Optimistic Medicine

or

The Early Treatment of Simple Problems

Rather Than

The Late Treatment of Serious Problems

By

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FOREWORD

Between the Technical Knowledge of the Physician and the Legendary Instincts of the average citizen there is a sort of No Man's Land which accounts for many a sudden disappearance from these earthly scenes.

If it were possible for the physician, who by comparison knows nearly everything on the subject, to in a measure bridge this gap and thus transform his patients into clients with a greater common knowledge of Physiology and Hygiene as a mutual basis for consultation, the advantages to the medical profession would be great; but nothing in comparison with the benefits conferred upon the average family, whose hygienic "blunders" in their aggregate results to society are worse than many of the traditional "crimes."
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INTRODUCTION

THE CONSULTATION ROOMS FROM THE BUSINESS STANDPOINT.

The impression produced on the patient by the doctor’s consultation rooms is a much larger factor than many physicians seem to appreciate.

The patient often approaches the doctor’s office with a certain feeling of dread. Everything which can be made to help relieve this natural sentiment is not only good ethics but good business.

A certain dentist who did not do extracting, informed a patient that the tooth which had been recently exhibiting a rebellious temperament might as well be removed. He directed this patient to another office devoted exclusively to extraction.

Naturally the owner of the troublesome tooth did not approach this place of torture with very pleasant anticipations. On his arrival he was ushered into a waiting room, whereupon he made his errand known to an extremely friendly, cheerful young woman who informed him that he would be given early attention.

After waiting a short time the owner of the undesirable tooth was invited by the cheerful young lady to enter another office. There his hand was grasped cordially by the operating dentist, another smiling young lady helped to escort him to the (electric) chair.
and another extremely cheerful assistant dentist participated in the reception ceremony.

Other details are unnecessary. The patient soon departed minus the tooth, deeply impressed, of course, by the skill of the dental surgeon, but completely overwhelmed by the psychological atmosphere of the office, skillfully designed to make the separation from an ulcerated tooth a holiday event.

The average physician's office should likewise be cheerful. Room decorations should combine to produce a soothing influence. Pictures on the wall should represent pleasant vistas of the open country with trees and broad highways and gracefully curving streams. A few fresh looking periodicals on the waiting room table or even the morning newspapers are preferable to old dilapidated back numbers of magazines of last year's vintage. Light painted woodwork with wall paper and rugs of a sunny brown help to heighten the pleasing effect.

There is probably no better investment for any physician, who has a considerable office practice, than a secretary of pleasing appearance and an agreeable personality. Such a young person should be tactful and the possessor of common sense, but most of all, should be exceedingly friendly, especially to the woman with a young child and to elderly people of both sexes.

The arrangement of the offices should provide for a moderate sized waiting room in front and a small waiting room in the rear of the consultation rooms. All these rooms should open on a general hall. By
this arrangement it is possible to provide for the business man securing an appointment by telephone, so that he need waste little time. Nothing is more tiresome to the man of affairs than to sit for an hour or two in a general waiting room with a miscellaneous class of patients. By having a small rear waiting room available business patients, whether men or women, can be received in the rear waiting room and thus secure attention at opportune moments between regular consultations. In fact, many a housewife with society engagements might more frequently get the habit of securing professional supervision if there was some way by which she could avoid the long waits during the periods when several patients happen to arrive at the waiting rooms about the same time.

The patient of whatever age or condition who leaves the doctor’s office with an agreeable impression, not only of the physician and his professional abilities, but of the business arrangements and general atmosphere of the office, is physically benefited thereby.

Many a physician who drives a handsome car and keeps himself well groomed in every respect, hardly seems to realize that it is equally important to have an attractive office. The modern city physician pays enormous rentals to provide these office attractions which can be secured for relatively small expenditures in the country towns. Human nature is essentially the same everywhere and numerous patients who expect to see the doctor only in their own homes, and then under stress of real illness, might easily acquire
the habit of dropping around to a pleasant office and thus give the physician an opportunity to make fair inventories of their physical conditions, which would be of great service in case of sudden and serious developments.
CHAPTER I.

Optimism as a Remedial Measure.

Even from the first primitive man has ever invested the Healing Art with awe. In no way have the aborigines of any part of the globe been more responsive to bombastic pretense than in medicine. Trading upon this human weakness, multitudes of ignorant pretenders in past times have lived in luxury, or at least in luxury as compared with the mode of life of their dupes. As human nature remains the same throughout the ages, we do not have to go very far back into the history of scientific medicine to find similar examples of a superstitious credulity on the one side and a class of charlatans on the other.

Now we have an era in which the physician scorns to impose upon the fears of his patients and takes them more into his confidence, thus establishing a sort of partnership in which the patient gathers the data for consideration by the physician and the latter consults with the patient and gives him the benefit of his naturally greater technical knowledge of the importance of the facts submitted. This is Medicine in its modern and true aspects, and opens up a field of usefulness for the physician which makes his former professional routine seem tame and uninteresting by contrast. The physician no longer regards his patient as an exhibit displaying such and such routine symptoms, to be treated likewise by routine, but as a
psychological entity with a mental and physical machinery which frequently requires adjusting. This human machine being the most marvelous and complicated mechanism ever in existence, it requires exceedingly careful handling. Therefore, it is the function of the physician not only to understand this mechanism and its vagaries, but also to instruct the owner in running this machine with the greatest possible skill.

Just as a locomotive engine may arrive after a hundred-mile run in perfect condition, but still require a period of rest and supervision in the roundhouse, so is it necessary that the human machine be not unduly strained by overexertion or unwisely stoked with improper fuel. For this reason it is important that each patient be trained to exercise the best possible judgment in the selection of foods and in the establishment of rest intervals, with such recreation as may be indulged in without undue fatigue, always bearing in mind, however, that a reasonably stiff regimen of work is less harmful than any protracted period of idleness.

As all human knowledge has its limitations, it is too much to expect that even the most intelligent person will not more or less constantly exercise such bad judgment in his daily routine as to exert a depressing influence upon the integrity of his physical organism. Every waking hour brings with it such factors as annoyance, anxiety, undue haste, and general disturbance of the mental or physical morale which induce excess wear and tear. The avoidance of
these destructive elements is sufficiently important to justify most careful study. To be sure, nature is always busily engaged in adjusting, smoothing over, and otherwise correcting these errors, but unfortunately nature frequently overdoes her part. The man who rushes off to business after a hurried and unsatisfactory breakfast finds nature so full of sympathy as to give him an abnormal appetite at lunch time, with the result that, unless he exercises unusual self-control, he a little later on finds himself trying to do business with a brain stupefied by the withdrawal of an unusual amount of vital force for concentration at the most threatened point, viz., the digestion.

We are told by certain well-meaning enthusiasts that we may safely leave most of our troubles due to a disordered physical apparatus to the kindly offices of nature and all will be well. Unfortunately, this view is not entirely a safe one. Nature muddles things badly at times and frequently needs restraint. The instances of this well-intended, but ill-advised zeal on nature’s part are almost countless. So it appears that those confiding persons who dispense with medical advice and rely solely upon these benevolent and restoring offices frequently find themselves in a very bad way. It is therefore often the function of the competent physician to repress these natural processes of repair by employing the well-known methods of the counterirritant, the laxative, and sometimes the opiate. The oft-expressed wish that we might be saved from our friends too often applies to benevolent nature herself.
A similar line of reasoning is justified when we contemplate the mind and its far-reaching influence upon the body. That the mental should dominate the physical is emphatically true, provided that the mind is in a normal state, well balanced, and properly trained. Under other conditions the influence of the mind upon the body may be extremely pernicious. We see this in so many instances of those given to morbid introspection, who magnify every symptom, with the eventual result of a general maladjustment all around. It is for this reason that so many physicians are disinclined to take the patient into their confidence, except in the most general way. We believe this is a mistake, except in the instances where the mental poise of the patient has become thoroughly unbalanced. A great many patients would recover much more rapidly if they could be relieved from entirely unnecessary anxiety. It is true that a little knowledge is a dangerous thing, but it does not necessarily follow that total ignorance of matters which can be easily explained and which would have a very reassuring effect on the patient is desirable. A few moments devoted to an explanation of the physiology of the case in hand and what the doctor confidently expects will happen to restore physical equilibrium may place the patient in such an attitude of optimism and hope as to greatly shorten the period of illness.

Most people of considerable experience have at some time or other come in contact with the breezy, cheerful, optimistic physician who often seems to be able to work a mental miracle with his patients. Such
physicians are apt to acquire a greater reputation for skill in the use of drugs than they really deserve, the credit which properly belongs to the genial, kindly, and optimistic atmosphere created by the doctor being given to the prescriptions he writes. For this reason it should be apparent that in every family the utmost of courage, hope, and optimism should be brought to bear to influence the patient to direct his or her mental attitude in the right direction. The importance of this attitude is illustrated by the well-known fact that many patients of middle age or older are prone to consider their chances of recovery pessimistically as long as they stay in bed. Getting them out, bundled up in a chair while the bed is being made, gives them a new lease of hope, and they feel that they have crossed the crest of the ridge and that now progress toward recovery will become more and more easy.

The depressed patient, normally of alert mind, who can be trapped into an exhibition of a natural display of humor may have received a more effective tonic than anything which can be taken out of a bottle. A woman who was naturally quick at repartee gathered the impression that her digestive functions were seriously impaired and the family doctor, a large and very rotund person, was joking her about it one day, making several allusions to her "poor stomach." Finally he secured the desired reaction. Quick as a flash came the retort: "I wouldn't exchange with you." Nothing could have benefited her depressed functional condition more. It can be taken for granted that for the moment at least the manufac-
ture of depressing toxins was interrupted. The old story of the colored gentleman who, when informed by the doctor that he had but a short time to live, got up from bed, put on his clothes and said, "If I am goin’ to die, I’m goin’ to have some fun," is not so therapeutically heretical as it might seem. A resident of New York City has the unique distinction of having had the undertaker call to take him in charge on three separate occasions, and is still devoting himself to "business as usual."

