had the kittens all sound asleep in a little furry pile and seemed to tell him they had been fed and would sleep a long time and be no trouble. Then she meowed to get out the back door.

"Benny dropped down beside the box with his nose over the edge, not looking at all pleased with his new job. Things

Letters From Some Habiteers

Aunt Sue has been delighted to receive letters from the following Habiteers:

- Dolly Perkins,
Wakefield, Rhode Island
- Beth Stout,
Greensboro, North Carolina
- Carole Randeholl,
Trinidad, B.W.I.
- Esther King,
Trinidad, B.W.I.

Congratulations to Dolly Perkins. She is the first to become a Conqueror. Won't some of the rest of you drop us a line? I am always glad to hear from you. Remember we'd like to learn more about your pets.

Sincerely,
Aunt Sue

went well for a time, but he kept watching closely for any move the kittens might make.

"After a while one kitten rolled over and stretched. Benny thought that meant he should wash them with his tongue just as he had seen Blackie do. Blackie's tongue was soft and tiny, but Benny's was very large and so rough and strong it rolled the little kitty over and over. She woke up with a start and began to cry. The others began to move, so Benny put his front paws into the box and licked first one kitty and then another. Soon all were kicking and crying.

"What should he do now?"

"Benny was as nervous as an old hen who has lost a chicken. He went to the back door and whined as if to say, 'Blackie, where are you? Come home and take care of your family. I cannot do anything with them.'

"Then he would go back to the box and gaze at the little crying furry balls, who thought it surely must be dinnertime right now. Finally they cried themselves to sleep and were all curled up again, and again Benny sat with his nose over the edge of the box, looking very worried.

"He seemed to say, 'What can I do to keep them sleeping? Oh, if they would

only sleep until Blackie comes home. Why is it taking Blackie such a long, long, long time? She really should be back by now.'

"Again there was a stir in the furry pile, and little Meow-meow began to cry. Benny stood up and tried to soothe his cries with his rough old tongue. This time all the kittens began to cry lustily, and Benny began to pace back and forth—to the back door to whine for Blackie, to the kitty box to lick the little squirming wrigglers, and then again to the back door.

"At last he heard a joyful sound, a plaintive 'Meow, Meow,' at the back door. He came running, and looking at us, he said, 'Woof—Woof,' and started toward the door as if to say, 'Please come quickly; don't you hear Blackie at the door?'

"When we opened the door, Blackie came trotting in, and as she and Benny started toward the kitty box, Blackie rubbed against Benny's front legs as she thanked him again and again for caring for her babies.

"Jumping into the box, she used a special meow for her babies as she curled down to give them a good meal and little love licks with her soft tongue. How happy they were to find their mother!

"And Benny?"

"His labors were over for the day, and he was completely worn out. Slowly dragging his weary bones to a warm spot behind the kitchen range, he dropped down with a hard dull thud, took a deep breath, let out a great sigh of relief, and was soon sound asleep.

"While he was sleeping we sometimes saw his legs twitch and heard tiny little woofs. I think he was dreaming that he was chasing a rabbit."

Suggestions to Teachers

1. Have a pet club, that can study the best means of caring for pets.
2. Study and talk about different kinds of pet animals, looking up about their history, habits, and care.
3. Have a pet day when the children can bring their pets to school.
4. Make scrapbooks about pets.
5. Outline balanced diets for different kinds of pets. Stress regularity in feeding and not too frequent meals, available water supply, and special care of different types of pets.
6. Have a pet fancier talk to the pupils about the care of pets.
7. Fix a bird feeding place outside the schoolroom window. Make a list of birds seen during this month.
8. List wild animals and birds that can be tamed, at least partially.

ATTENTION! BOYS AND GIRLS

Aunt Sue would like to have you write and tell her about your pets. How many do you have? What are their names? Do you have some interesting stories about them?

Junior Life & Health League

Rules

1. I take two baths each week.
2. I brush my teeth twice daily.
3. I drink milk every day. (Preferably 1 qt. daily.)
4. I wash my hands before eating.
5. I eat daily: vegetables, fruits (fresh, canned, or dried), whole-wheat or enriched bread.
6. I play or work out of doors six days a week when weather permits.
7. I sleep 8 to 10 hours every night.
8. I try to be courteous and cheerful at all times, and do one good deed for someone each day.

Progressive Class Requirements

HABITEER: Observe the rules for two weeks, and continue to keep them.

CONQUEROR: Be a Habiteer for six months, and continue to observe the rules.

LEAGUER: Be a Conqueror for six months, and continue to observe the rules. Enlist one new member in the League. Send in one new subscription to LIFE AND HEALTH.

The Habiteer, the Conqueror, and the Leaguer receive membership cards, and in addition the Leaguer receives a button.

