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NOVEMBER 1962

*Life
and*

HEALTH

THE NATIONAL HEALTH JOURNAL



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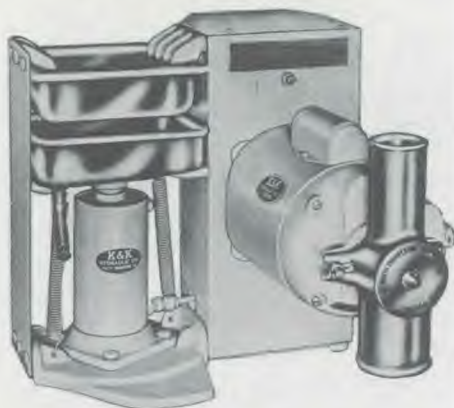
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LETTERS

to the
Editor



MY KIND

DEAR EDITOR:

I enclose cash for a one-year subscription to LIFE AND HEALTH. It is my kind of health magazine. I like it very much indeed.

HERBERT T. NATIONS
University City, Missouri

OUR NOVEMBER COVER



COURTESY OF
NATIONAL AERONAUTICS AND SPACE ADMINISTRATION

The Good Book mentions the time when "knowledge shall be increased" (Daniel 12:4). As the nation listened and watched with all its heart on February 20, 1962, to one of the greatest wonders the world has ever seen—a man out in space orbiting the earth—no one would have denied that in our age knowledge has increased markedly.

Great things are made up of small things, and Col. John Glenn's momentous trip was made up of small things. Small things such as daily exercise in the open air beside the invigorating ocean played their part in preparing Colonel Glenn for the physical, mental, and spiritual ordeal of entering space in a rocket.

Little daily health habits of eating a balanced diet, taking meals at regular hours, avoiding food between meals, getting plenty of exercise outdoors, drinking copiously of sparkling water, sleeping and resting to overcome the drag of the day, getting out into the bright sunshine, avoiding narcotics and other poisoners of the human body, helped give Colonel Glenn stamina—and they will help give you stamina. Not only will you benefit from doing them but you will also have fun doing them, and in the end you will have the supreme satisfaction of having built a strong and healthy body that will add life to your years. ▲

ON, WISCONSIN!

DEAR EDITOR:

I have taken LIFE AND HEALTH for many years. How I have enjoyed Harry M. Tippet's column, and all the poetry! The March [1962] cover is *delicious*, no less! The Golden Age articles are fine, and all the many other articles are really priceless. God bless your magazine.

MRS. GRACE L. VOLL
North Freedom, Wisconsin

GIFT SUBSCRIPTION

DEAR EDITOR:

From the attached address slip you can see that we are the happy recipients of a gift subscription to the magazine LIFE AND HEALTH. We are delighted with this publication.

MRS. A. T. MILLER
Cleveland, Ohio

HIGH PRAISE

DEAR EDITOR:

The LIFE AND HEALTH magazine is much superior to any other health magazine in the country, thanks to you.

CHARLES ARGENTO
Glendale, California

IN THE BEAUTY PARLOR

DEAR EDITOR:

I have seen LIFE AND HEALTH at the beauty parlor, and would like to subscribe, beginning with the June issue.

DAISY M. BRANDES
Milwaukee, Wisconsin

FOLLOW ADVICE

DEAR EDITOR:

We do enjoy your LIFE AND HEALTH and try to follow your advice.

MRS. BERT HOYT
Lyons, Kansas ▲

WHAT DO YOU THINK?

In the Readers' Pulse column, the editors count the heartbeats of their reader interest. So long as reader pulse is strong and regular, they know that circulation is good.

Make this column throb with interest and inquiry. Write in and express your ideas and comments. Drop a note to:

READERS' PULSE
LIFE AND HEALTH
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PROFILES

of Our Contributors



C. Edwin Houk ("John Glenn's Good Foundation," page 8) was born in Freeport, Pennsylvania. His father was an ordained Presbyterian minister who had served in Pennsylvania and Ohio.

Pastor Houk attended school in New Concord, Ohio, and graduated from Muskingum College in 1942. He graduated from Western Seminary, in Pittsburgh, Pennsylvania, in January, 1945, where he was president of the seminary student body, as was his father before him. He received his Master's degree in education from the University of Pittsburgh.

He started his preaching ministry at age 19, preaching in four Methodist churches in Ohio. He served variously in Adena, Ohio; Mount Lebanon, Philipsburg, Uniontown, and Philadelphia, Pennsylvania. The Third Presbyterian church in Uniontown, Pennsylvania, was recognized as having the largest Sunday school in the State. In Philadelphia he served the Tenth Presbyterian church as executive minister along with Dr. Donald Grey Barnhouse.

In March, 1960, he began his ministry to the Glendale Presbyterian church, in California.

Pastor Houk's poems and articles have been published in periodicals frequently. He has conducted many Bible conferences and been key speaker at many youth conferences, retreats, and conventions, especially in the Eastern States.

He is married to a minister's daughter, the former Sally Rhine. They have four children—David, Peggy, Donald, and Beth.

He is greatly interested in raising evergreen trees from seed. He plays tennis, handball, golf; loves to swim; enjoys hiking and camping with his family.

J. DeWitt Fox, M.D. ("The John Glenn Health Story," page 18), is editor of *LIFE AND HEALTH* and a Glendale, California, neurosurgeon.

At one time a general practitioner in Washington, D.C., Dr. Fox recently completed a long period of specialty training, beginning with internship and later residency in general surgery and neurosurgery at Henry Ford Hospital, Detroit, Michigan. He is certified as a Diplomate of the American Board of Surgery and the American Board of Neurological Surgery. Since 1959 a member of the Congress of Neurological Surgeons, he was this year elected to membership in the top neurosurgical organization, the Harvey Cushing Society.

He is a member of numerous other national societies, a past vice-president of the American Medical Writers Association, a member of the National Science Writers Association. He is the first physician to become an active member of the National Press Club of Washington, D.C., is listed in *Who's Who* and *American Men of Medicine*.

Born in Santa Ana, California, a Native Son of the Golden West, Dr. Fox attended Glendale Academy, where he was president of his graduating class. He gained his inspiration to become a surgeon from his family physician, Dr. Henry G. Westphal, and his aunt, Mrs. Naomi Shaver, a veteran nurse completing thirty years service at Glendale Sanitarium and Hospital. As a teen-ager, he was a bellboy at the same hospital.

"In the early days of transfusion, a pitcher of grape juice was taken into the operating room for the blood donor," Dr. Fox recalls. "I loved to take the transfusion calls and slip into the inner sanctum, where I could watch an operation."

During the depression he began pre-medical studies at Columbia Junior College, Washington, D.C., working nights as a linotype operator, later as sales manager of the Washington College Press.

A man of degrees, Dr. Fox holds a Bachelor of Arts degree from Columbia Union College, Washington, D.C. His M.D. degree was received *magna cum laude* from Loma Linda University, where for four years he was top man in his class, graduating first in a class of 93. He received a degree of Master of Science in Surgery from the University of Michigan in 1955. As a licentiate of the Medical Council of Canada (L.M.C.C.) and a member of the College of Physicians and Surgeons (M.C.P.S.), Manitoba, he is qualified to practice in British territories.

After his internship he served two years in the U.S. Army Medical Corps as a captain at Brooke and Letterman general hospitals. While in the army he became interested in medical writing for the public. His articles appeared in *LIFE AND HEALTH*, *Hygeia* (now *Today's Health*),



Travel, Lifetime Living, and other publications. In 1949 he was invited to become editor of *LIFE AND HEALTH*.

One to put his heart in his work, Dr. Fox conducted a survey on format, content, and reader interest when he took over as editor. After conferences with Ben Hibbs, then editor of the *Saturday Evening Post*, and other editors, he came up with a new clean-cut journal. The popularity of *LIFE AND HEALTH* is reflected in a worldwide circulation.

To awaken reader interest in keeping fit, Dr. Fox hit on the hobby of interviewing people prominent in the news and discussing their health habits. His collection includes former President Herbert Hoover, Mrs. Eleanor Roosevelt, Billy Graham, former Vice-Presidents Alben W. Barkley and Richard M. Nixon, Gen. Douglas MacArthur, Arthur Godfrey, and the late Speaker of the House Sam Rayburn, former HEW Secretary Abraham Ribicoff, Ivy Baker Priest Stevens, former Treasurer of the U.S., and now Astronaut John Glenn, Jr.

Author of many scientific articles, he wrote the best scientific article to appear in *GP* in 1951, "ACTH and Cortisone—Miracle Drug or Medical Tool?" for which he received the \$1,000 M & R Award. He wrote two books—*The Doctor Prescribes* and *The Best of Life and Health*—reprinted in England.

Active in civic affairs, Dr. Fox is a member of the Glendale Chamber of Commerce and American Legion Post 127, is a leader in YMCA affairs, and is a director of the Republican Buck and Ballot Brigade, a fund-raising organization for the Twentieth Congressional District.

He is on the attending staff of Glendale Sanitarium and Hospital, Behrens Memorial Hospital, and Memorial Hospital of Glendale, all three of Glendale; St. Joseph's Hospital, of Burbank; Presbyterian Hospital-Olmsted Memorial and California Hospital, both of Los Angeles.

Dr. Fox is a member of the Los Angeles, California, American, and World Medical associations. He is chairman of

(To page 7)

THE DOCTOR PRESCRIBES



Water Your Ulcer!



IT IS a tragic fact that one out of every ten American men will develop a duodenal or peptic ulcer or have some other serious gastrointestinal disturbance during his life. Peptic ulcer is a major malady.

Some 10,000,000 Americans are now actively under treatment for peptic ulcer. This earmark of the successful executive has become a scar of civilization. It is the stamp of success upon the stomach, for as Dr. Charles Mayo, of the Mayo Clinic, once said: "If you want a job done, and done right, find a man with a duodenal ulcer to do it."

Perhaps a few facts of life regarding the peptic ulcer will help you have a happier stomach.

The cause of ulcer is not what goes into the stomach but what goes into the mind. Hurry and worry are the prime causes. Trying to do too much in too short a time battling deadlines, racing with the clock, and biting off more than we can chew all contribute to ulcers. When we find that our physical capabilities cannot keep pace with our mental appetite for work we feel frustrated, guilty, worried. Worry over our job, money we've invested, deals pending, and poor domestic relations overstimulates our minds and produces too much acid in our stomachs.

Hurry causes irregular eating hours. It is not unusual for an ulcer patient to go all day without eating. Then he may down a highball before supper, only to wonder why his stomach goes into knots of agonizing spasm. He eats a big steak dinner, and lots of stomach acid is called forth to digest it. This, plus the acid that has accumulated through the day with no food to dilute it, causes a high level of stomach

acid during the night hours. He may find himself awakened in the early morning with heartburn, pain, and deep boring spasms in the epigastrium.

One reason executives get peptic ulcers is this: mental concentration obliterates normal hunger and thirst. The businessman who is intent on closing a deal has no time to get up from his desk for lunch. He has it sent in, or he skips lunch. He gets thirsty, but he hasn't time to go to the water fountain. Instead, he takes another cigarette. He settles down to concentrated



work once more. Meantime, the acid glands pour hot acid into the stomach. With no food or fluid to dilute the acid, it passes over the delicate lining of the duodenum in high concentration. This high acidity is the prime cause of ulcer. If there is food in the stomach the acid works on the food, and not the stomach or duodenal lining. Hence, no ulcer.

The desk-bound executive who reaches for a cigarette instead of a glass of water is flirting with an ulcer. Busy people are often not only heavy smokers but also heavy coffee drinkers. Both tobacco and coffee stimulate the stomach to secrete acid. People who smoke and drink coffee are notoriously poor water drinkers and frequent ulcer patients.

Every doctor who treats peptic ul-



FREDERIC LEWIS

cers knows that cigarettes and coffee, a go-go-go personality, coupled with an overactive worrying bump and irregular hours of eating and sleeping, help to prepare the ground where ulcers grow. If you find yourself drifting into some of these bad habits, prevent an ulcer by improving your way of life. One simple way is to drink more water. A doctor friend of mine recently told me that if he could persuade his ulcer patients to drink water, their ulcers healed much faster. The people who drink water between meals hardly ever suffer from stomach ulcer.

Here's what watering your ulcer can do:

First and foremost: it dilutes stomach acid and washes acid from the stomach into the intestine in a dilute form, which does not harm the duodenum.

Second, a drink of water can relax your brain and reduce the mental stimulus to the acid-producing glands of the stomach. When you get up from your desk and take a walk down the hall to the drinking fountain, you refresh your brain as well as protect your stomach. Frequent leg stretching and brain rests make for better decisions and keener concentration when you return refreshed and ready for another go at your work.

Water improves digestion. Your foods must go into solution before they can be absorbed and utilized by your body cells. You help nature

when you supply the water needed by your body.

Water will protect against viruses, too. Wetting your whistle now and then will keep you well hydrated and fortified against peptic ulcer and also against the common cold, influenza, and other infections. Your physician says, "Force fluids," when infection strikes. Drinking water will beat bacteria and viruses to the punch.

Water drinking helps take away your desire to smoke. Many misinterpret thirst for a need to smoke. If you supply the water your body needs, you will find no need for a cigarette.

A glass of sparkling clear cold water will reduce your need for coffee. Actually, a change of pace is all we need to bring fresh blood to our brain and make us feel brighter. The stroll to



HAROLD M. LAMBERT

the drinking fountain can do it. It takes less time to drink a glass of water than to go to the corner drug-store to order coffee. Conversation at the water cooler is just as congenial, and not so likely to take big chunks of time from your workday.

So there you have some of the wonder-working ways of water. Have you watered your ulcer today? Water is pretty cheap medicine—why not give it a try? Do you get your quota of eight glasses each day? It will do much to make you feel fit, help to heal an ulcer, and, more important, prevent one from ever occurring.

Yours for fewer ulcers,

J. DeWitt Fox, M.D.



PROFILES of Our Contributors

(From page 5)

the public relations committee, Glendale district, Los Angeles Medical Association.

Married to the former Evelyn Winifred Snider of Washington, D.C., Dr. Fox is father of three children—J. DeWitt, Jr., a college premedical freshman; Evelyn Jeanne, a high school junior; and Jere Lamont, a sixth-grader. The family enjoy patio parties at their Glendale hill-top home, love to swim or sail off Balboa Island, and ski at Badger Pass. Dr. Fox says he's never bored, and always has plenty to keep two secretaries—Mrs. Marion Weaver, in his Glendale office, and Mrs. Mary Castor Knight in Washington—busy with his many activities.