It is natural that some physicians should be optimistic and others pessimistic, but the pessimistic doctor should change his business. To be sure, not many long faced doctors mean to exert a depressing influence on their patients. They intend to mask their depressed mental condition by an exhibition of great professional gravity. Under discouraging circumstances they are very dignified and non-committal. When they make a statement, it is with a very grave demeanor and an attitude which implies that they shall do the best they can in a serious situation. Most families of reasonable experience with human nature naturally gather the impression that the doctor regards the patient's condition as serious. Level-headed members of the family discount this attitude and assure each other that the doctor is so conscientious that he is apt to be unduly anxious about his patients. But the depressing influence has its effect just the same, unless the family members have reached that state of mind where they are beginning to wonder if they had not better change doctors.
There are, of course, certain unscrupulous physicians who make their patients out to be extremely ill whenever they have some slight indisposition, in order that they may acquire the more glory for having brought about a recovery. This type of doctor is always cheerful. He tells the family that the patient is very sick, but that he feels confident that he can bring about early improvement. As long as the doctor can get away with this policy he has the family in a thankful frame of mind because of their great good fortune in having him for a family physician. But sooner or later this professional pose becomes apparent and there is a dread on the family's part to call the doctor, even when he should be brought into the case, because they feel that he will be sure to make a mountain out of what to them seems to be but a molehill. So in the long run this kind of professional strategy proves to be unfortunate for the doctor, if not for his patients.

Now by contrast just consider the counsellor who puts himself in that absolutely unassailable position occupied by the physician who is friendly, genial, hopeful, optimistic. The fact that the doctor advises the early employment of a trained nurse when such advice was unexpected does not come with the shock to the patient that would be the case were the doctor not cheerfully insistent that he has only favorable expectations as to the outcome of the case. The impression on the patient and the patient's family is that the probable recovery will undoubtedly be sufficiently hastened by the employment of a nurse to justify the
expense and inconvenience to the household. This type of physician always appears cheerful, calm, and hopeful. The patient looks forward with anticipation to his visits, and feels the hypnotic influence of his presence as soon as he enters the house. The orders of the optimistic physician are carried out cheerfully and hopefully.

To be sure, the optimistic physician does not always save his patients, but whatever the outcome of his professional endeavors, he is in a position to justify himself all the way along. He has done his level best for the patient, has kept up the courage of the patient and of the patient's family, resorted to every expedient which gave promise of being any help, and, with an unfortunate termination of the case, is given the credit for having done everything possible to avert the eventual calamity. Of course, it is possible for a physician naturally optimistic to rely too much upon his personality and too little upon remedial measures. If the physician is indolent, his natural optimism may lead him to neglect to carry out certain necessary methods or make a careful study of the case with a view of adopting some expedient which a more thorough consideration of the symptoms and course of the disease would have suggested. Even a delightful personality is no excuse for indolence and haphazard methods.

However, when we place the two opposing temperaments in apposition for analysis, we have to admit that, as a rule, the hopeful, but happy-go-lucky, physician is sometimes a more successful advisor than the
most thoroughgoing, conscientious physician with a long face, especially in those cases in which the neurotic element is conspicuous.

Various types of fallen healing cults have had their rise because with all their defects they had in many instances supplied that mental stimulus which certain adults in a low state of vitality always crave. Physicians who were competent in every way have often failed to benefit this class of patients because they could not quite disguise their feeling of contempt for them. The irregular practitioner never makes this mistake. While he may be short on medical knowledge, he is long on sympathy, and he panders to the morbid craving of the patient sometimes with quite remarkable results. The instance of the bedridden patient who after a séance or two starts on a rapid course toward apparent recovery is too frequent to justify comment, except that it illustrates the remarkable beneficial influence of a course of treatment which in the patient’s opinion attaches proper significance to their pet symptoms. It seems ridiculous that so many capable practitioners should have had to divide the clinical field with these pretenders, but such is the fact.

While everyone must admire that professional integrity which refuses to blend itself with therapeutic humbug, it is, indeed, unfortunate that this chief stock in trade of the quack should not be more frequently utilized by competent physicians and adapted to their daily routine, thus leaving these dangerous and irregular practitioners out in the cold altogether.
We are told by one of the apostles that, of many things which are lawful, some are not expedient. The quack employs certain methods which are expedient but not lawful for him to use, but which are both expedient and lawful for the thoroughly competent physician to make the most of in his professional routine.

While every physician understands the depressing influence of fear, it is probable that few physicians take this weakness of human nature sufficiently into account in their professional work. A certain percentage of patients make this feeling sufficiently manifest so that the doctor may govern his course accordingly, but a much greater percentage of patients keep this morbid influence in the background. While they are more or less possessed with this apprehensive feeling, they assume an attitude of indifference and bravado which is deceptive. It is probable that no routine measure could be inaugurated by the family physician which could be more productive of beneficial results than to assume in practically every case the possible existence of this form of depression.

If every patient were systematically given the benefit of hearty reassurance as a part of the course of treatment employed, the effect of mental depression anticipated and discounted in advance by the physician, the aggregate beneficial results would be very great. Take the mother of young children, for instance, who has to give up her housewifely tasks and the care of her children and go to bed with some form of illness associated with marked physical prostra-
Optimism as a Remedial Measure.

tion. She may assume an attitude of composure and even cheerfulness in the presence of the physician, but left to herself her mind, which must be occupied in some manner or other, is very likely to be diverted to what might happen to her family should she fail to recover. This thought occurs over and over, every time bringing with it the development of toxins which depress function and retard the processes of repair. To exorcise all such mental depressions and replace them with a cheery hopefulness is as much the function of the physician as to ascertain temperature.

Our mental faculties are usually either a great help to us in our encounters with any form of crisis or very much the opposite. It all depends upon the point of view. The patient naturally takes for granted that the members of the family will say all they can that is encouraging and such statements are accordingly discounted. But when the family doctor calmly and convincingly explains the cause of the illness and the probable certainty with which remedial measures will bring results, and as a friend of the family assures the patient in unmistakable terms that improvement should soon be manifest, it is apt to have a wonderfully reassuring and tonic influence, inducing the patient to eliminate from his mind this haunting morbid panorama of dire things which are likely to happen to dependants should the recovery not take place. With this load of apprehension effectively thrown off, rest and the natural resilience of a reasonable amount of vitality will accomplish wonders in a short time.
It is, indeed, sad to contemplate the innumerable instances in which families of growing children have been bereaved of a parent who, through overwork and perhaps underfeeding, had been reduced in health and vitality to be later pounced upon by these devils of morbid apprehension. Unnecessary anxiety has dragged down multitudes of such people, often depriving children of the guiding and affectionate care of a mother or of the material assistance of the father, who, could they have had even a little knowledge of the certain depressing influences of worry, might have developed sufficient mental poise to throw off these burdens and become restored once more to normal health and vigor. The physician who makes a part of his therapeutic measures a systematic policy of anticipation and elimination of morbid fears, is accomplishing far more for his community than even the most appreciative circle of patients can ever realize.

Of course, there is a time for everything. There may be circumstances when a cheerful pose would be a mockery. The existence of a crisis clearly discernible to the lay public is no time for a display of jovial demeanor. But an attitude of calm alertness and an appearance of readiness to meet the emergency always produces a steadying effect on the family, which is a much more helpful atmosphere for the doctor to work in than where opposite conditions prevail.

Every physician comes in contact with situations which are a pretty heavy tax upon his nerves. If he is
subject to depression of spirits and has a personal interest in the central figures of the tragedy or comedy being enacted, the general situation may considerably affect his efficiency. Furthermore, while it is desirable that the physician should take a keen interest in the welfare of his patients, it is extremely bad policy for him to allow his equilibrium to be jarred by personal anxiety. Many physicians whose sympathies were too sorely taxed in their contact with old families have paid dearly for same in vitality. Moreover, any depression on the part of the doctor produces even greater feeling of discouragement on the part of the patient and family. It is plain to be seen that the patient's prospects are distinctly lowered by any disturbances of poise on the part of the practitioner. Great numbers of people have become introspective invalids at an early age when, could they have thrown off the load of self-consciousness and successfully diverted their thoughts into other channels when these feelings of depression appeared on the scene, the symptoms would have died a natural death and they might have lived lives of usefulness and contentment instead of being a burden to themselves and their friends.

The octogenarian can generally be put down as having exercised wholesome restraints upon any tendency to take a gloomy view of things. This especially applies to the physician himself. The doctor who reaches the age of eighty years has been an optimist who has not allowed professional burdens and anxieties to depress the functions of his vital organs.
Optimistic Medicine.

The probabilities are that he has exhaled an atmosphere of hopefulness among his patients that has in the main been more beneficial to them than the prescriptions he has written. For this reason, it can be seen that all the cheerful influences which the doctor can bring to bear upon his patients perhaps accomplishes as much good for himself in a general way as for the patients themselves. It becomes second nature for him to be cheerful and he keeps his mental and bodily poise to an advanced age. Therefore the doctor should add optimism to every formula for his own benefit as well as that of his patients.

Nothing relieves the tension of anxiety more than a good, wholesome joke. A cheerful demeanor may be assumed by anxious members of the family and constitute more or less of restraint not only upon the patient who detects the unreality of the pose, but upon each other. The physician who has a sense of humor has abundant opportunities to exercise it in such a way as to, for the time being at least, dispel that seriousness which settles like a heavy fog upon the mental processes of those who are undergoing a heavy strain on account of serious family illness. The real joke should be made to do its full duty. Many a medical legend has been handed down from one generation to another and performed its little function of relief.

A physician in northern New England made his fame secure in a large area by an exhibition of thrift. Passing the cabin of a wood chopper on a side road he was called in by an anxious wife to see her hus-
band who had been injured. The doctor prescribed a liberal diet. On being assured that the family were in desperate straits and that the only suitable delicacies for the sick husband were the eggs contributed by two hens, the doctor disposed of the puzzling question in a very few words, namely, "Kill one of the hens and make broth; I will take the other for my fee."

Differences in temperament are, of course, as manifest in the family doctor as in his patients. In a country village two opposing kinds of professional policy were well illustrated.

