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# Life and HEALTH

THE NATIONAL HEALTH JOURNAL

## FEATURES

- 6 AVOID A HEART ATTACK *J. DeWitt Fox, M.D.*
- 8 HEALING WATER—2 *Carlson Wade*
- 9 WHAT CAN TOBACCO DO? *Frank W. Moffett*
- 10 BAKE A BATCH OF BREAD *Irene Butler Engelbert*
- 12 WARTS *Richard L. Potts, M.D.*
- 14 MAKE BREAKFAST APPEALING *Ruth Ann Wenzel*
- 16 PHYSICAL FITNESS IS A DUTY *Raymond Schuessler*
- 18 FACE LIFTING *Ralph E. Snider, M.D.*

## FOR HOMEMAKERS

- 7 CHEW FOR HEALTH *O. S. Parrett, M.D.*
- 20 FAMILY PHYSICIAN
- 22 MOTHER'S COUNSELOR, "Responsibility for Children"
- 24 FAMILY FIRESIDE, "Frightening Dreams"
- 25 TELEVISION LIGHTING
- 27 DELICIOUS GRAPEFRUIT
- 27 CUT EYE
- 28 HOME NURSING, "Distress Signals—2"
- 29 TEST FOR STAPH ENTEROTOXIN?

## MENTAL HYGIENE

- 13 KEYS TO HAPPINESS, "Littered Lives"
- 26 GOLDEN AGE, "Colon Hygiene—2"
- 31 1969 INDEX

OFFICIAL JOURNAL OF THE HOME HEALTH EDUCATION SERVICE

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#### LEFT IN THE HOME

DEAR EDITOR:

Enclosed is a check for a year's subscription to the *LIFE AND HEALTH* magazine. Someone left a July, 1966, issue in my home, and I read it. I had never heard of it before.

I am 75 years old, and I think it will be something for me to look forward to every month.

MRS. J. B. HOOPER  
Charlotte, Tennessee

#### OUR DECEMBER COVER



Color Transparency, Esther Henderson,  
From Louise Price Bell

On our cover this month we see a different aspect of the holiday season from the usual. Instead of the family opening gifts at the fireplace in the warm comfort of the living room, we see them out in the snow bringing in their gifts.

Apparently the children are not at home but at their cabin in the mountains. Snow has piled up deeply on the porch and steps, and they have had to break a trail to the door and may have to do some shoveling before they can open the screen door. The red-coated youngster on the steps evidently brought the wreath and hung it on the railing to express the season's good will to any passer-by.

Bright winter sunshine falls on the scene. It filters through the half-closed blinds of the picture window, lights up the gay group, and casts soft shadows on the snow. Apparently the parents following behind their youngsters could not resist the urge to record with their camera the scene of healthy, happy activity.

Tall pines and hazy winter clouds provide a fitting background for the scene. ▲

#### HEALTHFUL RECIPES

DEAR EDITOR:

In sending the enclosed check for another year's subscription to *LIFE AND HEALTH* I want you to know that I think your magazine is of the highest quality. I am glad I found it last year, when I bought a copy from a young girl on a street corner. It is a helpful, beautiful, genuine magazine. I want you to know how much it is appreciated.

I especially value the many nutritious recipes. It is difficult to find recipes that are designed particularly for healthful eating. Special thanks for this unique asset of *LIFE AND HEALTH*.

MARY ELLEN PECHEREK  
Chicago, Illinois

#### A GIFT

DEAR EDITOR:

Enclosed is check for a year's subscription to your magazine *LIFE AND HEALTH*. It is the most interesting and nicest magazine I have ever read. . . .

I wish to thank the gentleman who sent me *LIFE AND HEALTH* as a gift last year. I was sick, and reading it helped me mentally, physically, and spiritually.

MARY THORNE  
Canton, Ohio

#### FAITHFUL SUBSCRIBER

DEAR EDITOR:

I enclose my personal check. Please send me *LIFE AND HEALTH* for one year.

A new subscriber? Hardly, but I have not subscribed for the past two or three years. I have decided I just cannot get along without it.

MRS. J. E. MONCRIEFF ▲  
Angwin, California

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## PROFILES

of Our Contributors



**Ralph E. Snider, M.D.** ("Face Lifting," page 18), is senior attending plastic surgeon at Kettering Memorial Hospital, Dayton, Ohio.

Dr. Snider was born a Hoosier, but he grew up in Washington, D.C., where the family moved when he was a small boy. He attended Columbia Union College there and got his B.A. degree in 1949.

He graduated from Loma Linda University School of Medicine, Loma Linda, California, in 1955, and interned at District of Columbia General Hospital. He served two years in Germany for the U.S. Army Medical Corps as a captain. He had two years of general-surgery residency at California Hospital in Los Angeles, California, and three years of plastic-surgery residency at Blodgett Memorial Hospital, Grand Rapids, Michigan.

Dr. Snider was certified by the American Board of Plastic Surgery in 1965, and he is a member of the American Society of Plastic and Reconstructive Surgeons and of the American Society of Esthetic Surgery.

In the practice of plastic surgery at Kettering Medical Center, Dr. Snider has observed an increasing interest in cosmetic surgery (operation to improve a person's appearance) among his patients in recent years. He wrote this article to inform the public about the surgical possibilities and the psychological improvement that may be gained often by rhytidectomy (face lifting), rhinoplasty (nose surgery), blepharoplasty (eyelid surgery), and otoplasty (ear surgery).

He is married to a nurse, the former Jean Thompson, and they live in Kettering, Ohio. He enjoys driving a Dodge Charger, sailing in summer, skiing in winter, and playing a lively piano for his two boys, Robb and Danny.



**Richard L. Potts, M.D.** ("Warts," page 12), is an independent research consultant and medical writer living in San Diego, California.

Dr. Potts was born in Los Angeles, California. He began his medical career as a U.S. Navy hospital corpsman. After he finished his Navy stint he had a firm desire to study medicine. He returned to his home in Mexico City, Mexico, and completed his studies at the National University of Mexico. He stayed on to practice in Ensenada, Cuernavaca, and Mexico City.

As a general practitioner Dr. Potts became particularly interested in tropical diseases. After six years of successful practice in Mexico he returned to the United States as medical director of a pharmaceutical company in the Midwest.

He is a member of the American Association of Medical Writers, American Society of Tropical Medicine and Hygiene, American Society for Microbiology, and the International College of Tropical Medicine. He is one of the few Americans with a license to practice medicine in Mexico.



**Irene Butler Engelbert** ("Bake a Batch of Bread," page 10) is a teacher at Kauai Junior Academy on the island of Kauai, Hawaii.

Mrs. Engelbert was born near Boston, and she has lived in Massachusetts, New Hampshire, New Jersey, Maryland, Indiana, Michigan, Wisconsin, California, and Hawaii. She credits her many moves to the fact that her father was a minister and she became a teacher.

She and her family live on the island of Kauai in Hawaii, and her husband, Kenneth, also teaches at Kauai Junior Academy. They are graduates of Andrews University, Berrien Springs, Michigan.

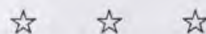
Mrs. Engelbert claims that writing is not a hobby with her but a compulsion. She has had more than 200 stories and articles published, is the author of three children's books, is writing two books.

She enjoys bird watching, knitting, sewing, and cooking, especially baking, as evidenced by the article she wrote for this month's issue of *LIFE AND HEALTH*. Mrs. Engelbert is enthusiastic about Oriental and Hawaiian foods, especially fried bananas, sushi, haupia, and baked breadfruit. She is collecting Hawaiian recipes.

She likes the leisurely aloha tempo of the islands, and when not in her classroom she wears a gaily colored muumuu and an orchid or a hibiscus in her hair.

The Engelberts drive a Ford LTD, but they are not wearing the tires out very fast on their thirty-mile-wide island.

They have one son, Frank, in college, and a daughter, Faye Miekko.



**Ruth Ann Trygg Wenzel** ("Make Breakfast Appealing," page 14) is a Denver, Colorado, mother and homemaker.

She grew up on a North Dakota farm during the depression. Life was not boring, because for the three Trygg girls it meant milking cows and cutting grain as well as washing clothes and mopping floors.

After two years of college and a year and a half of nursing, Mrs. Wenzel became a dropout to marry a medical student, who now specializes in ophthalmology.

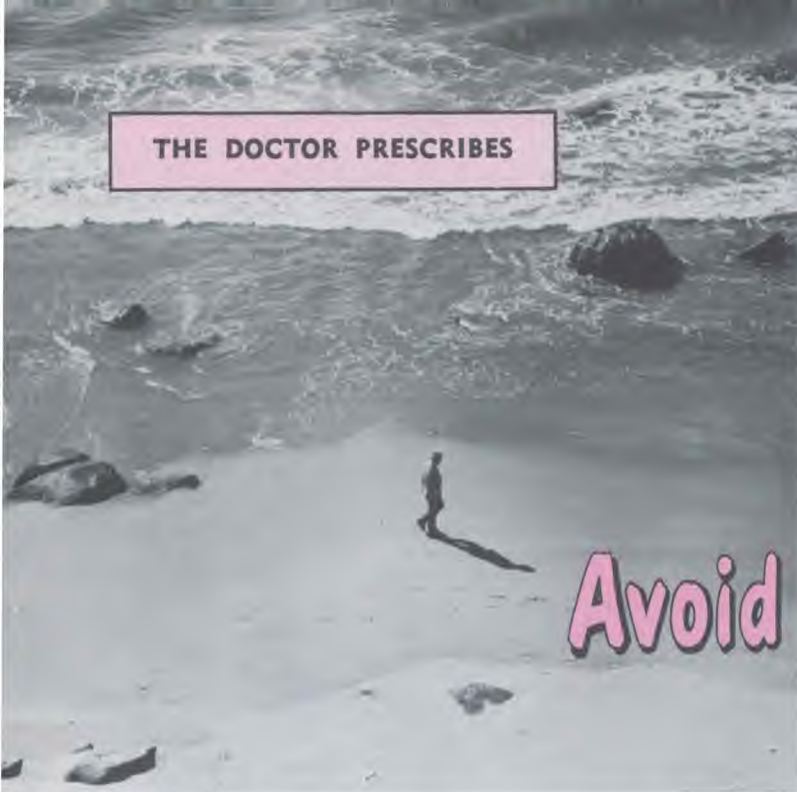
Enjoying the activities of her family is her main hobby. She likes nature, especially flowers, and she is fond of music, young people, dogs, books, simple feminine clothes, home decorating, baking, entertaining, and going to school. Through the years she has taken classes in various subjects for the joy of learning, but recently she spent several years as a mass-communications major at the University of Denver.

The Wenzels have two married daughters and a twenty-one-year-old son.

Because Mrs. Wenzel believes that food should be fun to eat as well as nourish-

(To page 29)





## THE DOCTOR PRESCRIBES



# Avoid a Heart Attack

**According to the American Heart Association, chances are good that you can avoid a heart attack if you watch your weight by exercising daily and dieting safely.**

**I**F YOU are a hard-working man over forty, there are a few heart tips the American Heart Association suggests that you take. If you avoid factors that favor a heart attack, you will be healthier and you will live longer and more happily.

Research has shown that the man who permits the following five factors in his life is many times more likely to suffer a coronary heart attack from hardening of the blood vessels than the man who does not permit them.

The factors are:

1. Overweight.
2. Lack of exercise.
3. Animal fat in the diet.
4. High blood pressure.
5. Smoking.

The reasons behind each of these factors are worthy of note for anyone living under high pressure or anyone over forty who wants to avoid joining the coronary club.

1. Body fat has been found to put added strain on the heart. Not only does it make for tightly fitting clothing, slowed metabolism, and lack of interest in exercise but it also favors high blood cholesterol.

The man who overeats usually likes animal fat. The resulting excessive cholesterol enters the blood stream and tends to coat the arteries. Eventually it plugs the little coronary arteries, which supply blood to the heart itself.

It is said that each pound of fat requires an extra mile of blood vessels and capillaries for the heart to pump blood through. The man who is carrying 20 extra pounds has 20 miles of extra strain on his heart. It is comparable to tying a 20-pound sack of cement to his back and telling him to carry it wherever he goes. He soon is so tired he wants to sit rather than walk, swim, play golf, play tennis, or engage in any other activity that will take him off his chair.

American men are often victims to what doctors call creeping obesity. In their twenties they have normal weight and waist measurement. As marriage, responsibility, and life behind a desk or a factory bench take precedence they enjoy little exercise, and there is a yearly two-pound weight gain. That

does not sound like much until 20 years roll by. Then the 40-year-old executive finds himself in the doctor's office 40 pounds heavier than when he married.

Shedding weight is a lot harder than avoiding it in the first place. The American Heart Association is encouraging the slimming diet to help avoid heart attack.

2. Regular exercise does much to tone the heart. It builds collateral circulation, so that should a heart attack occur it would not likely be fatal. Exercise may not actually prevent an attack, but it has been shown that men who get regular exercise survive a heart attack and quickly build back the circulation.

By burning fat and cholesterol in the blood stream and thus lowering the blood-cholesterol level, preferably below 200, you lessen the risk of plugged small arteries. This improvement is best made by a slimming diet linked with a regular exercise program.

What about jogging? Fine, if taken on a gradual program under your doctor's advice and direction. But if you have become soft and flabby, by all means do not go into any strenuous exercise program. Build up your tolerance and endurance and gradually increase your exercising.

The deep breathing that exercise demands will tone the heart and lungs better than anything else. Walking,



even upstairs and downstairs where you work, is one way of getting some exercise every day.

By using your legs you strengthen your second heart—that is, your leg muscles, abdominal muscles, and diaphragm—which helps return the blood to the heart.

Everyone can walk every day. Walking is the cheapest and most readily available form of exercise. Many a man has lengthened his life by using his legs. Harry S. Truman has walked for more than 80 years. Dwight D. Eisenhower played golf until his late 70's. Herbert Hoover was a great daily walker.

3. Avoid animal fats, heart doctors advise. This counsel includes fat meat, meat gravy, cured cheese, butter, eggs, whole milk, and ice cream.

Animal fat can be replaced by various palatable oils that are readily accepted by the body without elevating the blood-cholesterol level. Safflower, peanut, olive, and soybean oils are use-

AND HEALTH are of vegetable, soybean, and wheat origin. They carry no risk of excessive cholesterol or the diseases sometimes found in meat animals.

Eggs are limited to two a week by most heart doctors. Whole milk and its butterfat is substituted by skim milk or low-fat milk. Cured cheese is substituted by cottage cheese of the low-fat variety. Pastry and other rich desserts are substituted by fresh fruit. Happily, calories as well as cholesterol are cut. Weight drops, the waistline slims, the lifeline lengthens, and longevity increases.

4. Avoid stress, and you avoid high blood pressure. "Unrelenting stress is the cause of much heart trouble," Dr. George Griffith, nationally known heart specialist, has repeatedly said.

Man can take short periods of stress and high blood pressure, but never-ending tension eventually tightens his arteries, squeezes his coronary blood vessels, and leads to high blood pressure and heart attack.

Strain if you must but relax between times, is the advice of heart doctors. Take to the countryside, fireside, oceanside, or bedside to relax and enjoy yourself, if you want to avoid heart attacks.

5. Stop smoking. Heavy smokers are found to suffer heart attacks two to four times more often than are non-smokers. If you wish to do your heart a favor, stop smoking.

The following harmful effects of tobacco smoke on the human body are well documented: tightening arteries, elevating blood pressure, increasing heart rate, and many others. The effect of tobacco is so serious that if you stop smoking, you are giving yourself the best possible chance to avoid heart attack. This is the prime reform everyone can accomplish if he sets his will to be healthy and not smoker sick.

Here is the program: Drop your weight, get regular daily exercise, avoid animal fat, relax and avoid stress, stop smoking. In other words, keep healthy and enjoy life, and you need not worry about your heart. It will keep beating faithfully for 70-plus long years, day and night, without fail.

*Yours for a happy heart,*

*J. Delbert Fox, M.D.*

## Chew for Health

By O. S. PARRETT, M.D.

WHEN I advise patients to eat bananas, I usually expect them to say in astonishment, "Oh, doctor, I cannot eat bananas. They are indigestible. They disagree with me." I am prepared for this outburst with the reply, "You probably can if you eat them as I tell you." The banana is one of the most nutritious fruits God has given to man.

To people who find that fruit disagrees with them, allow me to make a suggestion. Try eating fruit near the close of the meal. Let it be your dessert instead of pie or pudding.

Practically all of the natural foods contain a large proportion of starch. Now, has the Creator made a mistake in serving starch so freely?

Starch requires thorough chewing. It needs to have incorporated with it a sufficient amount of saliva to help in converting it into sugar. If you chew thoroughly you may find starch to be one of the easiest of all foods for you to digest.