Pledge

I have read the rules of the Junior Life and Health League, and have been observing them for (two weeks _____), (six months _____), (one year _____). I shall continue to observe them, and will read the Boys' and Girls' page each month. Please enroll me as a (Habiteer _____), (Conqueror _____), (Leaguer _____) of the Junior Life and Health League.

Name _____

Address _____

Age _____ Grade _____

Directions

Copy the above pledge in your own handwriting, sign your name (very plainly), and give your age, and grade if in school. Then write your address and the name of your father or mother. Mail this to Aunt Sue, LIFE AND HEALTH, Takoma Park, Washington 12, D.C.

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Bevasoy, delicious soybean coffee substitute, lb.	.30
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Fenugreek Tea, cuts mucous, 8 oz.	.40
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Oster Liquefying Machine, drink your vegetables	39.50
Flex-Seal Pressure Cooker, best, not aluminum, 4 qt.	15.95
Gluten Cutlets or Cutlet-burger, 20 oz.	.49
Black-strap Molasses Powder, rich in iron, 8 oz.	.35
Peppermint Tea, finest leaves grown, pkg.	.75
Sassafras Tea, try this with cream, after meals	.15

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Eyes—the Supercamera

(Continued from page 11)

The formation of a substance called visual purple takes place in the rods as the eye prepares for seeing things in the dark and the reaction of the retina changes from acid to alkaline. It is a remarkable series of complex chemical changes which take place in an incredibly short period of time. And when one returns to the brightly lighted room, the reverse takes place more rapidly.

In the latest textbooks of physiology a great many pages of fine print are devoted to the involved mathematical relationships pertaining to the physiology of the eye. Visibility curves have been worked out, and the percentage composition of the various components of the eye have been determined. There will yet be a great deal of information compiled. But for the present it suffices to know a little more than the color of one's eyes and that old folks usually need reading glasses, just as one gives more meticulous care to an expensive watch than to one purchased for a dollar at the cut-rate drug-store.

With the brief foregoing description of the eye it might be in order to mention some common eye disorders.

We have already mentioned astigmatism and the loss of accommodation resulting from advancing years, both of which may be partially or totally

INSIDIOUS SOCIAL PRESSURE

A problem of tremendous importance to young people in meeting the alcohol problem is the dominant social pattern of our times, which includes the social pressure of the group to at least accept social drinking. The importance of this particular pressure is increased by the fact that it comes at a time when the young person is least prepared to meet it.—Dr. George T. Harding, Professor of Clinical Psychiatry, College of Medicine, Ohio State University, Columbus.

corrected by the use of the proper lenses. Farsightedness results from the eyeball's being too short, a condition causing the light rays to focus at a point behind the sensitive screen or retina. Nearsightedness is present in the eyeball that is too long, the rays coming to a focus slightly in front of the retina. These conditions are also correctable to a degree with lenses.

Cataract is the name given to a complete or partial opacity of the lens. There are a number of causes and the



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treatment varies with the cause and condition of the cataract in question.

Though many defects of the eye are unavoidable and may be present at birth or be the result of advancing years, there is much we can do to preserve our vision and avoid the development of irreversible conditions.

To have good eyes one must avoid unnecessary strain brought about by using the eyes for close work when there is inadequate light. If any defect seems apparent, one should not delay consulting his physician to determine the cause. Strain may be placed on the eyes as a result of wearing sun glasses in which there are cheap, irregular lenses. To use such lenses would actually amount to wearing a case of astigmatism.

Since the eye is such a delicate, precision instrument, regard it as such and avoid any intemperate or careless use of it which would place its safety in jeopardy.



BOOSTER DOSE OF DIPHTHERIA TOXOID STRESSED

THERE is only one way to control diphtheria. That is by active immunization," Donald T. Fraser, M.B., Professor of hygiene and preventive medicine, of the University of Toronto, told public health workers at the Grand Rapids Conference. "Vaccinate infants and revaccinate as often as intelligence indicates and the patience of families permits."

A safe and effective prophylactic is not enough, Dr. Fraser said. It must be used intelligently. The answer lies in educating physicians and parents.

Every case of diphtheria merits persistent inquiry to find out why the person had not been immunized. Dr. Fraser believes that the answer is usually ignorance. In this field public health nurses are by far the most effective educators, he said.

"We fail miserably," he declared. "Every death from diphtheria is preventable and some person should take the rap."

Dr. Fraser who is internationally known for his research in diphtheria prevention, told the audience that three doses of diphtheria toxoid reduce the incidence of diphtheria by 90 per cent. "The booster dose can improve this," he stated. "I believe we can prevent diphtheria entirely. No child should be considered immunized without a booster dose."

—Michigan *Public Health*.