A well-known resident, who, although uneducated, was a man of distinct personality and thoroughly respected by the community, was afflicted with a tissue growth which assumed a suspicious appearance. He was under the care of a well-known physician, who in his professional routine always exhibited a temporizing and blarneying attitude toward his patients. His attitude toward this case was characteristic. He made light of the matter, allaying the man's natural anxieties, applying local remedies, and looking out for him in every way that he could with the apparent hope that the growth might not prove to be really malignant. Whenever the doctor was interrogated pointedly as to what this condition really was, he assumed a very reassuring attitude. Finally the patient became convinced that the case was more serious than the doctor was willing to admit, and told him so. He also said he was going to consult another physician in the village who was in the habit of telling
his patients the truth. He accordingly interviewed the other physician who made a careful examination, and without any hesitation informed him that he had inoperable cancer that would doubtless prove fatal. The man paid the doctor his fee, thanked him for his frankness, and when he went to his sleeping room for the night carried with him a quart bottle of brandy. The next morning the bottle was empty and the man was found to be dead.

Many physicians seem to find it necessary to scare their patients a little in order to get them to carry out their professional instructions. This policy is justified in some instances, but should only be applied where the patient is naturally of a very hopeful disposition. Prediction of dire consequences due to failure to follow the doctor’s advice may make a lodgment in the mind which under discouraging circumstances will have a very morbid influence. Therefore, under almost any circumstances, the holding out of a hopeful outlook is by far the best policy.

There is probably no calling in life where the policy of being all things to all men and most women is more necessary than with a physician. The tactful doctor knows the temperaments of his patients, or at least he should find them out if possible. It is for such reasons that the cultivation of a more or less personal acquaintance with the family is so desirable. There are a good many expedients by which the shrewd medical man can impress the youngsters who come under his supervision. A Philadelphia urchin informed his mother, after a short ride in the auto of a
young doctor of the neighborhood, that Dr. So-and-So was “the best boy in town.”

The unscrupulous man employs artifice for a bad cause, but the most honorable physician may employ artifice in a good cause. An old regular army surgeon stationed in early life at one of the frontier military posts in the Northwest related the following experience: At the fort one day a messenger arrived from an Indian encampment some twenty or thirty miles distant asking that a medicine man in the fort be sent to see the big chief, who was in a bad way. Two or three surgeons respectfully declined the invitation, as the Indians were not regarded as very friendly. One doctor who thought he knew Indians pretty well and was inclined to be venturesome took an orderly who volunteered to go with him and started off with the messenger. Arriving at the encampment he was immediately shown into the tepee of the chieftain, whom he found to be afflicted with an extremely bad carbuncle on the back of his neck, which had apparently reached the stage to be lanced. A crowd of bucks, squaws and younger inhabitants of the encampment gathered around. They looked at the army doctor with some curiosity, but with more suspicion. It was not an especially reassuring situation. The doctor who knew Indian customs pretty well decided to make an impression. He therefore proceeded to imitate the mummeries and antics of an Indian medicine man who had given a performance once at the army post. The audience was duly impressed. Likewise the patient, who submitted to sur-
gical treatment followed by some quieting medicine, after which the old chief who had been in great distress for some days proceeded to sleep the entire night through. The next morning he was very much improved and the venturous doctor started back to camp with his fee, two fine Indian ponies led behind by the orderly,
CHAPTER II.

Co-operation Between Doctor and Patient.

When the doctor is called to visit an entirely new family in time of stress, nothing is more calculated to give confidence to such people than to have him show an interest in the general physical history of the patient and of the family itself. The impression produced is that he is a safe counsellor. And it is but natural that the physician who is suddenly called to a serious case should, in the interest of his own reputation, gather as much information as he reasonably can that will be of assistance to him in estimating the natural resistance and rebounding vitality of the patient whom he is expected to pilot through to recovery. Many physicians who thus meet every requirement at the bedside somehow prove to be a disappointment to the grateful family when they individually have occasion to interview the doctor at his office.

It is a mistake to ever consider the case of a patient who comes to the office as trifling. It is a disadvantage to the patient and a hindrance to the normal development of the doctor. Every problem should be considered as possibly serious until the neuropathic trail can be followed up to its probable source and the patient's anxiety succeeded by the desired feeling of self-assurance. Such cases are usually simple enough after a little study.

The man, woman, or child in perfect health is unconscious of any ailments. There is a sense of well-
being, a feeling of optimistic satisfaction with the entire situation. Any disturbance of mental poise which evidently has some physical reason for it is worth its proportion of the doctor’s time and of the patient’s money.

No physician should be so “busy” that he cannot give a reasonable degree of attention to the quite possibly trivial ailment which some office patient presents to his notice. To listen in an abstracted manner and hand out some routine tonic is to send the patient away dissatisfied, which is not good professional practice nor good business policy. Back of the slight ailment there may be the clue to a complete understanding of the general condition suggestive of new and rational methods of treatment.

The normal life of the adult is based upon proper functioning of every organ. It is the doctor’s official duty to see that this normal poise is maintained if possible by every one of his clients.

The proper procedure, therefore, is to review the symptoms and the state of mind of the patient, to coordinate the various facts brought together from time to time, and instruct the patient in those general principles of hygiene and physiology which will enable him or her to approximate as far as possible that desirable condition of a sound mind and a sound body. The patient is thus richly repaid for every visit he makes to the doctor’s office.

Naturally some patients are more communicative than others. Some wish to talk about their symptoms indefinitely and in other cases more than the third
degree is required to get anything like a coherent idea of what seems to be troubling them. But it does not follow that a reluctant patient is not secretly gratified to have the doctor persevere and get at the bottom of the case as soon as possible. Some patients present a rosy view of their situation with the hope that the doctor will be favorably impressed and by some optimistic utterance brush away their own lurking fears. Such patients attach a weird significance to any statement, however trivial, the doctor may have occasion to make. The physician, however, is always on safe ground if he explains physiology to them. This holds good in any condition of discouragement and apprehension. Nothing brushes the cobwebs of mystery out of a patient’s mind so effectively as to make clear to him that the person physiologically normal is healthy. It is much better for a physician to be regarded by his patient as a scientist than as a magician.

When the husband, wife, maiden aunt, or grandmother of the family has made a trip to the new doctor’s office, and the doctor has shown a desire to take an accurate account of stock of the patient’s general situation and has talked encouragingly and conveyed some real information that will be a help in correcting any tendency to anxiety, that person is likely to return home with a new interest in acquiring and maintaining a high standard of health; and the chances are that that day the family will have adopted that doctor as their medical director. So as aforesaid, the crucial moment between the new doc-
tor and the old family, or the old doctor and the new family, is in the first office visit when the patient goes to interview the doctor with a lot of hidden worries, but with perhaps the appearance of cheerfulness, to present some variety of ailment to be treated by the physician. The doctor who recognizes that psychological moment and makes the most of it is a real diplomat as well as physician.

Of course, it involves some little time and patience for the doctor to secure access to the inner consciousness, as it were, of the timorous or prudish patient. But the returns fully justify the trouble. When we contrast this humane method of dealing with those who have had the germ of worry implanted in their systems with the mysterious all-wise attitude of certain physicians who do not think it worth while to let their patients know anything about themselves, there can be but one answer as to which is the better course. The physician who assumes the oracular pose and believes in keeping his patients in ignorance is quite likely to see these patients pass into other hands. There is thus developed, as is frequently observed in small towns, an atmosphere of antagonism on the part of certain doctors toward the physician who pursues the opposite course, especially when by such methods he seems to be developing a large practice.

When we consider the remarkable change in functional power which may accrue to the morbid person who is suddenly placed in a new and cheerful environment, it begins to dawn upon us that such a person should be trained to divert the thought currents into
more optimistic channels. Even the most uneducated person recognizes the helpful influence of such a change. Such being the case and autosuggestion being an acknowledged factor in elevating or depressing the efficiency of bodily functions, why should so many people of middle age who begin to detect real or imaginary physical weakness find it necessary to consult an irregular practitioner in order to secure a sympathetic appraisal of their physical condition as revealed to them through the magnifying glass of anxiety? Knowing as he does so much more of the basic sciences of anatomy, physiology, and especially of the varying intensities of bodily waste and repair, it is the experienced family physician who should be consulted and who should explain the physiological aspects of such cases in such a way as to make perfectly clear to the patient what may be reasonably hoped for, provided that the upbounding and restoring functions of nature are not handicapped by unphysiological habits or depressed by the toxins of unnecessary and wholly unscientific anxiety.

Unfortunately a multitude of physicians consider it almost unethical to show much interest in a case unless there are real and clearly defined evidences of serious disorder. They decline to bother with a case where "there isn't much the matter with her." With the very best of intentions they assume an attitude that repels confidence, or causes the patient to feel that the doctor has tried by a bland and reassuring manner to disguise a certain feeling of contempt. Even where the doctor has guessed correctly and the
patient is soon well again, the result may be unfort-
unate, as the person who fancied himself ill may un-
der other circumstances delay consulting the physi-
cian until a serious condition has developed.

The physician should eliminate from his mind any
and all reservations as to the ethics of devoting time
and care to any person who comes to his office as a
patient. It is impossible for any man or woman to
consult a capable physician in his office without re-
ceiving full value for the fee which may be paid—
provided that the doctor makes proper use of the op-
portunity thus presented to explain the functions
which may seem to the patient to be disturbed. Only
a few minutes devoted to such explanations may pro-
duce impressions which will be lasting and helpful
from early life to old age. When we hear of the as-
tounding ignorance of hygiene shown by people who
in other respects are masterful in their intelligence, it
is to wonder that such useful people who may have
been cut down in their prime should not have been
better informed by their physicians, for in most cases
they have been under the nominal care at least of some
doctor.

Why should the man who had learned the art of
supreme concentration in business and who was
needed badly in the great constructive problems of
modern life stumble and fall out of the procession
because of the lack of a few lessons in self-preserva-
tion which could have been so easily passed on to him
by his doctor or his child’s doctor? Apparently it is
a curious conception of professional dignity which
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often leads the physician to feel that he would be attempting to parade his knowledge if he were to explain the physiology identified with the problem presented to his notice by a patient, or, when called to a case of croup, were to indicate an interest in the health of the father nearly always engrossed in the cares of business and absent from home when the doctor called.

Viewing this matter in its philosophical aspects, one might readily imagine a physician under such circumstances inviting a wife's confidence as to the husband's condition of health, and, should it seem suitable, advising her to ask her husband to report to his office for professional advice. It is easy to conjecture the innumerable instances in which such a policy might forestall the development of a nervous breakdown, overstrained blood vessels, or any premature change from perverted functions to permanent disability. But, no; it is not the fashion to "solicit business," and the family physician hurriedly prescribes for the ailing child now perhaps already well on the way to recovery and hastens to the next case.