Starch does not digest in the presence of acid. Acid interferes with the action of the ptyalin. If acid fruit or a large amount of sugar is eaten with starchy food, the digestion of the starch is delayed or arrested. Acid fruit eaten at the close of a meal does not interfere with starch digestion, and it may prove a valuable aid in digestion of proteides.

Bake starchy foods thoroughly. When starch is baked it is partially digested.

An anxious mother once came to me about her son, a lank and anemic young man. He was poorly nourished. Did he eat enough? Yes, he ate enough. While the boy was eating I was able to watch him. I saw him take a slice of white bread, double it up in his mouth by a twist of the tongue, and swallow it, sending down after it several swallows of a warm drink. The entire meal disappeared in a remarkably short time. Is it a marvel that children are poorly nourished, nervous, and irritable when they eat like that?

That boy learned to chew thoroughly. By chewing his food until it was ready to go into his stomach and be digested, he built up his health and strength and overcame an irritated condition.

Do not drink freely with meals composed largely of cereal or other starchy food. Moisten the starches with saliva instead of water. There can be no objection to a half glass of water if desired, but the free drinking of water with such a meal is a mistake.

Find out why you are out of harmony with God's original bill of fare, and make it your study and purpose to come into line gradually. If you go about this plan intelligently you will find that it can be done. There are few exceptions. ▲



THOMAS DUNBEBIN, ARTIST

ful in cooking, in salad dressing, and in margarine.

In place of meat, use pleasant-tasting meat substitutes, available in almost any variety of chicken, turkey, beef, veal, fish, hamburger, and Vienna sausage style, relished by children and adults alike. Most of these meat substitutes as advertised in LIFE



# Healing Water-2

By CARLSON WADE

**T**HIRST is nature's signal for the body's need of water. The experts tell us that it may be the result of dry mouth tissues. It may also result from diarrhea, nausea, excessive sweating, and the excretion of excessive amounts of urine. Thirst is common in such conditions as diabetes, hyperthyroidism, or disturbance of the salivary function. The person who has an above-average thirst would be wise to consult a physician to learn of any dormant illness.

Water lubricates the joints and acts as a cushion to protect the body from injury resulting from impact and shock. Water makes it possible for organs that rub together to slide smoothly. Water serves to maintain pressure in various parts of the body, such as the eyeballs.

The muscles, which are 75 per cent water, must have water to contract and maintain proper tonus. Good muscle tone itself serves to protect the body.

Under conditions of severe deprivation, generalized body symptoms develop. There is dryness of the mouth and throat. In some tests it was found that normal young men put on a low water ration soon showed abnormal function—headache, nervousness, loss of appetite, digestive disturbance, and inability to concentrate. The symptoms were promptly relieved by increased water drinking.

A water deficiency may also come about through excessive talking. Our bodies lose water through the air we breathe out. Ordinarily, an adult may lose a third of a quart of water this way in a day. Talking, as with exercising, is an activity that increases the loss of water from the lungs. For those of you who must talk a lot, balance your activity with water drinking to prevent dehydration and fatigue. Ever notice how tired you are after a short speech?

Prof. Olaf Mickelsen tells us, "It is well to remem-

ber that it is more important to have an adequate intake of water than it is to have calories.

"Except when a deficit of body water develops, thirst is the best guide to the amount of water a person needs. There is relatively little danger in an increased water intake, except if it persists and is associated with an insatiable thirst—symptoms that suggest *diabetes insipidus* and should be considered by a physician."

Professor Mickelsen then adds, "Aside from an edematous [swollen] condition, which occurs only in pathological states, the intake of water beyond the body's needs is excreted in the urine. From this standpoint, the regulation of body water content is more precise than the factors regulating caloric intake; caloric intake in excess of needs is stored as adipose tissue."

Water, on the other hand, serves to nourish, wash, and revitalize the system.

Here are ways for conserving your water supply:

1. If you are in a place where drinkable water is scarce, take all possible measures to reduce your water loss. Make certain that your drinking water is free from unpleasant odors and flavors.

2. If it is necessary that you work or walk under conditions of extreme heat, if possible do it at night or in the early morning. Keep in the shade whenever possible.

3. Work at a rate that does not cause your body to become overheated and cause loss of water through sweating. If you have to do hard work when the air is hot, spray your body and your clothes with any non-drinkable water at hand.

4. Protect your drinking water from evaporation, and use all possible means for collecting what rain water there may be. Where there is a plentiful supply of drinking water, hard physical work is facilitated and fatigue is prevented by drinking enough water to replenish what is lost by sweating. Under conditions of extra-high temperature you may have to drink as much as a quart of water an hour. Thirst is the clue to the need for drink.

It has been estimated that people need two or three quarts of fluid daily. This does not mean we have to drink this amount in the forms of liquids. Actually, we obtain water from fruits, which are from 75 per cent to 90 per cent water. Vegetables are often from 75 per cent to 95 per cent water. Eating fresh fruit and vegetables freely adds to the supply of water.

The Food and Nutrition Board of the National Research Council recommends a normal daily liquid allowance of about 11 glasses. Something like two pints of this amount is supplied by solid food. The remaining five or six glasses must come from water and other liquids.

The simplest way to take care of the daily water supply is to develop early in life a drinking plan that becomes as automatic and irrevocable a habit as brushing the teeth. A sensible

(To page 25)





**P**EOPLE who can look ahead in time should choose not to smoke. Some unfortunates close their eyes to the frightful danger of a habit that brings them no good. What happened to my friend Roy makes me hate tobacco as a destroyer of men's lives.

After I went to Chicago to learn the railway-signal business as a young man, my cousin introduced me to a railroad official, of whom he later said, "Roy is a Delaware childhood playmate of mine who used to visit my home during summer vacation. We had not seen each other until a few days ago, when we met through a business acquaintance. Because you will be installing signals on his railroad, I suggest that you get acquainted with his family when you are in Oak Park, where he lives."

I did meet Roy's family, and his wife invited me to come to their home on any Sunday I was in Chicago. I became well acquainted with Roy, and found him to be a talented, upright man. Because I did not smoke or drink he used to tease me, and we had some good-natured banter about his being a cigarette smoker. I told him construction workers called cigarettes coffin nails, because anyone who smoked them would eventually die from the effects. I tried in every way I knew to help him understand the danger of the tobacco habit. He laughed at the idea, saying he had smoked from the time he was a boy and was sure cigarettes would never be harmful to him.

Roy was unusually intelligent and apparently quite wealthy. He and I were fond of fishing, and we would go out to a stream whenever we both could get away from our work. He especially enjoyed fishing for trout in Rocky Mountain rivers. My preference was Minnesota lakes. While fishing we often talked about what we hoped to do after retirement.

After some years of friendship he told me it was his intention to retire from business when he was fifty years old and devote his attention to humanitarian projects.

# What Can Tobacco Do?

Roy's ambition was to travel and study the living conditions of one of the neediest countries of the world so as to improve its economy. He had the greatest sympathy for the people of India. He had never visited there, but from reading about it he wanted to make sure that the rest of the world appreciated some of the exports India could produce.

He had read about the Brahman cattle of India, of special interest to him because he had a ranch in Montana where he was raising cattle himself. He was raising longhorns among others, and he wanted to cross Brahman with the longhorns. He shrewdly guessed that the crossbred animals would be better foragers than either the longhorns or the Brahmans, also that they would be hardier in both lower and high temperatures than the longhorns.

Our fishing trips ceased when I was injured in a railroad accident and had to be hospitalized for five months and had to use crutches for a long time afterward. The accident ended my railroad-construction experience, and I was transferred to the home office at Rochester, New York. Roy and I did not have much association after that.

I often thought about what he planned to do after his retirement. There were many (To page 29)

By **FRANK W. MOFFETT**





To do away with the tension that causes insomnia

# Bake a Batch of Bread

By IRENE BUTLER ENGELBERT

**W**OULD you like to enjoy your insomnia and have fun while you are staying awake? Here is a cure for sleeplessness that will benefit you and also your family. When you cannot sleep at night, get up and set a batch of bread. That is an excellent way of working off tension.

One of my favorite household chores is baking bread. I get a lot of satisfaction out of placing fragrant brown loaves on the big breadboard to cool, then having my husband enter the house, sniff appreciatively, and say, "I'm glad I live at this house!" and hearing our tall son add, "You're my favorite mom."

I was brought up by a breadmaking mother. She taught all her daughters to make bread. My father used to say that he would never recommend any of us

I plan tomorrow's chores, make up menus, and think of special foods to serve my family. You can see I like to cook.

When hours go by and I do not relax enough to sleep, a happy thought occurs to me. Why not get up and set bread?

I put on my bathrobe, go to the kitchen, get out the big crockery mixing bowl (I have had it since I was married), look for the flour, yeast, salt, a little sugar, a little oil, and the big slotted mixing spoon.

I combine the ingredients in the proper order, and when I have added nearly all the flour I lay down the spoon and begin kneading.

To me the most-fun part of breadmaking is the kneading. Punching and folding, punching and folding, I put all my energy into it. After fifteen minutes of kneading, I am tired and relaxed.

The bread is ready to be oiled lightly and covered with a cloth. I place the bowl in the middle of the kitchen table, where the bread will rise slowly during the night.

I go happily to bed, full of a sense of accomplishment and ready to sleep.

The next morning I punch the bread down and quickly mold it into loaves before getting breakfast. By midmorning there are several golden-brown loaves cooling on the breadboard.

I do not always make whole-wheat bread. Sometimes I make oatmeal bread or potato bread, and once in a while I make almost-white bread.

Here are my recipes. They do not have to be set in the middle of the night. Each recipe here makes four loaves.

## Whole-Wheat Bread

- 5 cups warm water
- $\frac{1}{3}$  cup honey or molasses
- 4 teaspoons salt
- 3 packages dry yeast
- $\frac{1}{2}$  cup oil
- 5 cups whole-wheat flour
- 5 cups unbolted flour

Continue with the regular directions, which follow the recipes here.

## Oatmeal Egg Bread

- 4 cups hot water
- 4 cups quick rolled oats
- $\frac{3}{4}$  cup oil
- 1 cup brown sugar
- 2 tablespoons salt

Cool to lukewarm, and add:



as a wife until we could make good bread. For the sake of family health, I think every mother should bake the family loaves.

At the rare times when I buy commercial bread I feel apologetic, as if I had shirked my duty and was cheating my family somehow.

Feeling as I do about breadmaking, it is reasonable for me to get up and set a batch of bread when I cannot sleep. After I retire, sometimes my mind refuses to quit. I have this experience when I do not calm down during the evening after the day's work.



- 4 beaten eggs
- 3 packages dry yeast
- 10 cups flour

Continue with the regular directions, given after the recipes here.

#### Potato Bread

- 4 cups warm mashed potatoes (you may use instant mashed potatoes)
- 4 teaspoons salt
- 4 tablespoons oil
- 4 tablespoons sugar
- 3 packages dry yeast
- 1 cup lukewarm water
- 10 cups flour

Continue with the regular directions given after these recipes, and bake this bread in round pans.

#### Almost-White Bread

- 4 cups warm water
- 4 tablespoons sugar
- 2 tablespoons salt
- 4 tablespoons oil
- 3 packages dry yeast
- 11 cups unbolting flour

Instead of some of the white flour, use one or two cups of wheat germ, some soy flour, one of the quick-cook wheat cereals, or a combination of flours.

Continue with the regular directions:

Put warm water, honey or sugar, salt, oil, and yeast into a large bowl. (When you set the bread late at night, use only two packages of yeast so that it will not rise rapidly.) Stir until the yeast is dissolved let stand a few minutes until the yeast begins to form bubbles in the mixture. Add the flour two or three cups at a time. Stir it all in and add more if the dough is too moist to knead. Knead briskly for ten or twelve minutes. Put the dough into a greased bowl, turn the greased side up, cover with a clean cloth, and set in a warm place to rise. When doubled in bulk, knead down quickly, shape into four loaves, and let rise again. Bake at 375 degrees for 50 to 60 minutes. When done, remove from pans and put out on the bread-board. Cover with a clean cloth, tuck the edges well around the loaves, and allow them to cool. This secure covering assures loaves that are not too hard and crusty.

Here in Hawaii, where I live, there are many Portuguese people descended from those who came over from Portugal, Madeira, or the Azores a hundred years or so ago to work on the cattle or sheep ranches and in the sugar industry. The Portuguese housewives make a delicious sweet bread. They used to bake the loaves in dome-shaped outdoor ovens, but there are not many of those ovens left on our island. The women make the sweet bread in big round loaves. I bake mine in round oven-glass casseroles. Be sure to bake yours in round loaves, or they will not have exactly the right flavor.

This seven-loaf recipe for Portuguese sweet bread was given to me by Mrs. Amelia Campinha, of Hilo, Hawaii, and she has given me permission to share it with you. Your family will like it for a special treat. The dough makes good cinnamon rolls.

#### Portuguese Sweet Bread

- 5 pounds unbolting flour
- 4 cups sugar or honey
- 2 sticks butter or margarine

- 1 tablespoon shortening
- 1 tablespoon salt
- 12 eggs, beaten
- 3 packages dry yeast dissolved in about 1 cup lukewarm water
- 1 can evaporated milk mixed with an equal amount of water

Add the milk-and-water mixture to all the above ingredients, which have been put into a large bowl. Knead about 25 minutes or until the flour comes clean from your hands. Cover with a warm cloth, and when dough is high, knead it down once, let it rise again, and put it into seven bread pans. Put it in the oven when it has raised high. It may take five to seven hours to rise, depending on how warm the weather is. Before putting loaves in the oven, brush the dough with beaten egg to give golden color. Bake at 300 degrees for one hour.



AMERICAN INSTITUTE OF BAKING

A wholesome, well-baked loaf of bread is a pleasant sight, and even when you are not hungry its fragrance invites you to munch.

If you want a bonus in eating pleasure, while you are up setting your bread in the middle of the night slip a pot of New England baked beans into the oven.

Set your oven at 200 degrees, get out your bean pot, into it put 2 cups dry navy beans. Do not pre-cook or presoak. Add 4 cups hot water, 1 cup brown sugar, 1 teaspoon salt, and 2 tablespoons dehydrated minced onion. Mix all together, cover the bean pot, and set it in the oven.

Now your bread is set, and the beans are in the oven for the night. You will need to continue baking the beans, adding more water as needed.

Go back to bed and enjoy your sleep. When you get up in the morning, your family will smell the beans baking and come running to the kitchen. ▲



# Warts

**O**NCE while visiting in a home I was astounded to hear how auntie gave one of the nephews the touch against warts for a penny. Johnny was a typical freckle-faced nine-year-old who was plagued with warts. He must have had twenty tiny warts growing on his hands and fingers.

His mother was alarmed, because his frequent warts often were torn during his everyday activities. She had taken him to the family doctor, who injected a little procaine, waited a couple of minutes, and burned off three of the warts with an electric needle. Johnny wanted no more of that doctor, for he hurt.

A few days later auntie came to visit. She had little intention of practicing without a license. She listened to her sister-in-law complain about Johnny's warts, having had only three of them burned off in the doctors' office and anticipating more trouble in the future.

"I have just the thing," auntie answered. "Perhaps you will let me handle the problem. Ask Johnny to come in and let me talk to him."

Auntie asked Johnny whether he would like her to make his warts go away without injecting anything or burning them off. She said all he had to do was believe.

Johnny looked up at her and nodded his head. "Please do, Auntie. I believe, I believe."

"First, you have to give me a penny, then I'll make your warts go away," auntie said.

Johnny ran into his room, took a penny from his money, and ran back to auntie.

Auntie took the little boy's hands in hers, closed her eyes, and said, "Johnny, if you really believe, they'll be gone within the next three weeks."

I looked at Johnny's hands two months later, and the warts were gone. The only scars were those for the three warts my friend and colleague had burned off. I asked Johnny how they had disappeared, and he told me that auntie had made them go away. He believed, all right, and at that moment I was begin-

ning to believe in her abilities.

I must admit that auntie's method, although unorthodox, appears to be more effective than electrosurgery is. Our bodies behave strangely at times. There may have

been a stress factor influencing a delicate hormonal balance, which in turn influenced a specific viral infection. Faith in auntie's ability to heal may have influenced the delicate balance of nature. Perhaps the warts were doomed to fall off anyway.

Warts are one of the most frequent skin infections. It has been said that they are caused by psychological factors, vitamin deficiency, antibiotics, and toads. The truth is that they are caused by a virus or a group of viruses; in fact, the virus particles have been identified under an electron microscope.

Warts are caused by a virus, but what is a virus? It is the smallest parasite known. It is made up of an inner core of nucleic acid and an outer layer (capsule) of protein. The nucleic acid has either RNA (ribonucleic acid) or DNA (deoxyribonucleic acid) in it, according to the kind of virus that is present. Some pseudoviruses have both of these nucleic acids in them. RNA and DNA are the life-creating substances we have been hearing a lot about lately.