PURE WATER IS BEST MOUTH WASH

PURE water is the best mouth wash according to the Council on Dental Therapeutics of the American Dental Association.

"Pure water will fulfill the most important requirements as a mouth wash," the council reported.

Next best to plain water as a mouth wash is a saline solution prepared by dissolving two teaspoonfuls of table salt in one quart of distilled water.

Medicated mouth washes should be used only when prescribed by the dentist or physician, the council recommended.

"The fact that many persons rely on medicated mouth washes when they should visit a dentist or physician must result in numerous instances in serious delay in obtaining necessary treatment," the report said.

"For example, bad breath and sore throat are often symptoms of disease. The person who depends on mouth rinses to eliminate such symptoms or to prevent their development is fooling himself, perhaps to his own detriment.—American Dental Association.

NO ONE INHERITS TB

FEAR is responsible for the loss of many a life. Sometimes it is fear of knowing the truth which prevents people from seeking medical advice when they first become ill. Sometimes it is a haunting fear that a disease has been inherited and there is nothing that can be done about it.

Both kinds of fears have caused needless suffering to victims of TB. Fear never cured a person of tuberculosis, whereas knowledge points the way to recovery.

Tuberculosis kills approximately 55,000 persons in this country a year. But tuberculosis is not inherited, and a person can recover from it. There will be fewer deaths from the disease when people cease to be afraid to learn the truth.

There was a time, not so many years ago, when so little was known about tuberculosis that there was justification for excessive fear of the disease. Today, however, we know that a person can

recover from TB, particularly if it is detected in its early stages. We know, too, that it can be found in the early stage through chest X-ray examinations.

Furthermore, we know that TB is caused by a germ, the tubercle bacillus, and that this germ is transmitted from one person to another. People are not born with tuberculosis. They catch it from someone who has the disease.

The myth that TB is inherited probably arose from the fact that often different members of the same family had the disease. Unfortunately, it is true that frequently a whole family will contract TB. This does not prove, however, that they were born with it. The fact is that one member of the family caught tuberculosis and gave it to the others. Living close together, using dishes that had not been sterilized, it was only too easy for father to transmit the disease to son, for brother to pass it on to sister.

When people rid themselves of the fear that they have inherited a disease, they will realize it is not inevitable that they suffer needlessly and die of it. They will take advantage of the knowledge which medical science has placed at their disposal, and look forward to cure rather than backward at the shadow of fear.—District of Columbia Tuberculosis Association.

RHEUMATIC PNEUMONIA

DR. J. I. MOSSBERGER, writing in the *Journal of Pediatrics*, thinks that since acute rheumatic fever is predominantly a childhood disease, and because most of the heart disease in children is rheumatic, the possibility must be considered that the pneumonia which occasionally develops in a child with rheumatic heart disease is also rheumatic in origin. Other workers have pointed out that probably many of the odd and difficult cases of pneumonia that have formerly been observed in cases of rheumatic fever were in reality rheumatic in origin.

The histories of the patients recorded in this article were consistent with the concept of an allergic mechanism in the production of pulmonary disease. The pneumonialike symptoms and the conditions found in the lungs may occur some time after the subsidence of the original rheumatic heart trouble. This thought must be borne in mind in all cases of sulfonamide-penicillin resistant pneumonia occurring in children with histories of rheumatic fever.

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Dietetic Requirements of Nursing Mother.—Reproduction makes heavy demands upon the mother's nutrition. Although the calories are increased very little, the protein, mineral, and vitamin needs are greatly increased. Lactation makes the greatest demands, and only a carefully chosen diet will give the mother all the nutrients she needs. The magnitude of these demands can be seen by comparing the needs of the average housewife with those of the nursing mother. Although the calorie need is increased very little, she needs 1.7 times as much protein and 1.5 times as much phosphorus; the iron requirement is increased one-fourth, as is the thiamin. There is a small increase in the riboflavin requirement, but the demand for ascorbic acid and calcium is tremendous. Twice as much ascorbic acid is needed and 2.5 times as much calcium. These impressive figures help us to understand the following statement from a group of research workers in the field of nutrition in reproduction: "As the values from our investigators are brought together, impressive evidence of the unique physiology of lactation accumulates." A simple daily food plan, however, will turn the trick of giving the mother the moderate calorie, higher protein, and high mineral and vitamin diet she needs. This plan includes the daily use of the following foods.

- Milk: skim milk or buttermilk; 1½ quarts
- Egg: 1 each day
- Protein food such as nuts, soybeans and other legumes, cheese and egg dishes, and gluten preparation: 1 serving
- Leafy, green, or yellow vegetables: 2 servings
- Other vegetables: 1 serving (or three servings of the above)
- Potato: 1 or more serving
- Citrus fruit, tomato, or raw cabbage: 3 servings
- Other fruit: 1 serving
- Whole-grain cereals and bread: at least half of cereal foods from whole grains
- Butter or margarine fortified with vitamin A: 1 to 4 tablespoons
- Additional servings of these foods or other foods to complete the caloric need and maintain the individual's correct body weight.
- The addition of 1-3 tablespoons of wheat germ or rice polishing will assure sufficient thiamin.