Even if we grant that a smattering of the rudiments of medical knowledge may lead a person to be at times too introspective, is it not better for both patient and physician if the doctor is consulted sometimes unnecessarily than if the overworked business man or mother of a family ignore all warnings, only interviewing the doctor when the conditions are desperate? The old saying that "threatened men live long" has its counterpart in the histories of those who
frequently consult their physicians, as by this habit a person gradually acquires a comprehension of the physiology which relates to his particular case and instinctively avoids that which he has learned is hurtful. Of course, it is possible for an unscrupulous physician to trade on the morbid fears of a semi-invalid, but because this is sometimes done is no reason why the strictly reputable members of the medical profession should ignore such important aids to the extension of their spheres of usefulness. Often the elderly female who "has been the rounds" of the various offices at last finds a sympathetic listener and acquires a new lease of life through that power of suggestion which diverts her thoughts into more hopeful channels, thus giving the restorative powers of nature a chance.

A salesman visiting physicians once called at the office of a doctor who practiced in a small town where he had two or three professional rivals, and after office hours were over was invited to take a ride over the hills in the doctor's carriage. The object of the drive was a small cottage high up on the hillside, the visitor sitting in the carriage while the call was being made. That evening the salesman, interviewing another practitioner in the town, chanced to mention this trip. "Did the doctor go to a small red house on the hill over east of here?" was the question. "Yes," said the salesman. The rival medical man smiled sarcastically. "Whenever Dr. —— gets real hard up for a couple of dollars, he visits an old woman at that red house who thinks she is sick, and she
always pays cash.” The interesting sequel is that the physician thus accused changed his location, removing from the above described atmosphere of spite to a large town, where he soon acquired an extensive practice and an enviable reputation as a man of ability in his profession.

In the “good old days” that we hear about, but which few of us would have enjoyed, it was considered weak and childish to consult a physician unless conditions were serious. Men and women thus proud to show a contempt for ordinary physical ills frequently refrained from seeking medical advice until the only remaining function of the doctor was to, so far as possible, ease the path to the grave. Such people were regarded as strong characters, whereas in the light of our present age their code was entirely wanting in common sense.

The average adult American follows a certain routine of personal habits, some of which, unmodified by a correct understanding of their influence upon the ordinary physiological processes, may prove disastrous to the functional integrity. When we consider these facts it may be pertinently asked why a man should not select some capable physician to make clear to him those methods by which he may conserve the healthfulness and functional efficiency of his nervous system, his heart, his kidneys and digestive apparatus. He would thus be better prepared not only to retain health and youthfulness to an advanced age, but also greatly increase his capacity to accomplish results in his business or calling. Such an orderly
system of self-development and conservation presents an illuminating contrast to the by far too common habit of living in a haphazard way until some unpleasant warning sends a man in a panic to a physician, who is himself handicapped in meeting the emergency by an almost total ignorance of the physiological history of the case. The advantages on the one side and the disadvantages on the other would seem to be apparent to any man of business acumen. Even the man most careless of his own physical well-being sees the good sense of having his automobile carefully examined occasionally by a competent mechanic.

It is a reflection upon the common sense of the present age, and in a measure upon the capacity of the medical profession as well, that the prospects for longevity of the delicate woman of fifty should be greater than those of the apparently robust man of the same age. The reasons are obvious. The average delicate woman has had her physical limitations explained to her by her physician whom she consults at such times as with her awakened sense of significance of unusual symptoms she deems necessary. The big, resolute, robust man ignores symptoms. He has always "come through" all right in the past and relies upon his abounding vitality as sufficient. Some time the charm fails to work, and analysis shows either that the kidneys, those noble organs, as Lorand so aptly terms them, no longer effectively perform their functions, or that something else has gone wrong. The catastrophe could have been prevented
had some competent physician been given the contract a few years earlier to watch for jarring sounds in the physical machinery.

The functions of the physician should more nearly correspond with those of the attorney. In older and more crude social conditions the successful lawyer rather encouraged his clients in litigation. In these days he counsels moderation. He devotes more and more time to preparing himself as a business adviser. He acquires a knowledge of the business problems of a variety of clients who come to rely more and more upon the sound judicial advice they can always depend upon when they consult the attorney who has followed the ups and downs of a business year after year.

Given a fair chance, any well-qualified physician could soon form a pretty accurate estimate of the physical assets of the average man or woman. He could soon detect that "weakest spot" and teach the patient to recognize the storm signals. Under such conditions the practice of medicine would become more remunerative than at present, as it would soon be the fashion with all intelligent families to regard their doctor as a director of hygiene as well as physician. They would soon discover that the avoidance of serious illnesses made even a considerable expenditure for general professional supervision a great economy in the aggregate.

Such a modification in the professional routine would be a boon to the physician. He could devote more and more time to the study of disease preven-
tion, while there would be less and less of those times of stress which are sprung on the hard-worked physician called in on emergency to a patient of whose general history he knows practically nothing. Many a time with such cases the physician is almost sure to be a victim. If he saves the patient, the family may never call for his services again, while if the case terminates unfavorably, the doctor is blamed.

It is the sudden, critical type of case that exhausts the doctor’s vitality and makes him old before his time.

The retail clerk who assumes a bored air when questioned closely by a customer as to the quality or special characteristics of an article of merchandise is not likely to rise very fast. By taking the trouble to give a little real information so that the patron would take away with him a new idea or two on that special subject, the store would have been given a bit of effective advertising and the salesman quite likely would have added to his personal clientele.

A certain type of family physician assumes a somewhat similar attitude toward patients. The doctor asks a few routine questions and with little or no comment on the case writes a prescription. With the suggestion that he be consulted again if necessary, he hurries to the next patient. Quite likely he never hears from the case or the patient again. To be sure, he preserves his professional dignity and could not by any stretch of the imagination be accused of trying to “drum up trade.” But by a few skillful questions he could have secured some valuable data which,
briefly summarized in his notebook, would be useful if consulted again, while by the exhibition of a friendly interest he would have sent the patient away feeling that a safe and competent family practitioner was here available.

Another species of medical man has an ambition to have a society practice. If consulted by a woman who plays bridge in exclusive circles, he turns the conversation into such channels as will impress the patient that he, too, is of the elect. This policy sometimes seems to bring results, but the associations of fashionable society are little consolation when a family crisis develops. It is then that the plain, unpretentious, but capable physician shows his value.

Most families have developed certain methods of treatment by home remedies which, with a little encouragement, will be explained to the family physician. It is quite the common practice to ridicule these family notions. A certain matron was accustomed to apply camphorated oil to her children's chests whenever there was a cold with bronchial irritation. The family doctor considered this a huge joke, and on one occasion told his small patient with a heavy cold, the mother standing by, "Now, if your mother wants to put oil on you, tell her she can rub your chest well and then apply the oil to this chair leg and it will do just as much good." The mother, who knew the doctor very well, enjoyed the joke, but did not change her opinion of the remedy. However, quite a few home remedies are actually foolish. Some people still believe in powwowism.
Generally speaking, home remedies employed by women of fair intelligence are entitled to the semblance at least of the doctor’s respect. For this reason a better impression is produced if the physician admits the value of such expedients. It may be in the interest of the family if the medical adviser takes the trouble to explain the reasons for whatever efficacy there may be in the home device, perhaps incidentally pointing out its limitations and the possible dangers of too much reliance upon it. In this case the mother will feel that in the main the doctor approves of her judgment and will also carry away with her a higher appreciation of the doctor as a recourse in time of stress. The woman (or man either) who leaves a doctor’s office pleased with herself is pretty sure to incidentally be pleased with the doctor.

Few practitioners appreciate the value to a patient of some chance word of warning or physiological hint. Real old people especially treasure up the hygienic hint received from some physician they knew in earlier years. Often an old man of eighty, explaining his health in advanced years, will quote some such suggestion as exercising a wholesome influence during many years. It is needless to say that such physicians are invariably pictured as eminent practitioners.

It is only natural that a distant professional attitude on the one side should be met with a feeling of more or less constraint on the other. This will not be dispelled by airy references to social topics by the doctor. To get the inner confidences of the patient a physician must show an interest in details of personal
hygiene and the all-important mental pose. The apparent dietetic error may not, in view of certain idiosyncrasies of the patient, be the key to the situation at all. Some irritating or corroding element in the family relationships may, if ascertained, provide the clue to a line of mental suggestion that will improve the situation materially.

Every man or woman of fair intelligence can be made to see the importance of thought propulsion in healthful channels. To avoid the physical depression which results from morbid mental states there must be a habit of switching the thoughts in other directions. A few minutes devoted to explaining these methods of interchangeable thought currents may save a brand from burning up under the artful supervision of an irregular practitioner. A woman will naturally be grateful to the physician who rescues her young child from a dangerous attack of croup, but if he can teach the mother the rudiments of that philosophy which will enable her to make the best of whatever situation may confront her, she will be reminded of his helpfulness continually.

In securing the unreserved confidence of patients some trouble is involved, of course, but it is the best of investments. To encourage the employment of home remedial measures by explaining their physiological action is but to assist parents in recognizing in season those conditions which indicate the need of professional counsel. An understanding of the general principles of diet, a knowledge of the utility of the fomentation and counterirritant, and of those
methods by which it is possible to secure relative immunity from colds should be reasonably expected by the average family as a part of the equivalent to be delivered to them by any physician whose relations are such as to constitute him the family doctor.

Of course, there are families who will sadly impose on the good nature of any doctor who will submit to it. Every situation has a law unto itself. The slacker in paying bills naturally deserves little consideration. Under such conditions the traditional brusqueness of the bluff country doctor is very much in order. A physician in a medium-sized country town in New England was standing in his habitual pose of dignified reserve on the steps of his favorite drug store one summer afternoon. He had completed his calls, his horse and carriage were at the curb, and the doctor was contentedly smoking a long black cigar. An old garrulous male resident of the town approached the doctor just as a funeral cortege rounded the corner and passed down the street. The old man, not greatly admired as a citizen, and who was always endeavoring to appear on terms of intimacy with this physician, was immediately interested. He blinked for some moments at the passing procession. Turning to the impassive figure beside him, he asked "Whose funeral procession is that, Doctor?" The name of the departed was supplied. "What! is he dead, Doctor?" "His friends must be a mighty hard-hearted set if he isn't dead," was the laconic reply.