There are several kinds of warts, and they vary in appearance, age of the person, and location on the body. They include *verruca vulgaris*, which means common skin wart; *verruca planum*, which means flat wart; *verruca filiformis*, which means threadlike wart; *verruca plantaris*, which means sole-of-the-foot wart; and *condylomata acuminata*, which pertains to venereal wart.

**Common Skin Wart.** The common skin wart appears most often on such exposed areas of the body as the face or back of the hands, but it may grow under the fingernails. Of the various kinds of warts, this is the most common. Children and adolescents have it more often than adults do.

The common wart is a solid, round, raised growth with a characteristic cauliflowerlike appearance. It may be gray or yellow. It occurs singly or in groups, but most often in groups. At times there is a mother wart with smaller warts around it. This kind of wart may appear or disappear spontaneously.



The common wart is readily infected with bacteria, because of improper self-treatment, whether by burning with a lighted cigarette or a red-hot ice pick, cutting off with a knife or a razor blade, or sandpapering off. Normally skin is often soiled, the instruments used may be contaminated, and an open wound may come in contact with bacteria.

To the frustration of the physician, these warts tend to recur even after adequate treatment has been given to the patient.

**Flat Wart.** The flat wart is small, round or angular, slightly raised, and either skin-colored or brownish. Most commonly it is found on face, neck, hands, and wrists. It usually appears on children and young women. On the face, the flat wart gives a soiled appearance.

Electrosurgery in expert hands may give good results, but in inexperienced hands it may leave permanent scars. That is why many doctors recommend caustic chemicals for burning off these warts.

Just as the common wart may reappear after its removal, so also may the flat wart reappear, and only by patient care can total and permanent removal be expected.

**Thread-shaped Wart.** Tiny threadlike warts that may appear on face, eyelids, lips, and neck belong to the wart called *verruca filiformis*. This wart responds best to the electric needle, seldom requiring a local anesthetic.

**Sole-of-the-Foot Wart.** Plantar wart is a painful wart on the sole or toes of the foot. It may occur singly or in groups. It is similar to the common skin wart except that it grows inward instead of outward. It is in the skin rather than on the skin.

Of all the warts, the plantar is the least likely to disappear spontaneously. It is the most difficult to treat with permanent results.

Because the plantar wart often looks much like an ordinary callus it is sometimes mistakenly diagnosed as a callus and treated accordingly. Inspect the plantar wart carefully under good lighting and you see a tiny center core, which distinguishes it from a callus.

In treating plantar wart, it is best to remove as much of the surrounding callus or scar tissue as possible with the aid of a caustic chemical or collodion with salicylic acid. Electrodesiccation, or removal by electric needle, appears to be an effective way of getting at the root of the plantar wart. Circular pads with a hole in the middle inhibit the wart's inward growth, making treatment more effective.

When a plantar wart is allowed to remain without proper attention, scar tissue can become so thick that radical surgery becomes necessary. Secondary infection with bacteria is frequent, for in spite of precautions the feet, being heavily contaminated with bacteria normally, may become infected.

**Venereal Wart.** The venereal wart occurs in young adults. It is passed on by sexual intercourse. It appears on the external genitalia and the area immediately around the anus.

Of all warts, probably the venereal is the easiest to cure. With proper application of podophyllin resin to the funguslike growth, it disappears after a few applications. (To page 23)



By HARRY M. TIPPETT, M.A., Litt.D.

## Littered Lives

AN EMPTY beer can landed on my lawn from a passing car. When I went to pick it up I spied a six-pack-carton wrapper of a popular soft drink in the street storm drain. I thought it time to make the week-end cleanup of my front premises. Fetching a half-bushel basket, I retrieved from the residential street on which I live enough litter to choke the city sewer. Cigarette butts, candy wrappers, a paper bag, a soft-drink bottle, and crumpled facial tissues had all been discarded by passers-by. And so far as litter is concerned, I have seen worse clutter than this.

Litterbugging is symptomatic of something more than carelessness. It is utter irresponsibility. It is the spirit that not only flouts the law but has contempt for order and decency in whatever area of experience. It laughs at old maxims like "cleanliness is next to godliness" and "order is heaven's first law." It is crass disregard for any kind of restraint from others or any need for it in one's self. It is incipient anarchy.

It is easy to make transference here to the unhappiness there is in the world through littered lives. We pity those who through forlorn circumstances not of their choosing find themselves in unsolvable hangups. But many a life is in a mess today because of a disregard not only of social proprieties, but of fundamental laws of mental, spiritual, and physical health. People defy the principles of nutrition with cokes, hamburgers, and banana splits between meals. They slacken the rein on lust by reading salacious novels. They litter their thinking with trivial matters. They clutter their lives with "weakling loves that fondly cling." They bury their spiritual impulses with temporal concerns.

Much of the indirection and unhappiness in modern life could be obviated by doing the thing at hand that has to be done in the passing hour, no matter how inconvenient or embarrassing or costly. A sense of duty is the greatest monitor of an ordered life. ▲







# Make Breakfast Appealing

By RUTH ANN WENZEL

**M**AKING a breakfast that is eye appealing as well as nourishing can challenge a woman's creative ability as much as a paint brush, chisel, or musical instrument.

The morning meal is the one most likely to get into a rut. My mother complained of having had oatmeal for breakfast 365 days a year when she was a child. Will the present generation feel the same way about dry cereal and eggs?

We would not start an automobile trip with an empty gas tank, nor should we start the day without the fuel supplied by breakfast. Husbands and children often prefer fifteen minutes' sleep to the same old breakfast. Let us dream up some ideas to stimulate a second bite as well as a second look. Your children might react like a five-year-old who exclaimed with delight, "Look—banana splits for breakfast!"

## Banana Splits

Arrange lengthwise halves of a banana (two quarters may be sufficient for a small child) on a plate. With an ice-cream scoop, add a mound or two of small-curd cottage cheese. Top with colorful fruit—fresh, frozen, or canned. Favorites are berries, cherries, pineapple, and peaches, but do not overlook tart cranberries, rhubarb, or puréed apricots. Garnish with mint, parsley, maraschino cherries, or chopped nuts.

No bananas on hand? How about cottage cheese sundaes, as delicious looking as the ones at the soda fountain? Preparation takes about as long as getting dry cereal out and preparing the fruit. With whole-grain toast and margarine, a glass of juice or a warm drink, we have a balanced meal. Cottage cheese is the complete protein needed for growth and repair, and toast and fruit are good energy and protective foods.

Why not try some of the protein foods other than the meat and eggs that have become routine at breakfast? Eating a diversity of foods, nutritionists generally agree, is the best way to provide not only the amino acids of which proteins consist but also the vitamins, minerals, and other elements the body requires, besides adding variety to the diet.

Peanut butter is a favorite with most children. It supplies twice as much protein as an equal weight of egg, according to the book *Composition of Foods*, published by the U.S. Department of Agriculture. How about this recipe:

## Apple-and-Peanut-Butter Toast

Spread slices of toast generously with peanut butter. Top with hot applesauce and a dollop of sour cream or yogurt.

Peaches, apricots, cherries, berries, fruit cocktail, and grape juice make delicious fruit toast. To each cup of hot grape juice add a few grains of salt and a teaspoonful of lemon juice. Thicken with one and one-half tablespoons of corn starch mixed in a fourth cup of cold water. Or top buttered toast with sliced bananas and hot milk. For an extra-quick breakfast, heat a can of prepared fruit-pie filling thinned with water or juice so that it will not be too sweet and serve it over Melba toast.

Ready-made Swedish rusks or Melba toast may be purchased, but they are rather expensive. Buying day-old burger buns and toasting the halves until golden in a 250-degree oven can save money, but watch them closely in order that they do not burn. The shape is not the same, but they and other bread and rolls work equally well. Keep a can of dry toast



on hand, and a nourishing breakfast can be ready in minutes.

For the gourmet touch do not forget the accent—sour cream, yogurt, cream cheese, cottage cheese, nuts, or seeds. It adds protein as well as flavor. Besides the familiar almonds, cashews, peanuts, and pecans, experiment with pine nuts (pignolias), filberts, and Brazil nuts, or sunflower, sesame, or pumpkin (pepita) seeds. Coconut makes a delicate garnish. A light toasting in the oven enhances the flavor of the last two accents, but watch them closely, for they brown quickly.

Friends of ours have creamed tomatoes on toast for Sunday breakfast. This family tradition came originally from Missouri. They serve this dish with broiled meatless sausages.

#### Creamed Tomatoes

- 1 No. 303 can tomatoes or tomato sauce (with onion, celery, sweet peppers, and herbs)
- 1 bay leaf
- 1 teaspoon sugar
- $\frac{1}{2}$  teaspoon salt
- 1 cup milk
- 3 tablespoons flour



REVIEW PICTURES

Varied, delicious menus will bring your family to the morning meal.

Bring first four ingredients to boil while mixing flour with milk. Add to the boiling mixture off the fire. It may curdle at first, but continue stirring until thick. Do not boil again. A pinch of sweet basil or dill may be added, if desired. Serve with toasted bread, English muffins, or kosher bagels. With the latter, serve cream cheese. Garnish with freshly snipped chives, parsley, or other herbs; almond slivers; or sunflower seeds.

There is seldom difficulty in getting youngsters to eat cookies. Why not put the ingredients into your cookies that will give a nourishing start for the day? With milk or fruit juice, a couple of these jumbos may make a complete meal on rare occasions when time is scarce. They are handy take-along breakfasts for traveling or camping.

#### Breakfast Cookies

- 3 eggs, beaten
- $\frac{3}{4}$  cup honey (may be half molasses)
- $\frac{3}{4}$  cup oil
- 1 teaspoon vanilla
- $1\frac{1}{2}$  teaspoons salt
- $\frac{1}{2}$  teaspoon Royal baking powder
- $\frac{1}{4}$  cup milk
- 2 cups unbleached flour (may be part whole-wheat or other grains such as soy, rye, barley, millet, buckwheat, rice bran, wheat germ, and corn meal)
- 2 cups oatmeal
- 2 cups or more raisins, dates, or other dried fruit—apricots, apples, peaches, figs, prunes, or pears, cut in pieces with scissors
- 1 cup nutmeats, chopped or whole, depending on size
- 1 cup sesame seed
- 1 cup sunflower seed

Mix in order given and drop in generous portions on greased cookie sheet. Bake in 350-degree oven for about 15 minutes, until lightly browned, watching carefully to make sure the fruit does not burn. Serve warm or cold. The dried fruit I use is tender, ready to eat. If what is available is not tender, steam it in a colander over boiling water before cutting.

If your family likes a zesty salty tang, try brown butter (recipe below) on your morning toast or muffins or to season vegetables. Brewer's yeast adds flavor and protein and cuts down on the calories.

#### Brown Butter

- $\frac{1}{2}$  pound margarine
- $\frac{1}{2}$  pound food yeast (brewer's yeast)
- $\frac{1}{4}$  cup corn oil
- 2 tablespoons soy sauce

Whip together in mixer and store in refrigerator or freezer.

Someday when you feel adventurous, invite your neighbor over to help make homemade dry cereal. It takes a bit of time, but you will have a supply of ready-to-eat breakfasts that will be different from the usual dry cereals. Yield: about six quarts.

#### Fruit-Nut Cereal

- 4 cups whole-wheat flour—part gluten, if available
- 3 cups quick oats
- 8 cups miscellaneous flours (such as soy, rye, wheat germ, barley, millet, rice, bran, and corn meal)
- 3 cups sesame seed
- 2 cups sunflower seed
- 2 cups nuts or seeds—ground, chopped, or whole, depending on size (preferably almonds, peanuts, or pumpkin seeds)
- 2 cups shredded coconut
- 2 tablespoons salt
- 1 cup oil
- 1 cup honey
- 1 cup boiling water
- 3 to 6 cups dried fruit, cut in pieces with scissors

Mix dry ingredients thoroughly in a large dishpan or canning kettle. Blend the oil, honey, and boiling water with a fork. Have one person continue stirring liquid as she dribbles it into dry ingredients, which are being stirred by the second person. Rub particles between hands to break them up to coarsely chopped nut size. Divide into three large baking pans and toast slowly until golden in 250-degree oven for about 1 hour. (To page 25)



**H**OW can man preserve the vigor of his body, which was created for physical activity and depends for its health on strength-giving activity? It is a principle of organic life that disuse leads to decay.

Everyday living depends in some way on the work done by the body. According to Dr. Albrecht Szent-Györgyi, a Hungarian scientist and Nobel prize winner, "Human happiness and efficiency are dependent to a real extent on the good working order of our muscles, and no end of suffering is due to their dysfunction."

"We begin life," he reminds us, "enclosed in a strong bag of muscle, one which is inactive for nine months and then goes into strong contraction to bring us out into the world. And life is terminated, for more than half of us, by failure of another muscle, the heart."

People are beginning to realize that bodily activity cannot be neglected. With automation the danger of deteriorating human bodies is greater than ever. "When all industry and business boils down to pushing buttons," said Dr. Delbert Oberteuffer of Ohio State University, "man will have to revert to physical activity for survival."

Many doctors have come to recognize the value of exercise, and it is important that the younger generation learn this lesson. The increasing deaths from heart and circulatory diseases have led to such enlightenment for the watchful population.

Dr. Emile F. Holan of San Francisco, California, believes that a daily stint of exercise vigorous enough to cause breathlessness would prove lifesaving by keeping open blood vessels in the heart muscle that otherwise would close with the years.

A study often cited to show the value of exercise in heart disease was made by Dr. J. N. Morris among London transit workers. Dr. Morris found that the conductors who had to climb the stairs of their double-decker buses had fewer heart-attack deaths than the drivers who sat all day.

The results of an exercise program can be measured by physiologists in terms of greater lung and heart capacity. The heart rate of the person in training is slower at rest and returns to normal sooner after exercise, as compared to that of the nontraining person.

Physical activity increases metabolism, cell formation, blood flow, respiration, and other body functions.

The chores of modern life leave little time for exercise, but the wise person will set aside some time for healthful activity and exercise.

# Physical Fitness Is a Duty



PHOTOS COURTESY OF THE AUTHOR

For an executive who wants to keep in condition without exercising to the point of exhaustion, archery offers fresh air and muscular activity.

By  
**RAYMOND SCHUESSLER**

Before you get into an exercise routine, observe a few cautions. Visit your family physician first of all and find out how much exercise you can safely take. He will advise beginning slowly. If you have been long out of condition you must begin lightly and gradually increase your effort. Remember, you are not trying to build strength, only good health.

If you turn to sports to get in shape, here are five points the Athletic Institute suggests you follow:



1. The time to exercise is when you think you are too busy.

2. Select a sport that compensates for the excessive demands of your occupation.

3. Be regular in your exercise habits. Participate in sports regularly.

4. Be moderate. Avoid overdoing and strain.

5. Have more than one favorite sport, so that more muscles are used and some muscles are not overworked.

The best exercise sports for adults are golf, tennis, bowling, volleyball, handball, playground ball, riding, boating, fishing, gardening, hunting, hiking, and camping. The peculiar advantage of such activity is that for the most part it is done outdoors and is mentally as well as physically wholesome and stimulating. That proves its worth.

The key to fitness is your weight. The best exercise for losing some of that excess poundage still is to place two hands firmly on the dinner table and shove yourself away from the food. But exercise can help get rid of some excess weight. You can pick up 350 calories at a meal and lose 300 playing an hour of golf. Here is a chart showing how many calories you can burn up in 30 minutes of sport:

Swimming	15 to 200	Badminton	200 to 250
Walking	75 to 150	Horseshoes	100 to 150
Handball	200 to 300	Fencing	175 to 225
Bowling	175 to 225	Tennis	150 to 250
Golf	100 to 150	Croquet	100 to 150
Archery	100 to 150	Table Tennis	150 to 200
Shuffleboard	125 to 175	Darts	75 to 125

For an executive who wants to keep in condition without exercising to the point of physical exhaustion, the answer may be archery. Some doctors say that archery provides better all-round exercise than any other sport, including swimming, and does it with less strain. It tones up and toughens chest and back muscles, tends to flatten the stomach, and demands good posture. Retrieving arrows provides walking and bending. It is a good nonseasonal family sport.

How much exercise shall you take? A reliable guide for judging the amount needed is what the physical educators call recovery ability. In activity, both the breathing and heart rate speed up. In ten minutes they should get back close to their rate before the exercise. If after a two-hour rest you still feel weak, you have overexerted for your present condition. This reaction does not mean you should stop exercising. It simply means you must begin with a slower program.

If you are too busy to engage in outdoor sports, you can do conditioning exercises at home. Do not make up your own home routine of exercises. Amateur exercise planning is never as good as a scientifically prepared program.