Teeth and Lemon Juice.—Much comment has been made recently after the report of observations on fifty patients who were using lemon juice routinely and who showed evidence of dissolution of tooth structure. It has been known for some time that highly acid solutions do have a bad effect on tooth enamel, especially when used daily in the absence of other types of food. The patients reported from 22 States, Canada, Mexico, and Puerto Rico. They were taking the lemon juice in

self-treatment of rheumatism, constipation, colds, and as a tonic, also for its value as a source of vitamin C. Daily use of an excessive amount of lemon juice, especially when taken alone, can be considered an improper use of lemon juice. Small amounts of lemon and certain other foods represent an adequate supply of vitamin C, so it is not necessary to resort to its daily use in large amounts. Acid fruit candies and soft drinks when used constantly can also cause defects in tooth enamel.

I.Q. and Glutamic Acid.—Glutamic acid, one of the amino acids that make up the proteins, when given to animals has revealed some striking results in increasing the intellectual performance of these animals. When the test was carried to mentally retarded patients, similar results were noted. Dull and inattentive patients after taking glutamic acid became more alert, attentive, and persistent in trying to solve the test problems given them. Investigators feel that glutamic acid probably does not increase intellectual capacity but may enable the individual to regain intellectual functions that have been inhibited. It is not known as yet whether

there was a glutamic deficiency in the bodies of these patients. If so, the study will be of special interest to nutritionists, since glutamic acid is present in food and is also made in the body. At any rate, these few studies open an entirely new avenue of approach and suggest a method of improvement of brain function where before mental defects had been considered inalterable.

Processed Rice.—Converted rice is now on the market. This processed rice is as white as any white rice, but because of a precooking process it has the vitamins left in. Developed before the war, the converted rice was bought by the Government for military use all through the war years. The postwar product was introduced and named Uncle Ben brand at a luncheon at the Ritz-Carlton by Gordon L. Hartwell, rice king of Texas. In the processing the starch is gelatinized with steam, which results in a glossy surface with no free powder to cause a sticky, gummy mass. It cooks up white and fluffy, with every grain by itself. It is impossible to estimate the great value this processing will be to the people of the world, especially those whose main diet is white rice.



RUTH M. WHITE, R.N., B.S.

Have you taken the Red Cross first-aid course? If so, check these questions on first aid, and see how much you remember. If you did not take the course, test yourself on these statements, and take the course when the opportunity comes your way. (Underline the correct answer and then refer to page 34 to see if you are right.)

What's Your Score?

- 12-15 correct _____ excellent
- 8-11 correct _____ good
- 5-7 correct _____ average
- 1-4 correct _____ poor

1. **The best treatment for a bee sting, after removing the "stinger" is**
(a) Epsom salts compress, (b) ammonia water compress, (c) application of tea leaves.
2. **Which of the following may be put directly on a wound as a protective dressing?**
(a) adhesive tape, (b) sterile cotton, (c) sterile gauze.
3. **To stop a simple nosebleed,**
(a) put a piece of brown paper under the upper lip, (b) apply cold, wet compresses over nose, (c) stuff cotton in nose.
4. **To prevent a bruised eye from becoming black and swollen,**
(a) apply an ice compress, (b) apply a piece of meat, (c) cover eye with a bandage.

5. **A frostbitten hand may be treated by**
(a) rubbing with ice or snow, (b) rubbing with hands, (c) allow to thaw gradually in cold water.
6. **If poison has been taken by mouth, induce vomiting by**
(a) giving Epsom salts, (b) giving luke-warm salt water, (c) giving tea.
7. **Simple burns may be treated by applying**
(a) a paste made of baking soda, (b) melted butter, (c) buttermilk compress.
8. **Poison ivy rash may be treated by**
(a) applying ammonia water, (b) applying thick lather of laundry soap, (c) applying olive-oil compress.
9. **Advise a person who feels faint to lie down if possible, otherwise,**
(a) drink hot coffee, (b) sit down and put head between knees, (c) breathe deeply and slowly.
10. **A moderate amount of bleeding coming from a wound may be stopped by**
(a) pressure with gauze over wound, (b) applying an antiseptic such as iodine, (c) letting cold water run over wound.
11. **When a person is injured, the first thing to do in caring for him is to**
(a) take him to the hospital in your car, (b) ask him questions as to how injury occurred, (c) keep him lying down and warm.
12. **The object used to immobilize a fractured bone is called a**
(a) sling, (b) splint, (c) cravat.
13. **Promoting breathing by alternately compressing the lungs and releasing the pressure is known as**
(a) artificial respiration, (b) asphyxia, (c) Red Cross lifesaving.
14. **Boils can be opened best by**
(a) bread-and-milk poultice, (b) squeezing, (c) lancing by doctor.
15. **A toothache should be taken care of by the dentist, but until he can be seen**
(a) suck on lemon drop, (b) apply hot water bottle, (c) apply oil of cloves.