While the physician is sometimes embarrassed by the too assiduous attentions of his admiring followers,
he is not entirely immune to charges of unnecessary solicitude for them. However, the caustic critic who admonishes her neighbor to be careful and not let the doctor “run up a bill” by making unnecessary visits will have her cautions ungraciously received, provided that the physician in question makes it his custom to always take the family into his confidence. Such a system assures the attending physician of the loyalty of any family whose patronage is worth having. It is no small advantage to any family doctor to have the intelligent mother of a family of children ready at any time to take up the cudgels in his defense.

The woman who has seen her children safely piloted through the perils of those contagious diseases which are with difficulty avoided, especially in towns and cities, and who has had the rudiments of physiological development carefully explained to her incidentally, is no small factor in providing an effective substitute for the advertising of which the doctor is deprived by his code of ethics.
CHAPTER III.

BUILDING IMMUNITY TO DISEASE.

An ancient form of medical humor is exhibited where the family doctor declares that he cannot afford to take a very long vacation at any time for fear that his patients will all get well. In a similar fashion the lawyer of ancient times was careful to keep in touch with his clients lest they might adjust their own difficulties and thus be able to dispense with his services. These crude days are now no more. The business man now knows enough law to enable him to see for himself the importance of having his attorney keep him out of difficulties and the time is rapidly approaching when the average man or woman of intelligence will expect a similar policy on the part of his medical adviser.

There are enough hygienic problems connected with every household to justify more or less continuous association with a capable medical man. To build up an immunity which will stand off disease is a much more advanced form of medical science than treatment of colds and indigestions brought about by gross ignorance of hygiene.

Greatly to their disadvantage, it is not the custom of the average family to secure medical advice in cases of ordinary colds. For this reason these colds constantly repeat themselves. If the physician could be encouraged to hunt for the cause of these predispositions, he might very likely be able to make suggestions that would largely eliminate these recurrent dis-
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tempers and at the same time augment the powers of resistance to other forms of disease. Colds are due to chilling the skin.

People can well afford to keep in reasonably close communication with any physician who is making a study of the avoidance of colds. A long train of unpleasant consequences are identified with a repetition of colds. The integrity of the mucous membrane of the nose and throat is very considerably affected, thus rendering the patient more susceptible to the influences of dust, damp air and sudden chill. Frequently repeated head colds are very likely to cause eventual impairment of the hearing. Therefore, for the reasonably intelligent family to depend upon self-treatment for such conditions is often worse than folly. In too many cases it results in actual life-shortening. Numerous persons have died of pneumonia as a result of having "colds" and not consulting a doctor promptly.

Now taking both parties into consideration, let us briefly review the advantages which would result from consulting a physician systematically whenever a cold materializes. From the patient's standpoint there is a possibility of great benefits in the form of a greater capacity for enjoyment to advanced years. On the doctor's part there is an opportunity to acquire a very intimate knowledge of the physical organization of the patient. In studying up the cause of these recurrent colds, he must of necessity acquaint himself with the general physical condition of the patient and especially the state of the digestion. In this way he
is prepared to formulate a hygienic regimen which will build up resistance to all varieties of germ diseases. Any average family can well afford to pay the doctor for these researches and the doctor can richly afford to devote the time to so interesting and useful a task if he is to be well paid for it. Tact is, of course, required, as people are quite prone to be shy of the medical adviser who is forever asking for "specimens."

If we place in contrast two families of equal financial and social conditions and general intelligence and one of these families avoids all association with the family doctor except in time of urgent necessity and the other family keeps in frequent communication with the physician on the lines above suggested, it is interesting to consider what may develop in ten years. In the first case the family will have acquired no additional knowledge of self-preservation. They will have perhaps passed safely through some serious illnesses, but are still walking along life's pathway blindfolded. The other family will have acquired a general knowledge of self-preservation and will have been able to detect approaching indispositions so as to bring the doctor into such cases while there is yet time to make a defensive battle. In the one case the doctor will have perhaps been paid considerable sums for the treatment of acute illnesses. In the other he may have received even greater compensation for constant supervision. It ought not to be difficult to decide which investment in medical services is likely to prove the better.
Many fairly intelligent men and women suffer a great deal from rheumatic conditions. They gradually come to expect about so much misery from that cause. They wait until there is absolutely no possible way of avoidance and then call the doctor. The physician employs such palliative measures as his experience and knowledge of the patient would suggest and when the patient is beginning to get fairly comfortable, the doctor no longer figures in the case. It does not occur to these excellent people that it would be the best possible investment to have a contract with the physician to make a study of the conditions underlying these illnesses with the view of perhaps being able to eliminate the cause entirely. It would not seem to be necessary that a normally healthy man or woman who understood the general principles of hygiene should have to endure these repeated rheumatic afflictions. If the doctor is given an opportunity to make a study of the hygienic habits, the probabilities are that in a few months he would have located that hygienic error or system of errors or local infection, or whatever it may be which has been responsible for the trouble.

As an example, if the capacity of a business man is reduced 50 per cent. three months of the year on account of lumbago or some other form of rheumatic ailment, it would seem to be the best possible investment for him to encourage some capable physician in making a long-continued investigation of his physical organization and thus perhaps have this recurrent burden taken out of his routine ever afterwards.
It is easy to conjecture numerous forms of disability which are not identified with any organic weakness, but which reduce the capacity for usefulness and enjoyment to a marked degree. Every person who has some tendency of this kind can well stop and consider whether he should not, as a part of wisdom, undertake to have this weakness corrected and thus become practically normal.

Biologists have pretty thoroughly demonstrated the soundness of the theory that immunity and the prospects of longevity are in the main reproduced true to type. The man or woman whose ancestors were strong and rugged people living to an advanced age may reasonably expect similar good fortune provided that he or she lives in an equally favorable environment. Previous generations have been subjected to the wear and tear of life's battle and reached a good age. Granting that they have transmitted their vitality to the present generation, it would seem that, with a more adequate knowledge of hygiene and with less of the effects of the irritating and corroding influences of life, they might maintain health and usefulness to an even greater age. Almost any person of reasonable intelligence as an interested party would naturally consider it worth while to make a study of this problem.

Assuming that a person with good heredity and with fairly good health concludes to make a study of self-preservation, he will naturally undertake to make the best possible use of such immunity as he may have inherited, augmenting same so far as he can by
development of a reasonably perfect system of nutrition and with such exercises in the open air as to keep his muscles in good condition and with careful avoidance of any luxurious habits with which the earlier generations were not handicapped. In this way he not only keeps his inherited capital of natural resistance intact, but may considerably add thereto.

If such a regimen of common sense hygiene is indicated in the case of the fortunate possessor of great natural immunity, it is to a far greater extent appropriate to the person whose family record is not so favorable.

While a great deal can be accomplished by the layman in figuring out the right program for himself, he is immeasurably better equipped if he comes in frequent contact with some intelligent physician who knows his physical strong points and weak points, and who is able to estimate the usefulness of any hygienic method which may have been under consideration by the patient. In this way he is safe from overdoing some things and underdoing other things. He is in a position to act intelligently all along the line; so, as in practically every attempt at self-development, the capable physician is the man of the hour whose trained judgment is worth a great deal more than it ever costs.

Of course, it should not be inferred from the foregoing that no fairly intelligent citizen is capable of estimating for himself the benefits and disadvantages of habitual physical exercise, neither does it follow that individual preferences in matters of diet are to be
lightly cast aside in favor of some strict scientific regimen laid down by the family doctor. The patient is perfectly justified in exercising his own judgment in a large number of instances, provided that he understands the underlying physiology. As few people uneducated in medicine do understand physiology, they are in a great deal safer position in attempting self-development if they proceed under the general tutelage of a competent physician.

It may easily be pointed out by any person of observation that it often happens that children of perfectly healthy parents, with a good heredity in the background, seem to be handicapped at the start. Such instances are by far too common, it is true, at least in outward appearance. Nevertheless, it often turns out that the substandard child with a good heredity eventually develops a remarkable immunity to disease. When this is combined with a perhaps unusual knowledge of hygiene, resulting from solicitous care on the part of the family doctor, the individual will be enabled to reach middle life with far better prospects for longevity than some husky playfellow who in early life was apparently able to endure anything, but whose heredity was less fortunate.

Perhaps no more powerful agency for the development of personal immunity can be noted than careful avoidance of all undue irritations of the mucous membranes of the body. This is a very comprehensive term when considered in its true significance. Great numbers of people in reasonably good health are constantly doing something which produces this form of
irritation. Dietetic errors not only affect the stomach, but the entire upper digestive tract as well. Perfectly sane people persistently disregard the laws of chemistry and of digestion in their selection of foods, with the resulting impairment of nutrition and with the dangerous element of mucoid irritation as well. Thus we have, as a result of these errors, not only inevitable physical depression as compared with the thoroughly good system of digestion, but dangers of cancer, gastric ulcer, appendicitis and various other abnormal states of the abdominal tract which may develop an explosion at any time. Of course, the reason why these risks are taken is usually gross ignorance.

Probably there are few people so ridiculously fool-hardy as to deliberately adopt dietary habits which are sure to result in physical impairment, if not actual danger. So, again, the function of the family doctor is naturally suggested. Whenever a patient is brought to his attention who shows any evidence of impairment of the digestion, it would be greatly in the interest of the patient if the doctor could feel himself justified by custom and the approval of the patient to thoroughly investigate the habits of eating and the character of any unpleasant sensations which may have accompanied the process of digestion. Such a program carried out might enormously increase the powers of resistance as well as modify within the system various danger points which may at any time develop into a serious condition.

Few persons in ordinary life comprehend the true significance of immunity. They have an idea that a
person who has immunity is somehow gifted with a certain charm to ward off the results of indiscretions. Nothing could be more erroneous. Immunity in its real meaning of the term means the exercise of good judgment in the maintenance of a normal vitality which has been inherited from past generations. Someone has said that genius was merely infinite capacity for taking pains. Health and immunity may be aptly defined in a similar way. Thus immunity or the art of self-preservation is not acquired by hap-hazard methods. It comes from a perfectly sane level-headed study of cause and effect with the underlying knowledge of physiology which the intelligent family doctor can make clear in relatively few words and which often establishes bonds of sympathy between the doctor and patient which are only severed by death or removal.