The following exercises were designed by the American Medical Association for adults. They are scientifically sound and

the product of years of study. Used daily they will help increase organic vigor, muscular strength, body suppleness, and motor reaction. Do them correctly, vigorously, and with good posture. In the beginning repeat each exercise the minimum number of times, and gradually increase the counts to the maximum. Ten minutes of your time every day can pay big dividends in good health.

1. Stand erect, step sideways with your right foot, hands to shoulders. Breathe in and stretch your hands upwards as you rise on your toes. Reverse to come back to starting position. Begin with four counts and work up to no more than ten movements, adding an extra count every three days until you reach the maximum count.

2. Stand erect. Squat with your hands beside your feet. Straighten your legs while keeping your hands on the floor. Squat again and then stand erect. Begin with 6 counts and work up to 15.

3. Lie on your back. Lift your feet off the floor about two feet, hold for one second, and lift your feet the rest of the way up. Return your feet to the floor and repeat. Begin with 6 counts and work to a maximum of 15.

4. Spread your feet, hold your arms out from your sides at shoulder height. Bend your trunk forward and fling your arms around your right knee. Your right knee may bend during the movement. Return to position and repeat to your left side. Increase from 6 to 15 times.

5. Squat on the floor, your hands near your feet. Kick your feet backward so that trunk and legs are straight. Bend your arms and dip. Return to standing position and repeat. Increase from 6 to 15 times.

6. Sit on the floor, hands on hips, feet apart. Touch your right hand to your left toe, then your left hand to your right toe. Increase

(To page 21)



CANADIAN GOVERNMENT TRAVEL BUREAU

Skiing is an exhilarating exercise that increasingly gains worldwide popularity.





WALLACE-MARTIN STUDIO

M. H. M., a fifty-seven-year-old secretary with sagging facial muscles, before surgery.



WALLACE-MARTIN STUDIO

M. H. M. after having rhytidectomy (face lifting) and blepharoplasties (eyelid surgery).



The above pictures show a middle-aged patient before and after surgery to lift the brows and remove puffiness and wrinkles from the eyelids, with resulting improved appearance.



Above are pictures of a young housewife with an inherited sagging chin neckline before and after corrective surgery—rhytidectomy (face lifting), which helped her appearance.

## **R** **RALPH E. SNIDER, M.D.**

PHOTOS, COURTESY OF THE AUTHOR

**A** MIDDLE-AGED attorney attending a party listened with pleasure while a friend paid justified compliments to his wife. "I never realized, Harry, what a young and attractive wife you have." The attorney smiled graciously and said, "She gets younger looking and lovelier every day." He was thinking about what a clever middle-aged wife he had, for she had recently mustered the courage to consult a plastic surgeon about facial characteristics that had annoyed her for years.

It had taken courage for this housewife and mother of two teen-agers to make an appointment with an esthetic surgeon, because she considered it vain and selfish and probably extravagant to think of an operation to improve her appearance.

When she entered the surgeon's waiting room, she was pleasantly surprised to find it much like other doctors' offices, with neatly uniformed and efficient attendants to greet her. While she waited a few minutes she noticed that the other patients in the room were normal-looking people, much like herself. She saw that although many of them had dressings and bandages that probably were protecting beauty surgery, they appeared well and comfortable in their after-care period. She felt her confidence rising.

After she was directed to a consultation room the doctor entered and was introduced by an assistant, who then left the room. For a moment she felt her reservations and embarrassment building up again, but because the doctor was genuinely interested and professional in his manner, she was



Plastic surgeons today, with many new technics, have advanced far beyond their attainments of former years.

# Face Lifting

able to pour out her thoughts about the old-looking face she had endured since she was a young girl.

She was only thirty-eight years of age, but her puffy, full eyelids made her look years older. Her eyes had been like that for more than twenty years, for it was a family trait. She had tolerated years of ribbing about "staying home and getting more sleep at night."

There was also the matter of her double chin. It was not that she had an extra chin but that her neckline dropped straight from her chin to her breastbone. For years she had camouflaged this lack of a fine, angular neck with long hair, scarves, high collars, and excessive gestures with her hands—ever since her first party in high school.

The doctor listened attentively. He showed no surprise or shock at her feelings about her face or her desire to have it changed surgically. After a few minutes he was able to tell her of many similar problems he had discussed with patients over the years. He talked to her about the psychological importance of the face and the fact that a person must regard his face favorably in order to maintain his self-esteem. An otherwise well-adjusted person may have a family trait or some other facial characteristic that concerns him seriously.

The doctor explained that surgical correction or improvement of an undesirable feature is usually possible and desirable, giving the person a reassuring boost in his life situations. He discussed the procedures that might be considered to change her baggy eyelids and lost neckline, and

he chose the type of anesthesia. He informed her of the hospital stay, costs, and professional fees.

When she had left the doctor she made arrangements with the secretary for her surgery schedule. She wished she had been brave enough to seek help years earlier.

Several months later at the party with her husband she was happy about her decision as she listened to her husband and friends showing their pleasure at her appearance.

This not-unusual story emphasizes several changes in plastic surgery of recent years. There was a time when high-quality esthetic surgery was performed by only a few surgeons, for a few supposedly wealthy, famous, or important people.

Today people of all kinds and ages and of both sexes consult the plastic surgeon. Much of the stigma of surgery to make people attractive has disappeared.

A mother may bring her daughter in for an operation on her nose that she always wanted herself but never dared to have. A woman may want deep frown lines removed. A man may consider a new hairline or removal of heavy jowls. Businessmen and executives are turning to plastic surgery for many personal reasons. People take the matter in stride much as they do when having teeth straightened or capped, and the surgery may very well cost less.

Today forehead creases and frown lines can be smoothed. Eyebrows can be lifted for a more youthful appearance.

Eyelid wrinkles and pouches can be much improved, including the an-

noying crow's-feet at the corners of the eyes. Fine wrinkles about the mouth or over the entire face may be erased by chemical peeling, and cheeks, jowls, and necks lifted.

Problem noses or ears can usually be pleasingly improved by a single operation, designed to correct the particular deformity present in each individual case.

Today's plastic surgeon is highly trained in a prescribed program over many years in the art and science of surgery, especially of facial reconstructive surgery, tumor surgery, and esthetic or rejuvenating surgery. His practice is limited to such work.

Surgery in general has made refinements and improvements in technics. Most operations done today originated years ago, some in the nineteenth century. A technic has been developed for producing only fine scars, which are inconspicuously placed. Suture materials are improved and better tolerated, and modern instruments permit fine work without injury to the patient. Safety has increased with the development of antibiotics and other medicines. General and local anesthesia technics have been much improved.

Many esthetic operations are performed under local anesthesia, and hardly a day passes that some patient who did not want to be awake during surgery tells how much he appreciates the local anesthetic. It was much easier to take than expected and nothing like the experience described by so-called friends.

Does all this improvement in plastic surgery mean then that it is for you, particularly the (To page 23)



# The Family Physician

We do not diagnose nor treat disease by mail, but answer only general health questions. Address: Family Physician, LIFE & HEALTH, Washington, D.C., 20012. Enclose stamped, addressed envelope.



By JOHN R. SPENCER, M.D.

## Porphyria

*I am a registered nurse aged 49, and have been in poor health for several years. Within two years I had two serious operations. After the second surgery my blood pressure remained over 210/120, and it was discovered I was suffering from porphyria with mental confusion. The doctors tell me I am sensitive or allergic to morphine and its derivatives, barbiturates, phenergan, sulfas; that I will always have porphyria, and that probably I have had it all my life. How serious is porphyria? What can be done for it? I eat well, and I gained almost 25 pounds after surgery, but I still have high blood pressure, edema, and poor coordination at times. I take only one medication, but I feel no benefit from it. I have been told porphyria can be fatal.*

Porphyria includes a group of diseases in which large amounts of abnormal substances called uroporphyrins occur in the urine. Porphyria is one of several conditions that could cause inherited metabolic irregularities, ranging in severity from a mild condition to a pronounced disease process.

There are two major groups of porphyrias. One involves the production of red cells in the bone marrow, and the other type involves the liver, in which excessive uroporphyrins are formed.

The first group, or erythropoietic porphyria, a condition people are born with, often is discovered in infancy or childhood. It may cause certain skin lesions or a rash.

The second group, the hepatic (liver-related) type, may be called acute intermittent porphyria. Your condition may refer to it. This condition usually is first noticed between the ages of 20 and 40, and it is more likely to occur in women than in men. This type of porphyria may cause attacks of severe abdominal pain associated with such related symptoms as vomiting, diarrhea, and bloating of the abdomen. The colicky nature of the pain may simulate acute abdominal conditions, and it may even result in exploratory surgery.

Patients with this disease can develop various nervous-system symptoms such as anxiety, irritability, restlessness, and even more severe symptoms; for example, confusion or even delirium, according to the severity of the condition. High blood pressure, a fast heart rate, liver insufficiency, and fever may develop. In such cases the urine may become dark red or black on exposure to sunlight, owing to the large amount of abnormal end-products formed in the liver.

Treatment should be adjusted to the needs of the patient by the doctor. There are medications that can give rapid relief of the symptoms.

## Vein Stripping

*Please explain what is meant by vein stripping, ligation, and surgery on the sympathetic nervous system.*

Vein stripping and ligation refer to surgical procedures done for varicose veins.

When varicose veins require surgery, one of the procedures used is called vein stripping.

Ligation consists of removing the enlarged and dilated veins with an instrument that more or less literally strips out a vein after the instrument has been threaded into it. Ligation refers to the tying off with a suture of the end of the remaining vein to prevent bleeding. Some surgeons merely tie off the diseased veins in several locations. In either case the circulation is expected to be taken care of by the connecting blood vessels.

Surgery on the sympathetic nervous system refers to an operation on any part of the sympathetic nervous system, which refers to the combination of the central nervous system (the brain and the spinal cord) and the peripheral nervous system (the connecting nerves from the spinal cord to the arms and legs).

In selected cases neurosurgeons can sever a nerve or some of the fibers in the nerve complex to relieve prolonged unbearable pain or to improve circulation to the arms and legs. ▲

## COMING NEXT MONTH

### STROKES

By J. D. HENRIKSEN, M.D.

It is wisest to live so as to avoid strokes, but there are many things that can be done to rehabilitate the patient.

### PINWORMS

By JAMES A. BRUSSELL, M.D.

Meticulous housekeeping and a stern eye on hygiene are the requirements for control of a pinworm problem in the home.

### MENTAL ILLNESS

By MYRLE TABLER, R.N.

Rejection can bring on a case of mental illness. Think what love could do in preventing a tragedy in an embittered life.

### REGULAR FEATURES

MOTHER'S COUNSELOR

FAMILY FIRESIDE

HOME NURSING



## PHYSICAL FITNESS IS A DUTY

(From page 17)

from 6 to a maximum of 15 times.

7. Stand erect, hands on hips. Raise your right foot sideways, kick high, and return. Kick forward high and return. Same with left leg. Increase from 6 to 15 times.

8. Stand erect, feet apart, hands at neck. Bend your trunk to the left as you raise your arms upward. Return to the starting position, and repeat to the right side. Increase from 6 to 15 times.

9. Stand erect, hands on hips. Draw your head backward and to the right. Same to left. Increase from 6 to 15 times.

10. Run in place, raising arms and legs vigorously. Begin with 10 steps,

## NIGHT MIRACLE

By MARCIA ROSEN

Tall triangles of trees wait eagerly  
In winter woodland's wonderment of white  
To greet the Decorator when He comes  
So silently and secretly at night.

Green pines stretch out long waiting arms  
to Him

To catch fast flakes He flings with artistry,  
Then holding delicate white ornaments  
Each proudly stands as God's own Christ-  
mas tree.

counting each time your left foot comes down, and work up to 20.

Suppose you do not have time for even this small schedule. You still can get in some exercise every day. Get it in with your regular tasks. The trick is to learn to make the most of each movement, according to physical-education leaders.

When you arise in the morning, do you kick your slippers out from under the bed? That is the easy way. It is better to get down on your hands and knees and bend to get them.

Try standing while you dress and undress. That is a way to exercise at everyday tasks by not doing them the easiest, most efficient way.

A few minutes in the morning can be spent at a brisk walk to the next bus stop. The same exercise can finish off your working day. Get off the bus two or three blocks before your stop and walk home.

If you live in an elevator building or have business in such a building, get off two or three floors above or below your destination and walk the rest of the way. Stair climbing is good exercise.

Many practical everyday tasks can de-

crease your girth. Is your car dirty? Wash and polish it yourself. More important than the few pennies saved is the fact that you are using your muscles.

Even taking your morning shower can be a body builder, according to the physical-education experts. While drying, use your towel as a conditioning aid. Place it around the nape of your neck and pull forward, at the same time pushing your neck and chin against it as hard as you can. Hold for two seconds.

Repeat the process with the towel in the small of your back, pushing hard against it by tightening the muscles of your abdomen and buttocks to flatten your back. Hold for two seconds.

One more towel workout. Place your right foot into the towel, holding the ends as a sling. Pull up on the towel while pushing the tips of your toes (not the ball of your foot) into it. Hold two seconds, and repeat with the left foot.

Get into the habit of doing these exercises regularly. One caution that applies to all new ventures in exercising is to take it easy the first week or two, and you may avoid all sore muscles.

There is no limit to which everyday tasks can help. Breathing is no exception. Get in the habit of pulling in your abdomen—but do not hold your breath—whenever you pick up the telephone. Do this with other office jobs—filing, checking through the mail, reaching for a book.

Stretch whenever you can. Push your chair away from your desk between assignments and lower and raise your feet, legs fully extended.

Another chair exercise is to grip the arms firmly, then relax all over limply. It is an aid to circulation.

While you are at the office your wife can benefit from her household chores. By sweeping and dusting with brisk movements she can clean the house better and also benefit from added exercise.

At floor-scrubbing time the fitness wash is with a straight back and moving the weight from the shoulders. Again vigorous movement gets the results.

Just as hubby exercises whenever possible in the office now that he is fitness-conscious, his wife can do the same at bedmaking, dusting, and sweeping.

Doing the family ironing can be physically beneficial if the back and arms are kept reasonably straight without stiffness.

After work and dinner comes recreation time. Do you simply sit before the television? Why not adopt some new hobbies—swimming, badminton, bowling, whatever? Keeping fit can be a lot of fun. You make new friends and develop new interests.

Best of all, you find that when you feel better you get along better in your work and in your home life. You are happier and healthier. That is the whole idea of exercise. ▲

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# The Mother's Counselor



Address questions for this department to: Mother's Counselor, LIFE & HEALTH, Washington, D.C., 20012. Enclose a stamped, addressed envelope for the reply.

By MARIAN SPRAGUE STRICKLAND, M.D.

## RESPONSIBILITY FOR CHILDREN

CHILDREN and young people need responsibility as they grow toward maturity. Some youngsters have more burdens placed on their shoulders than they deserve or should have, whereas others slide along with the idea of getting out of all that hints of responsibility. The word *responsibility* in Funk and Wagnalls *New College Standard Dictionary* (1953) has three definitions:

1. "The state of being responsible or accountable."
2. "That for which one is answerable; a duty or trust."
3. "Ability to meet obligations or to act without superior authority or guidance."

I like the third definition, which encompasses the first two.

The time to begin helping our children to act wisely without superior authority or guidance is when they are very young. As parents, with God's help we endeavor to develop a sense of trust within our children by our actions and words. Their trust in us is increased when they learn to understand what we say to them. Little children can work with mother or father at simple tasks and understand simple directions. This activity is not drudgery, but should be pleasure. It helps to develop the children.

I remember our oldest daughter washing dishes by herself at the age of two. Doing so was her own idea, and of course it was not a daily occurrence. Early in our marriage my husband and I had an old iron sink, and she stood on a stool and did the best she could. Efforts like hers should not be discouraged, even if it means some extra cleaning up on mother's part. Incidentally, our little girl did not break a single dish.

Children are great imitators, and they can be encouraged daily to have their work to do just as mother or father has. Parents do not have to buy elaborate equipment despite the catalog array of toy stoves, dishes, and vacuum cleaners. I have often wished I had not thought

myself too busy to play and work along with my daughters.

Children naturally prefer certain types of activities above others, and it does no harm to encourage this preference. But all girls and boys should know how to perform ordinary household tasks. All should be instructed in simple cooking, cleaning, washing, and ironing.

I can think of no reason why a mother has to be a slave to any child. We had two teen-age nephews with us one summer, and these boys could iron as well as many girls can. Any child over 12 should be able to do most of his own ironing.

I like this statement made by Ellen

G. White in the book *Education* in the chapter entitled "Manual Training":

"The youth should be led to see the true dignity of labor."—Page 214. Farther on in that chapter are the following words:

"As a rule, the exercise most beneficial to the youth will be found in useful employment. The little child finds both diversion and development in play; and his sports should be such as to promote not only physical, but mental and spiritual growth. As he gains strength and intelligence, the best recreation will be found in some line of effort that is useful. That which trains the hand to helpfulness, and teaches the young to bear their share of life's burdens, is most effective in promoting the growth of mind and character."—*Ibid.*, page 215.