MEATLESS MEALS SIMPLIFIED WITH VEGETARIAN MENUS

(Continued from page 19)

SUNDAY

Breakfast

Orange juice Plum sauce
Whole-grain cereal with cream or milk
Milk
Whole-grain bread and butter

Dinner

*Savory vegetable loaf Mashed potatoes
Creamed peas Combination vegetable salad
Milk Whole-grain bread and butter

Supper

Apple-and-date salad
Favorite lentil patties Milk
Molasses bread and butter

MONDAY

Breakfast

Orange juice Stewed apricots
Oatmeal cereal with cream or milk
Milk
Whole-grain bread and butter

Dinner

*Walnut timbales Baked potato
Baked banana Squash
Grated beet-and-cabbage salad
Milk Whole-grain bread and butter

Supper

*Split-pea soup—croutons
Fruit salad with nuts
Milk Russian rye bread

TUESDAY

Breakfast

Mixed fruit juice Fresh or stewed prunes
Whole-grain cereal with wheat germ and
cream or milk
Milk Whole-grain bread and butter

Dinner

Boston brown beans with molasses
Potatoes cooked with jackets
Sliced tomato salad Broccoli, buttered
Milk Whole-grain bread and butter

Supper

*Carrot ring with green peas
Celery stalks Soy bread
Milk

WEDNESDAY

Breakfast

Apricot nectar Applesauce
Whole-grain cereal with cream or milk
Milk Whole-grain bread and butter

Dinner

*Parsley or celery loaf with tartare sauce
Baked yams Zucchini, buttered
Fluted cucumber salad
Milk Whole-grain bread and butter

Supper

Melon balls salad
Fresh tomato omelet
Milk Graham bread

THURSDAY

Breakfast

Grapefruit juice Peach sauce
Whole-grain cereal with cream or milk
Milk Whole-grain bread and butter

Dinner

*Princess loaf Browned potatoes
Swiss chard Shredded carrot salad
Milk Whole-grain bread and butter

Supper

Browned eggplant with tomato gravy
Sliced oranges with coconut
Milk Wheat-germ bread

FRIDAY

Breakfast

Tomato juice Pear sauce
Whole-grain cereal with cream or milk
Milk Whole-grain bread and butter

Dinner

*Pecan loaf Escalloped potatoes
Green string beans
Romaine lettuce, tomato, and cucumber salad
Milk Whole-wheat bread and butter

Supper

Creamed eggs on toast
Baked apples
Milk Bran bread

SATURDAY

Breakfast

Apple juice Frozen loganberry sauce
Whole-grain cereal with cream or milk
Milk Whole-grain bread and butter

Dinner

*Peanut-butter meat Beet greens
Hashed brown potatoes Cole slaw
Milk Whole-grain bread and butter

Supper

*Scandinavian fruit soup
Cream cheese spread
Milk Corn bread

* Indicates recipe given.

VEGETARIAN RECIPES

Walnut Timbales

2 eggs (beaten)
2 cups milk
4 cups diced stale bread
Sage or other herbs
2 tablespoons fat or oil
2 tablespoons chopped onion
 $\frac{3}{4}$ cup tomato juice
1 cup walnuts (ground fine)

Mix eggs and milk, and pour over diced bread. Let stand 20 minutes. Heat the fat in a pan and simmer the onion, but do not brown. Add the sage and tomato juice. Bring to a boil. Mix all the ingredients together, put in muffin tins, and bake until set. Serve with mushroom gravy. Yield: 8 timbales.

Pecan Loaf

1 cup chopped pecans
2 cups bread crumbs
1 cup chopped celery
 $1\frac{1}{2}$ cup tomato juice
 $\frac{1}{2}$ cup chopped parsley
2 tablespoons salad oil
2 tablespoons chopped onion
2 eggs (well beaten)
1 teaspoon salt
 $\frac{1}{2}$ cup chopped green pepper

Mix well together. Place in oiled pan and bake 45 minutes at 350° F. Serve at once.