The vital statistics show a steady increase in this country of the proportion of deaths from heart disease. The cause of this increased mortality is variously attributed to the intensive pursuit of wealth and the luxuries and pleasures which wealth can procure. This is true in a measure, but does not tell the entire story. People crumple down and die of heart disease because they have lived lives which weakened the resistance of the heart to the ordinary wear and tear and the inevitable strains. The heart that is not kept in a state of integrity by suitable exercise must necessarily become less immune to strain.

An elderly physician who was a magnificent physical specimen had gradually become indolent in
the matter of suitable physical exercise. He had always been well, his digestion gave him no trouble, and so far as he knew he was in perfect health. He decided to take a vacation in the mountains, and one day joined a party who were going to take a long walk to a point where there was a beautiful view. The strain upon this doctor’s heart was too great and before he realized what was actually happening he was in a state of collapse, from which he died within a day or two. A merchant who prided himself upon his ability to keep in first-class physical shape without vacations undertook to take a walk late one night with a friend up a long hill. About two-thirds the way his heart suddenly gave out and he was helped to his home, where he went to bed and never recovered. He lived a few months, but his heart was completely exhausted and he died comparatively in his prime.

Immunity to weakness of the heart is developed by such forms of exercise as will keep that organ in proper functional efficiency. An unused muscle is a weakened muscle, and if the heart is given long intervals of complete rest it loses its power of resistance.

Nothing is better calculated to maintain the functional integrity of the heart than the habit of doing about so much walking each day. It is not necessary nor desirable that the heart should be subjected to strain, but it should have its minimum amount of exercise each day, and that minimum should be a liberal allowance of real work.

There is probably no function in which the doctor can accomplish more for the benefit of his patients
than to explain this necessity for constant exercise which will bring the heart into functional activity. If the heart is kept in condition it can stand an occasional jolt without danger. Otherwise any person, no matter how apparently well he or she may be, can easily produce heart weakness which will be permanent.

No investment of time and money can possibly be more justified than to secure the co-operation and advice of the family doctor in relation to the various forms of exercise. The judgment of the patient may be good in general, but the doctor knows the physical and anatomical situation far better than even the most intelligent patient. Not only is there danger from an unwise system of exercise, but there is greater danger from no exercise at all, especially where it is the patient's custom to indulge freely at the table a naturally good appetite. This custom accompanied by insufficient exercise is very likely to lead to the habit of utilizing in the menu coarse vegetables and fruits for their laxative effect. Such foods should be employed with caution, as they are notorious gas formers, and the accumulation of gas in the stomach may produce such pressure upon the heart as to materially reduce its functional efficiency. This accounts for some of the frequent deaths from acute indigestion. Gas pressure upon the heart or heartburn should be promptly reported to the family physician, who will inaugurate a system of that natural relief associated with the employment of the laxative waters or even the moderate use of Epsom salts, which are life savers for the
heart struggling against the gas pressure above referred to.

There seems to be a totally unexplainable aversion on the part of many people to the employment of laxatives. Such people ought to be guided by their physicians, who will explain to them the absolute necessity of developing an accurate knowledge as to the character and quantity of these remedies which may be required to secure a normal condition of the stomach and intestinal tract.

It is only necessary to give a little consideration to the foregoing facts to appreciate the recklessness of otherwise conservative men and women who try, by frequent self-treatment experiments, to materially modify the functional activities of their digestive system. A habit is perfectly normal and conducive to physical well-being if it is a good habit. When a person of middle age and with little practical knowledge of anatomy, physiology and hygiene undertakes to revolutionize his bodily habits, he is assuming very considerable risk. It is an old saying that the physician who treats himself has a fool for a doctor, as it is generally conceded that no one can exercise as good judgment in the correction of his own physical ills as in making suggestions to others. The old legend tells of the farmer who was dissatisfied with the accuracy of the kitchen clock and took it to pieces, after which he put it together again, with the result that he had nearly enough pieces left over at the completion of the job to make another clock. The jaunty self-confidence with which many supposedly intelligent
people will tinker with their own machinery bears a similarity to the clock experiment.

Certain adults who are blessed with good health and who pride themselves upon the fact that they have never had to consult a physician are usually living in a false security. Such people, even if they do occasionally consult a doctor for a trifling indisposition, seem extremely anxious to avoid the appearance of having any real need of a doctor's services. They consult him for some transitory ailment and keep away from the medical atmosphere so long as possible thereafter. The physician under such circumstances has no opportunity to make any real appraisal of the patient's physical condition. He makes suggestions for the relief of the intercurrent malady complained of and will not expect to see the patient again for a long time. The doctor is, in fact, much in the position of the Canadian Frenchman who told of meeting a friend in the road leading a sick horse. The friend asked him what he thought was the matter with the horse and this was his explanation, "I tu'n him aroun, look at his symptom. I say probably got cold; probably no." In a considerable number of instances the doctor interviewed by a transient who has only a brief time to spare for the examination has just about as good a chance to determine the real conditions as in the case of the man with the sick horse.

Just why it is that so many people of most excellent judgment in general affairs should be so unwilling to give any physician a half reasonable chance to investigate their physical assets and determine their
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points of weakness is one of the mysteries which has thus far not been solved.

This unaccountable aversion to coming within the sphere of influence of the physician seems to be explainable only as a form of superstition. There are people who will long defer making a will because they somehow have a feeling that the next logical move for them is to take their departure from earthly scenes and therefore make the will operative. There are, in fact, people who seem to have a similar dread of taking out life insurance. Reduced to its elements, such sentiment is an extremely childish form of superstition, and it is probable that the reluctance of many people to have their physical well-being duly appraised by a doctor is based on a vague theory that by keeping away from the doctor altogether they will never need the services of one.

It is apparent that, if men and women are to make an intelligent study of the means of producing immunity to disease, they must lay aside their reluctance and accept the guidance of physicians who possess a practical knowledge along this line. In this way they may be safeguarded against the unpleasant results of injudicious exercise or of little or no exercise whatever. The term exercise used in this connection refers not alone to muscles, but to all bodily function. It is just as harmful to undereat as it is to overeat and it is equally important that the menu be suitably selected with its proper proportion of animal and vegetable foods. The great danger lies in eating too much animal food. Every physician worthy of the
name is ready and willing to discuss such questions with his patient who has given some little intelligent study to the subject as applied to his own case. In this way the patient has the benefit of his own observation and experience and the doctor’s superior knowledge, while the doctor has the advantage of being able to verify his own conclusions as to the status of health of the individual by the intelligent suggestions of the patient.

In the production of immunity there figure not only the organs of respiration, digestion, circulation, etc., but the ductless glands. An overworked thyroid has often been found to be the key to much disorganization in the ordinary processes of function. Soldiers at the battle front are frequently found to be suffering from this form of debility due to overexcitement. People who allow themselves to become easily disturbed and irritated over the ordinary wear and tear or friction of life may suffer a similar way. It is worth a great deal to an easily excited patient to have the family doctor explain the probable relation between such unfortunate conditions and that all-important governing center known as the thyroid. It is reasonable to suppose that such knowledge would often exercise a wholesome restraint upon those who “let themselves go” when things go wrong. Within recent years a good many of the intelligent lay public have gradually acquired a certain knowledge of that mysterious glandular system, defective function of which they have found out is responsible for certain types of arrested development. When physicians as a
class take the trouble to instruct their patients in relation to those glands, the influence of such information cannot fail to be wholesome.

Unless some great and universal cataclysm overwhelms the human race and civilization is destroyed, it is probable that the problems of life will become more and more complex. If the intelligent races of mankind are permitted to develop to higher and higher forms of civilization and higher education becomes more universal, it can be reasonably expected that much knowledge which is now regarded as technical and only available to trained specialists will in a general way at least become available to the masses. Under such conditions, the associations of physicians and their patients will be more intimate and confidential, with results highly gratifying to all concerned. When these conditions prevail the contrast with the crudities of the earlier days of medical practice will, indeed, be great.

It is pleasant to conjecture a period when a large proportion of the duties of the family physician will be the direction and supervision of hygienic households. It is easy to imagine the gratification with which the highly trained physician will see the various households with which he is established as a general adviser developing such robust forms of health as will make his onerous duties in the treatment of perplexing and oftentimes baffling and acute diseases less and less a factor in his professional life. Under such conditions association with the physician will but seldom carry with it any atmosphere of dread,
but rather an atmosphere of optimism and intelligent co-operation on the part of his clients.

Building immunity to disease, therefore, considered from the scientific standpoint, consists of so systematizing the processes of digestion and of exercise as to raise to the highest possible degree of efficiency all of the functioning organs of the body. It would seem that the enormous benefits in accomplishing such a desirable state of affairs might well justify the laying aside of all prejudices and superstitions and the establishment of such co-operation between the doctor and his patients as to reduce mistakes in hygiene to the minimum.

There has perhaps been no better example recently of a well-balanced mental and physical life than in the instance of the late Joseph H. Choate, for a considerable time ambassador to Great Britain. Mr. Choate was a man of wealth, of remarkable culture, and with exceptional social gifts. His abilities as an attorney are too well known to justify comment. The legends of Mr. Choate which have been passed about in recent years demonstrate the saving influence of a genial sense of humor, which naturally relieved the tenseness of a life of unusual activity and mental strain. An example of the readiness to which his flexible mind could adjust itself so as to bring out the humorous side of any topic which chanced to occupy his attention is given in his quick reply to a guest who was present at the celebration of one of Mr. Choate's last birthdays. Asked who he would prefer to be if he could not have been Joseph H. Choate, the instant an-
swer was "Mrs. Choate's second husband." Such a retort is only possible when there is a perfect mental and physical balance. Mr. Choate was perennially young. He was an extremist in nothing, as evidenced by the fact that the inventory of his estate included a wine cellar, the contents of which were valued at several thousand dollars. To hint that Mr. Choate was in any way at a disadvantage physically, mentally or morally from the fact that he had a discriminating knowledge of high-grade wines would be ridiculous. All of which goes to show that, as aptly stated by Lorand, the keynote of healthful immunity to disease and the encroachments of time is moderation in all things. But many there are with whom moderation in the use of stimulants is impossible.