The Foxes are fond of exotic foods, relish Chinese dishes, and cherish weekends in San Francisco, where they can indulge their appetite for the foods of foreign lands.

A coast-to-coast traveler in the U.S. to medical meetings or writing expeditions, Dr. Fox has been to Hawaii and Canada. His dream is one day to take a world tour, stopping in various medical centers to render his surgical skills where needed, and visit the people personally, especially in the Orient and India.



Bethel Rice Barger ("Be Truly Thankful," page 14), a homemaker living in Holly, Michigan, was born in Detroit, Michigan, the year World War I began. Her parents moved to Washington, D.C., in 1920. She graduated from Columbia Union College in 1935, went on to get her Master's degree in science in 1938 from Catholic University of America while teaching physiology and anatomy laboratories at her alma mater.

She likes to work with her hands, and it is said she tatted her way through college. She took over much of the cooking and baking at home because her mother worked. When she started to bake on her afternoons off, it was hard to know when to stop with the oven already hot. Good books, especially biographies, appeal to her. For several years she was a member of Columbia Union College A Cappella Choir along with her parents.

In 1939 Mrs. Barger started doing secretarial work, and in 1943 she transferred to Lansing, Michigan. There she met R. Chester Barger, a teacher, who later became her husband. For three years



they worked in Washington, D.C., then went back to teaching in Michigan, where they have been since 1952. Her husband is librarian and teacher at Adelphian Academy, Holly, Michigan, and she is enjoying housework to the full. This includes baking seven or eight kinds of bread, sewing, keeping in touch with friends through letter writing. She enjoys making most of her clothes, and during her leisure time Mrs. Barger enjoys raising and training parakeets.



Beatrice S. Stout ("The Physical Therapist," page 29), a twenty-year employee in the department of physical medicine and rehabilitation at Washington Sanitarium and Hospital, Washington, D.C., graduated from a Pennsylvania high school and came to Takoma Park, Maryland, to attend Columbia Union College. After receiving the Bachelor of Arts degree, she married.

Later she entered nurse's training at Washington Sanitarium and Hospital but discontinued in the second year because of illness.

Three years ago a trip to South America to visit her missionary son became the inspiration for her first article. Although always deeply interested in her work, Mrs. Stout considers that motherhood supercedes all other interests. She has two sons.

She takes delight in her three small grandchildren. ▲

A small friendly town, a godly home,
a church that brought him to faith in Christ, that's

John Glenn's Good Foundation



By **PASTOR C. EDWIN HOUK**

Glendale Presbyterian Church, Glendale, California

SHORTLY before he blasted into space to become the first American to orbit the earth, Lt. Col. John Glenn, Jr., closed a letter to me by saying, "Best regards to you, . . . Ed. It's a long way from New Concord for both of us, isn't it, but I think there were some good foundations laid back there anyway."

As I put John's letter down, I couldn't help thinking that both of us were a long way from New Concord, the little Ohio town of 2,000 where we grew up together. Also I couldn't help thinking that though John was now an astronaut and I a minister, those "good foundations" laid back there in New Concord were the same for both of us.

What makes a man able to remain calm and cool in spite of repeated disappointment? What enables John Glenn to face possible death willingly without fear or panic? What keeps him from allowing fame to go to his head?

I don't claim to be a psychologist with the ability to analyze the relationship between past and present experience, but I have been interested for my own benefit as a parent and a minister in attempting to discover the answers to some of these questions by thinking back to the foundation laid in John Glenn's childhood and youth when we were boyhood friends.

Many stones went into those foundations. For one thing, as boys John and I learned friendliness from New Concord's people, where the word *hello* is still something of a tradition. No one thought of passing friend or stranger on the street without an exchange of a friendly Hello. This was such a part of life that it was difficult to go to a neighboring city and not speak to everyone there too. Youngsters growing up in this atmosphere can't help having a friendly outlook on life.

Life for most of the townsfolk revolved around the local college, Muskingum. John grew up hearing the repeated advice of the college president, Dr. J. Knox



NASA PHOTOS

Astronaut Glenn gives the "ready" sign during prelaunch activities.

Montgomery: "What you are to be, you are now becoming." Even the grade-school youngsters knew these words by heart, and they grew up realizing that what they were doing and learning and being right then was important.

Another foundation that John Glenn's home, church, and town helped to lay was the importance of submission to authority.

Home for John was a happy place where there was fun and laughter. His friends were always welcome, and they were allowed to help consume many pounds of cheese and crackers, jars of peanut butter, and gallons of milk.

At the center of the Glenn home was the full knowledge and understanding that his parents had submitted themselves to an Authority higher than their own. Family worship in the home helped establish the concept of submission to God's will. The little church the family attended Sunday by Sunday contributed much to their understanding of the authority and importance of God's Word. Here John learned



NASA PHOTOS

Colonel Glenn's wife Annie; his daughter Lyn, 15; his son Dave, 16.

the first steps toward trusting his life—present and future—to God, who loved him and had a plan for his life. Out of this background grew respect for those in authority—his parents, his teachers, and the leaders of his country.

Discipline was a natural part of his early training. Whether in sports, music, or schoolwork, John showed early signs of self-discipline in routine practice and training. I remember hearing him practicing his trumpet early in the morning as I passed their house delivering my morning papers.

If John Glenn made a promise, he kept it to the best of his ability. When he belonged to a boys' club called the Ohio Rangers, he took the promise that all the boys took—not to use profanity. Some might have

thought it not too important, others that it didn't matter so long as the leader didn't catch them at it, and still others would have said, "Everybody does it." But John had made a promise, and to him it was important. Strangely enough, even at the time we all respected him for it.

Discipline brought its own reward. Even in small things, John was a recognized winner. Frequently the town boys participated in a bicycle race during a track meet at the college stadium. Somehow we all knew John would be the winner, but none of us minded. He was the kind of winner no one resented. If we couldn't win ourselves, we wanted John to take the honors. I think it was because we caught some of his enthusiasm, his wholeheartedness in any contest, making it a more interesting race for everyone.

Although a small town often is thought to be provincial and narrow, it was in New Concord, Ohio, that foundations were laid for John's love and respect for his flag and country. There were many opportunities in a college town to see and hear great men from all walks of life—preachers, statesmen, businessmen, and world travelers. They had their influence on young minds—building concepts of democracy, freedom, love of country, and love of God. They also helped to give us boys a vision of a world much greater and more far reaching than our little town. Then too, there is nothing like playing "America," "The Battle Hymn of the Republic," and "The Stars and Stripes Forever" in a small-town band to make a boy proud to be an American. John blew the trumpet at many a town celebration.

John's reception in Washington, D.C., reminded me of his first visit to the nation's capital in his early teens. It was a long way from Ohio to Washington, especially for two boys who had a one-way ride and must hitchhike home. I remember the boyish wonder and awe in John's face as he looked up at Lindbergh's *Spirit of St. Louis* hanging from the ceiling of Smithsonian Institution. Words can never describe the impression, emotion, and thrill of a boy when he first sees the things he has read about in his history book—the Lincoln Memorial, Washington Monument, the Capitol, and the White House. Being an American took on new meaning, and we felt part of the history surrounding us.

We all have different ways of facing danger and channeling our emotions. John had a technique all his own. Even in our small town there were driving hazards. One of them was a steep overpass across the railroad track. These bridges, built for horse and buggy, were almost too narrow for two cars to pass comfortably. It was a breath-taking moment to meet another car at the top. When we were riding with John, we always sensed when danger was approaching by the sound of John's whistling. He began whistling a tune as we approached the overhead bridge and kept it up in varying degrees of intensity until we were safely on the other side. This was an outlet for emotion, but it left him cool and collected to maneuver the difficult driving.

I got up at 3:00 A.M. the day John Glenn made history. What does a man think of when he sees a lifetime friend blasted into space? (To page 29)



Don't stand for diaper rash on your helpless wee babe. Take precautions that will help prevent it.

Diaper Rash

R. KATHRYN L. HAGEN, M.D.

EVERYONE admires the soft, smooth skin of the baby. Baby's skin is very tender, especially during the first few days of life. Before birth, the skin is covered with a layer of protective material known as the *vernix caseosa*. After birth this protective layer is easily removed, for it is no longer needed. Methods used to remove the *vernix caseosa* may be irritating to the skin.

Often rashes are seen soon after birth. They may be red, white, or like small hives. Whiteheads may become infected, with formation of pus. If the pustules are removed when the skin is cleansed, areas appear that are denuded, or raw.

The mother of the baby who arrives home from the hospital with his buttocks covered with raw spots will think he has been neglected. This is rarely the case. Baby's tender skin has not adjusted to the necessary washing to keep his buttocks clean or to the roughness of hospital diapers. His own diapers at home are softer. They will not require the same amount of heat or disinfectants to keep them free from germs. All his things will be new, soft, and therefore less irritating to his skin.

Simple rashes rarely last long. If the rash worsens or the buttocks become raw, you should seek help from your baby's doctor. He may advise protective and healing salves, such as zinc oxide or any of the ointments used for noninfected rashes. If he thinks there is infection, he may use a salve or lotion containing some antibiotic ordinarily used on the skin.

Ammonia is the cause of most diaper rashes. Ammonia is not passed as such in the urine. The urea in the urine breaks down to ammonia because of a germ called *Bacterium ammoniagenes*. These bacteria originate in the stools, and not all of them are removed from the buttocks by simple wiping or water cleansing. The germs on the diaper are not always removed by ordinary methods of washing.

Ammonia rash is in the form of pimples, which at times appear purplish in color. The buttocks look scalded, and may have few or many raw spots. The baby is fussy and uncomfortable. When the diaper is removed, he will scratch the skin when possible. If a wet diaper remains on him for any length of time, you can smell the ammonia.

Special diaper rinses are available, and directions for using appear on the container. The companies making diaper rinses also make ointments to use on the buttocks for protection of the skin.

Diarrhea resulting from an infection causes irritation, with pain and itching around the anus. At times diarrhea may be caused by an antibiotic, and it also will irritate the skin around the anus. There are creams for local application. When this kind of irritation occurs, you should consult your doctor.

Some diaper rashes are caused by soaps, salves, detergents, and lotions. At times there will be an allergic rash when baby has eaten a particular food. You will notice it each time baby eats this food. It is quite possible that by watching you will be able to tell your doctor the food or product to which your baby is sensitive. He can tell you what measures to take to prevent recurrence of the rash.

Many mothers wait to see whether the rash disappears. The sooner you know the cause of the rash, the easier it is to control and clear up. Let your doctor examine the rash early.

Your doctor may prescribe medicine to be taken by mouth to control ammonia diaper rash. There are two medications I have used for ammonia diaper rash. One is rather expensive, and the other is relatively inexpensive. Both are taken by mouth. Fortunately, the less expensive one rarely fails to clear the rash. Because the rash is probably due to a combination of excess urea and the presence of the *Bacterium ammoniagenes*, treating or removing one or both causes brings rapid

relief. The inexpensive medicine is one of the important sulphur-containing compounds. It is a member of the vitamin B-complex, known as B₁. Just what chemical process takes place in order to adjust the amount of urea in the urine is not understood. Chemists have not been able to explain fully some of the processes the body uses in making the protein we eat available to the body. If we eat an oversupply of one kind of food and not enough of the others, the end products eliminated by the kidneys and bowels are not the same as when a balanced diet is eaten. Ammonia is more likely to be observed when your baby has a cold, is teething, or is overtired.

You may find prevention simpler and more to your liking by using the various diaper rinses to prevent formation of ammonia. Some of the mothers I attend keep a small supply of powders on hand and use them only when needed. Others use the rinse, and come for help only when the ammonia cannot be controlled for one reason or another.

Diaper rashes have four common causes, and are classified according to the cause:

1. Ammonia diaper rash, caused by the presence of ammonia.

2. Perianal rash, or dermatitis, due to diarrhea and occasionally to antibiotics taken orally.

3. Contact rash, which follows direct contact of the skin with irritating substances, such as creams, detergents, lotions, soaps, and plastic panties.

4. Atopic rashes, which are seen when there is an allergy to foods such as milk, eggs, and orange juice. The atopic rash may be of short duration because allergic reaction to food varies. Sometimes foods not tolerated when baby is very young may be eaten a few years later without any local rash or allergic symptoms.

A comfortable baby is a happy baby. Don't let diaper rash spoil your baby's disposition. Change his diaper frequently. Cleanse his buttocks carefully. A sudsy detergent containing hexachlorophene used to destroy germs on the skin may be advised by your doctor. Mothers who use it find it a wonderful help in preventing skin infections. If simple ordinary treatment does not give your baby quick relief, ask the doctor to help you. ▲

A baby suffering from diaper rash cannot smile and laugh with ease.

H. A. ROBERTS



Simply help nature to take its course, and you will find yourself enjoying an uninterrupted good night's repose.



EDMUND JACOBSON, M.D., Ph.D.



A. DEVANEY

More Restful Sleep



GOOD HEALTH is based upon sufficient sleep, and it is easy to understand why. The body, including the mind, requires periodic refreshment. Fuel needs to be replenished, tissues rebuilt, wastes removed. When all is well within, a person "feels fine." His feelings, although hard to describe, are green lights for him to go ahead with his daily activities. When he has gone too far, there is need for a halt, and nature provides feelings of fatigue and drowsiness as red-light signals for him to go to sleep.

Many people disregard the red-light signals, and there is no traffic officer to give them a ticket. Their health suffers. The more often a rule of health is broken the easier it becomes to break it the next time. If people knew fully the power of habit in their daily life they could make these potent factors work for them. They could work into regularity of getting up in the morning, eating their breakfast, going to work, eating lunch, returning to work, eating dinner, and getting to bed in plenty of time for a full night's sleep. The power of a good habit is as strong as the power of a bad habit in a person's daily routine.

When people have the habit of disregarding nature's sleep signals, the results are not necessarily immediately disastrous. Often the ill effects on health are minor. Fortunately, each normal person has a wide

range of tolerance for many kinds of abuse. Nature has kindly provided compensatory devices in the body that help him withstand the strains resulting from neglect of health rules. Although there are limits, he can become accustomed to fewer hours of sleep than he really needs. After long-accustomed night life at work, he may not notice the loss of sleep and may claim that he "feels fine as ever." The red-light signals of fatigue have become dimmed. No one has discovered a method to measure exhaustion of tissues, so we have no instruments to tell us how much sleep each person really needs.