Favorite Lentil Patties

2 cups lentils (well drained and
cooked)
3 tablespoons chopped onion
2 cups mashed potatoes
2 tablespoons margarine
Scant $\frac{1}{2}$ teaspoon sage or sweet
marjoram
1 cup chopped nuts

Place onion, savory, and margarine in a small pan and let simmer for a few minutes over the fire to soften the onion, but do not brown. Add the cooked and drained lentils. Shake together and mix with the mashed potato. Add nuts. Form into small round pattycakes and brown lightly in a quick oven or in oiled skillet. Serve with tomato gravy.

Parsley Loaf

$\frac{1}{2}$ cup nuts (any kind ground)
 $\frac{1}{2}$ cup cracker or bread crumbs
1 cup milk
2 eggs
2 teaspoons fat
1 teaspoon salt
1 teaspoon grated onion
1 cup parsley (put through food chop-
per)
2 tablespoons tomato puree

Mix nuts with tomato puree. Add cracker crumbs, beaten eggs, seasoning, milk, and parsley. Turn into buttered baking dish and bake in moderate oven. Serve with tartare sauce.

Tartare Sauce

1 cup mayonnaise
1 tablespoon chopped dill pickles
 $\frac{1}{2}$ medium onion (grated)
3 tablespoons stuffed olives
 $\frac{1}{2}$ can pimiento
2 tablespoons lemon juice
 $\frac{1}{2}$ cup rich milk
 $\frac{1}{2}$ Salt to taste

Mix all ingredients and serve.

Fresh Tomato Omelet

9 eggs
3 medium-sized ripe tomatoes (canned
may be used)
1 teaspoon salt
6 tablespoons fat

Beat eggs thoroughly, add salt and peeled diced tomatoes. Melt 1 tablespoon fat in a hot frying pan, add about 1/6 of the tomato-egg mixture. Set over a moderately hot flame. Tilt the pan and draw the cooked portion toward the handle of the pan. When of a creamy consistency and delicately browned, roll the omelet with a spatula or knife and turn out on a hot platter. Repeat 6 times.

Princess Loaf

3 tablespoons butter
2 tablespoons chopped onion
1 tablespoon Savorex or Vegex
1 cup tomato puree
2 eggs
1 cup cream or evaporated milk
2 cups cooked rice
1 cup crumbs
 $\frac{1}{2}$ cup ground walnuts
Salt to taste

Brown the butter and onion, add the Savorex, tomato puree, and cream. Then add the rice, crumbs, and nuts. Add to this mixture the 2 eggs, well beaten, and salt to taste. Mix well, place in a baking dish, and bake until well done. Slice and serve with any sauce desired.

Mushroom Gravy

1 small onion
2 tablespoons fat
1 can cream-of-mushroom soup
2 tablespoons flour
1 tablespoon soy sauce
Milk or potato water

Sauté onion in fat; add soup, flour, soy sauce, and thin with rich milk or potato water to desired consistency. Boil gently. Yield: 3 to 4 cups.

Carrot Ring and Creamed Peas

1 cup carrots (mashed)
1 cup bread crumbs (soft)
2 eggs (well beaten)
Milk, diluted with water or carrot
juice
1 teaspoon grated onion
1 teaspoon salt

Mix the above ingredients thoroughly. Fold in stiffly beaten eggs. Turn into greased ring mold. Set in pan of hot water. Bake in moderate oven 350° F. 1 hour or until knife inserted comes out clean. Turn out on platter and fill center with creamed peas or other vegetable.

Split Pea Soup

- 1 cup green split peas
- 1 carrot
- 2 stalks celery
- 1 medium-sized onion
- 1 or 2 bay leaves

Cook all together until done. Put through a colander; then add butter and seasoning.

Peanut-Butter Meat

- 1 lb. peanut butter (light-colored)
- 1 small can evaporated milk
- 1 small cup water
- 2 eggs
- 1 cup toasted bread crumbs
- 1 can tomato soup

Emulsify the peanut butter in the liquid. Add the other ingredients and mix well. Pour into oiled cans, set in water and steam 2 or 3 hours or 1/2 hour in pressure cooker at 10 lbs. pressure. When done, let cool enough to handle, then remove from cans. This may be served as a hot dish or sliced cold. It is good in sandwiches and salads.

Scandinavian Fruit Soup

- 1/2 cup tapioca (quick-cooking)
- 2 quarts water
- 2 cups small prunes
- 2 large tart apples (diced)
- 1/2 cup honey
- Juice of 1 or 2 lemons
- 2 cups fruit juice
- Other dried fruit may be added—apricots, raisins, peaches, and pears
- 1 pinch salt

Cook tapioca in 2 quarts water until half done. Add prunes, sugar, apples, and juice from other fruit. Add more water if mixture is too thick. Serve hot.