The problems in the world we are hearing about and seeing today can be traced in part to poor home training. Many children have not been brought up to know their worth as human beings or to know the worth of other human beings. Some young people are quick to say what they think is wrong with other people, but they show little evidence of trying to help correct the wrong. They have never been taught that "life means earnest work, responsibility, care-taking" (*ibid.*). They have never had training in the practical aspects of life nor been taught "that the discipline of systematic, well-regulated labor is essential, not only as a safeguard against the vicissitudes of life, but as an aid to all-round development" (*ibid.*).

Work is not degrading. Almost all men worth their salt, many of them having received a place among the famed, have used their hands in daily labor. "That which degrades is idleness and selfish dependence. Idleness fosters self-indulgence, and the result is a life empty and barren—a field inviting the growth of every evil."—*Ibid.*, pp. 215, 216.

All of us still respect and admire the child or youth who takes a responsibility



### HOPE

By DOROTHY AITKEN

How good to see the snow again,  
To feel the chill wind blow again,  
And through it all to know again  
That spring will come.

The Christmas bells will ring again,  
And little children sing again,  
The message they will bring again  
That hope has come.

And when the wind is still again,  
Then we will feel the thrill again  
Of spring upon the hill again,  
O lovely thought!

So when the cares of life are past,  
The chill of death is overcast,  
Eternal spring will break at last.  
O glorious morn!



and follows through, whether mowing a lawn, baby-sitting, attending to a paper route, or working in a garage. These youngsters have no time for sit-ins or sit-outs, no time for yelling obscenities at law enforcers and would not think of doing so, destroying property, or injuring other people.

My inspiration for these thoughts is a family of eight children, mostly boys, all with purpose and direction in life, brought up with the idea that they each had a share in the work at hand and a personal effort to exert in attaining Christian maturity. These young people will never be found demonstrating against their government, but will be found trying to demonstrate good responsible citizenship as they train to work for others. Theirs will be a true responsibility as they attain the ability to work without adults' authority or guidance.

From infancy to the grave all of us need the guidance of God's wisdom. Children, youth, and older people also need to accept the authority of God's written Word, which is superior to all other authority. ▲



## FACE LIFTING

(From page 19)

esthetic operation? Probably most people have asked themselves this question at one time or other. The answer is, Perhaps. Many factors will enter into the decision reached by you and your doctor. He will have to be convinced of your general emotional stability, and he will have to know that you have a reasonable motivation for surgery—that you need the surgery. He will consider your age and the character of your skin and other tissues. He will consider what the changes in one or two features you wish made may do artistically to your over-all facial appearance from all angles, not just the view you have in the mirror.

In my practice I like to explain to the patient what I think is possible and what is not possible, what should be done and what should not be done, what results, changes, and improvements can be expected and what cannot be expected. Such a discussion and such an understanding before the operation is performed is the best assurance of satisfying results.

A plastic surgeon cannot completely change your face for a new one or make you look like another person. On the other hand, there are few characteristics or features of your face that he cannot change and improve. The question is, Should he or will he?

Is plastic surgery for you? Again the answer is Maybe. Anyone considering

an esthetic operation must calmly and honestly consider his own motives. If he expects an altered face to make the world more peaceful, a wife more loving, or a husband more attentive, the result of surgery is going to be disappointing. A more attractive or more youthful face does not change the personality or character.

If you desire a reasonable change in your appearance for the better, which will help you to like yourself and make you feel more confident or at ease with other people, then certainly consultation with a qualified plastic surgeon should prove helpful.

Your family physician, the local medical society, and even the public library can help you locate such a qualified, reputable specialist.

I truly believe that anyone considering an esthetic operation seriously will never regret talking about it with an ethical, experienced plastic surgeon. After frank discussion, surgery may or may not be advised.

If it is not, you will have a better understanding of your over-all problem and know the reasons why surgical change is not best for you. If surgery is performed, you will know it is being performed by a competent person for sound reasons. Esthetic surgery on such a foundation almost always yields a result that pleases and helps inspire self-confidence and assurance for years to come. ▲



## WARTS

(From page 13)

Because of recurrence of the common virus skin infection called warts, research is needed for eradicating the lesions. There is plenty of literature describing warts and their treatment, but the most determined treatment does not keep them from coming back.

This troublesome skin disease is inconsistent. It rebels against aggressive and conservative treatment alike. Repeated adequate treatment and even surgery are often necessary to clear up the condition.

Modern medicine is progressing in the management of warts. With cryosurgery (freeze surgery) and the laser beam, there is progress.

If you are affected with warts, here are some rules to follow:

1. Keep the skin around the warts clean.
2. Do not attempt to remove warts yourself.
3. Consult your physician for diagnosis and treatment of the warts.
4. Be patient as you are treated for warts. You may have a difficult case. ▲



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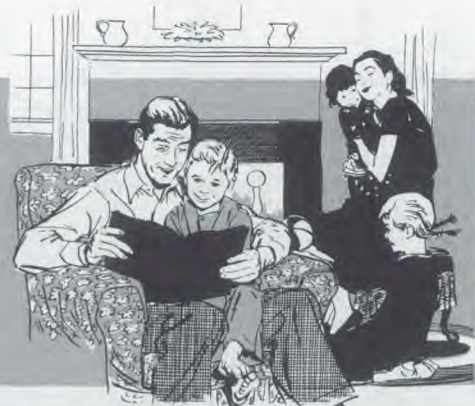
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# The Family Fireside



Send your questions on family problems to: Family Fireside, LIFE & HEALTH, Washington, D.C., 20012. Enclose stamped, addressed envelope for your reply.

By HAROLD SHRYOCK, M.D.

Professor of Anatomy  
Loma Linda University School of Medicine

## FRIGHTENING DREAMS

**T**HERE are pleasant dreams and there are unpleasant dreams. Some dreams cannot be classed either way, because they are neither. Then there are frightening dreams. They occur most often in children and adolescents, but even some adults are troubled with terrorizing experiences during sleep. They are called nightmares.

Dreaming is normal. It is necessary to maintain proper brain function. The average person spends about a third of his time in sleep (a child should have more than that) and probably about a fourth of his sleeptime in dreaming.

In understanding sleep and dreams, much scientific progress has been made within the past ten years. Scientists have identified the phases of the sleep cycle, so that by observing the tracing of the brain waves they can know where the sleeper is in the cycle.

Dreaming has been correlated with one of the phases of sleep. When a sleeper is awakened during that phase, he is able to recite the details of the dream. When he is awakened during other phases, he usually has nothing to report.

Knowing in what phase of sleep a person dreams, scientific workers can awaken a human laboratory subject every time he starts to dream, thus depriving him of his dreamtime. He does poorly on such a program. After a few dreamless nights, even though his total sleeptime was adequate, he becomes irritable, anxious, and unable to concentrate. When he is allowed to sleep without being hampered, he spends more than usual of his sleeptime in the dreaming phase. He seems to be making up for the dreamtime he has lost.

A great deal is yet to be learned about dreams. On the strength of present information it is tempting to speculate on the purpose of dreaming. Dr. Michel Jouvet, eminent researcher in the field of sleep and dreams at the University of Lyons in France, expresses his working theory as follows:

The process in the brain by which in-

formation is sorted and recorded is a chemical activity. It takes place largely during sleep. In order for items to be remembered, the brain cells concerned must be stimulated repeatedly as the chemical process goes on toward completion. Dreaming accomplishes this aim by recapitulation of the items to be remembered. A person is aware of only a small part of the activity that takes place in his brain as he sleeps.

When it happens that the person has been through recent thwarting, perplexing, frightening, or unduly exciting events, the playback during sleep may reactivate some of the original emotional responses. The emotional component may

become more intense than it was during wakefulness, because in sleep he is not inhibited by compulsion to behave properly. The content of a dream may be disorganized and the emotional element predominant, giving us a reasonable explanation for nightmares.

### Frantic Dreams

*Our daughter Melissa, aged 9, eats well and seems to be in good health, but she has frantic dreams. She watches some television programs, but not to excess. Other children in the family are aged 5 years, 2 years, and 8 months. What causes these dreams, and what can I do to help Melissa?*

No doubt Melissa has had some recent experience that causes her to be easily alarmed. You may not be aware of such an experience, and it may be that she has forgotten the actual reason why she becomes easily frightened.

I suggest that you help Melissa to develop physical fitness by getting enough exercise each day so that sound sleep at night comes automatically. The nature of the exercise depends on her preference, on the weather, and on convenience. It need not be too strenuous, but it should be sufficient to make her mildly tired at night and thus able to sleep soundly.

Help Melissa to develop a calm attitude, particularly in the evening before bedtime. She should not look at exciting television programs or read exciting stories. It is good to read stories to children, but they should be selected carefully in order to avoid any that are filled with suspense or tragedy. Try to arrange her activities every evening so that she is calm by the time she goes to bed.

I suggest that you deal kindly and tolerantly with Melissa. When she has troublesome dreams go to her bedside, awaken her gently, and speak reassuringly to her. Encourage her to go back to sleep with the comment, "Everything is all right, darling. It was only a dream."



### CHRISTMAS PRAYER

By FRANCES E. LESLIE

A stable was Your shelter  
On that first Christmas morn.  
It turned into a heavenly place  
As soon as You were born.

The cobwebs hanging all about  
Became soft silver thread,  
The golden straw a diadem  
To crown Your lovely head.

Come in and be a part of me,  
Be more than just a guest;  
Be closer than the air I breathe,  
Sole object of my quest.



## Nightmares

*Our daughter Rochelle, aged 6, has nightmares. We believe we have a pleasant home, and we are a religious family. The only thing I can think of that may be responsible is that a few months ago she was in a terrible car accident.*

Nightmares occur commonly in children. They are most frequent in those who are tense, anxious, or emotionally strained. No doubt Rochelle still is suffering from the emotional turmoil she experienced at the time of the accident.

I suggest that you make a special effort to give her reassurance and abundant affection. I hope your own program as a mother is such that you do not have to be away from home on account of employment. Just now it would be unfortunate for Rochelle to be left with someone else. When it comes to schoolwork, she should not be pushed. Perhaps a year's delay in starting school would be advisable. You could be influenced in your decision by the advice of your family doctor or of the school principal.

I notice your comment that you are a religious family. Surely Rochelle will derive benefit from the security dependence on God brings. Taking time to read Bible stories and other stories of a reassuring nature will be helpful to Rochelle. It is not advisable that she watch exciting television programs. ▲



## MAKE BREAKFAST APPEALING

(From page 15)

Stir frequently. Turn oven off, but leave cereal in oven for another hour to dry, stirring again. Add dried fruits and store in cool place in covered containers. Serve with milk.

With the increased interest in natural foods, many markets carry a variety of flours, nuts, seeds, and dried fruits, or these products may be obtained in health-food stores. If not all the flours called for in the fruit-nut cereal recipe are obtainable, use a cup of each of those available and complete the eight cups with wheat flour and wheat germ. This same mixture of flours, used about half and half with wheat flour, adds flavor and food value to bread, rolls, muffins, hot cakes, and waffles.

The aesthetic and emotional atmosphere at the dining table can contribute to the desirability of a meal, especially in the morning. A simple vase holding a pussy willow, daffodil, rosebud, zinnia, or several violas can bring a touch of natural beauty inside. Gay easily cleaned place mats brighten a table setting. On mornings when the pace allows, change the scene of breakfast to the patio, yard, or a different room, perhaps with an

interesting view. The cheerful attitude of parents, even if the meal must be hurried, is essential to a happy start for the day.

Why not accept the challenge of using your creativity to make breakfast eye appealing and nourishing. ▲



## HEALING WATER

(From page 8)

schedule might be one glass of liquid in the morning, two or three more between meals, and one before going to bed.

Drinking plenty of water helps retard the growth of intestinal bacteria and lessen the putrefactive process in the intestines. For some people drinking a few sips of liquid with meals promotes activity of the digestive juices and digestion and absorption of the food.

There are various good sources of water, such as these:

1. Fresh fruit and vegetable juices are excellent sources of liquids that boost your mind and body. Freshly squeezed juices are tasty and stimulating to enzymatic flow. You might go on a fast occasionally using only juice from raw fruits or vegetables and devote an entire day to these healthful juices. Many people have found an all-natural food program of valuable health-building benefit.

2. Foods that contain water include all raw and cooked fruits and vegetables. Eat freely of these luscious and succulent edibles. Vegetable juices or the water in which vegetables have been cooked are prime sources of water. Many protein foods such as soybeans, lentils, peas, seeds, and nuts supply a fair amount of water.

3. In addition to coffee substitutes and herbal teas, there are natural beverages that help supply you with water. Make it a practice to enjoy a variety of natural beverages as well as fresh water.

Water helps overcome fatigue. Many people are reluctant to interrupt their work for a drink of water until thirst becomes urgent. Even when they do, they may drink only enough to take the edge off their thirst without actually restoring positive fluid balance. Help your body by drinking water freely every day. ▲

This article is the last of a two-part series.



## Television Lighting

While watching television, sit ten feet or more from the set, the National Society for the Prevention of Blindness advises. Have the set at eye level, and leave a lamp burning in the room while the television is turned on. ▲

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# 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 O. S. PARRETT, M.D.

## COLON HYGIENE-2

USING milk to illustrate what happens as food passes through the bowel, we see that it has three main ingredients—fats, carbohydrate (as milk sugar), and protein. Fats cannot putrefy or sour, although they can become rancid if they undergo change. Neither can the milk sugar putrefy, or rot, but it can sour. We use this souring of milk sugar to make buttermilk, which we called clabber. (We used to like to spoon it out of the old milk crock.) With protein there is a different situation. It can neither sour nor become rancid, but it can readily putrefy in a warm moist medium. It may undergo spoiling in the warm moist bowel environment.

Dr. Kellogg claimed that 7 per cent of meat undergoes putrefactive changes even in a normal digestive tract. In a meat diet there is added danger of auto-intoxication, particularly if passage through the digestive canal is delayed.

If you boil milk it will not sour, but it will rot, because the natural sour-milk germ, called *bacilli lactis aerogenes*, is in the cow's udder. Unboiled milk will sour before it has time to rot, or putrefy. Place a chunk of beefsteak in sour milk and change the milk every few days, and the meat will not undergo spoilage for many years, if at all.

I have for decades used this wholesome factor in buttermilk or sour milk to treat bowel infections. I have seen even acute attacks of influenza respond quickly after the use of an enema of buttermilk, half and half with warm water, held in the colon for a short time.

As for enemas, some people have an incompetent ileocecal valve, which normally prevents food from returning to the small bowel once it enters the large bowel. I have witnessed in my own office the barium enema fill and distend the colon, only to back up into the small bowel, ascending at least a foot or two up into the small intestine, if the ileocecal valve is defective.

In such a case there is every likelihood of absorption of toxic material. The small bowel is constructed to readily absorb not only water but other substances, whereas the large bowel seems to be largely a dehydrating plant, removing mostly water. At the first turn of the colon (the hepatic flexure) the bowel contents rapidly become dry. Some observers have conjectured that a constipated bowel, in which most of the bacteria have died out, could be looked upon as diminishing rather than favoring absorption of toxic products in the patient's intestines.

Dr. Kellogg told me he estimated that one person in six had a faulty ileocecal valve. He devised a competent valve in such cases, having experimented with animals in working out the technic.

I believe that a safe and sane attitude is to look upon both enemas and cathartics as emergency treatment, to be used only until better plans can be worked out or the emergency passes.

Irritation of tissues is known to be one of the factors in inducing malignancy, therefore, I cannot help thinking that cathartics used over a long period might favor malignancy.

Some years ago at the Mayo Clinic an experiment was conducted in an attempt to measure the degree of reaction and time length from the various cathartics commonly used. Even an enema kept the bowel in a state of hyperperistalsis (over-

active wave movement of intestinal muscle walls) and irritability for twenty-four hours.

To cut down somewhat on this reaction, Dr. Alvarez suggested using, instead of plain tap water or soapsuds, enough salt to equal the concentration of salt in the body fluids—a so-called physiological salt solution, at least a rounded teaspoonful of salt to each quart of water. Such a salt solution, because it is not irritating, is less likely to get these too-quick results, because irritation of the bowel is one reason it tries to expel the intruder.

In using cathartics commonly sold in pill form, Dr. Alvarez found the period of hyperperistalsis to be extended. With castor oil (known to be markedly effective) the bowel showed irritation for seventy-two hours.

In casting about to find the best means of securing bowel activity without enemas, pills, or potions, we are faced with another problem. What works well in one person may do nothing for the next one. Recently I visited a patient who had taken enemas for at least fifteen years. He told me that he had overcome the enema habit only three years before. He and two other patients found that two or three teaspoonfuls of olive oil helped keep them regular. I am sure that this remedy might not work with a majority of people, but where it does work it should be a safe measure.