A few people live to a great age and succumb to the gradual, but ever increasing, burden of years, but the great majority gradually lose their resistance to the disease enemies which are always ready to take advantage of any break in the defenses. Not only are people cut off in their prime or earlier, but the community is correspondingly weakened through the loss of their productive energies. Every family properly instructed by a physician is likely to develop candidates for the advanced immunity class who live their full allotted term of life and accomplish so far as possible what their ambition inspires them to do. This is normal human existence. It is hard to conceive of any more profitable expenditure of the physician's time than to assist in increasing the number of nonogenarians.
CHAPTER IV.

CHILDHOOD AND ITS MEDICAL PROBLEMS.

The average infant born of reasonably normal parents should start out in life with good physical prospects. What that child will be a year or two later depends to a marked extent upon the amount of common sense possessed by the parents.

A frequent remark by a certain wise grandmother was that one of the most beneficial factors in rearing young children was a reasonable amount of wholesome neglect. The child that can be well fed and cared for and at the same time left to its own devices during a good proportion of its waking moments is, indeed, fortunate.

It is a well-known fact in natural history that young puppies or kittens that are fondled too much are apt to become sickly. The young child that is constantly under supervision, continually being talked to and encouraged to show off its various characteristics, is likely to develop overwrought nerves. There is little doubt that much of the sarcasm which has been directed toward the only child has as a basis the too assiduous attention devoted to such a child in infancy and childhood. Such children are prone to become self-centered and introspective, which usually means in adult years more or less mental instability and an unwillingness to assume the responsibility which goes with the better grade of citizenship.

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Probably the foregoing statement is trite and commonplace, but, after all, it cannot be emphasized too often.

It is unfortunate that in this strenuous age more physicians do not have an opportunity to closely watch the development of the infants over whose advent they have presided. In small country towns this custom is usually practicable. In cities, owing to the habit of many families to move into more expensive neighborhoods as the families increase and the parents become more prosperous, it is quite common for these youngsters to pass out of the range of observation of the original family doctor.

Where it is feasible for the physician to exercise watchful care over the physical destinies of the small child until adolescence or later, it can be seen that it is greatly to the advantage of both child and parents. The doctor who is familiar with the digestive history of the child and who has been brought into consultation when the common diseases of childhood have developed, is pretty sure to acquire a practical knowledge of the youngster's physical assets. If he can come in contact with such children sufficiently often to retain a personal acquaintance with them, he is in position to exercise a very beneficial influence.

Nothing is more conducive to such proper physical development than the acquirement of the habit of eating without discrimination any wholesome food which the family menu may provide. What one learns to like in childhood is pretty sure to be acceptable during the adult years. Whenever a problem presents itself
whereby a child exhibits a fussy attitude toward the bill of fare, the doctor should be brought into the case to settle the question. A child is very quick to detect any inconsistency on the part of the parents, and, if the impression is gained that the mother desires the child to eat something that is distasteful simply as a matter of her own convenience, the youngster is quite prone to manifest a rebellious spirit. If in such cases the doctor has cultivated an agreeable personal relation with the child and explains simply and logically the importance of acquiring a liking for all kinds of food, the child is very liable to accept the doctor's explanation as reasonable, and will conform to the doctor's recommendations. This one factor in family health is in itself sufficient reason for intelligent parents to cultivate a personal relation between the family doctor and their children.

Every reasonably sturdy small boy has an ambition to appear manly. If the physician makes it clear to the youngster that it is a "sissy" habit to be always finding fault with the food, it will carry more weight than a great deal of expounding of dietetics by the interested parents. What appeals to very small boys appeals with even greater force to the very small girl.

Most young children have a wholesome dread of being delicate. When they acquire habits which are detrimental to good health, it is to a much greater extent than most people apprehend, because they have never been convinced as to the direct relation between correct habits of eating and exercise and the robust
good health which every well-born child should possess. There is no function of the family doctor which is more important to the family and to society in general than the establishment of a personal relation with the small developing child which will ensure the placing of that child on the right route for health and vigor.

When a boy or girl has reached the reasoning age of, say, six or eight years, it should be possible for the family doctor to have furnished the rudiments of a hygienic education which will materialize positive benefits during an entire lifetime. The civic value of such a course of instruction is almost beyond calculation, while there could hardly be a surer formula for a high degree of professional success on the part of the doctor than to have the personal approbation of the juvenile members of the families under his care.

Children whose parents are afflicted with anxiety neurosis acquire the effects of this neurosis more than they inherit the disease. Even a neurotic woman may become the mother of a perfectly normal healthy child, but when the healthy child has been worried over and scolded for slight infractions of hygiene and kept in a stirred-up mental state through the apprehensions of that mother, the effects cannot fail to be harmful, unless the child eventually ignores such apprehension sufficiently to become immune to it.

 Mothers who begin by dressing their infants too warmly are prone to show continual anxiety a few years later lest the sturdy appetite of an active child leads him to overeat, thus causing indigestion. To
ward off possible indigestion anxious parents will often deprive their children of foods which their healthy appetites crave and which are eminently suitable, merely because they feel that it would be safer for the child to eat more easily digested foods. This is a sadly mistaken policy. The active small boy or girl should be early accustomed to the use of foods which, without overtaxing the digestion, still provide the alimentary canal with plenty to do. The pampered stomach soon loses its capacity.

On the other hand, the small schoolboy's definition of the conical form and mechanical characteristics of the human stomach, in the statement that the human stomach is a comical shaped body which is capable of enormous extension, was probably correct. Therefore it is little short of tragedy when the fear that gratifying the normal and healthy appetite will possibly produce indigestion results in the child being deprived of its normal inherent right to give that importunate stomach of his plenty of occupation. An urchin who has never experienced the surreptitious delights and subsequent pangs which are associated with green apples has somehow been deprived of his birthright.

One of the most unfortunate of parental delusions is found in those cases where the mother gets the impression that a child must not be made to mind when a crisis develops through the fear that the child will become nervously unsettled. Many cases of regrettable self-indulgence in adults are traceable to this unwise viewpoint of parents. The child who is worth rearing at all should be subjected to discipline.
The doctor comes in contact with such examples frequently in cases of small patients who refuse to comply with the requirements of the nurse and especially who object to taking medicine. Some of these cases are quite perplexing. There is probably no province in which the doctor can accomplish more for the hygienic benefits of such pampered children than in the exercise of a certain amount of tact and wholesome advice under appropriate circumstances. There are few children who do not possess a reasonable amount of family pride, and it is along these lines that the physician can get in his work. Even if the small boys or girls, show very little respect themselves for their parents, they expect their playfellows to show respect just the same, and, if the doctor plainly points out to those refractory youngsters that, if they do not mind their parents, it is going to make their playmates lose respect, also, it will start those juvenile minds to working, and if they can be made to see that an exhibition of disrespect on their part toward their parents produces exactly the same attitude toward their father and mother on the part of their playmates, the influence is sure to be beneficial.

It might easily seem to be somewhat remote from the daily routine of the family doctor to be assisting in the family discipline. Nevertheless, there is probably no service which the family physician can render which is more worth the financial cost than in instructing young children as to the importance of getting strong and robust. If they can be made to see that the parents are even more anxious to have them
strong and robust and are making rules for their guidance solely with the best interests of the children at heart, it is easily possible to create a more receptive attitude on the part of such children and thus make them more ready to co-operate with the parents and the doctor in adopting daily habits that will make them strong and healthy.

Of course, it can be readily seen that a considerable percentage of weak mothers who overindulge their children are of a mental calibre that would make them quick to resent anything which they considered to be unjustifiable interference by the family doctor in their household. But it can also be seen, through a little reflection, that the doctor who had sufficient backbone to call a spade a spade in such cases would be pretty likely to secure the wholesome respect of a very considerable number of intelligent people. It is also easy to imagine, although perhaps not easy to estimate, the enormous benefit which might result in many pampered American families if the family doctor could lay aside any habitual policy of supergraceful tactfulness, and when in contact with small citizens who gave the promise of growing up to be spoiled citizens in later years were to adopt a form of "shirt-sleeve diplomacy."

We must not overlook the fact that the psychological element enters into human life at a very early age. Those who amount to something in the general economy of communal life are those who are able to exercise self-discipline and this same element is of almost illimitable importance in the development of a
sound physique. The best possible advice that can be given to a person of almost any age with reference to any individual "symptoms" is to forget them. The person who fears indigestion is always likely to have it, and the same law of psychology holds good in the case of other bodily functions. To have the right attitude is considerably more than half the battle in accomplishing most anything desirable to accomplish. Thus it appears that if the small child is trained to have the right attitude in its daily routine, development becomes normal and symmetrical.

The physician who succeeds in appealing to a child's sense of humor has done much in the establishment of agreeable personal relations. Even the most cantankerous children become more pliable when the situation becomes amusing. Tense moments lose their acuteness and reason asserts itself. This holds good so invariably that it is indeed unfortunate that parents do not more frequently bring this soothing element into common use. The child who will only seem to become more stubborn in conflict with the parental edict often drops his belligerent attitude almost instantly if it is made to appear ridiculous.

There are abundant reasons why the physician should be regarded as an adviser in shaping the child's mental development. Few parents know much of psychology and when juvenile mental problems arise the doctor is as much needed as in cases of impaired nutrition. The best moral instruction alone may not produce the effective influence. The sons of doctors of good standing will bear very favorable comparison
for general usefulness with the sons of clergymen. And so we must conclude that of all the soothing influences which may aid in establishing the child's normal development, an awakened sense of humor is probably the most important. This sense often manifests itself at a very early age. A lady, accompanied by her small son, was making an all-day journey by train. The boy, squirming about in his seat, attracted the attention of a benevolent looking woman near by. She looked approvingly at the youngster and remarked, "Little boy, what makes your hair so curly?" The boy looked at her a moment and then drawled, "I don't know, unless it's because I eat so much hash." The mother was much disconcerted, but with such evidence against her did not think there was any use in attempting a denial, although hash was a very infrequent part of the family menu.

Owing to the frequency with which a slight indigestion or other form of indisposition may cause a rise of temperature in young children, it is hardly practicable for the family physician to be called in all such cases.