Sufficient sleep is required to protect us against the ravages of fatigue, which diminish our daily productivity and happiness, lessen our zeal, and cloud our mind, render us less resistant to many diseases, and tend to increase our emotional instability. The best thing for us to do is study our own needs and work out some standard of hours, which we should as a rule follow with care.

To do this successfully each person can be guided by the following considerations: He should not set out to find the minimum number of hours required for sleep, but generally to assume that for an adult eight or nine hours is the nightly requirement, with perhaps more during or after illness, overwork, or nervous strain. Hours of sleep required for growing children

should be longer, most of all for the very young. Naps or rests that break the day's efforts are useful for adults as well as for children, and may do much to keep the person well. Sleep is nature's savings bank for energy.

What the average man should know about his energy is that he expends it chiefly when his muscle fibers shorten. In a nutshell, human action of any kind is muscular contraction—shortening; and relaxation—lengthening. Any physical action includes shortening and lengthening of muscle fibers in his body.

People generally regard the nervous system, including the brain, as the essential operator in whatever man does. They are right in this. What is often overlooked is the no-less-essential role of the muscles in every act of man's day and night. At night most muscles relax to a certain extent, accompanied by lessened activity in certain parts of the brain and nervous system. When muscular relaxation is prolonged, the person goes to sleep. Generally when the eye and speech systems remain relaxed for about thirty seconds persistently, there is sleep.

The greater the relaxation during sleeping hours, the more refreshing the sleep. Once the person has fallen asleep, he may become fairly tense for a time without awakening. Certain brain mechanisms keep him asleep. When he dreams, the muscles of his eyes and speech organs become tense. In addition, during nightmares his muscles everywhere become tense, and he rests very poorly.

Just as muscles participate during dreams by shortening and lengthening in kaleidoscopic patterns here and there over the body, so do they take essential part by day in thinking, in emotion, and in every activity. Awakening, arising, bathing, dressing, eating breakfast, writing, reading the newspaper, talking, walking—these and every deed of the day are examples of muscular acts. To be sure, the nervous system and the brain are included in each act, for no muscle acts without the simultaneous action of certain portions of the nervous system and vice versa. However important the nervous system, it is impossible to understand sleep scientifically unless the participation of the muscular system in our every act is fully grasped.

Since sleep proves more restful the more relaxed we are, the practical person will try to keep himself sufficiently relaxed by day. Many people are tense all day long, although some may not know it and some would deny it. They should learn to relax. Everyone can profit by technical instruction in different ways of relaxing.

A good way to gain an idea of muscular tension is to bend back the right hand at the wrist, noting the feeling of tension in the right forearm. Also feel the arm with the fingers of your left hand and note the hardness of the right forearm muscles as they contract and how soft they become as they relax when the bending is stopped.

From this simple procedure many people can learn a little to guide them in keeping muscles throughout the body more relaxed. The more they relax the less they would need sedatives for dulling their brains and relaxing their muscles. The greater the skill in muscular relaxation, the more natural and refreshing will be the sleep. ▲



By

HARRY M. TIPPETT

M.A., Litt.D.

Automation

AUTOMATION is here to stay, whatever its mixed blessings. By way of button we become our own elevator operator, traffic policeman, music master. Vending machines have made salesmen unnecessary in many commercial areas. Some of them even say, "Thank you," after a purchase—an improvement on some sales people we have seen.

The electronic brain has revolutionized office computing procedures, and is entering the field of language interpretation on an assembly-line basis.

Let us hope that with the vanishing sense of right and wrong in public and private affairs the flipping of a switch may not be the answer to our moral problems.

In this age of enlightenment God calls you to make your own decisions and choose your own destiny. To ancient Israel He said: "I have set before you life and death, blessing and cursing; therefore choose life, that both thou and thy seed may live" (Deuteronomy 30:19). The same privilege is ours today, yet how many of us are moral and spiritual automatons, pushed around by our desires and browbeaten by our habits! With our minds in neutral, our reflexes obey the TV commercial and we "reach for" this and "light up" that.

We condition ourselves to ridiculous situations, even to the compromise of principle, lest we be out of step with those who are calling the tune, then we take tranquilizers to quiet our emotional conflict.

Established routine that contributes to our physical and spiritual well-being produces its best effect when we do not let it become mechanical. Eating and bathing should be a delight, not a chore. Church worship can be a recurring spiritual adventure, not dogged adherence to custom. Family relationships and duties should be a happy daily experience, not an endurance test with thoughts of martyrdom. We shall avoid being cogs in the wheels of a robot existence if we make life zestful from morning shower to evening prayers. ▲



With a body brimful of good spirits from following healthful habits, you can do a proper job of showing your gratitude.

WHAT better way can we celebrate Thanksgiving than by sharing it with family or friends? Thanksgiving has always been a time for family get-togethers, but many times distance makes reunions impossible. We can invite lonely neighbors, older people, children, and those not so well situated as we.

The Bible tells us to be temperate in all things, so let us begin the day by having a good wholesome breakfast. Whole-wheat waffles with frozen strawberries and applesauce make a delicious breakfast. A glass of citrus juice before breakfast provides vitamin C. We like the "Bit O' Soy Waffles" recipe found on page 23 of *Food—Health and Efficiency* by Mrs. Marion W. Vollmer. Use a fine-grain whole-wheat flour for half the required flour and the waffles will be tasty, tender, crisp, and healthful. You might try powdered milk in your recipes. It saves expense. I use powdered milk plus boiling or hot water when scalded milk is called for.

Now we can turn our thoughts toward dinner. It is a good idea to plan several days, perhaps even weeks, ahead! If you have a deepfreeze, you can make the dessert and rolls ahead of time. You can use a frozen or fresh vegetable or two that do not take long to cook. Even the entree dish could be made the day before and be ready to pop into the oven at the right time. We like baked potatoes at our house. They are easy to prepare. We scrub them ahead of time and let them dry. Then all we need to do before placing them in the oven is to oil them lightly. Several years ago an aunt gave me a potato rack that holds eight potatoes. We find it handy to use. The potatoes bake thoroughly and quickly on it. It uses the same principle as potato nails but it can be handled more easily. Recently I saw a rack that holds only four potatoes.

To have a balanced meal we need to plan for one serving each of an entree and potatoes, two or more servings of vegetables (including one raw in the salad), whole-grain bread with spread, milk, and a simple dessert if desired.

Probably many of us can remember holiday dinners of the past with a table so loaded with so great a variety of foods that we had to run around the block before we had room for the dessert. At any rate, we probably left the table feeling miserable. Let us hope we have all learned

Be Truly Thankful

By **BETHEL RICE BARGER**



A. DEVANEY

How appropriate for a family to thank the Giver of all the blessings they have.



A. DEVAHEY

In the beautiful hills of New Hampshire the lavish earth produces a bountiful harvest of apples, pumpkins, squash, and colorful gourds.

better through the years. Temperance rewards you well.

I have come to plan a meal no larger than we ordinarily eat except possibly for dessert. But I do use my best tableware to celebrate this special season.

If the housewife plans her meal ahead of time she can visit with her guests and not feel too tired to enter into the spirit of the day.

Plan a light supper of soup or a hot drink, or milk, fruit, and bread and butter. Have you ever tried eating whole-wheat sticks or oven toast with soup? We eat more "twice-baked" toast at our home than we do bread and butter. Through the years I have tried various bread recipes. We have a "bread basket" in our food freezer containing a variety of homemade breads. I fill two cooky sheets with sliced homemade bread and let it toast slowly in a 250° to 275° F. oven, turning so as to brown both sides lightly. This is delicious with hot soup and fruit for supper. For added protein and taste appeal, spread peanut butter on your toast and eat cottage cheese with your fruit.

At the close of such a day we can rest well. The day has brought enjoyment to others as well as ourselves. It will not be necessary to recuperate from eating too much. And truly we will have had a day for which we can be thankful. Delicious, light, nourishing Thanksgiving Day meals will make our day a happy one.

RECIPES

Entrees

Grapenuts Loaf

- 2 beaten eggs
- 1/2 teaspoon salt
- 1 1/2 cups milk (1/2 cup dried plus 1 cup water)

- 2 tablespoons melted butter
- 1 teaspoon Savita, Vegex, or Beta Broth
- 1 cup Grapenuts (or Nabisco 100% bran)
- 1 cup chopped pecans (or walnuts)
- 1 cup chopped celery, with leaves
- 1 large onion
- 1 can mushroom soup

Mix together and bake in loaf pan at 375° F. about 45 minutes or until done. This is an easy-to-make yet delicious roast.

Mock Turkey*

Wash gluten from 8 cups of bread flour. (If you need directions, refer to page 35 of *Food—Health and Efficiency*. I knead the dough 500 strokes so as to develop the gluten well.) Lay on wet breadboard and press flat. Roll as for a jelly roll. Sew roll tightly into a firm, wet cloth. Boil in hot water (well covered) about two hours. Cool in water; remove cloth and peel as thinly as possible in the direction the gluten was rolled. Marinate overnight in:

- 1/4 cup oil
- 1/2 teaspoon Beau Monde seasoning or Kitchen Bouquet (optional)
- 1 teaspoon Ac'cent
- 1 teaspoon grated garlic
- 1 teaspoon salt

Mix with your favorite bread dressing and bake. This entree is different and really delicious.

Dressing: Make zwieback of a loaf of bread by placing it in a warm oven until completely dried and toasted a bit. It will crumble easily. Sauté the following ingredients in a little oil for 10 minutes:

- Tops of one or more large bunches of celery
- 1 large onion chopped
- 6 to 8 green onions

Add: 1/2 teaspoon Savorex or Tastex. Add marinated gluten strips. Heat through and then add to crumbled bread. If more moisture is needed, add hot water with a little Ac'cent. Do not make it sticky, however. Place in a baking dish and bake at 375° F. for about 45 minutes. A little hot water mixed with soy sauce may be added to the top so the dressing will not be too dry when it is baked. Serve with gravy or cranberry sauce.

Breads

Oatmeal Cloverleaf Rolls

- 1/2 cup shortening (or oil)
- 3 tablespoons brown sugar
- 1 teaspoon salt
- 1/2 cup boiling water
- 1 1/2 cups rolled oats
- 1 cake yeast
- 1/2 cup lukewarm water
- 1 well-beaten egg
- 2-2 1/2 cups flour

Measure shortening (or oil), sugar, and salt in mixing bowl. Add boiling water. Add oats and cool to lukewarm. Soften yeast in 1/2 cup of lukewarm water. Add the beaten egg to the yeast. When the first mixture is lukewarm add the yeast and egg mixture. Stir in 1 cup of flour and beat hard. Add the remaining flour and shape into cloverleaf rolls. Place in muffin pans. Let rise until double in bulk (about 1 1/2 hours) in warm room. Bake in preheated oven (425° F.) 15 to 20 minutes. (To page 23)

* We give credit for this recipe to Mrs. Kiyoko Yoshida of San Francisco, California.

Don't Let
CHICKENPOX
Scar Your Conscience

▲ BURTON H. FERN, M.D.

The childhood disease chickenpox is usually a mild infection, and only in rare cases are complications of a serious nature encountered.

NOBODY ever heard of chickenpox until shortly before the American eagle sprouted his revolutionary wings. Everyone talked about the dreaded smallpox, about whole families being wiped out and other families having smallpox so mildly that no one was sick.

Thousands of miles from the growing rebellion in the American colonies an English doctor rebelled against traditional medicine by announcing that "mild smallpox" was actually a totally different disease. He had discovered that it was the disease that later came to be known as chickenpox because its rash resembled a bunch of chick-peas.

Chickenpox is a mild virus infection that invades all parts of the body. The skin rash is its best-known symptom. The infecting germ is called the chickenpox virus.

Your child shouldn't have any trouble catching chickenpox even if he doesn't come in contact with someone who's sick. He can pick up the germ from people who have been near chickenpox victims and who carry the virus on their clothing, or he can catch it out of the air. Like the man on the flying trapeze, the chickenpox virus floats through the air with the greatest of ease. The germ travels on clouds of fine droplets, which are as contagious as a rash-covered child.

Usually the sickness doesn't begin until the germs have had time to incubate inside the child's warm body. Before the two-to-three-week incubation period draws to an end, the child is passing chickenpox to all his friends. In two or three weeks more they'll be cooped up with chickenpox.

The first symptoms resemble those of flu. The

child's temperature climbs. He won't touch food—not even his favorite dish—and he feels weak, dragged down, and tired. Within a day or so a rash breaks out.

Small pink freckles appear and soon grow into hard red blotches. A minute blister pops up in the center of each blotch and grows larger. These blisters are oval, like teardrops.

Chickenpox usually follows a set timetable. The first spots break out on the chest, then invade the scalp, the face, and after a few scattered blisters break out on the arms and legs the rash starts again on the trunk.

For days the rash resembles a disorganized crowd singing a round. Some spots are just starting, some are finished, and others are in between. On the same patient you can find beginning spots, fully blossomed blisters, and dried-up, crusted, brownish scabs.

Unlike chickenpox, deadly smallpox follows a dirge, where everyone starts and finishes together. Smallpox blisters are all on the same note at the same time. They pass through each stage together. If the blistery rash shows crops at different stages, you can be sure it's not smallpox.

Chickenpox blisters can also break out on the moist tissues lining your mouth, eyes, the delicate walls of the sex organs, and even on the vocal cords, making the patient hoarse.

Itching starts the first day of the rash and gets worse. Scratching breaks blisters, scrapes scabs, and lets in some of the millions of germs carried on normal skin. Ordinarily each blister breaks or dries up and crusts over. After a few weeks the crusts fall off, leaving the skin unblemished.

When bacteria invade the rash, all sorts of skin

infections—impetigo, boils, abscesses—complicate the picture, deepening the sores. Although superficial, chickenpox heals completely; the deeper bacterial infections leave little white scars just as deep gashes may do.

If the bacteria belong to the streptococcus family, arthritis, nephritis (Bright's disease), and even rheumatic fever may gain a foothold. Diseases related to streptococcus infections can usually be prevented by penicillin and other antibiotics, but the best idea is to prevent the bacterial complication in the first place.

Because chickenpox spreads easily, it is almost impossible to prevent. Every broken blister contains thousands of viral particles, each of which can infect a new victim. The child remains contagious until every blister is crusted over with a dry scab.

Even though dried scabs are perfectly harmless, it's best to keep your child at home until most of the crusts drop off. You'll be avoiding an argument with your less-informed neighbor who wants to know, "What do you mean by letting your Billy play with my Tommy? Can't you see Billy's covered with chickenpox?" Schoolteachers may sometimes send home recent chickenpox victims because a few dried crusts remain.