What about bulk producers, mostly made from refined psyllium seed—such as Mucilose, Metamucil, Testagar, and the like—calculated to furnish bulk and moisture? These are harmless products and worth trying. They work well for some people, but they tend to pack in the bowel of others. A secret here worth remembering is to drink plenty of water if you resort to a bulk type of regulator—at least the recommended six or eight glasses daily. This amount may include whatever juice or other drinks you consume.

## Christmas, 1969

By LOUISE A. NICKERSON

Tonight the road is long  
And strangely sad,  
Until our stumbling feet draw near  
To Bethlehem, then joy  
Makes measureless  
The miles, because the Child is here.



Brewers' yeast is a real help to some people. A man I know takes it hit or miss, according to his needs from day to day. This remedy is worth trying, for brewers' yeast is used by many people as a good source of essential vitamins and other food elements.

Perhaps one of the best constipation remedies is flaxseed tea or even a spoonful of flaxseed. Some people have found that it will keep them regular. I use a good teaspoonful of whole seed to each glass of boiling water, making enough for at least two days and keeping it in the refrigerator. I drink one, two, or more glasses daily, because it cannot cause injury.

About the only time I was ever sent to a hospital was for acute cystitis (inflammation of the urinary bladder), except recently when in an accident. We tried bladder washings, using various disinfectants, argyrol instillations, and the like. A nurse classmate of my wife suggested flaxseed tea, which her brother-in-law used in order to live with a tubercular kidney. I sent the nurse scurrying after flaxseed tea, and it did the trick. All pain was gone in a short time. I tried stopping the tea after three weeks, only to find the pain returning. After another three weeks it disappeared, never to return in the forty and more years since.

I have since told several doctor friends about the use of flaxseed tea, and they reported highly satisfactory results from its use.

Some of these cherished grandmother remedies still work, and if I ever have recurrence of bladder symptoms, I will think first of flaxseed tea. Flaxseed tea might be considered by some as too simple in comparison with gantrisin and other bladder medicines. I might take some gantrisin, but because I am fearful of many powerful drugs if used very long or in great amounts (lest I have to make two recoveries, one from the drug and one from the disease), I feel safe where possible to use some simple remedy that grandma might have discovered, whose prolonged use will not kick back on me.

In stubborn bowel cases the patient cannot be hurt by using any one or more of the remedies I have mentioned until he finds the combination that enables him to secure regular elimination with safety and not build up future trouble.

I wish to put in a plug for the use of fruit of all kinds. With many people the free use of fruit is all that is needed to solve the elimination problem.

Another point for fruit is that of all foods it is the least likely to be a cause of autointoxication, whereas meat is certain to be the most likely cause of this condition. For those of us who are on the downhill slope, nothing we can eat

will yield us the benefits from every angle as the free use of fruit.

Green vegetables should also find a good place in our diet. If the bowel is determined not to yield after you try almost everything else, try a breakfast of middlings and germ cereal purchased at a health-food store put up by El Molino Mills of San Gabriel, California. Some people dare not eat this cereal because it makes for overactive bowels. In any event, cut out your white bread, white biscuits, and refined cereals, in which the germ and outer layers are destroyed, because these parts of the grain were intended by nature to prevent the very problem from which much of civilization now suffers—constipation. ▲

This article is the last of a two-part series.



### Delicious Grapefruit

Count on fresh grapefruit for year-round enjoyment. It is low in calories, high in refreshment, and important in body-building nutrients.

From the desert areas of southern California and Arizona, solid juicy winter grapefruit are available from November through June or early July. Zesty flavored summer grapefruit from southern California are abundant from June through September. California is the only place in the world that produces summer-ripening grapefruit.

Throughout the year and throughout the day grapefruit is a refreshing and versatile fruit. For meals of old and young, fresh grapefruit offers light delightful eating. Weight watchers look to fresh grapefruit as a treat, not a treatment. One-half medium grapefruit contains only 44 calories. One-half grapefruit contains an excellent supply of vitamin C and a valuable combination of other important nutrients including calcium, phosphorus, and magnesium.

Feature fresh grapefruit in appetizers, salads, and desserts. Fresh grapefruit combines with and complements vegetables and other fruits. ▲



### Cut Eye

Bandage a cut eye lightly with a sterile gauze patch and call a doctor immediately, advises the National Society for the Prevention of Blindness, Inc.

An eye with a cut, puncture, abrasion, or similar injury should not be washed with water. Do not try to remove an object stuck in the eye. Have your doctor care for such injuries at once without letting any time go by. ▲

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# Home Nursing



Send questions on home-nursing problems to: Home Nursing Editor, LIFE & HEALTH, Washington, D.C., 20012. Enclose a stamped, addressed envelope for your reply.

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

## DISTRESS SIGNALS-2

### Equipment Needed

A watch with a second hand.

For taking oral temperature:

1. An oral thermometer.
2. A covered container with antiseptic solution in which to keep the thermometer when it is not in use.

3. Tissues for drying the thermometer before and after use.

Equipment needed for taking rectal temperature:

1. A rectal thermometer.
2. Petroleum jelly for lubrication and tissues for cleaning thermometer afterward.

3. A covered container with solution for the thermometer when it is not in use.

### Procedure

For taking oral temperature:

1. Do not take the temperature immediately after the patient has been eating or drinking. Wait at least twenty minutes so that the mouth can adjust to normal temperature again.

2. Take the thermometer from its container. If you are using it regularly, keep it in an antiseptic solution in a covered container. For home use, perhaps the easiest antiseptic solution to use is rubbing alcohol. The solution should cover the thermometer, to make sure that all bacteria on it are destroyed.

3. Rinse the solution off the thermometer with cold water. *Never use hot water*, or you will damage the thermometer.

4. Begin at the top of the thermometer and wipe down over the bulb. Learn to wipe in this manner so that you will always remember to wipe down after removing the thermometer from the patient's mouth, in order to be able to read the figures easily.

5. For an accurate reading, place the thermometer under the patient's tongue, well back in the mouth, but not uncomfortably so. Instruct the patient to close his lips firmly around the thermometer.

His teeth should not bite down on the thermometer. Remind him not to talk.

This is the procedure for taking rectal temperature:

1. Remove the thermometer from the solution and wipe with a tissue in the same manner as when taking the oral temperature.

2. Place a small amount of petroleum jelly on a tissue and lubricate the thermometer well.

3. With the patient on his side or face down, insert the thermometer gently into the rectum an inch or an inch and a half. Do not leave him while the thermometer is in place. It is best to hold onto it so that no accidents can occur and to be sure it remains in place.

This is the procedure for taking oral and rectal temperature:

1. After two or three minutes, remove the thermometer, wipe it with a tissue, read it, and record the temperature.

2. Shake the thermometer down.

3. Rinse the thermometer with cold water and return it to the solution in the container.

This is the procedure for taking the pulse:

While the thermometer is in the patient's mouth, check his pulse and respiration. A patient will not breathe normally if he is conscious that you are counting his breaths, so do this while

you are holding his wrist to take his pulse. Either one may be recorded first, but always record them in the same order so that you do not omit either. This is the easiest time to take his respiration, because he is not talking.

1. To determine the pulse rate, use your first two or three fingers. *Do not use your thumb*, for you will then be confusing the pulsation of the artery in your thumb with what you think you feel at the patient's wrist.

2. Seek for the pulse on the thumb side of either wrist. The radial artery lies just under the skin there, and it is usually the easiest place to find the pulse. Count it for one minute, although it may be taken for half a minute and doubled. Normal pulse rates run 70 to 80 beats a minute, but the normal varies with age and with individuals. The pulse is faster in children and usually faster in illness. A slower pulse is often normal for some people.

This is the procedure for counting the respiratory rate:

Count the motions of the chest, for it will rise slightly with each inspiration. The normal respiratory rate is 18 to 20, but it is higher in children and in illness. As with the pulse, it may be slower normally for some people.

In making a record, write the temperature first, the pulse second, and the respiration last, so that you have the familiar TPR, in that order.

### Precautions

1. Keep the thermometer out of the reach of children and very ill patients.

2. Shake the thermometer down after each use so that it will be ready for the next time.

3. Be sure the patient does not bite down on the thermometer.

4. Use care in inserting rectal thermometers, and do not leave the patient with rectal thermometer in place. It is best to hold the thermometer and take

## Love

By ELMA HELGASON

Love isn't just for Christmas,  
Love is for all year long,  
Filling the mind with gladness,  
Giving the heart a song.  
Love works no ill to its neighbor,  
Love is not jealous or cold,  
Love in the heart is a blessing,  
Sweetening young folk and old.



the pulse and respiration somewhat later.

5. Stand clear of objects that you might strike when you shake down the thermometer, so that it is not broken.

6. After the patient is well you need not keep the thermometer in antiseptic solution, but dry it and return it to the container it came in. Constant standing in solution will dim the figures and make them difficult to read. ▲

This is the second article in a two-part series.



## WHAT CAN TOBACCO DO?

(From page 9)

things he could have done, for he had many unusual and clever ideas. It was his opinion that the number of hours people worked per week would decrease as labor-saving means were developed, that industrial pensions would become common, that the age of retirement would decrease to at least 65 (in those days people commonly worked to a much greater age), and that the developments of medical science ultimately would result in longer life. He expected that the number of retirees would increase until they made up a large percentage of the population.

I had not heard such ideas advanced anywhere else, but time has shown how farsighted Roy was.

As he had hoped, he accumulated enough money to retire before fifty. Unfortunately, his years of retirement were cut short by cancer of the larynx, which rapidly spread to the lungs, and he died not long after retirement.

When he learned from the doctors that he had cancer, which they attributed to cigarette smoking, he asked that I visit him. He said to me, "The doctors advise me to get my affairs in order as quickly as possible. I realize how foolish I was in not heeding the effort you made to get me to stop smoking. I was so confident because I had smoked from the time I was a boy and no harm had come to me. Now that it is too late, I realize how foolish I was."

He wished I had been even more persistent in trying to persuade him to stop smoking, and he asked that I convey a message from him to anyone else I would try to persuade. His message:

Anyone learning of his painful and untimely death who continued to smoke cigarettes was gambling with his life. He predicted that because I neither smoked nor drank alcoholic beverages I would live longer than the average person. He hoped I would use my retirement years to do everything I could to persuade others not to smoke cigarettes or use tobacco in any way.

Roy hoped I would devote some time to carrying out the humanitarian proj-

ects he had planned to use his wealth and years of retirement to carry out.

The conversations I had with my dying friend made a lasting impression on me, shown by the fact that in my eighty-seventh year I have written down his warning to help other people who do not realize that the poisons of tobacco can take life at its prime. ▲



## LAST WORD

By INEZ BRASIER

"There's a cold wind now inside my bones,  
I've felt it there all day."

"Now, pa, you jest stop a-worryin'.  
You shouldn't talk that way."

But grandpa knew what he surely knew;  
His old bones told him so.

"You mark my word, 'fore this day is done  
There'll be trouble, I know."

He watched the dark cloud with anxious eye,  
And that time he was right.  
A wild storm soon flattened all his corn,  
And day was dark as night.

Wind lifted the roof from off his barn;  
He'll have to build again;  
And apples were blown from off his trees  
And feathers from a hen.

"You see," he said when the storm screeched  
out

And he surveyed the sight—  
The ruin of all his barns and crops—  
"You see, my bones were right."

And grandma said, "God sends so much  
good,

But yet this bad we see.  
Accept it all as His plan for us,  
And lean against His knee."

"I reckon you're right this one time more;  
You almost always are,  
But it was the cold inside my bones  
That was the warnin' jar."

## PROFILES

(From page 5)

ing, she considers meal planning and preparing a creative art. When her son returns to college after a weekend at home he stuffs his suitcase with breakfast cookies, fruit-nut cereal, and dried fruit. This habit gave his mother the idea that other young people might also enjoy his favorites. ▲



## Test for Staph Enterotoxin?

How can staphylococcal enterotoxin, a major cause of food poisoning, be detected if present in food? M. S. Bergdoll of the Food Research Institute at the University of Wisconsin is wrestling with this problem.

Many factors complicate Mr. Bergdoll's work toward improving and simplifying the test for enterotoxin. First, although most people speak of the enterotoxin by itself, it has many types. The test must account for each type. Also, this toxin can be present in a variety of foods—dried and whole milk, cheese, cream-filled baked goods, baked ham, other meats, and salads.

The test should recover the enterotoxin from all types of food. Bergdoll explained that it is sometimes difficult to recover or detect small amounts of the toxin in meat.

A quick reliable test for staphylococcal enterotoxin would greatly benefit the food industry. The demand is increasing for foods specified free from enterotoxin, and proof is sometimes needed in cases of alleged food poisoning. Many interested companies and the U.S. Public Health Service are willing to support this research.

Along with improving the present test, the Food Research Institute will prepare the specific reagents (antisera and reference toxins) for company laboratories to do their own detection with the present test. The institute will also train laboratory workers from member companies in this test procedure.

Even though enterotoxin in food can be determined, standards for minimum detectable levels are difficult to set. Bergdoll pointed out that sensitivity to the toxin varies from person to person. An amount that makes one person ill may not affect another. A minimum level of one microgram has been suggested. This small amount compares to an ounce of gold in a 1,000-ton rock, but even this small bit of toxin can make some people sick.

The best way to prevent food poisoning is to keep staph organisms from growing in the food. ▲



## Successfully Boiling Eggs

By MILDRED PRESLEY GRIFFIN

WHILE browsing through a department store in Innsbruck, Austria, I discovered a basket filled with tiny cup-like gadgets in kitchen colors of red, blue, green, and yellow, each with a white collar. Wondering vocally what they were and how used, I was told by a saleswoman in halting English that if I pricked the shell of an unboiled egg the shell would not crack while cooking.

"See," she illustrated, and holding the gadget close to the large end of an artificial egg she pressed the collar over the body of the egg and the pin moved forward. Had she held a real egg the pin would have punctured the shell.

I thought these gadgets were such interesting novelties that I brought several back home to my friends.

That experience made me wonder how many more tricks I had missed in the simple process of boiling an egg. I had thought a person simply dropped an egg into boiling water and waited for the fire to do the rest. But now I sought out my friends the dietitians for further instructions.

They told me never to drop an egg just out of the refrigerator into boiling water. I was to place the egg first into a dish of warm water while bringing the cooking water to a boil. This prewarming keeps the shell from cracking during boiling. As an added measure the dietitians suggested that I prick the large end of an egg with a pin before boiling. I need not have gone abroad to learn this point.

The water must not boil while the eggs are cooking but be kept just below that point, simmering all the time the eggs are on the stove. If your stove has a thermostat on one of the top burners, set the temperature at 170 degrees. This precaution will not only protect the shells from cracking but also preserve the yolk color. If the yolk is allowed to cook too quickly or too long it will take on an unpleasing greenish tint. Hard-cooked eggs require timing of 12 to 20 minutes.

Boiled eggs peel easily when placed under cold running water as soon as they are taken from the stove. One dietitian suggested that I roll the egg between my hands to help loosen the shell before I begin to peel it. When I followed these directions my eggs turned out well.

With the eggs boiled just right, I wanted to do something special with them, so I tried croquettes—two different but quite similar recipes, both of which I like. They may be made the day before you need them and refrigerated, requiring only to be baked before serving. I

am adding here a potato casserole that also can be prepared the day before and browned with the croquettes in the oven.

Here are the recipes:

### Chix Croquettes

- 1 pound white Chix, ground, or 1 can Soyameat, diced chicken style, drained (both from Worthington Foods)
- 7 eggs, hard cooked and grated
- 3 tablespoons butter or margarine
- $\frac{3}{4}$  cup chopped onion
- $\frac{1}{4}$  cup vegetable cooking oil
- 1 cup very thick white sauce (recipe below)

Sauté onion in oil over low heat until almost done. Combine all ingredients and mix well. Shape into croquettes and roll in Kellogg corn-flake crumbs, which you can buy by the box. Place on an oiled baking sheet and brown in a 400-degree oven. This recipe serves 8.

If you do not have success the first time with the above recipe, it will be because your white sauce is not thick enough. It will seem too thick when you first make it.

### Egg Croquettes

- 5 large hard-cooked eggs, chopped
- $\frac{3}{4}$  cup thick white sauce
- $\frac{1}{2}$  teaspoon salt
- 1 tablespoon minced onion
- 1 tablespoon minced parsley
- 1 tablespoon chopped pimiento
- Dash of paprika
- Dash of nutmeg, if you feel daring

Combine all ingredients and chill for several hours to make the mixture firm for forming into croquettes. Use about  $\frac{1}{2}$  cup mixture for each croquette.