Savory Vegetable Loaf

- 1 1/2 cups stale bread (soaked in cold water)
- 3/4 cup brown beans (cooked)
- 1 1/2 tablespoons margarine
- 1 tablespoon chopped onion
- 1 1/2 tablespoon browned flour
- 1/2 cup milk
- 1 egg
- Sage and salt to taste

Soak bread in cold water, press out lightly. Put onion, margarine, and sage into small pan. Simmer but do not brown. Add brown flour, then milk, and stir smooth. Mash beans with spoon, add egg and mix all ingredients. Put into oiled baking tin and bake until brown.

¹ Henry C. Sherman, *Chemistry of Food and Nutrition* (5th ed.), p. 535.

² *Ibid.* (6th ed.), p. 508.

³ Jean L. Bogert, *Nutrition and Physical Fitness*.

⁴ E. V. McCollum, *How to Live*.

⁵ C. A. Elvehjem and Willard H. Krehl, "Imbalance and Dietary," *J.A.M.A.*, vol. 135, p. 279.

⁶ Isaiah 55:2.

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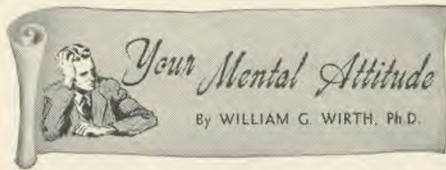
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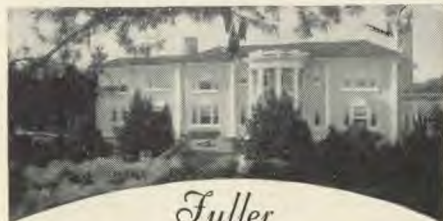


Respecting the Other Fellow's Ego

HAVE we ever stopped long enough to ponder those words of Jesus of Nazareth: "Thou shalt love thy neighbor as thyself," which He quoted from the Old Testament, to realize that if we kept their counsel we could turn this world of ours into a really delightful and peaceful place in which to live? Every normal man thinks well of himself, and it is proper that he should; for this self-dignity, this self-respect, gives him the confidence, the assurance, that he is able to face life and make it a success. Without this rightful regard for our ego, as the psychologist calls it, this feeling that we do amount to something, we would sink into a sort of Oriental nirvana, indifferently and fatalistically absorbed into mere existence. Ambition would be gone, and striving and aspiration would be but a mockery. It is precisely because the Creator places a high value upon us, proved by His making us in His own image and but a little lower than the angels, that He gives us this Old Testament command that we shall love ourselves, not selfishly or pridefully, but in the full measure of our possibilities as He ordained.

It is not difficult to do this. How jealous we are of our person, that it shall be highly regarded; how easily we resent any reflection upon our character, our good name. How significant that the Bard of Avon even makes the iniquitous Iago aggressively defend this sacred, personal ego, when he tells Othello:

"Good name in man and woman, dear my lord,
Is the immediate jewel of their souls;
Who steals my purse steals trash; 'tis something, nothing;
'Twas mine, 'tis his, and has been slave to thousands;
But he that filches from me my good name
Robs me of that which not enriches him,
And makes me poor indeed."



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South Attleboro, Mass.

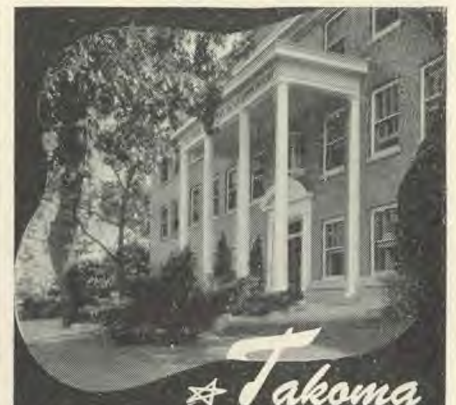
The rub comes when we endeavor to project this same regard for ourselves toward the other fellow. So zealous are we to safeguard and promote the sacred ego within, the good name that we demand it to bear, that we easily forget that our neighbor's ego, his good name, must needs also be safeguarded and promoted if we would obey the Old Testament injunction in full. It must be so if the community, the society, or the state is to prosper and be at peace. This is the true Christian way and spirit, which its Founder so brilliantly and indelibly impressed upon human history and experience. We highly regard Him and always will because, first, He in His own dignity and elevated self-regard placed an imperishable superior estimate upon man. In all His ministry we cannot escape His challenge to arise to our potentialities and possibilities as men and women created by God for high and great things. Likewise it is inescapable that He left us the charge to treat our fellows as we would ourselves. The parable of the Good Samaritan teaches it: His evaluation of the purpose of His own life here proves it, for did He not exclaim, "The Son of man came not to be ministered unto, but to minister, and to give His life a ransom for many"?