Like an accurate barometer, the chickenpox rash gauges how the victim will weather his illness. A few scattered spots indicate fair and mild, with normal temperature. The victim may not feel the least bit sick. At the other end of the barometer, a rash covering every square inch of skin means that chickenpox is striking with hurricane force. Temperature skyrockets, and the illness may prove extremely severe.

One tiny blister at a crucial spot in the eye can permanently scar the vision. When a vocal-cord blister oozes, the virus can drop down into the lungs and cause pneumonia, but such complications are rare.

After three or four days of constant attack by wave after wave of blisters, the invasions suddenly stop. This is the first all-clear signal—the beginning of the end of the siege. The remaining blotches sail through the usual sequence from blister to crust, and the chickenpox finally ends, even though your neighbor may not think so.

For most children, chickenpox falls somewhere between these two extremes. Usually the only complications children run up against are swollen glands at the back of the neck, which come from infected blisters on the scalp.

Healthy children almost never encounter the three major complications of chickenpox—brain infection, pneumonia, and hemorrhage. Even when brain infection causes coma, delirium, or paralysis, most children recover completely.

Like most other viral diseases, chickenpox strikes adults more severely than children, but because chickenpox is highly contagious, almost everyone catches it before adolescence. When adults do catch chickenpox, one out of three winds up with pneumonia. Like the chickenpox itself, the pneumonia varies from very mild to deadly. Even when the older victims are spared pneumonia, they may develop hemorrhagic chickenpox, where the blisters fill with blood.

Children with weakened resistance may also find themselves battling pneumonia and hemorrhagic chickenpox. Modern cortisone-like drugs tear down natural barriers and let disease flood your system. Recently two little Dutch girls died because cortisone-like drugs had destroyed their natural barriers. One suffered hemorrhagic chickenpox, the other chickenpox pneumonia. Cortisone can change mild-mannered chickenpox into a ferocious monster.

There is no known cure for chickenpox. All you can do is keep your child comfortable and try to prevent complications. The better the child's health, the more easily he'll handle chickenpox. This is just one more reason why your child should have plenty of rest, exercise, pure water, fresh air, sunlight, and good wholesome food.

Fight fever with aspirin, but let your doctor tell you how much to give. Too much aspirin can be dangerous. You may use cool enemas to bring down a high fever. Alcohol sponging hurts and injures open blisters.

(To page 21)



A. DEVANEY

To save their children from injury, mothers learn to watch them for distress signals.

the John Glenn Health Story

 J. DEWITT FOX, M.D.



NASA PHOTOS

Relaxed, happy, healthy, serene, Colonel Glenn is a model of manhood.

THE TIME:

February 20, 1962, 6 A.M.

THE PLACE:

Cape Canaveral, Florida.

THE PERSON:

Marine Lt. Col. John H. Glenn, Jr.

THE EVENT:

The orbital flight of space capsule
Friendship 7.





AS THE countdown moment approaches, Colonel Glenn is lying on his back in the space capsule high atop the Atlas missile, which is to take him skyward.

After waiting calmly through ten postponements, Colonel Glenn knows that the great moment of his life has arrived. He is gambling his all on this event. If he succeeds in carrying his capsule into orbit around the earth and returns safely he will have made a tremendous contribution to scientific advance and will be acclaimed the greatest hero of our day.

If not? Well, he knows the possibility. He will be seen no more should the capsule disintegrate or develop a failure. Should he mistime the split-second firing of the retro-rocket for return through the atmosphere he may land in the jungles of Africa instead of in the Caribbean as planned. These are the great chances John Glenn is taking, yet he is lying on his back calmly awaiting blast-off.

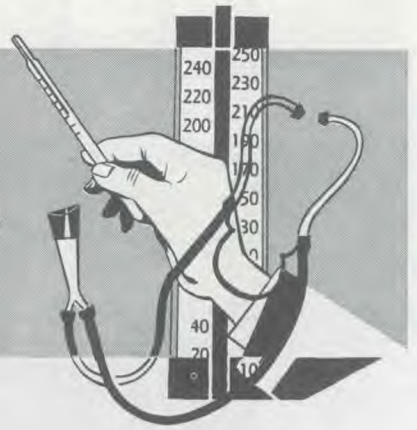
What motivates a man to take such chances? What is the background of this hero who accurately performed his job, did return to earth to become America's No. 1 hero? What kind of person is John Glenn? How much importance did good health have in his spectacular success?

Shortly after (To page 31)



Top: Astronaut Glenn in his space suit stands beside the "Friendship 7." Top right: The astronaut's wife shows her joy at a Washington reception. Lower right: A last-minute medical examination before the actual launching.

The Family Physician



We do not diagnose or treat disease by mail, but answer general health questions. Enclose stamped, addressed envelope. Address: Family Physician, LIFE & HEALTH, Washington 12, D.C.

Inner Ear

My doctor tells me I have inner ear trouble. What is it? I am dizzy much of the time. Is this condition related to the ear trouble? I am very nervous along with my other difficulties.

Inner ear trouble implies that there is some dysfunction in the internal canals of the ear or the hearing mechanism that connects with the nervous system. These structures are in the bony portion of the head behind the ear. They are subject to trouble usually induced by infection from bacteria or viruses.

Changes in the condition of the blood vessels such as are incident to age also

may have a direct connection with the functioning of these parts.

The canals of the ear have to do with maintenance of position and poise. If the movement of fluid within them is disturbed, dizziness or uncertainty of position is likely to occur.

It is practically impossible to foretell the outcome of treatment, for prognosis depends on the cause of the condition. Recovery tends to be slow, especially if the patient is an older person and blood vessel changes in the ear are involved.

Perseverance and regularity in treatment are important, and treatment must be given under the guidance of your physician.

Oral Insulin

Are there any harmful effects on the body in taking Orinase (oral insulin)? I have heard that it does damage to the intestines—that undertakers have discovered it in embalming people.

It has been the experience of this writer to order Orinase in many individual cases. So far as we have learned or observed or seen at an autopsy there is no direct injury done to the intestinal tract by the use of this medicine.

Orinase is not insulin; it is a substitute for insulin. We still think it is hard to provide anything that is better than the natural insulin, but a tablet taken this way with the avoidance of daily injection is agreeable with perhaps the majority of people so that the use of Orinase where the needs of the day are not high in respect to insulin has become widespread and quite general.

We cannot think of any direct injury that one tablet a day would produce on one's physical structure or anatomy.



Piles

I have difficulty with piles. What shall I eat and what treatment do you suggest?

Without knowing more about your general condition we would not be able to say more than that you could use a bland selection of food, not rough or coarse. Very rough food should be avoided in piles.

Piles are dilated veins, or blood cavities, about the anus. If they are persistent and large and tend to bleed, the only satisfactory method for their care is surgery.

If surgery cannot be undertaken, the application of white vaseline to the piles with the tip of the finger several times a day may be found soothing. ▲

—NEXT MONTH

PAPANICOLAOU SMEAR

BY CHESTER L. ROBERTS, M.D.

A third of cancer deaths could be prevented. The Papanicolaou smear helps prevent death, but it needs the cooperation of every woman to be effective.

JOHN JONES'S HEADACHE

BY HAROLD SHRYOCK, M.D.

Headache is not a disease but a symptom. If your worries exceed your tolerance, this symptom may show up owing to mental strain.

SCIENCE OF PRAYER

BY HAROLD A. TASSELL, M.D.

A remedy even better than chemical antibiotics and mutilating surgery? Until we find it we must use miracle medicines and physical therapy.

REGULAR FEATURES

HOME NURSING

YOUR CHILD'S HEALTH

FAMILY FIRESIDE



CHICKENPOX

(From page 17)

A feverish child always needs extra fluids. The oozing from hundreds of blisters taps even more body fluids, so he needs more liquid. He needs nourishment also because he probably won't eat during his sick days. Sweetened fruit juices supply plenty of nourishment and fluid even when a child takes only small sips at a time. Keep a glass always at hand, and keep him sipping.

The fight against scratching is the major battle in chickenpox. Every scratch means a potential scar. Starch baths and calamine lotion soothe the irritated rash. If they fail, stronger lotions containing antihistamines and nerve-numbing medicines can erase every itch. Your doctor may prescribe antihistamines, sedatives, or special anti-itch medicines that fight internal itching.

Itching control is only partial insurance against scratching and scarring.



Take out additional coverage! Keep the child's skin scrupulously clean. Change his bedding and clothing every day, and bathe him morning and evening with antiseptic soap. Cut and clean his fingernails, and if necessary make him wear mittens.

General resistance helps your child fight chickenpox, and after the illness, specific resistance guards him against a second attack. He develops this specific resistance because his body manufactures antibodies designed to kill chickenpox virus. Every adult who has had chickenpox carries these antibodies in the gamma globulin section of his blood serum. Because expectant mothers pass these antibodies on to their babies, most new arrivals start life temporarily immune to chickenpox.

Expectant mothers sometimes can pass the virus itself to their unborn children. Not long ago a teen-age mother delivered a baby a week after she had recovered from chickenpox. At birth the baby was covered with typical chickenpox blisters.

Although antibody-rich serum and gamma globulin protect against many dis-

eases, no one knows yet whether they help fight chickenpox.

From time to time adults—who usually are immune to chickenpox—come down with virus infections that attack nerves. The irritated nerves register sharp, knife-like pain over a large area. When these viruses attack nerves on the left side of the chest, the victim may show such typical heart-attack symptoms that only electrocardiograms can tell the difference. After a few days of agony, little blisters break out over the painful area. Because these blisters overlap like so many little shingles on a house roof, the disease is known as shingles.

In laboratory test tubes shingles virus mimics the chickenpox germ so perfectly that no scientist can tell them apart. Shingles has been known to set off chickenpox epidemics, and adults have come down with shingles after being exposed to chickenpox.

Most experts now agree that shingles and chickenpox are probably caused by the same germ. Immunity makes the difference. When no antibodies hold down the invading virus, widespread chickenpox breaks out. When antibodies protect but do not prevent, the infection is limited to localized shingles.

Scars are never pleasant, but when they could have been prevented they are tragic. You can prevent scars when your child has chickenpox. If he starts out with good general resistance, if you keep his skin clean and free of germs, and if you fight itching every inch of the way, your child should breeze through chickenpox with no trouble and without a single scar.

Because you won't have to face hundreds of white pitted marks on his formerly unblemished skin, you won't have a scar on your conscience. ▲



Don't Wear Sabots!

By Evelyn Witter

THE original saboteur was an angry peasant of the Middle Ages who put on his wooden shoes (sabots) and sneaked out at night to trample his landlord's grain fields to get revenge for some grievance. This act became known as sabotage and, unfortunately, it didn't end in the Middle Ages.

Today we think of sabotage as the malicious taking of revenge in time of war.

"Vengeance is mine. I will repay," saith the Lord, but when someone does us a mean turn we immediately start thinking of ways to get revenge ourselves.

Why not resolve to let bygones be bygones this year? Bury the hatchet and try



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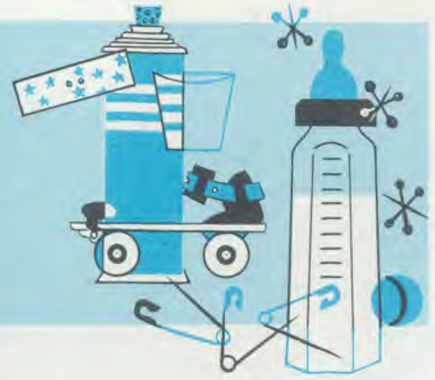
to live in peace with your neighbors and schoolmates.

Any person who takes the law into his own hands and sneaks around in the dark wrecking property is a person without much conscience. He has no sense of fair play. He thinks only of his own hurt feelings and cares nothing for the feelings of the one he wants to hurt in order to get even.

And what happens if he does get even? It solves nothing. It only widens the breach. He becomes the slave of this desire to strike back, and it is far from a true Christian attitude of turning the other cheek.

So don't put on the sabots, because you'll find them heavy, uncomfortable, and cumbersome. Rather, have your feet shod with the gospel of peace. This is the last that lasts. ▲

Your Child's Health



Fathers and mothers, send your questions about your children to: The Children's Physician, LIFE AND HEALTH, Washington 12, D.C., enclosing stamped, addressed envelope for reply.

By ROBERT F. CHINNOCK, M.D., Professor of Pediatrics, Loma Linda University School of Medicine, Los Angeles, California

Overweight Child

My six-year-old daughter is very overweight. How can I help her lose weight?

Obesity in children is common. It may be due to a family pattern of excessive eating, eating too many foods high in calories, an inherited trait, or nervousness.

Children who become fat before the age of 8 usually have difficulty maintaining weight normal for their age. This overweight commonly persists into adulthood and is resistant to treatment in adulthood as well as in childhood.

The overweight child eats an excessive amount of food for the requirements of the body and its needs for growth and exercise. In order to lose weight the child must decrease the amount eaten to below the basic needs, but the volume of food taken cannot be changed very much or the child will have a real sense of hunger.

Placing the child on a strict diet that will permit only a small amount of food intake is usually not successful because of the hunger that develops. Because of hunger the child may go to any length to get food. He may become very confused as he sees other members of the family eating large amounts and he is given only a small amount to eat.

The diet for the overweight child should be high in low-calorie foods. This means that fried foods, rich desserts, and sugar on cereal will be eliminated from the diet. Choose foods for the diet that are low in calories, such as celery, lettuce, cabbage, cucumbers, asparagus, tomatoes, and carrots. Select fruits canned in light syrup rather than in heavy syrup. Give skim milk rather than whole milk, and even skim milk should be limited.

Frequently the question is raised as to whether a fat child has a disturbance of the endocrine glands. When the endocrine system is carefully studied, it is

practically never found that an endocrine imbalance is the cause of overweight.

It is incorrect to assume that every overweight child is deficient in thyroid. Thyroid administration is seldom helpful in weight reduction. When overweight is of little concern to the child or the parents, it is wise to wait for a period of time before an attempt is made to correct thyroid deficiency.

The use of various drugs is seldom of real benefit in the management of overweight, and some of them may make the child more nervous than before and thus defeat the purpose of the treatment.

It is unwise to frighten the child with the dangers of heart attack in later years or to make fun of him because of his size. Such tactics may aggravate the feelings of insecurity already present.

The child who overeats for release of emotional tension is usually very quiet,

good, and obedient, apparently the model in the home. This fine exterior may completely hide severe stresses underneath. When it becomes apparent that stresses are excessive, someone who is qualified in investigation and management of emotional problems in children may be of tremendous help. At times only when stress is properly evaluated will weight reduction occur.