### Breading Mixture

- 1 egg, beaten
- 1 tablespoon water
- Cracker crumbs

Slightly beat the egg and mix in 1 tablespoon water. Roll the croquettes in the cracker crumbs, dip into the egg mixture, and roll in the crumbs again. Let stand 20 minutes or refrigerate until the next day. Bake in a 400-degree oven about half an hour. If you decide to sauté, have the oil 375 degrees and cook until golden brown. Drain on absorbent paper. This croquette recipe makes 10 to 12 patties, depending on the amount of mixture used for each.

### Thick White Sauce

- $\frac{1}{2}$  stick butter or margarine (4 tablespoons)
- 4 rounded tablespoons all-purpose flour
- $\frac{1}{4}$  teaspoon salt
- 1 cup milk

Melt butter in a saucepan over low heat. Blend in the flour and salt. Add to the milk all at once. Cook quickly, stirring constantly until mixture thickens and bubbles for 1 minute. You may think it too thick, but it will not be when combined with the egg mixture for the croquettes. Makes about  $1\frac{1}{2}$  cups.

### Potato Casserole

Boil the desired number of potatoes in their jackets, and when they are cool dice or rice

them. In a large buttered casserole place a layer of potatoes, making the dish half full. Sprinkle with salt and add a layer of softened cream cheese. Complete filling the dish, add more salt and cheese, and dot with butter. Refrigerate until ready to bake. Add 4 or 5 tablespoons of milk to the dish before baking. Brown in a 400-degree oven about 45 minutes.

This casserole is good for potluck suppers.

Your menfolk will love this dish—and remember that it can be prepared the day before.

Happy eating! And may we never more have the shells of our eggs crack before we want them to. ▲



## Coronary-Care Units Beneficial

More people than ever before are making a good recovery from heart attacks as a result of intensive treatment in hospital coronary-care units, says a new booklet published by the American Heart Association.

"Inside the Coronary Care Unit" is the title of the booklet, which is intended as a guide for the heart patient and his family. Copies are available from local heart associations.

A coronary-care unit is a special area set aside in a hospital for patients with symptoms of heart attack, with its own nursing staff specially trained in coronary-care-unit service. The nurses have patients under constant observation, and they have learned to recognize early signs of impending trouble and to call for prompt treatment by a physician assigned to the unit.

At times a nurse herself may perform vital procedures as authorized by a physician to correct irregularity of heartbeat and other complications that may occur.

The nurse is able to receive early warnings, because in effect she is keeping electronic watch over the patient. Each coronary-care unit is equipped with cardiac-monitoring machines, which constantly register the patient's heart rate and heart rhythm.

The booklet explains for the patient how he is connected to the machine and how his heart is monitored. It also tells him and his family what is expected of him and what he can expect as a member of the doctor-nurse-patient team in a coronary-care unit.

Also explained are the conditions that help a patient obtain the necessary rest for recovery; how his family can help him and also get help for their own adjustment to the breadwinner's illness.

Most patients make a good recovery after a stay of only a few weeks in the hospital, the booklet says. Many can return to their former occupation, and usually resume other normal activities. ▲



# 1969 Life and Health Index

	Date	Page		Date	Page
Aaron, Mildred Donehoo. Blind children	Sep	9	Child care: Adjustment to school	Jul	32
Seeing Eye dog	Aug	18	Avoid dental cavities. Ruth Little	Nov	30
Abbott, G. K. Prevent colds	Nov	11	Babies with colds	Feb	22
Treating colds	Jan	34	Baby is teething. Thomas J. Zwemer	Apr	16
Adams, Minnie Corwin. More cherished recipes	Jan	32	Care of baby's skin. Mary Bayley Noel	May	15
Aged: Nutrition for the aged. Cecilia Marie Braunwart	Aug, Sep	28	Childhood kidney ailment	Jul	25
Retirement. Edith M. Lacey	Mar	14	Children afraid of the dark. Vaun Sayle	Apr	30
Your friend the dog [pet companionship]	Nov	5	Children at home alone	Nov	34
Aitken, Dorothy. Cross on the Jungfrau	Jun	32	Children's speech problems. Beulah France	Oct	10
Albaugh, Dorothy P. Thanksgiving thoughts	Nov	34	Chores for children. Jack Eicholz	Apr	29
Alcohol: Alcohol is dangerous	Mar	21	Cleft palate. Seymour J. Kreshover	Feb	8
Cause: alcohol	Sep	29	Congenital clubfoot. Richard L. Potts	Jan	8
How about a little character	Apr	32	Cystic fibrosis and mold	Aug	27
People's disaster	Jan	30	Diabetes—your child and you. Marylou Leng Blosser	Aug	8
Truth about beer. D. H. Kress	Feb	10	Diaper hygiene tip	Apr	23
Allergy: Summertime allergy [poison ivy, poison oak, poison sumac]	Jun	33	Expose your child to mumps. Matilda Rose McLaren	Sep	12
Anderson, Clifford R. Don't take a chance with cancer	Apr	8	Family fireside. Harold Shryock	Jan-Dec	24
Appendicitis: Appendicitis. Robert Lee Marsh	Mar	15	Just watching. Grace V. Schillinger	Jul	32
Arthritis: Arthritis. Ellis L. Thompson	Aug	14	Little imitators. Louise Price Bell	Apr	32
Artificial respiration: Control bleeding, restore breathing.			Mother's counselor. Marian Sprague Strickland	Jan-Dec	22
Marian Sprague Strickland	Mar	22	Nursing the sick child at home. Geneva Bowman	Jan	12
Artificial sweeteners: Ruth Little	Apr	28	One year old. Lillian Saltzman	July	14
Asthma: Prevention. O. S. Parrett	Jul, Aug	26	Seeing Eye Dog. Mildred Donehoo Aaron	Aug	18
			Sore throat and kidney illness	Sep	34
			Sparkling school lunches. Donna Gibb	Oct	30
			Summer and winter fun. Grace V. Schillinger	Apr	34
Backache: Exercises for backache. Carlson Wade	May	9	Cleft palate: Cleft palate	Jan 22, Jul	5
Beer, truth about. D. H. Kress	Feb	10	Cleft palate. Seymour J. Kreshover	Feb	8
Bell, Louise Price. Little imitators	Apr	32	Clubfoot: Congenital clubfoot. Richard L. Potts	Jan	8
Bietz, Arthur L. Happy family	Oct	14	Colds: Babies with colds	Feb	22
How to beat boredom	Nov	17	Prevent colds. G. K. Abbott	Nov	11
Is divorce the answer	Jul	15	Treating colds. G. K. Abbott	Jan	31
Biggs, T. H. Do you want to stop smoking? use your will power	Jun	18	Coles, William Henry. Glaucoma—everyone's problem	Jun	8
Birth defects: Cleft palate	Jan	22	Colon: Colon hygiene. O. S. Parrett	Dec	26
Cleft palate. Seymour J. Kreshover	Feb	8	Hirschsprung's disease [large colon]	Jan	20
Clubfoot, congenital. Richard L. Potts	Jan	8	State-board diarrhea. Harold Shryock	Jun	12
Bishop, June. How about breakfast	Oct	8	Constipation: Colon hygiene. O. S. Parrett	Nov, Dec	26
Blindness: Blind children. Mildred Donehoo Aaron	Sep	9	Cornor, Myrta M. Health-giving entrées	Feb	16
Seeing Eye dog. Mildred Donehoo Aaron	Aug	18	Coronary-care units beneficial	Dec	30
Blodgett, Jean. Do as your doctor does	Nov	10	Cromie, William J. Influence	Jan	11
Blood: Blood as a medicine. J. DeWitt Fox	Mar	6	Cross on the Jungfrau. Dorothy Aitken	Jan	32
Blood type. Marian Sprague Strickland	Oct	22	Cystic fibrosis: Cystic fibrosis and mold	Aug	27
Blosser, Marylou Leng. Diabetes—your child and you	Aug	8			
Nurse has no time for tears	Oct	12	Delinquency: Background of delinquency. Harold Shryock	Mar	24
Blushing, make, an advantage. Paul Brock	Jun	14	Our wonderful world. O. S. Parrett	Jan-Apr	26
Boils and pimples: Care of baby's skin. Mary Bayley Noel	May	15	Diabetes: Diabetes—your child and you. Marylou Leng		
Booth, Evangeline. Who kissed me	Jan	17	Blosser	Aug	8
Boredom, how to beat. Arthur L. Bietz	Nov	17	Is insulin obsolete. Angeline Ozga	May	12
Bowman, Geneva. Nursing the sick child at home	Jan	12	Diarrhea: State-board diarrhea. Harold Shryock	Jun	12
Brasier, Inez. Health in leaf and flower	Feb	25	Dietitian says. Ruth Little	28 or 30	
Laughing together	Sep	33	Avoid dental cavities	Nov	25
Braunwart, Cecilia Marie. Nutrition for the aged	Aug, Sep	28	How much do you weigh. Maynard W. LeBrun, guest	Jun	
Breakfast: How about breakfast. June Bishop	Oct	8	How to plan meals. Helen Register, guest	Jul	
Make breakfast appealing. Ruth Ann Wenzel	Dec	14	Light supper suggestions	May	
What's for breakfast. Ruth Little	Feb	30	Notes on nutrition	Mar	
Brock, Paul. Make blushing an advantage	Jun	14	Nutrition for the aged. Cecilia Marie Braunwart, guest	Aug, Sep	
Brooks, Charles D. Joy of salvation	Jul	18	Questions and answers	Apr	
Brussel, James A. Domestic animals and disease	May	18	Sparkling school lunches. Donna Sherwood Gibb, guest	Oct	
Burns: Burns and poisoning. Marian Sprague Strickland	Apr	22	What's for breakfast	Feb	
Burt, Jesse C. Do you snore	Nov	12	Divorce: Is divorce the answer. Arthur L. Bietz	Jul	15
Soothing silence	Mar	9	Doctor prescribes. J. DeWitt Fox		6
			Avoid a heart attack	Dec	
Campbell, Victor H. Vitamin A	Nov	16	Blood as a medicine	Mar	
Cancer: Can goiter become cancer. Robert L. Marsh	Apr	9	Dangerous meat	Feb	
Danger from bleeding piles. Robert L. Marsh	Jun	15	Do it right now	Apr	
Don't take a chance with cancer. Clifford R. Anderson	Apr	8	For body, mind, and spirit	Aug	
Mouth cancer	Sep 32, Oct	25	Free remedies	Oct	
Prevent breast-cancer death	Jul	5	Noise and your nerves	May	
Cataract: Eye cataract	Sep	22	Peanuts for protein	Jan	
Charcoal: Charcoal speeds pesticide removal	Mar	32	Posture and personality	Jul	



	Date	Page		Date	Page
Thanks-living	Nov		Weeping eczema	Aug	
That tiger in your tummy [pancreas]	Sep		<b>Food, cookery:</b> Bake a batch of bread. Irene Butler Engelbert	Dec	10
Whistle away your worries	Jun		Bananas again. Muriel Davies Percy	Mar	32
<b>Drugs:</b> Antibiotics. O. S. Parrett	Oct	26	Beans are good food. Lucille J. Gotham	Jun	16
Better a clean man	Sep	27	Bread and cereals. May Wright	Jul	10
Drug facts	Sep	23	Cooking protein foods. May Wright	Apr	12
<b>Ears:</b> Noise and your nerves. J. DeWitt Fox	May	6	Cooking with walnuts. Irma Bachmann Vyhmeister	Jan	14
<b>Eczema:</b> Care of baby's skin. Mary Bayley Noel	May	15	Dietitian says. Ruth Little	Feb-May, Nov	30, 28
Editorials: See Doctor Prescribes			Fruit and desserts. May Wright	Sep	10
Edwards, John Fassett. What about migraine	Jan	18	Grow your own sprouts. Myrle Tabler	Jan	34
Eicholz, Jack. Chores for children	Apr	29	Health-giving entrées. Myrta M. Cornor	Feb	16
Gout is still a crippler	May	14	Holiday fruitcakes. Ruth Little	Jan	25
Electric nature of the body. Arthur Welklin	Sep	14	How about breakfast. June Bishop	Oct	8
<b>Emphysema:</b> Tobacco and digestion. William Travis Gibb	May	10	Make breakfast appealing. Ruth Ann Wenzel	Dec	14
Engelbert, Irene Butler. Bake a batch of bread [to relieve tension]	Dec	10	Mayonnaise without eggs. Ruth Little	Apr	28
<b>Evolution:</b> Our wonderful world. O. S. Parrett	Jan-Apr	26	More cherished recipes. Minnie Corwin Adams	Jan	32
<b>Exercise:</b> Exercises for backache. Carlson Wade	May	9	Peanut-butter sandwich. Mrs. John Hulstyn	May	34
Physical fitness is a duty. Raymond Schuessler	Dec	16	Quick meals. Alice T. Starr	Aug	32
Run for the money. M. F. Graham	Apr	18	Sparkling school lunches. Donna Gibb	Oct	30
Run to live. W. W. Fordham	Feb	9	Strawberry time again. Irma Bachmann Vyhmeister	Jul	16
<b>Eyes:</b> Avoid eyestrain. Rose Tenent	Sep	8	Vegetables and salads. May Wright	May	16
Blind children. Mildred Donehoo Aaron	Sep	9	<b>Food, nutrition:</b> Avoid dental cavities. Ruth Little	Nov	30
Cross-eye	Aug	32	Cause of tooth loss	Mar	25
Cut eye	Dec	27	Delicious grapefruit	Dec	27
Eye burn	Aug	33	How to plan meals. Helen Register	Jul	28
Eye cataract	Sep	22	Inseparable. Mary Castor Knight	Mar	30
Eyesight and hunting accidents	Aug	34	Meat diet, good or bad. O. S. Parrett	Aug-Oct	12, 16
Glaucoma—everyone's problem. William Henry Coles	Jun	8	Nutrition for the aged. Cecilia Marie Braunwart	Aug, Sep	28
Hunters and eye safety	Jan	30	Peanuts for protein. J. DeWitt Fox	Jan	6
Seeing Eye dog. Mildred Donehoo Aaron	Aug	18	Prevention. O. S. Parrett	Jul, Aug	26
Speck in the eye	Nov	22	Proper chewing	Sep	5
Television lighting	Dec	25	Successfully boiling eggs. Mildred Presley Griffin	Dec	30
<b>Face lifting:</b> Face lifting. Ralph E. Snider	Dec	18	Vitamin A. Victor H. Campbell	Nov	16
Reconstruction of the face. Thomas J. Zwemer	Nov	8	World protein shortage [soybeans]	Apr	31
Family fireside. Harold Shryock		24	Fordham, W. W. Run to live	Feb	9
Backround of delinquency	Mar		Fox, J. DeWitt. Doctor prescribes	Jan-Dec	6
Child's religion	May		Health of the FBI	Feb, Mar	18
Encouraging obedience	Oct		<b>Fractures and other bone conditions:</b> Hot-and-cold treatments. Mary Noble	Jan	28
Frightening dreams	Dec		France, Beulah. Children's speech problems	Oct	10
Is punishment necessary	Jul		Your teeth	Mar	10
Is your child bright enough	Apr		Gibb, Donna. Sparkling school lunches	Oct	30
More love, less punishment	Aug		Gibb, William Travis. Tobacco and digestion	May	10
Problems of remarriage	Feb		Gilhousen, Leila. Nixon dream salad	Nov	9
Remarriage	Jan		<b>Glaucoma:</b> Glaucoma—everyone's problem. William Henry Coles	Jun	8
Sex offenses against children	Jun		<b>Goiter:</b> Can goiter become cancer. Robert L. Marsh	Apr	9
Teen-age smoking	Nov		Golden age. O. S. Parrett		26
What kind of punishment	Sep		Antibiotics	Oct	
<b>Family physician.</b> John R. Spencer		20	Colon hygiene	Nov, Dec	
Calcium deposits	Nov		Failing memory	Jun	
Carrageenan	Nov		Florida	May	
Change in bowel habits	Jun		Mortality not fatality	Sep	
Diabetes insipidus	Jul		Our wonderful world	Jan-Apr	
Dry skin	Feb		Prevention	Jul, Aug	
Ear wax	Nov		Good health. Agatha M. Thrash	Feb	14
Face rash	Feb		Gotham, Lucille J. Beans are good food	Jun	16
Falling hair	Mar		<b>Gout:</b> Gout is still a crippler. Jack Eicholz	May	14
Flu injections	Mar		Graham, M. F. Run for the money	Apr	18
Gall bladder and diet	Sep		Griffin, Mildred Presley. Stationery with a flair	Oct	34
Hand spasm	Apr		Successfully boiling eggs	Dec	30
Hirschsprung's disease	Jan		Travel	Jan, Mar, Apr, Jun-Sep	
Hodgkin's disease	Jun		<b>Handicapped:</b> You help the handicapped. Ellis L. Thompson	Jul	8
Ichthyosis	Oct		<b>Headache:</b> What about migraine. John Fassett Edwards	Jan	18
Lupus erythematosus	Apr		Healing water. Carlson Wade	Nov	18
Muscular dystrophy	Jul		Health-giving entrées. Myrta M. Cornor	Feb	16
Nosebleed	Aug		<b>Heart attack:</b> Run for the money. M. F. Graham	Apr	18
Ovarian cysts	Oct		<b>Home nursing:</b> Distress signals. Mary Noble	Nov, Dec	28
Overactive thyroid	Feb		Hot-and-cold treatments. Mary Noble	Jan	28
Pigment pills	Jun		Nursing the sick child at home. Geneva Bowman	Jan	12
Porphyria	Dec	20	Paraffin bath. Mary Noble	Oct	28
Potassium iodide	Sep		Rehabilitation. Mary Noble	Feb	28
Premalignant lesions	Sep		Simple remedies. Mary Noble	May	28
Premenstrual stress	Aug		Hoover, J. Edgar. Health of the FBI. J. DeWitt Fox	Feb, Mar	18
Raynaud's disease	Mar		Hulstyn, Mrs. John. Peanut-butter sandwich	May	34
Rheumatic fever	Jul		<b>Hypnotism:</b> Mind and body. H. O. Swartout	Jan	10
Salmonella poisoning	Nov		<b>Ichthyosis:</b> Ichthyosis. John R. Spencer	Oct	20
Sarcoidosis	May		<b>Impetigo:</b> Care of baby's skin. Mary Bayley Noel	May	15
Sinus trouble	Jan				
Superfluous hair	Aug				
Twitching eye	Jun				
Ulcer and overweight	May				
Vein stripping	Dec	20			
Vitamin B <sub>12</sub> —Nicotinamide	Jan				