As we look out upon human life in these troublous times, we see that it is just because we have failed to follow the Galilean's example in regard for self and in regard for others that we have failed, bringing upon ourselves untold difficulties and perplexities. We must not lose the sense in these days when human life seems to be becoming more futile, when we seem to be the toys of world forces that tend to reduce men and women in stature and significance, that we are still men, able with God's help to rise above all discouragement, all despair. And, further, the very desperateness of our days, its increasing demands that we must share the burdens of others who are perishing and starving; its appeal that we must give hope to the hopeless, and cheer to the cheerless, brings us squarely up to the fulfillment of the responsibility that we are our "brother's keeper," that we, like our Palestinian Paragon, are in the world not to be ministered unto but to minister. Let us esteem and love our brother, our neighbor, the suffering people of the world, as we do ourselves, and we shall have the satisfaction of making our sphere a happier and more wholesome place in which to live.

+ + +

ANSWERS TO "ARE YOU HEALTH WISE?" ON PAGE 29

- | | |
|--------|---------|
| 1. (b) | 9. (b) |
| 2. (c) | 10. (a) |
| 3. (b) | 11. (c) |
| 4. (a) | 12. (b) |
| 5. (c) | 13. (a) |
| 6. (b) | 14. (c) |
| 7. (a) | 15. (c) |
| 8. (b) | |



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"There's Health in the Hills
of East Tennessee"

when you need a quiet place to regain nervous energy, here where Nature conspires in beautiful surroundings to help bring it about.

This modern Hospital offers the finest in medical and surgical care plus the new Sanitarium section with its unique features.

Special emphasis is placed on physical therapy, such as hydrotherapy and electrotherapy, and also on proper diet.

Mental and tubercular cases not accepted. Write for free Booklet "A."

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This Modern Health Institution, located amid 15 acres of beautifully shaded lawns, offers an atmosphere conducive to the rebuilding of health.

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Throughout the United States, and in many other countries, is found a distinctive chain of medical institutions known as Sanitariums. To the many thousands who have been guests of these unique health institutions, the name Sanitarium describes not merely a hospital, though the best of medical care is given; nor does it describe simply a rest home, though many come primarily for rest. Rather, it denotes a unique combination of both. The word Sanitarium also carries with it the idea of health education and disease prevention, for those who come to these health centers receive instruction in the principles of healthful living.

In addition to the Sanitariums whose announcements appear in this issue, the following belong to this distinctive chain of health institutions.

Boulder-Colorado Sanitarium, Boulder, Colorado
Florida Sanitarium, Orlando, Florida
Georgia Sanitarium, Route 4, Box 240, Atlanta, Ga.
Glendale Sanitarium, Glendale, California
Loma Linda Sanitarium, Loma Linda, California
Madison Rural Sanitarium, Madison College, Tenn.
Mountain Sanitarium, Fletcher, North Carolina
Paradise Valley Sanitarium, National City, California
Pisgah Sanitarium, Box 1331, Asheville, North Carolina
Porter Sanitarium, 2525 S. Downing Street, Denver, Colorado
Portland Sanitarium, 932 S.E. 60th Avenue, Portland, Oregon
Resthaven Sanitarium, Sidney, British Columbia, Canada
St. Helena Sanitarium, Sanitarium, California
Walla Walla Sanitarium, Walla Walla, Washington
White Memorial Hospital, 312 N. Boyle Avenue, Los Angeles, California
Wytheville Hospital, Wytheville, Virginia

How to Choose a Doctor

(Continued from page 9)

of his patients in his keeping that he refrain from the use of alcohol or indulgence in other body-destroying habits. As with the minister to our spiritual needs, he should be above reproach. It is not too much to require that he engage in his work in a serious, dignified way. To the patient, his troubles are of concern, and no doctor of the finer type will treat them lightly. A physician has to deal with the greatest tragedies of life, and though not obliged to go around with a doleful visage, neither should he be a clown.

So then, make a serious business of choosing your doctor. Such a choice may be of no great concern at the moment, but it may sometimes prove to be a matter of life and death.

Choose your doctor well in advance of need. Take time to do this and secure the advice of those best able to give it. Select the practitioner in your community who is best suited to the needs of your individual family. Retain that physician who deals carefully, efficiently, and honestly with your medical problems. He will prove a true friend in your deepest need.

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**GREATEST
ASSET**
Health

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ENGLAND
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HEALTH

in Your Budget?

Health is a priceless possession. Statistics show that it costs less to *keep* well than to *get* well, so it will pay you to appraise your health and adjust your budget accordingly.

Along with the three musts—food, clothing, and shelter—include Health in your 1948 budget.

The staff of the Washington Sanitarium and Hospital by aiding you to maintain good health is ready to help keep you happy throughout the coming year.

Send for Illustrated Booklet "A"



WASHINGTON SANITARIUM and Hospital
Takoma Park, WASHINGTON 12, D.C.