Impetigo

A child in my son's class at school has impetigo. Is there anything I can do to keep him from developing this condition?

In the broad sense, impetigo is merely an infection of the skin due to several of many types of germs.

In the past, impetigo was greatly to be feared because it spread rapidly from child to child, and at times apparently little could be done to control the infection. In some children the involved area was extensive and the children became quite ill.

With the development of antibiotics, impetigo is no longer a condition to be feared. The majority of cases are treated very satisfactorily with either an application of an antibiotic directly to the affected area or occasionally an antibiotic given by mouth or injection.

Because of the relative ease with which this condition is treated now, there is no special precaution to be taken, such as isolating a child so that he will not spread the disease to others.

Good skin care, which includes bathing with soap and water and wearing clean clothes, usually cuts down the chance of a child's developing impetigo even if he has had contact with a child who has it. ▲

THE ANSWER

By ELAINE V. EMANS

She asked me, "What is faith?" with so
Much confidence that I would know,
I couldn't fail her. But how does
One tell a child of a thing that was
To one, for ages, just a word?

"Well, sometimes, dear, faith is a bird
Flying," I said, "to lead us on.
Sometimes in dark before the dawn
It is a lantern or a star
Shining to let us know we are
Not really lost. Sometimes faith is
A song a man hears deep in his
Own heart [I hoped she understood]
And often it's just knowing, dear.
I wonder if I've made it clear?"

"Oh, yes," she smiled, "I knew you
could."

BE TRULY THANKFUL

(From page 15)

Makes 16 rolls. (Try adding 1 tablespoon of soy flour per cup of flour to this recipe and see how delicious the rolls are.)

Whole-Wheat Sticks

Mix together:

- 3 cups white flour
 - 4 cups stone-ground whole-wheat flour
 - 1 cup brown sugar
 - 1 teaspoon salt
- Cut in 1¼ cups Crisco as for piecrust

Add 1¼ cups cold water and mix, kneading in the bowl until smooth. Divide into three or four parts and knead each well, using very little flour. Roll ¼ to ½ inch thick, prick with a fork, and cut into strips, cutting again to make short sticks. Place on cookie sheet and bake in moderate oven, watching carefully to prevent burning. They may be turned so as to be lightly browned on both sides. Keep in closed jar until ready to use. Delicious while still warm. (Dough may be chilled between kneading and rolling out.)

Desserts

Washington Sanitarium Pumpkin Pie

Makes 3 pies

- 1 quart cooked pumpkin
- 1 cup brown sugar
- 1 cup white sugar
- 3 eggs
- 1 cup cream or ½ cup canned milk plus ½ cup whole milk
- 3 tablespoons flour
- 3 tablespoons melted butter
- 1 pint scalded milk
- Spices to taste or 3 teaspoons pumpkin pie spice



Stir all dry ingredients, except sugar, through the pumpkin. Dissolve brown sugar in the hot milk; then add the milk and cream to the pumpkin; whip eggs and white sugar till stiff, and add last. If the mixture is too thick, add more milk; pour into unbaked pastry shells. Bake in a moderate oven until set.

I use whole-wheat flour for one third of the flour in my piecrusts and it adds flavor. Often I freeze my piecrusts until ready to use. This pumpkin pie can also be frozen after it is baked.

Try this topping sometime: Five or ten minutes before taking pumpkin pie from the oven, sprinkle with ¼-cup of coconut. Drizzle one or two teaspoons of honey over this and return to the oven for ten minutes to brown the coconut delicately and to finish baking the pie.

Delicious Cheesecake

Crust:

- 1 box crushed Holland Rusk

- ½ cup sugar
- 1 teaspoon cinnamon
- ¼ cup melted butter

Mix and press into bottom of large metal pan (13 x 9½), reserving ½ cup to place on top of cake.

Filling:

Beat 4 eggs, add 1 cup sugar, 1 teaspoon vanilla.

Cream 3 eight-ounce packages cream cheese. Add egg-sugar mixture and beat well. Pour into pan.

Bake 350° F. for 30 minutes. Let cool 10 minutes. Sprinkle top of cake with remaining crumbs. Refrigerate 24 hours.

Try this when cream cheese is on sale. It makes a large cake and can be frozen for future use.

Soups

Split-Pea Soup

- 1 cup dried peas
- 2 quarts water
- medium-sized onion
- scant ¼ cup barley

Cook for two hours. It boils over easily, so use a large kettle and a low fire after it begins to boil. When cooked, season with salt, Beta Broth, Wyler's vegetable cubes, G. Washington Broth, McKay's Chicken Style Seasoning, or a combination of two or three of these. Add evaporated milk before serving.

Lentil Soup

- 1 pound lentils
- 3 quarts water
- salt
- 2 or 3 onions boiled whole
- 2 or 3 celery stalks

Cook until done. Brown two heaping tablespoons flour in oil and add 1 or 2 cups of cold water. Add 1½ cups tomato juice and bring to boil. Add to soup. Parsley may also be added.

Try cooking lentils, celery, and a bay leaf together for soup and add evaporated milk before serving. ▲



As Hazardous as a Factory

A home kitchen may contain as many hazards as a light manufacturing establishment, says the National Safety Council *News Letter* (edited by Carman Fish). Records compiled by the National Safety Council indicate that the kitchen is the No. 1 accident area of the home.

Quoting Judith Stone, a New York home economics writer, there are 13 items in the kitchen that should receive the attention of the safety-minded housewife:

1. *Pots and pans.* Pot handles sticking out from the stove are easily knocked over. Keep handles turned inward. Keep potholders handy. A towel will protect the hand from heat, but a towel corner may catch fire. If a grease fire starts in a

pan, smother it with a metal cover or pour on plenty of baking soda.

2. *Electrical equipment.* Frayed cords and worn plugs cause many fires, so check yours periodically. Install safety guards on outlets not in use. Don't overload circuits. Electrical fires are among the hardest to put out.

3. *The oven.* Modern gas ovens can be lighted without matches. If yours requires a match, don't turn on the gas until the flame is there. Be sure the room is well ventilated.

4. *Matches.* Use safety matches and store them out of the reach of children.

5. *Knives.* Store sharp knives in a high wall rack beyond the reach of children. Wash and dry them one by one, keeping the sharp edge turned away from your hand. When cutting, always cut away from you. Use one of the safe, inexpensive gadgets for peeling instead of a sharp knife.

6. *Dishes.* For everyday use there are dishes that won't splinter or chip. Save the fragile dinnerware for company and handle it with care. (Cost as well as safety is involved here.) Fragments of glass in the dishpan or on the floor can cause nasty cuts.

7. *Cleaning fluids.* Even nonflammable cleaning fluids may be risky; they may give off poisonous fumes. Be sure the room is well ventilated. When using acids or caustics wear rubber gloves. (Many housewives wear gloves for dishwashing—even with mild detergents.)

8. *Cupboard doors.* Close them immediately after use, to avoid a possible bump on the head. Keep drawers closed to prevent tripping or bruised shins.

9. *Towels.* Hang them away from the range to avoid fire. Use them as little as possible. It's more sanitary to let dishes air dry.

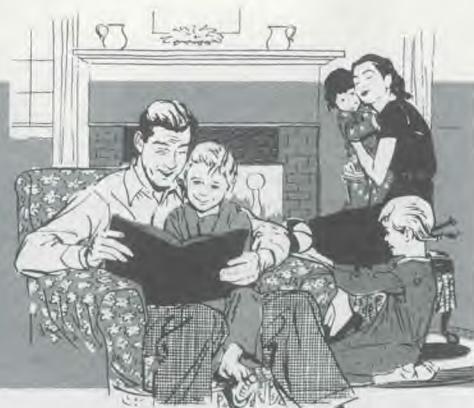
10. *Fire extinguisher.* A portable dry chemical or carbon dioxide extinguisher is recommended for the kitchen. (Be sure it bears the label of Underwriters Laboratories or Factory Mutual Laboratories. Some pint-size extinguishers are of little value.) Keep the extinguisher far enough from the range so flames won't make it inaccessible.

11. *Spillage.* When water, food, or grease spills onto the floor, wipe it up at once. Someone entering the kitchen might not notice it, and you might forget it.

12. *Nails and hooks.* When putting up nails and hooks, place them where passers-by can't be caught on them. If possible, hang hooks high enough to be avoided by children. Your waist level may be their eye level.

13. *Stools.* A sturdy stool costs little, lasts a lifetime, and may prevent a serious fall. Avoid that little extra stretch. A folding combination stool and stepladder is useful if you have shelves to reach. ▲

The Family Fireside



Send your questions on family problems to: The Family Fireside, LIFE & HEALTH, Washington 12, D.C. Enclose stamped, addressed envelope for reply.

By HAROLD SHRYOCK, M.D.

Professor of Anatomy, Loma Linda University
School of Medicine

OLD ENOUGH TO DATE?

RECENTLY I attended two meetings held a day apart in which teen-agers in the first meeting and parents in the second discussed dating. At each meeting people in the audience submitted questions for discussion. One of the most frequent questions asked by both teen-agers and parents was "When is a young person old enough to have dates?"

I was impressed by the difference in the tone of the questions submitted by teen-agers and by parents. The context of most of the former was, "My parents treat me as if I were still a child. They refuse to let me have dates for fear I will do something they would not approve. Others my age are free to have dates as they choose, but my parents keep telling me to wait until I am old enough to have good judgment. How old must a person be in order to convince his parents he can be allowed a reasonable amount of freedom in social matters?"

The context of the questions submitted by the parents ran something like this: "Modern young people think they are entitled to their own choice in social matters even in their middle teens. We parents believe that even though they have reached physical maturity, they do not yet have balance of judgment to act wisely. How old should a young person be in order to provide assurance that he will conduct himself wisely on a date?"

Teen-agers clamor for more liberty, and parents hesitate to grant the social liberties their teen-agers want.

Why Date?

One mother who had forgotten the thoughts and interests that were hers twenty years earlier asked: "What can we do to help our teen-age boy and girl to be content for a few more years rather than follow the example of their school-mates, who are so boy crazy and girl

crazy that all they think about is dates?"

Young people smile at the question Why do boys and girls want to date? "It's just the natural thing to do" is the usual answer.

In order to understand the desire for personal companionship, parents will do well to consider the four fundamental

reasons why young people like to date.

1. There is a natural attraction—a personal magnetism—a young person experiences during the early teens that draws a boy and girl toward each other. Scientists call it the biologic urge, older people call it lovesickness, but young people don't bother to name it—they simply experience it. The attraction is so strong that a boy who just a few months ago was unkempt, awkward, and bashful gives attention to his appearance and finds the courage to seek out the girl of his choice. The girl finds great delight in being sought out, and she devises ways of making it convenient.

2. Dating provides a setting in which young people can get better acquainted than is possible in large social groups. On a date, a boy and girl give attention only to each other. Each becomes aware of the other's preferences. They have opportunity to observe each other's personality.

3. An impelling force in dating is that it is the popular thing to do. The force of social custom is extreme in the lives of young people. If friends of their age are dating, they want to date.

Dating gives a young person the assurance that he rates normally. When John asks Ann for a date, Ann reasons quite correctly that John considers her his social equal. When Ann accepts the date, John reasons similarly. Dating provides a social yardstick by which a young person measures progress toward the goal of social acceptance.

4. Dating is attractive because it is the conventional pathway toward marriage. Every young person, admitted or not, looks forward to the prospect of marriage. Every date carries exhilaration that comes from being selected from among many, exhilaration that gives a foretaste of the one-and-only relationship on which the security of marriage rests.

IN THE EVENING

By GLADYS HAYES

Did you chance to see last eventide
The pink sky splashed—so gay—
With silver streaks o'er crimson sun,
All filmed with blue and gray?

The cloud banks went their eerie way,
My mind went dancing wild.
So many things my eyes did see,
I felt I was a child.

I saw a face, I saw a ship.
Was that a throne up there?
I saw a pig with curly tail
And a girl with long blue hair.

I watched the pictures fade away
As daytime slowly ended;
The girl, the pig, the throne, and all
Were beautifully blended.

Through dusk I watched, and still I saw
More marvels of the sky
As evening let the nighttime come—
Or did day slowly die?

I saw a star, the first of night;
I watched it twinkle, sly,
And as I watched, another came
And joined it by and by.

What Is the Risk?

A seventeen-year-old girl argues, "What are my parents afraid of? Even though I'm seventeen, they won't let me date alone. I think they don't trust me with the family's good name. I have no thought of doing anything that is wicked, and I wish I could put this across to them."

This girl, reasoning as do many of her age, finds it difficult to understand her parents' viewpoint. She is sincere in her belief that she is able to direct her conduct on dates. What she fails to understand is the risk as appraised by her parents.

1. Among the risks of dating is the influence of unscrupulous associates. Many a young person with good intentions is persuaded by fear of being a wet blanket to violate his conscience by petting, smoking, drinking.

2. A risk in poorly regulated dating is social indiscretion. The mere mention of this possibility causes some young people to shrug off the danger as fiction of



elderly people's imagination. But the fact of 200,000 illegitimate births in the United States each year stands as evidence that when young people are on dates alone they may pass the point of no return in the physical expression of their affection.

One young woman testified, "I thought I was able to turn my physical desires off and on at will, but to my shocked surprise there came a time when I was no longer in control."

3. Poorly regulated dating also carries the risk that casual friendship will lead to marriage before age, education, and earning power make marriage feasible. The epidemic of teen-age marriage with its astoundingly high divorce rate indicates that premature marriage stands as a threat to the future happiness of young people.

Is Age the Only Factor?

Now to the question of the earliten girl who asked, "How old should I be before I start having regular dates?"

The tradition that when a girl becomes sixteen she is old enough to have unsupervised dates does not provide a reliable answer. Even before a girl celebrates her sixteenth birthday she is interested in having boys admire her. The desire for admiration is not the basis on which dating privilege should rest. The fact of being sixteen does not in itself bestow the good judgment and understanding of human nature that enable a young person to avoid the danger complete freedom in dating entails. Readiness for dating cannot properly be measured by counting birthdays.

A young person is "old" enough to date when he—

1. Understands that the kind of maturity enabling a person to live successfully is not measured by number of birthdays but by stability of character.

2. Accepts the God-given attraction to those of the other sex as an endowment to be used wisely rather than a blank check to be spent for momentary pleasure.

3. Realizes that dates alone set the stage for the kind of courtship that leads quickly to marriage and that dates alone are not appropriate until the maturity and circumstances of the couple make it reasonable for them to undertake marriage.