	Date	Page
<b>Indian remedy:</b> Health in leaf and flower. Inez Brasier	Feb	25
<b>Infection:</b> Hot-and-cold treatments. Mary Noble	Jan	28
<b>Influence:</b> Influence. William J. Cromie	Jan	11
Just watching. Grace V. Schillinger	Jul	32
May I always remember. Josephine Millard	Aug	7
<b>Insulin:</b> Is insulin obsolete. Angeline Ozga	May	12
<b>Itch (scabies):</b> Care of baby's skin. Mary Bayley Noel	May	15
Jarrott, Sally D. New image of the old family doctor	May	8
<b>Jawache:</b> Aching jaw. Douglas H. Morgan	Jul	12
<b>Jogging:</b> Run for the money. M. F. Graham	Apr	18
Run to live. W. W. Fordham	Feb	9
Jones, M. Dorothea Van Gundy. Peanut-butter dandies	Nov	32
Joy of salvation. Charles D. Brooks	Jul	18
<b>Kidneys:</b> Childhood kidney ailment	Jul	25
Free kidney booklet	Nov	34
Sore throat and kidney illness	Sep	34
<b>Knight, Mary Castor.</b> Inseparable	Mar	30
Old times	Apr	31
<b>Koppel, Albert C.</b> One-visit dentistry without discomfort	Oct	18
<b>Kreshover, Seymour J.</b> Cleft palate	Feb	8
<b>Kress, D. H.</b> Truth about beer	Feb	10
Lacey, Edith M. Retirement	Mar	14
Learning to sew. Muriel Davies Percy	Nov	14
LeBrun, Maynard W. How much do you weigh	Jun	28
Little, Ruth. Dietitian says	Feb-May 28 or 30,	Nov 25
Holiday fruitcakes	Jan	25
<b>Live healthfully:</b> Destroy the rat. Clarence W. Travis	Apr	14
Failing memory. O. S. Parrett	Jun	26
For body, mind, and spirit. J. DeWitt Fox	Aug	6
Free remedies. J. DeWitt Fox	Oct	6
Good health. Agatha M. Thrash	Feb	14
Ingenious people. Ellis L. Thompson	Mar	12
Joy of salvation. Charles D. Brooks	Jul	18
Meat diet, good or bad. O. S. Parrett	Aug-Oct 12,	16
Retirement. Edith M. Lacey	Mar	14
<b>Lupus erythematosus:</b>	Apr	20
McFarland, J. Wayne. Stay slender [after quitting tobacco]	Mar	8
McKay, Donald W. Overcome tension	Oct	33
McLaren, Matilda Rose. Expose your child to mumps	Sep	12
<b>Marsh, Robert Lee.</b> Appendicitis	Mar	15
Can goiter become cancer	Apr	9
Danger from bleeding piles	Jun	15
What the doctor means by "functional"	Sep	15
<b>Mental hygiene:</b> Do it right now. J. DeWitt Fox	Apr	6
Failing memory. O. S. Parrett	Jun	26
Happy family. Arthur L. Bietz	Oct	11
Teacher sent from God. Ellen G. White	Aug	16
Thanks-living. J. DeWitt Fox	Nov	6
Whistle away your worries. J. DeWitt Fox	Jun	6
<b>Migraine:</b> What about migraine. John Fassett Edwards	Jan	18
<b>Milk leg:</b> See Phlebitis		
Millard, Josephine. May I always remember	Aug	7
Miller, E. P. S. Don't play doctor	Jun	34
<b>Mind, the human:</b> Mind and body. H. O. Swartout	Jan	10
Moffett, Frank W. What can tobacco do	Dec	9
Morgan, Douglas H. Aching jaw	Jul	12
<b>Mothballs dangerous:</b> Spring-cleaning safety	Apr	33
<b>Mother's counselor.</b> Marian Sprague Strickland		22
Accidents	Feb, May	
Burns and poisoning	Apr	
Control bleeding, restore breathing	Mar	
Grandmothers' restorers	Aug	
More on poisoning	Sep	
Positive or negative blood type	Oct	
Questions and answers	Jan, Jun, Jul,	Nov
Responsibility of children	Dec	
Muenschner, Minnie Worthen. Peanut butter is good	Mar	16
<b>Mumps:</b> Expose your child to mumps. Matilda Rose McLaren	Sep	12
<b>Nervousness (tension):</b> Bake a batch of bread. Irene Butler		
Engelbert	Dec	10
Do as your doctor does. Jean Blodgett	Nov	10
Nixon dream salad. Leila Gilhousen	Nov	9
Noble, Mary Catherine. Home nursing Jan, Feb, May, Oct-Dec		28
Noel, Mary Bayley. Care of baby's skin	May	15
<b>Noise harmful:</b> Noise and your nerves. J. DeWitt Fox	May	6
<b>Nurses:</b> Nurse has no time for tears. Marylou Leng Blosser	Oct	12
<b>Nuts:</b> Cooking with walnuts. Irma Bachmann Vyhmeister	Jan	14
Macadamia nuts	Mar	34

	Date	Page
Peanut-butter dandies. M. Dorothea Van Gundy Jones	Nov	32
Peanut butter is good. Minnie Worthen Muenschner	Mar	16
Peanuts for protein. J. DeWitt Fox	Jan	6
<b>Overweight:</b> How much do you weigh. Maynard W. LeBrun	Jun	28
That tiger in your tummy [pancreas]. J. DeWitt Fox	Sep	6
Ozga, Angeline. Is insulin obsolete	May	12
<b>Pancreas:</b> That tiger in your tummy. J. DeWitt Fox	Sep	6
Parrett, O. S. Chew for health	Dec	7
Golden age	Jan-Dec	26
Meat diet, good or bad	Aug-Oct 12,	16
<b>Parrot fever (psittacosis):</b> Domestic animals and disease.		
James A. Brussel	May	18
Percy, Muriel Davies. Bananas again	Mar	32
Delicious cool drink	Sep	32
Learning to sew	Nov	14
Peterson, Charles T. Save your teeth	Apr	17
<b>Pets:</b> Domestic animals and disease. James A. Brussel	May	18
Your friend the dog	Nov	5
Phlebitis. Garnet G. Thomasson	Apr	11
<b>Physical therapy:</b> Arthritis. Ellis L. Thompson	Aug	14
Healing water. Carlson Wade	Nov 18,	Dec 8
Hot-and-cold treatments. Mary Noble	Jan	28
Paraffin bath. Mary Noble	Oct	28
Rehabilitation. Mary Noble	Feb	28
Simple remedies. Mary Noble	May	28
You help the handicapped. Ellis L. Thompson	Jul	8
<b>Piles (hemorrhoids):</b> Danger from bleeding piles. Robert Lee Marsh	Jun	15
<b>Plastic surgery:</b> Face lifting. Ralph E. Snider	Dec	18
<b>Poisoning:</b> Burns and poisoning. Marian Sprague Strickland	Apr	22
More on poisoning. Marian Sprague Strickland	Sep	22
<b>Posture:</b> Posture and personality. J. DeWitt Fox	Jul	6
Potts, Richard L. Congenital clubfoot	Jan	8
Warts	Dec	12
<b>Premenstrual Tension:</b> Premenstrual tension. Chester L. Roberts	Feb	12
<b>Prevent illness:</b> Good health. Agatha M. Thrash	Feb	14
Meat diet, good or bad. O. S. Parrett	Aug-Oct 12,	16
Mortality not fatality. O. S. Parrett	Sep	26
Physical fitness is a duty. Raymond Schuessler	Dec	16
Prevention. O. S. Parrett	Jul, Aug	26
Run for the money. M. F. Graham	Apr	18
Run to live. W. W. Fordham	Feb	9
Simple remedies. Mary Noble	May	28
See Alcohol, Tobacco		
<b>Psychosomatics:</b> Mental hygiene	Mar	21
Mind and body. H. O. Swartout	Jan	10
What the doctor means by "functional." Robert Lee Marsh	Sep	15
<b>Rabies:</b> Domestic animals and disease. James A. Brussel	May	18
<b>Rats:</b> Destroy the rat. Clarence W. Travis	Apr	14
Reconstruction of the face. Thomas J. Zwemer	Nov	8
<b>Reducing pills:</b> Notes on nutrition. Ruth Little	Mar	28
Register, Helen. How to plan meals	Jul	28
<b>Rehabilitation:</b> You help the handicapped. Ellis L. Thompson	Jul	8
Rheumatic fever. John R. Spencer	Jul	20
<b>Rheumatoid arthritis:</b> Hot-and-cold treatments. Mary Noble	Jan	28
<b>Ringworm:</b> Care of baby's skin. Mary Bayley Noel	May	15
Roberts, Chester L. Premenstrual tension	Feb	12
<b>Rocky Mountain spotted fever:</b> Domestic animals and disease. James A. Brussel	May	18
<b>Safety:</b> Build in fire safety	Mar	34
Charcoal speeds pesticide removal	Mar	32
Children at home alone	Nov	34
Cigarette fires	Jul	23
Destroy the rat. Clarence W. Travis	Apr	14
Drownproof yourself	Jun	34
Expensive harm [drug use]	Apr	31
Eye burn	Aug	33
Eyesight and hunting accidents	Aug	34
Frostbite	Nov	5
Gun safety	Jun	34
Hunters and eye safety	Jan	30
Plan your escape from fire	Mar	21
Prevent insect-sting reaction	Sep	5



	Date	Page
Safe driving .....	Sep	23
Spring cleaning safety [mothballs] .....	Apr	33
Test for staph enterotoxin .....	Dec	29
What is your choice. Beatrice S. Stout .....	Apr	10
Saltzman, Lillian. One year old .....	Jul	14
Sayle, Vaun. Children afraid of the dark .....	Apr	30
Schillinger, Grace V. Just watching .....	Jul	32
River reverie .....	Sep	34
Summer and winter fun .....	Apr	34
Schuessler, Raymond. Physical fitness is a duty .....	Dec	16
Seeing Eye dog. Mildred Donehoo Aaron .....	Aug	18
Shryock, Harold. Family fireside .....	Jan-Dec	24
Nervous stomach .....	Sep	18
State-board diarrhea .....	Jun	12
<b>Silence beneficial: For body, mind, and spirit. J. DeWitt</b> .....		
Fox .....	Aug	6
Soothing silence. Jesse C. Burt .....	Mar	9
<b>Sinus trouble:</b> .....	Jan	20
Snider, Ralph E. Face lifting .....	Dec	18
<b>Snoring:</b> Do you snore. Jesse C. Burt .....	Nov	12
<b>Soybeans:</b> World protein shortage .....	Apr	31
Spencer, John R. Family Physician .....	Jan-Dec	20
<b>Sprain, strain, injury:</b> Hot-and-cold treatments. Mary Noble .....	Jan	28
Starr, Alice T. Quick meals .....	Aug	32
Salad time [cauliflower entrée salad] .....	Jul	34
Stout, Beatrice S. What is your choice .....	Apr	10
Strawberry time again. Irma Bachmann Vyhmeister .....	Jul	16
Strickland, Marian Sprague. Mother's counselor .....	Jan-Dec	22
Suntanning, safe. Carlson Wade .....	Aug	10
Swartout, H. O. Mind and body .....	Jan	10
Tabler, Myrle. Grow your own sprouts .....	Jan	34
Teen-age smoking. Harold Shryock .....	Nov	24
<b>Teeth:</b> Aching jaw. Douglas H. Morgan .....	Jul	12
America's teeth .....	Oct	34
Avoid dental cavities. Ruth Little .....	Nov	30
Baby is teething. Thomas J. Zwemer .....	Apr	16
Caries-free recruits .....	Sep	5
Cause of tooth loss .....	Mar	25
One-visit dentistry without discomfort. Albert C. Koppel .....	Oct	18
Oral hygiene .....	Nov	5
Prevention. O. S. Parrett .....	Jul, Aug	26
Reconstruction of the face. Thomas J. Zwemer .....	Nov	8
Save your teeth. Charles T. Peterson .....	Apr	17
Your teeth. Beulah France .....	Mar	10
<b>Temperature, pulse, respiration:</b> Distress signals. Mary Noble .....	Nov, Dec	28
Tenent, Rose. Avoid eyestrain .....	Sep	8
Thomasson, Garnet G. Phlebitis .....	Apr	11
Thompson, Ellis L. Arthritis .....	Aug	14
Ingenious people .....	Mar	12
You help the handicapped .....	Jul	8
Thrash, Agatha M. Good health .....	Feb	14
Tippett, Harry M. Keys to Happiness .....	Jan-Dec	13

	Date	Page
<b>Tobacco:</b> Do you want to stop smoking? use your will .....		
power. T. H. Biggs .....	Jun	18
Majority rule .....	Jan	30
Results of stop-smoking plan .....	Jan	31
Stay slender. J. Wayne McFarland .....	Mar	8
Teen-age smoking. Harold Shryock .....	Nov	24
Tobacco and digestion. William Travis Gibb .....	May	10
What can tobacco do. Frank W. Moffett .....	Dec	9
What is your choice. Beatrice S. Stout .....	Apr	10
<b>Travel.</b> Mildred Presley Griffin .....		
Don't miss the boat .....	Jun	31
Faces of North Carolina. Midlands Jan 31; High country .....	Mar	33
Longwood Gardens .....	Aug	33
Many faces of Boston .....	Sep	30
Mountain phenomenon .....	Jul	31
Winston-Salem story .....	Apr	33
Travis, Clarence W. Destroy the rat .....	Apr	14
<b>Ulcer, stomach:</b> Tobacco and digestion. William Travis Gibb .....	May	10
<b>Undulant fever (brucellosis):</b> Domestic animals and disease. James A. Brussel .....	May	18
<b>Varicose-vein ulcers:</b> Hot-and-cold treatments. Mary Noble .....	Jan	28
<b>Vein circulation impaired:</b> Hot-and-cold treatments. Mary Noble .....	Jan	28
Vess, Virginia. Vacant house .....	Jan	33
Vyhmeister, Irma Bachmann. Cooking with walnuts .....	Jan	14
Strawberry time again .....	Jul	16
Wade, Carlson. Exercises for backache .....	May	9
Healing water .....	Nov 18, Dec	8
Safe suntanning .....	Aug	10
<b>Warts:</b> Warts. Richard L. Potts .....	Dec	12
<b>Weight gain and tobacco:</b> Stay slender. J. Wayne McFarland .....	Mar	8
Tobacco and digestion. William Travis Gibb .....	May	10
Welklin, Arthur. Electric nature of the body .....	Sep	14
Wenzel, Ruth Ann. Make breakfast appealing .....	Dec	14
White, Ellen G. Fragrant touch of courtesy .....	Jan	16
Teacher sent from God .....	Aug	16
Witter, Evelyn. Building happiness together .....	Sep	33
Portrait of a farmer .....	Oct	34
<b>Women:</b> Building happiness together. Evelyn Witter .....	Sep	33
Don't take a chance with cancer. Clifford R. Anderson .....	Apr	8
Laughing together. Inez Brasier .....	Sep	33
Premenstrual tension. Chester L. Roberts .....	Feb	12
World Health Organization .....	Jun	33
Wright, May. Bread and cereals .....	Jul	10
Cooking protein foods .....	Apr	12
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