4. Believes that his own ideals of right and propriety must serve as guides to conduct in preference to social custom or the example of friends.

5. Subscribes to the philosophy of the apostle Paul when he advised the Philipians: "Whatever is true, whatever is honorable, whatever is just, whatever is pure, whatever is lovely, whatever is kindly spoken, whatever is lofty and whatever is praiseworthy, put your mind on these" (Philippians 4:8, Berkeley). ▲



Clenching Teeth

People who have the unconscious habit of grinding or clenching their teeth, sometimes even during sleep, may suffer chronic headache. It is due to overstraining the muscles of chewing and the scalp muscles that attach to the sides of the head.

An article appeared in the British medical journal *Lancet* giving as treatment for this condition the use of a relaxation plate with a bite plane between the upper and lower incisor teeth to prevent clenching of the jaws. Ragnar Berlin, M.D., and Leopold Dessner, L.D.S., of Falkoping, Sweden, reported that 54 of 62 patients with chronic headache associated with clenching of teeth were success-

fully treated with this relaxation plate.

People whose upper and lower teeth match poorly sometimes have the habit of clenching their teeth during sleep. They should have their dentist check the relative position of their teeth and consider prescribing such a relaxation plate.

The more common cause of clenching of the teeth during sleep or daytime activity is an overactive mind and too much nervous tension. People having this problem need physical exercise and relief from mental strain. For breaking up chains of nervous tension, a good swim or a walk around the block is of value in relieving chronic headache due to nervous tension. ▲



Signs Lower Speed

Reductions up to 50 per cent in automobile speeds in school zones protected by new high-visibility signs are reported by police departments of two Chicago suburbs.

Sgt. John Pickrell of the Oak Park police traffic division said the signs—covered with a bright-orange fluorescent material—are responsible for cutting speeds "at least 50 per cent" in residential area school zones and almost 30 per cent in school zones in business districts.

"This is quite a cut," he said, "when you consider the village speed limit is 30 miles an hour on main streets and 25 on side streets. The new signs are automatic policemen."

Impressive speed reductions in Wheaton school zones also were reported. Sgt. John O'Neill said that checks show motorists are driving "at least 20 to 25 per cent slower through school zones protected by these new signs."

Sergeant O'Neill added that since the new signs were installed near a Wheaton school about a year ago arrests have been cut 50 to 60 per cent and "complaints from residents of cars speeding through school areas have dropped to almost nothing."

Indianapolis, Indiana, also reports that the new bright-orange signs have been instrumental in slowing down motorists going through school zones. Arthur G. Wake, design and planning engineer for the Indianapolis Bureau of Traffic Engineering, said a pilot study made after the markers were installed there showed speeds were reduced 10 to 12 per cent.

Approximately 200 cities, including New York, are reported to be using the signs. The States of Virginia and Washington recently adopted the signs as standard for use in all school zones. ▲

The Golden Age

This page is dedicated to all our Golden Age readers who are still young at heart. It is designed to improve and encourage active hobbies, good diet, and outdoor exercise.



By OWEN S. PARRETT, M.D.

COFFEE AND TEA—FRIEND OR FOE?

A CARD just came in the mail from a patient's wife. A week ago the patient came to my office complaining of blackouts so severe he was afraid to drive his car lest he have an accident.

A careful examination of heart and blood pressure revealed nothing abnormal. Becoming suspicious that the villain coffee might be up to his old tricks, I asked the patient how much coffee he was drinking daily.

Turning to his wife with a dawning expression on his face he remarked, "You know, I had three cups of coffee just before I had that attack this morning." He inquired of me, "Can it be coffee that is making me have these blackouts?"

"It isn't the first time I have seen that happen," I replied. "Coffee is a rogue that often gets by without being suspected of the crime."

Then I told him the following story:

Seeking advice from my income-tax man one day, I learned that he was out of his office and at a nearby medical clinic. Because he was apparently in good health, I wondered what had happened.

A few days later he called for an appointment and told me his story. Becoming so severely dizzy he could hardly keep at his work at the height of his busy tax season, he feared something serious and went for a complete examination at the clinic. After several days of testing and observation he was told to go home, that there was nothing wrong with him, heart and blood vessels included. He was given medicine commonly used for seasickness and told to try it if dizzy. It did nothing for his dizziness.

What was he to do? He had to keep up, for of all times this was the worst to be sick and off the job.

Certainly, I thought, if there was anything serious about the case the specialists with all their testing would have found

it. Something simple must have been overlooked. Suspecting coffee, I said, "What about coffee?"

"Oh," he said, "you put me on a coffee substitute two years ago, and I have been using that instead of real coffee ever since." Then he broke out with, "By the way, recently I have been drinking a cup of coffee at ten o'clock and another at four in the afternoon—a lift during my rush tax season."

I said, "I am afraid it is lifting you off your feet. Leave it alone and see me in a week."



FOR THEE

By JANE MERCHANT

We thank Thee for uplifted hours
Renewing our diminished powers,
For service competently done,
And full, abundant harvests won,
For fields and hills that bless our eyes
With constant wonder and surprise,
For all who understand and care,
For fellowship and bread to share;
And for the joy, forever renewed,
Of offering Thee our gratitude,
In certainty that Thou art near
Us always, Lord, and always hear.

The next day he called and asked whether I could see a friend of his who was sick. "He is dizzy," he said.

"Well, what about you?" I asked.

"Oh, I am all right now," he answered, and he has had no trouble since.

After I told this story to my blackout patient, he decided to try going without coffee for a week to see what would happen. He lived more than a hundred miles from the office, so I, eager to get a report from him, asked his wife to drop me a card and tell me the result. Here it is:

"DEAR DOCTOR:

"I am happy to tell you that since Carl left your office he has not touched a drop of coffee, neither has he had any blackouts. Evidently you were correct in your diagnosis. Now if he would only give up his cigarettes, he might really enjoy good health."

An hour ago I was chatting with a camper here in Yosemite, a man aged sixty-nine, who drives a sight-seeing bus. He is recovering from surgery and hopes to be back on the job soon. When I mentioned coffee he said he regularly drank ten or more cups a day. No one had ever suggested to him that he should not drink it, nor was he conscious of any bad effects from it. He admitted he was becoming somewhat nervous. I suggested that he leave off the coffee and see whether his nervousness would not improve, besides avoiding worse troubles later on.

Like many other poisons and habits that undermine human health, coffee drinking may not always ring any bells; but its insidious action may be laying the groundwork for later trouble not easily cured. Never forget that nature is an exacting bookkeeper, and will eventually call for a pay-off, at which time the real culprit may not be suspected.

Without doubt, regular coffee drink-

ing is making a heavy contribution to the increase in heart disease in the United States. Statistics show that Americans consume as much coffee as all the rest of the world combined. In one recent year this was more than 2 billion pounds, including 500 million pounds of instant coffee. This coffee would make 100 billion cupfuls, or 4.5 billion gallons, said to be enough to keep Niagara Falls flowing for nearly an hour.

The average coffee consumer uses the total bean harvest of ten coffee trees. Coffee constitutes America's largest import trade. U.S. Department of Commerce figures reveal that in 1954 the retail coffee sales in America amounted to approximately \$2.25 billion.

I heard Dr. J. Arnold Bargaen of the Mayo Clinic, leading specialist in ulcerative colitis, relate in one of his lectures how a man in Chicago with a permanent window in his stomach could be observed. Whenever he drank coffee, the lining

RUSSIAN PROVERBS

An old friend is better than two new ones.

When you meet a man, you judge him by his clothes. When you leave, you judge him by his heart.

Love your wife like your soul, but shake her like a pear tree.

Tears come more often from the eyes than from the heart.

damaging than coffee, tea contains the same drug and has a similar effect. Practicing medicine in Canada for five years, I saw the effect of tea in a country where it is the principal beverage.

One day a prominent man in government service came to my office. He was having dizzy spells so severe that it was feared he might succumb to a heart attack. He was drinking one or two cups of tea daily. At the hospital we took away his usual tea ration. When I next saw him some time later, he laughed and, striking his hand over his heart, remarked, "Since leaving off tea, I have had a good heart and no dizziness."

Were I to be offered a huge sum of money simply to drink one cup of coffee daily for a year I would laugh at the offer. I don't want to tamper with a good circulating system. Think of it, that little pump we call the heart, scarcely bigger than our fist, must pump the blood through a system of pipes long enough to more than encircle the earth twice. Capillaries are so small that six hundred of them rolled into a cable would be no larger in diameter than an ordinary pin. Truly, as the Good Book says, we are "fearfully and wonderfully made." No machine of man's devising can even remotely compare with God's masterpiece of creation. Strange how willing we are to treat it worse than a jalopy, and with what dire results.

If you have a good heart, keep it good. If you have a bad heart, by all means give it the best break possible by not throwing more poison into your system. Treat it as your best friend, for such it is. ▲



membrane appeared red and inflamed. He said that none of the ulcer patients at the clinic were permitted to drink coffee.

Dr. Owen H. Wangensteen, a prominent gastroenterologist, who helped devise the suction tube frequently used after surgery, and who should know much about the digestive tract, made this statement on pages 190 and 191 in the September, 1954, issue of the *American Journal of Gastroenterology*:

"I would say that coffee is number one on the list of things that patients who have peptic ulcer should not take. . . . I have the impression that if a patient is to be treated medically for peptic ulcer, he should not take caffeine in any form whatsoever."

Someone may say, "But I don't have peptic ulcer." Let's not irritate that delicate stomach lining even though it is in healthy condition. Digestive disturbances may arise too soon at best.

What about tea? Although a little less

Beware Rare Pork

The *Illinois Health Messenger*, official State health department magazine, quotes this report from the *Journal of the American Medical Association*:

Our country's incidence of the disease trichinosis is three times that of all other countries put together.

Because pork bears the stamp "U.S. inspected and passed," it does not mean that the meat has been routinely inspected for trichinosis. The U.S. Department of Agriculture, unlike such departments of other countries, does not examine pork routinely for presence of the parasite that carries trichinosis to man.

The trichinosis parasite goes from pork to man's stomach, then to his muscles, causing nausea, cramps, and muscular tiredness, even death.

The only preventive is to cook pork and pork products thoroughly to destroy the parasite. Or leave pork alone. ▲

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Home Nursing



By MARY CATHERINE NOBLE, R.N., R.P.T.

THE RELAXING BATH

OUR hearts should be filled with joy at the Thanksgiving season; it brings us reminders of our heavenly Father's care. As we think of His blessings, we should see many opportunities for sharing with others. Sharing not only blesses the lives of others but returns in blessing upon the giver, as our Saviour has said: "It is more blessed to give than to receive" (Acts 20:35).

Thoughtfulness is implied in sharing, but a great deal of hard work is often involved. At holiday time mother is so busy, so full of everyone's secrets, that her mind is still in a whirl long after the children are soundly sleeping. Father secretly wishes she wouldn't do so much each year that she is tired out to start a new year.

Why not steal a march on after-holiday fatigue? Many wise people plan months ahead so that only the details are left to do when the holiday season arrives. It may not be possible to do that this year, but plan for it next year. Knowing from experience how quickly the short December days fly, start early on letter writing and preparing for sending holiday wishes. To do as you would really like and send a thoughtful message takes time and planning.

Save a little corner of time for yourself every day. Come what may, do not surrender it. It may be only thirty minutes, but into it tuck as much relaxation as possible.

One way to make thirty minutes really count toward more relaxed living is to take a neutral tub bath.

The word *neutral* is used because the temperature of the bath is almost the same as that of the skin. The central nervous system is not stimulated as it would be with cooler or warmer water. Outside stimuli are at a minimum, and so

the nervous system is calmed and relaxed.

The temperature of the bath should be somewhere between 94° F. and 97° F. It may be necessary to begin the bath at 98° F. and permit the water to drop to the lower temperature for the rest of the time. If you do not do this, you may be chilled and the purpose of the bath be defeated.

During the bath remove all noises and outside stimuli. Encourage relaxation as much as possible. Talking acts as a stimulus and prevents relaxation, so don't talk to anyone.

For the neutral bath you will need:

1. Three bath towels,
2. Bath mat.
3. Washcloth.
4. Basin of cool water.
5. Shower cap to keep your hair dry.
6. Bath thermometer.

Proceed in this way:

1. Fill the tub two thirds full of water

between 94° F. and 97° F. The water should be deep enough to cover your shoulders comfortably.

2. Place a folded bath towel on the edge of the tub for a pillow.

3. Make yourself comfortable in the tub, covering your body with a bath towel. If you are helping someone else take such a bath, he may need assistance into the tub.

4. Keep your face cool by bathing it with cool water.

5. Maintain the temperature of the bath by adding hot water as needed.

6. Take the bath for fifteen minutes to an hour. The usual time is twenty minutes.

7. At the end of the bath cool the water two or three degrees.

8. Gently pat your skin dry. Do not rub.

9. Dim the lights during the bath and avoid conversation.

Some important points to remember:

1. A bath thermometer is essential in maintaining the correct temperature. Without it the temperature is usually kept too high and the desired relaxation not achieved.

2. If you do not feel warm before starting the bath, take a hot foot bath for five or ten minutes.

3. Comfort in the tub is essential. Elderly or thin people often require a plastic air ring under the buttocks for comfort. A bath towel is sometimes rolled and placed under the knees for comfort.

4. The bathroom should be warmed before the bath, and you should not feel chilly when coming out of the tub.

5. A period of rest after the bath is helpful in increasing relaxation if time can be made for it.

The neutral tub bath is excellent for relaxing nervous tension and for sleeplessness. ▲

MY LEGACY

By BETTIE PAYNE WELLES

I know the glory of a star
And the art in a small brown seed.
I find my treasures near and far;
I am rich indeed.

I hear a symphony in the rain,
The woods, the wind, the sea.
Songbirds do not sing in vain;
I love their harmony.

I am akin to life and man,
To earth and sky and tree;
I share God's universal plan—
This is my legacy.

JOHN GLENN'S FOUNDATION

(From page 9)

Well, I prayed, and I thanked God for the good foundations laid in our lives long ago. As I watched his *Friendship 7* capsule blast out into space, I envisioned that same whistling boy—calm and ready for any emergency, trusting in God, whom he knew David had trusted:

"If I ascend up into heaven,
Thou art there. . . .
If I take the wings of the morning,
and dwell in the uttermost parts of
the sea;
Even there shall thy hand lead me,
And thy right hand shall hold me."
Psalm 139:8-10

When John Glenn soared through space, he was a lot farther from New Concord than he or any of us had ever dreamed of being, but he was living evidence of that counsel given many years before: "What you are to be, you are now becoming." ▲



The Physical Therapist

By Beatrice S. Stout

MORE and more people are interested in the science of physical therapy when they see and feel the results. Large universities are carrying on vital research in this field of medical service.

A modern department of physical medicine and rehabilitation is an intriguing place. There is the hydrotherapy (water treatment) department with its hot packs and various baths, including the whirlpool. There are the diathermy (deep heat), ultrasonic (high-frequency waves), and muscle stimulating machines. Just as important are the exercise rooms and the occupational therapy rooms, with power tools and devices to aid in re-educating weak muscles. When we see what this equipment does for despairing people, we are glad we can have a part in bringing hope.

The drama of life passes through the well-equipped rooms here at Washington Sanitarium and Hospital. Sadness and pain are not strangers to its walls. People who know the raging of life's storms, who are left crippled and despairing, come to find healing and courage. Many have had a close brush with death.

Most tragic of all is the completely paralyzed patient. In the ebb and flow of life around him, he challenges the initiative and skill of the therapist.

A young boy accidentally shot through the spinal cord, with deterioration of nerves and muscles, is brought in on a stretcher, helpless.

A little girl injured by a fall is speechless and unable to walk.

A youth with brain damage by an accident with an electric tool is another helpless victim.

These people who once would have been written off as helpless cripples can now hope for a degree of recovery and possible return to a normal, useful life. Under the care of the trained therapist there is at first a slight, almost imperceptible change. But quietly, slowly, there is a gradual renewal of life for these inert bodies.

Two factors that we can't do without in rehabilitation are determination and persistence. With each new advance, the patient has a satisfying sense of accomplishment. The physical therapist, the occupational therapist, and the speech therapist all have a part in helping him. Behind them stands the skilled physician, overseeing and directing the complex procedure.

When science has done its utmost, all the skills of man prove unavailing without the healing touch of the Creator. With God and trained men working together, there is brought about the mystery and wonder of rebuilt bodies. Instead of despair, there is the beginning of hope for thousands of helpless victims.

Heroism is not found only on the battlefield. We see it in a woman hopelessly paralyzed, who instead of hugging her load, eyes to the ground, holds onto hope as she is trained to a degree of usefulness by the occupational therapist. Holding a pencil between her teeth, she draws designs for lovely cards. Quietly bearing the unbearable, she displays rare and beautiful courage.

Young men and women find that a career in physical therapy proves to be a contribution to humanity. Whether the patient's restoration to health is complete, partial, or nil, the knowledge that he played a part in the contest between life and death is a rewarding experience to the dedicated physical therapist. ▲



Power of Music

Celsus, the Roman nobleman who gained renown as a medical authority in the first century A.D., urged that music be used in treating the mentally ill.

With much the same approach some thousand years later Avicenna, the famed physician of Baghdad, prescribed as an analgesic "agreeable music, especially if it inclines one to sleep."

Music captures the attention of the listener through other stimuli, even unpleasant or painful ones. Evidently people do not have enough nerve cells to respond to many simultaneous stimuli. ▲

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By LYDIA M. SONNENBERG

TALLER POPULATION

FAMILIES with growing children usually have a measuring wall somewhere in the home. On birthdays, each child stands up to the wall for measuring. A higher mark proudly indicates he is growing taller. It is not an unusual family in which a child outstrips his parents in height. To these families it is not news that in the United States children and adults are taller than children and adults a generation or two ago.

The United States Department of Agriculture in the book *Food, The Yearbook of Agriculture 1959*, gives some interesting figures on changes in height and weight of the American population.

Before the year 1800, the population of the United States was made up chiefly of English and Scottish descendants. From 1800 to 1900, immigrants came largely from Germany, Ireland, and Poland.

Most of the immigrants between 1900 and 1920 were from Canada, Mexico, and countries of Southern Europe. These immigrants tended to be shorter in stature than the ones from Northern European countries. After 1920, immigration was restricted, and the population largely moved westward.

Army records give us the earliest information on the measurements of large groups of our population. More than 500,000 Civil War soldiers were measured in 1863-1864. They averaged 67.7 inches in height.

An interesting record is of U.S. Senators of 1866, who averaged 69.5 inches. Curiously enough, they were not considered typical of their time, for the report pointed out: "They exceed (in height) the average of mankind in all parts of the world as well as the average of our own country."

The average height of more than 1 million United States soldiers in 1917-1918 was 67.5 inches. In 1943, about 100,000 Army recruits had an average height of 68.1 inches; 85,000 recruits in 1946 aver-

aged 68.4 inches. In 1946-1953 smaller special groups of men in the Armed Forces averaged 68.4 to 70.2 inches.

In 1955 a study of height and weight was made by the Department of Agriculture as part of a survey of eating habits in the United States. This study gives us some interesting figures on trends in women's height and weight. Women 20 to 29 years old averaged 62.4 inches in 1900-1908 and 64.3 inches in 1955, an increase of about 2 inches. Only 4 per cent of the earlier group could be considered tall—67 inches and over—but 18 per cent of the age group in 1955 were that tall. Today women weigh 6 to 8 pounds less during the 25-29 age bracket than their counterparts 50 years ago. But by the time they are 45-49, they have gained 18 pounds, whereas the women at the turn of the century gained only 14 pounds.

Statistics show that men succeed better than women in keeping their earlier weight. On the average, women gain weight faster in their later years than men.

Another way to measure changes in size is to study changes in selected population groups, such as college students. The percentage of freshmen college men who were 6 feet and over has increased from less than 5 per cent in the 1880's to about 30 per cent since 1955. Average weights have increased about 20 pounds, from 136 to 157 pounds—slightly more

than would be expected for the extra 3 inches in stature.

Yearly measurements were made in 1922-1934 of a group of children in the public schools of Boston. Children large at 6 years grew faster and stopped growing sooner than those small at 6. The fast-growing children generally were heavier at all ages than those who grew slowly.

Girls have their spurt growth earlier than boys. The 10 to 12-year-old girls are usually taller than boys of the same age. By the time the boys are 13-15, they catch up with the girls and continue to grow until 18 or 19. A boy's gain in weight may continue after he has attained his full height. Girls grow only slightly after they are 13-15 years old, and there is little change in weight between 15 and 20 years of age.

Statistics indicate that overweight children mature unusually fast. Growth stops early in these fast-maturing children, and they usually are relatively short in stature and heavy in weight.

The best way of judging whether your child is growing normally is to follow his growth record over the years. There should be a fairly regular gain in height and weight until about a year before puberty. Then a rapid spurt in growth takes place, and he soon reaches his maximum height.

A child's final size depends on several factors. First is heredity. More than anything else, the genes he is born with determine his potential size. He cannot exceed this potential, but some factors such as severe illness, insufficient building foods, and emotional stress may alter his rate of growth and even his ultimate size.

What accounts for our taller population in the United States today? Many factors are involved. Among the most important are improved economic conditions, better medical care and health services, better diet from babyhood on. ▲



JOHN GLENN HEALTH STORY

(From page 19)

Astronaut John Glenn's successful three-orbit flight around the earth it was my pleasure to meet him at his Arlington, Virginia, home. In a comfortable brick house across the street from Williamsburg Junior High School I found his wife, Annie, preparing supper for David, 16, and Lyn, 14. Glenn himself was ready for a gala evening, attired in a tuxedo, standing straight and trim. He is 5 feet 10½ inches tall, has thinning red hair and a crop of freckles that gives him a boyish look. The twinkle of his green eyes matches the sparkle of his infectious broad smile, which immediately tells you that here is a man who is everyone's friend. Humble and free of ostentatious airs, he is as easily met as a schoolboy; devoid of a celebrity's conceit.

In the twilight hour of my visit a car drove past the house, and the children in

THE FARTHER VIEW

By JUANITA MC DONALD

I thought a cherished tree the fairest thing
To rim my little world—
Until it toppled, broken by the storm.
Then I came to know
The hills beyond
And love the stars, and from the sky
I learned of quietness.

it shouted gleefully, "Oh, look, there he is!" When their father got out of the car, camera in hand, John Glenn stood beside the children for a shot or two. He appeared as proud as the kids to have his picture taken with them.

After the visitors left, he took time out to answer some questions.

"What did your health have to do with your flight and its success?" I asked him.

"Everything," he replied. "It was most important to our success." He could never have made it without tiptop stamina, he admitted. The build-up of good health began in early boyhood. It was carried right up to the moment of flight, according to Glenn's own recital.

His keen focus on a sole project—the Mercury project—was his second point of success. From the moment he was selected an astronaut on April 1, 1959, until the moment of blast-off, John Glenn was dreaming, eating, drinking, sleeping, exercising, planning, learning, and studying for one thing—the exhilarating moment of flight. His self-discipline and his preparation were perfect. In mid-April, he took his wife to the mountains for a retreat.

The background of the boy John Glenn may help explain his later life and success. He was cut from solid American timber and built in firm Christian faith. From boyhood, he was a go-getter. Born and raised in the quiet little college town of New Concord, Ohio (population 2,000), he learned to be friendly and to say Hello to friend and stranger alike.

His father was a railroad conductor, a plumbing business owner, and a Chevrolet agency operator. Glenn's parents grounded him in Christian principles. Family worship was a daily practice, as was regular attendance at Sunday school. New Concord was predominantly Presbyterian, and John Glenn's moral code was tight and strict. Cigarettes were instruments of the devil in this little town that the kids nicknamed Saint's Rest. Profanity was taboo with Glenn.

"At the age of 12," recalls C. Edwin Houk, now pastor of the Presbyterian church in Glendale, California, "John and I belonged to the Ohio Rangers. We took a vow never to use profanity. One evening the group began singing 'Hail, Hail, the Gang's All Here.' I continued with the phrase, 'What the hell do we care?' Well, I can tell you, it didn't sit well with Johnny. He came up to me white-faced and righteous and told me to stop. In later years he never wore his religion on his sleeve but he had a deep abiding faith in God and His plan for his future."

As a boy Glenn swam in nearby Crooked Creek. He hunted rabbits, played football and basketball, raced bicycles (usually won), and disciplined himself in sports, music, and schoolwork.

He blew a blaring trumpet in the town band. His piercing practice notes fractured the morning stillness. While other kids delivered papers John practiced the trumpet.

In 1939 Glenn entered Muskingum College, a small Presbyterian school in New Concord, where he got solid B grades and schemed to get into the war as a pilot. He quit college as a junior, entered the Navy's preflight training program, and in 1943 took the Navy's option to join the Marine Corps.

The same year he returned as a second lieutenant in a sparkling Marine-blue dress uniform to marry Annie Castor, daughter of Dr. and Mrs. Homer Castor, his sweetheart as long as he could remember. Dr. Castor was the local dentist.

World War II found Glenn flying fifty-nine missions in the Pacific's Marshall Islands, where he was adjudged one of the smoothest pilots in the air. In the Korean war he flew F9F-5 Panther jets with Ted Williams, Red Sox left fielder, who declared flatly, "The man's crazy!" He later learned to fly Air Force F-86's, and downed Russian-built MIG-15's to the tune of three in nine days.

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TREATMENT FOR BURNS

By ARCHIE M. SMITH

I WAS eating in a Washington, D.C., restaurant when a piece of chicken slipped off a serving spoon and fell toward my blue suit. When I impulsively caught it, the gravy, hot off the stove, seared the palm of my hand. I left the table clutching my wrist with my other hand, desperate for something to kill the pain.

A druggist next door looked at me sympathetically. "Why don't you use the treatment I learned from a foreign doctor?" he offered.

In no mood for exotic remedies, I squinted and tried to hide my impatience. He produced a can of bicarbonate of soda.

Soon after, the soda in my pocket, I was at home, still in pain, still skeptical. "He's crazy!" I mumbled, putting butter on the burn instead of soda.

When I couldn't stand any more, I

wiped the butter off and followed the druggist's instructions.

I dumped half the soda into a glass bowl, added enough water to make a thin paste, and spread it over the burn. The pain subsided at once. Soon the soda dried, and the pain was back. Again and again I added wet soda to offset the pain. My arm lay on the kitchen table twenty-five, thirty, thirty-five minutes. The druggist had said, "Don't expect it to work right away. Just keep adding more wet soda."

Even if I hadn't been convinced, it would have hurt too much to quit. Forty minutes after I began treatment, the soda dried for the fiftieth time and—no pain. Cautiously I washed my hand with cold water. Pain knifed quickly into a tiny spot between my fingers. But my palm showed only a healthy pink. Between my fingers, where butter must have kept the wet soda away from my skin, an ugly blister swelled.

"My whole hand would be blistered," I exclaimed, "if it weren't for that wet-soda treatment."

I went looking for my friend the druggist early the next morning. He whistled when he saw my hand and the small blister. "This is for posterity," he said. "You've got to spread the gospel."

Someday you may appreciate this way to hold burn injuries down and—not only that—stop pain in a few seconds. If you're a parent, cut out this article and paste it inside your medicine cabinet. ▲

Back in the United States, Glenn ended up as test pilot for the Navy's Chance Vought F8U Crusader fighter. On one flight he pushed it up to Mach 1.2 and something snapped. He returned after pushing it up to Mach 1.2 a second time. On landing, he found that twenty-four feet of the trailing edge of a wing had sheared off.

Glenn had a way of wiggling his way into a program where he wanted to be. In 1959, he set out to enter the toughest of all—Project Mercury. He had two handicaps—he lacked a college degree and at 37 he was considered to be an old man. He was allowed to go along as an observer. When one of the prime candidates failed an early test, John stepped up, chest high, and offered himself, and they took him.

In the selection, John Glenn and 510 others were run through rigorous mental and physical testing. Glenn held up tenaciously under heat and vibration tests and did exceptionally well in logic problems.

It was no surprise to his friends to find John Glenn listed among the first seven astronauts in April, 1959. From then on,

he stood out in his determination. His training program was as strait-laced as the space suit he wore.

Physical fitness and perfect health took top priority in the selection of every astronaut. As soon as their Washington interviews were completed, the men were sent to the Lovelace Clinic, Albuquerque, New Mexico, for exhaustive medical examinations. Each man had a one-week examination of every body system, including blood and tissues. His eyes, nose and throat, heart and lungs, internal organs and nervous system, were scrutinized by specialists. Psychiatric examination determined his emotional response to stress. He was placed under the fluoroscope for X-ray evaluation, and films were taken of his internal organs—stomach, gall bladder, colon, kidneys, bones. The doctors made special chemical studies of his blood.

Physical exercise was used to test heart action. The men were to pedal a bicycle as fast as possible until their heartbeat jumped from the normal seventy-two beats per minute to one hundred eighty. Electrocardiogram tracings were taken to search out irregularities. A dozen stress

tests were taken, such as feet plunged into ice water and quiet sitting in a sound-proof room for three hours to determine ability to adapt to unusual circumstances, including absence of external stimuli.

Once selected, Astronaut Glenn became one of the seven patients of Lt. Col. William K. Douglas at Langley Air Force Base, known as Spacetown, U.S.A. Dr. Douglas, 39, a graduate of the University of Texas and a board-certified specialist in aviation medicine since 1956, is the only man designated as astronaut flight surgeon. He is a slender, well-built man with a graying crew cut. He not only prescribes a program of physical-fitness exercise for the men but also lectures in medicine and physiology in order that they will understand the meaning of various tests they are asked to perform in flight.

Dr. Douglas supervises annual physical examinations of the men at Lackland Air Force Base, San Antonio, Texas. On the astronaut's birthday, Dr. Douglas himself makes another examination.

As stress experiments proceed, Dr. Douglas is on hand to evaluate each man's reaction. He notes pulse, heart rate, electrocardiograph tracings, respiration, blood pressure, and temperature while the astronaut spins in a fifty-foot centrifuge in Johnsville, Pennsylvania, or whirls in a revolving room in the Navy's School of Aviation Medicine, Pensacola, Florida. He teaches the men how to become conscious of their breathing by taking them into the muddy waters of the Chesapeake Bay to swim under water in a breathing apparatus.

Survival instruction was taken by each man at Stead Air Force Base, Reno, Nevada. They sat in the desert learning how to protect themselves from the sun with a parachute cloth or articles of clothing and the space capsule. They learned an interesting tip: If water is short, doling it out by the spoonful means death from dehydration in the desert. To survive, the astronauts found out, take a good swig of the water available, even though it is limited. You will last longer.

Because astronaut test areas are scattered around the country, the astronauts and their flight surgeon, Dr. Douglas, have to be away from home much of the time. Dr. Douglas estimates that during the past three years he has been away from home 70 per cent of the time, much of the time being spent in test areas or riding commercial jet airplanes.

His major complaint: he himself can't fly. Being in the air a great deal of the time doesn't build up flight time necessary for "wings." Dr. Douglas, once an Air Force enlisted man, studied medicine in order to combine his scientific interest in medicine with his relish for flying.

He has achieved both goals. He enjoys protecting his famous patients from stress

and injury by practicing high-quality preventive medicine.

Once John Glenn was selected by Robert R. Gilruth, National Aeronautics and Space Administration director, he went to Canaveral to prepare for the flight. Medical attention by Dr. Douglas became even more concentrated. The physical fitness program was stepped up. Diet and sleep received careful attention.

Two weeks before firing date, Glenn moved to Hangar S. He ate in a special dining room. Samples of his food were kept under refrigeration for forty-eight hours so that if he developed a gastrointestinal illness the source of the infection could be found quickly. Contact with outside personnel was kept to a minimum to prevent exposure to infection.

Three days before launching, a low-residue diet was begun. It is a high-protein diet—meat and eggs—with rice and sugar. Whole-grain bread, cereal, cheese, and rich desserts are eliminated.

Extensive two-part preflight physical examination was given, the first half two days before launching and the second half on flight day.

The first part of the physical involved examination by specialists in neurology, eye, aviation medicine, psychiatry, and radiology. The doctor took electrocardiogram and electroencephalogram tracings and blood specimens.

The second part of the physical consisted of an extensive heart and blood vessel examination and a brief psychiatric test.

Biological sensors were attached to the astronaut's body, and he was dressed in his space suit, taken to the launching pad, and threaded into the capsule.

Attention then shifted to Mercury control center, where each of the biologic functions was observed on an oscilloscope.

Interestingly enough, the pilot's voice is the single most important monitoring aid available. "Once the pilot is in orbit," Dr. Douglas stresses, "we will permit the flight to continue even though bioinstrumentation telemetry is lost—so long as the voice link is still intact."

Before John Glenn's flight, tape recordings of his voice were sent to each observation station in Australia, Bermuda, and around the world in order that the men in charge might know his normal voice tone and detect any changes during flight.

The practice of medicine among seven healthy, happy astronauts and their protection have been among the most exciting and rewarding experiences in his career, says Dr. Douglas. Living closely with the men and knowing intimately their emotional drives, aspirations, and their family background have brought Dr. Douglas into closer contact than most physicians have with their patients. As a

specialist in this unique practice, he is best fitted to advise and direct their future in the space program.

Under the direction of Dr. Douglas the astronauts began a program of eating, exercise, and training.

"These men are well motivated, and so we allow them to select their own programs of physical training," Dr. Douglas told me. "Glenn chose running," he said, and added, "By his own decision he kept his family in Arlington while he lived during the week at Virginia's Langley Air Force Base in order to concentrate on the program better.

"Before breakfast, Glenn would run two miles. He built up this time until before his flight he was running five miles a day," said Douglas.

He trimmed his weight from a solid 193 to a slim-waisted 168 pounds. "His diet is not especially designed for him," said Dr. Douglas. "We try to let the astronauts live as nearly normal a life as possible." Glenn went easy on desserts and heavy fatty foods. He likes to munch apples during moments of relaxation.

The morning of his flight Glenn ate a low-residue breakfast recommended by Dr. Douglas consisting of orange juice, filet mignon, scrambled eggs, toast and jelly, and Postum instead of coffee. By his own choice Glenn does not drink coffee. No doubt on this particular morning he didn't need any more nerve stimulus than the exciting situation itself.

Careful in his health habits, Glenn's hygiene is impeccable. He insisted on shaving at 2:00 A.M. the morning of his flight. He is neat and trim at all times. He does not smoke cigarettes or pipe or cigar, thinking that tobacco might impair his wind, alter his heart rate.

Despite his age, Glenn's heart rate showed the least fluctuation under stress conditions of any of the astronauts. Even in the giant centrifuge that multiplied gravitational pull, Glenn's pulse showed the least change. At lift-off, Glenn's pulse was a relatively peaceful 110 beats per minute, as compared with Alan Shepard's 139 and Virgil Grissom's 170.

Never one to indulge in night life, Glenn avoids alcoholic beverages and the cocktail parties that are an accepted part of military life. He prefers to spend his off-duty hours with his wife and children, in quiet conversation, or even in contemplation of the Mercury Project.

The Glenn family is closely knit, with many common interests. Colonel Glenn encourages the children in their church activities. They attend the Little Falls Presbyterian church in Arlington, Virginia, where each member of the family is active. The children—David 16 and Carolyn 14—are two of his staunchest supporters. The family has a favorite pet, a little black-and-white dog named Chipper. Carolyn is in the ninth grade at Wil-

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liamsburg Junior High School, and her hobbies are church work and art. During the New York tour of the astronaut family, she was notified that she had been elected president of her class.

Young David, a sophomore at Yorktown Senior High School, is active in sports and church youth activities. One of his favorite hobbies is model construction.

For relaxation during the long wait through ten postponements, John Glenn would leave his quarters at Cape Canaveral now and then for a haircut, and on Sundays he went in to Cocoa Beach to church. After dinner, he spent a half

Healthful Recipes

By Florence Mead Laubach

Graham Bread (*Homemakers' Cookbook*)

- 1 cake compressed yeast
- 2 tablespoons molasses
- 2 tablespoons sugar
- 2 cups lukewarm water
- 2 tablespoons oil
- 1½ teaspoons salt
- 1 cup white flour
- About 4 cups whole-wheat flour

Dissolve the yeast cake, molasses, and brown sugar in warm water. Add oil and salt, then the flour gradually, or enough to make easily handled dough. Knead thoroughly, keeping dough soft (about 10 minutes).

Cover and set in a warm place to rise for about 2 hours. When doubled in bulk, mold into loaves and place in well-greased pans. Cover and let rise again about one hour. Bake in hot oven (400° F.) about one hour. Yield, 2 loaves.



Smo-and-Cream-Cheese Spread or Dip

- 1 package cream cheese
- 1 or 2 tablespoons evaporated milk
- 1 tablespoon Smo or Sovex

Mix the cream cheese with the evaporated milk until smooth. Mix in the Smo or Sovex. Serve on crackers or as chip dip.

Soy Mayonnaise

- 3 tablespoons Soyamel or Soyalac
- ½ cup water
- 1½ or 2 cups oil

- ¼ cup lemon juice
- 1 teaspoon honey or sugar
- 1 teaspoon salt
- Garlic, onion, paprika to taste

Mix the Soyamel and water into a paste. Add the oil slowly, beating with a rotary beater (electric mixer or electric blender may be used and is much faster). Add the lemon juice slowly and beat until thickened. Add salt, honey, and other desired seasonings.

Perfection Salad

- 1 package lemon Se-jel
- 2 cups water
- 1 teaspoon salt
- 1 cup finely shredded cabbage
- 1 cup finely diced celery
- 1 green pepper, chopped
- 1 carrot, grated

Prepare the gelatin according to directions on the package. Let cool just a little. Add the vegetables, pour into a pan, chill until firm. Cut in squares and serve on a lettuce leaf.

Green Salad Bowl

- 1 head lettuce, broken in small pieces
- 1 small onion (sliced thin) if desired
- Garlic salt to taste (or rub bowl with cut clove of garlic) if desired
- ½ teaspoon salt
- Juice of one lemon
- ¼ cup olive oil

Mix ingredients, and toss lightly.

Other fresh crisp greens that may be added or substituted are cucumbers, radish greens, radishes, water cress, parsley, endive, chicory, romaine, escarole, dandelion greens, Chinese cabbage, tender raw spinach, and green peppers.

Cranberry Conserve

- 1 pound cranberries
- ¾ cup honey, or to taste
- 1 medium or 2 small oranges
- 1 apple unpeeled
- Pinch of salt

Put all ingredients through food chopper after they have been thoroughly washed. Mix and allow to stand at least 24 hours before serving. This may be made several days ahead. ▲

any emotional strain. Dr. Douglas told me, "The public does not understand how the astronaut can be so calm. They must remember that the men are familiar with every detail of the mission. They are well informed, and have been through simulated flight conditions many times. The capsule and its instruments are not strange to them. They have spent three years familiarizing themselves with them; have developed a high level of confidence."

It was John Glenn himself who helped design and arrange the panel board of instruments within the capsule. He color-coded his instrument panel, arranged the 165 meters, dials, toggles, levers, and lamps to please himself, and marked guide lines on his window to help gauge his observations. Glenn's own spaceship, *Friendship 7*, which he named after talking with his family, was tailor made to his specifications. In Project Mercury, each astronaut was given a special responsibility. Glenn specialized in capsule cockpit layout and contributed to its design.

One explanation of Glenn's calm emotional confidence is his deep, abiding faith in God. Saying that we should live every day as if it were our last, he said, "I don't know the nature of God any more than anyone else. . . . He'll be wherever we go."

When U.S. Senator Alexander Wiley of Wisconsin asked for his thoughts in relation to his faith, Glenn replied, "I have some very definite feelings on that. I cannot say that while I was in orbit I sat there and prayed. I was pretty busy. People in the past have tried to put words in my mouth on this." And he added, "My religion is not of the fire-engine type—not one to be called on only in an emergency and then put God back in the woodwork for a twenty-four-hour period. I am trying to live as best I can. My peace has been made with my Maker for a number of years, so I had no particular worries on that line."

"Ready" was the magic of John Glenn's success. He was ready for the fateful moment of blast-off because he had spent literally years in preparation. He had done his homework. His body was in tip-top condition. His mind was alert and keen. His reflexes were quick acting. Besides being prepared, he was body and brain at peace with God and the world around him. Emotionally he was ready and spiritually he felt safe. How could he lose, especially with so many Americans rooting for him?

Behind his success was a body kept in robust health. The slightest physical defect could have meant sudden death.

Good health is vital to success in every human endeavor. John Glenn stands as a living hero to the value of good health. ▲

hour or so with friends listening to records. He doesn't call himself an opera fan, but he nearly wore out one favorite record of Puccini's *Madame Butterfly*.

In Washington, Glenn keeps a boat on the Potomac, loves to take his family down to indulge his favorite sport of boating and water skiing. He also enjoys these sports at Cape Canaveral on the Banana River. No hunter or fisherman, and not one to golf because it takes so much time, he prefers to get his exercise in vigorous doses of running.

The only real scare Glenn had regarding his health was during the waiting period when he visited a friend's home for dinner and later learned the children

had mumps. He did not recall having had mumps as a lad. Technical delay or weather holdup was one thing, but to be bumped because of mumps would have been truly discouraging. A few days later, to his great alarm, he awoke with a sore neck. He thought surely the mumps had arrived. But he had only strained some neck muscles the day before. Dr. Douglas could find no sign of the mumps. From then on, he shied away from anyone who had even the slightest sign of a cold.

Glenn was remarkably calm during the waiting periods and postponements. Psychiatrists around the country said, "He must be suffering from emotional strain." However, his psychiatrist was unaware of

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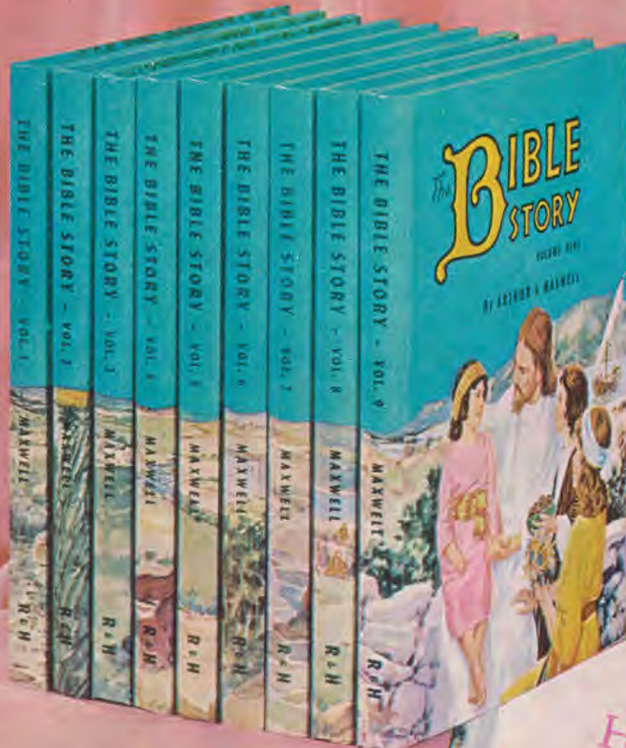
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