Certain routine instructions conveyed to the parents by the doctor will suffice in most instances. If a child is ailing and there is simply evidence of fever, the first thing which the mother should do, of course, is to examine the throat. If nothing unusual is revealed by such examination, it may be assumed for twenty-four hours at least that quiet and a careful diet will probably bring about a normal condition. Even with the disappearance of the fever, however,
there may be no apparent appetite temporarily, but this is but natural. The small child is often better qualified to decide whether to eat or not than the parents. If there are no other unfavorable symptoms and the child is normally healthy, it is pretty safe to assume that the appetite will manifest itself in due season and that the child will make up for all lost time. A doctor of experience well stated the case in the following words: “Leave it to him; he knows better than you do whether he wants to eat or not and whether he ought to eat or not.” In fact, as aforestated, this is generally the case. The adult after an attack of indigestion will often force matters by some form of tonic and tax the stomach beyond its requirements under the existing circumstances, while the child, not hampered by the little knowledge which is sometimes such an embarrassment, will wait until the digestive tract is in readiness to receive and properly digest the normal and sometimes abnormal quantity of food which is urgently called for by the average child after a period of deprivation.

In earlier days the presence of typhoid fever in the neighborhood afforded frequent opportunities for display of apparently remarkable skill on the part of the attending physician. A bad indigestion followed by temporary fever of several days’ duration was often regarded under those conditions as probably typhoid fever, and when the symptoms suddenly subsided and the temperature became normal, the doctor acquired the credit of having “broken up” a bad case of typhoid. Such professional feats are seldom heard of
at present. But there is yet occasionally an instance where a grateful family will congratulate themselves on having a family physician possessed of such ability.

It is interesting to note the marked contrast in the attitude of different families residing under similar conditions in the same neighborhood. In one instance there will be found the family which comes in contact with their physician through the habit of calling for professional assistance whenever there is any evidence of the slightest ailment in the household. Perhaps not more than three doors away will be a family where the children seldom if ever know what it is to have the services of a doctor. With the latter type of parents it may be usually assumed that they regard their more anxious neighbors as being under the sway of their family physician for exploitation purposes. This theory will often seem to hold good for a considerable time, but sooner or later the family which has been immune from the apparent need of medical attendance will need a doctor very badly and will have to have the services of some physician who knows practically nothing as to the constitutional characteristics and early history of the patient. On the same principle certain people save themselves considerable expense for fire insurance, which, however, they need very badly should the unexpected happen.

It is probable that many comparatively uneducated parents are really sincere in their belief that having the family under the supervision of a physician tends to a habit of coddling the children. In the main, however, it is thrift rather than ethical considerations
which causes so many children to pass through their developing years without professional attention, resulting unfortunately in many instances in some neglected form of perversion which would have been promptly detected by a competent physician, perhaps averting a lifelong weakness or untimely breakdown.

These sins of omission on the part of the parents are not altogether their own fault. It is natural that people of thrift with the quite common worshipful attitude toward success should prefer as their medical adviser the doctor with a big practice. Physicians who have this reputation are apt to have considerably more to do than they can give proper attention to and are quite prone to pass over their ordinary routine cases very superficially. This is a great disadvantage to the patient and also a detriment to the standing of the medical profession at large. What could be more natural than that parents who get the impression that the most successful doctor in the community had failed to give proper attention to their children should become prejudiced against regular practitioners and drift away to become the dupes of those of limited education who claim a vast superiority over graduates of high-grade medical colleges?

It is clearly in the civic interest itself that overworked physicians should divide their patients with fellow-practitioners who have not the special personal magnetism to attract large numbers to their offices. Many a physician of excellent qualifications is never appreciated. If the overworked doctor who has somehow become the vogue would exhibit a fraternal spirit
toward his colleagues, it would be much in the public interest and also be a great advantage to the medical profession as well. A prompt visit by a less-sought-after physician may be of much greater assistance than the delayed visit of the practitioner who has more serious cases on his mind to such an extent that he can hardly bring himself to devote even a few minutes to the patient in question.

A woman lived on a farm at a point so remote that busy town physicians disliked to make the journey there. Finding physicians so reluctant to answer her calls, she solved the problem for herself as she explained to one of her acquaintances. She said that she had decided that her best policy was to keep herself supplied with different kinds of patent medicines and use her own judgment. It may not occasion surprise to add that one of her two children, a young man, who should be in superb health, is a wreck.

While we pride ourselves upon our enlightenment as a free people, and justly, too, it is only in recent years that our children have begun to receive a modicum of the attention and civic care that they are entitled to. Public schools, through medical inspection, are beginning to exercise supervision over their pupils, with the object of detecting structural defects at a time when they may be at least partially remedied. But even this system is often carried out in a perfunctory way that fails to accomplish the desired object. The school physician cannot be expected to give more than superficial attention to such cases. He makes recommendations which in a few instances
stir up the parents to proper action, but are in far too many instances practically ignored. And yet a great majority of families who send children to public schools take pride in having these pupils suitably dressed and adequately fed. They do not realize that while being even lavish in the equipment of their children they are neglecting that which is far more important to their later success in life and which would cost comparatively little by comparison.

As stated before, physicians are often reluctant to make recommendations lest the parents should consider them as meddlesome. A physician may give attention to an interesting child of six and take it through a brief intercurrent illness and not see that child again for five years. During that interval conditions may have developed which could have been easily remedied, but which through the neglect or ignorance of the parents, are allowed to produce structural defects which will persist during life. Such incidents are often little less than tragedy.

If physicians as a class would adopt the custom of tactfully assuming a personal interest in all children which come under their observation and would make a thorough examination with the object of recommending correction of physical defects and such a policy would become universal with doctors, the benefits thus resulting would be beyond computation. Every family doctor should call the parents' attention to any neglect of the teeth and should explain to parents, especially mothers, the all-importance of a correct posture.
Such a professional policy would no doubt require considerable time in the aggregate, but it is difficult to believe the average family of even moderate intelligence would not appreciate the interest shown and acquire the custom of bringing the doctor into more frequent relations with the family, thus permitting opportunity for this very important supervision over the physical development of the growing child. It is hard to conceive of any more congenial phase of medical practice for the red-blooded family practitioner than in watching the hustling youngsters of his clientele and making sure that they had a "square deal" at their critical formative periods.

The healing art is one of the noblest of callings, but it is burdened with numerous conventional customs which are greatly at variance with modern enlightenment. Under existing conditions most physicians construe it to be their duty to remain in the background in matters of family health, unless their intervention is requested. This works very well in the matter of adult affairs. Men and women of maturity are free agents, and are supposed to be in possession of mental faculties which will enable them to decide whether or not they need professional inspection. But this philosophy cannot be applied to young children. Their parents are responsible for their welfare, and if they are ignorant or indifferent, the children must suffer the consequences. Reluctance to suggest remedial measures to adults in a family being visited by a physician may be justified; but wherever the doctor goes and there are young children, custom should per-
mit the doctor to show an interest in the health status of these children without same appearing to be meddlesome or evidence of a commercial instinct. A little wholesome tact on the doctor's part can often open the way to the location of some impediment to health in a growing child. That professional delicacy which stands in the way of such obviously practical measures should be relegated to the rear, with many other forms of excess baggage with which doctors have been incumbered in the past.

No one realizes quite as much as the doctor does the crimes which are committed against many children by their often well-meaning parents. There ought to be some way to bring these parents to account, and there is no one who can do it quite as well as the doctor can. Unfortunately, many doctors, believing that they will probably find trouble enough in their pathway without hunting for it, adopt the policy of strict non-intervention. Hence the parents complacently proceed with their child management and carry out any quaint or fantastic theory which may take possession of them.

Nothing is perhaps more harmful from the civic standpoint than the grotesque conceptions of the process of nutrition which well-meaning, but ignorant, parents sometimes acquire from neighbors and irresponsible propagandists and perhaps newspaper writers. They are as illogical as the celebrated author who figured out a suitable ration for his dog. A friend calling at the author's bungalow in the country was told by the colored maid that he was absent. The
visitor, lingering for a few moments, chanced to notice a lean and melancholy dog nearby. Being fond of dogs, he called to him, and he came dejectedly forward. He asked the maid what seemed to be the matter with the dog. “Oh! he’s jes’ stubborn,” was the reply. “He won’t eat his tomatus.” The visitor was astonished. “Won’t eat his tomatoes?” he said. “What do you mean by that?” The explanation was forthcoming at once. “Mr. ———, he says tomatus is a puffec food for dogs. This dog he is stubborn and won’t eat his tomatus.”

Much good can be accomplished by the removal of the child’s usually vague misconceptions of the functions of the stomach. Many quite intelligent parents are nearly as much in the fog in such matters as their children. If it be explained that the stomach is a sort of receiving station where the different food elements are classified, assorted and utilized in the human factory, it will seem less mysterious. And if it can be made clear that the introduction of inharmonious substances into the stomach at the same time may result in these discordant elements starting a free fight among themselves, it becomes more comprehensible. For example, it can be explained that while liberal helpings of pink strawberry ice cream and ripe red watermelon are all right if kept apart, they are considerably like the cat and dog when crowded together in a child’s stomach.

Such illustrations may easily make impressions that will be lasting when dissertations on greediness will be soon forgotten.
Any moralizing homilies which will discourage the normal buoyant optimism of childhood are always unwise. It is a regrettable situation even when the adult acquires a distrust of the good intentions of his stomach. The child should be given to understand that, with anything like reasonable indulgence of the appetite, everything will be all right. Parents often little realize how lasting are the impressions of childhood. The small boy or girl whose only association with the physician is at some time of stress will often acquire a dread that will persist into adult life, and cause avoidance of medical attendance too often until some serious condition has arisen which at an earlier period might have yielded to treatment more readily.

Few young children arrive at the age of ten or twelve without having manifested some subacute condition which suggests a trip to the doctor's office. The child which is pale and anemic, the healthy looking child with a generally bad breath and coated tongue, the round-shouldered child, the child who complains of rheumatic pains of the joints, and many others, all require a general overhauling by the physician. And when this is done and the small patient appreciates the benefits resulting, he has acquired a useful lesson and will probably never join the ranks of those who in a crisis seek for guidance at the shrine of the medical magician or next-door neighbor.
CHAPTER V.

adolescence and the Family Doctor.

To unthinking parents the manifestations of adolescence often constitute merely an annoying problem. To those who are wiser this period is of the most intense interest and even amusement.

The child that has heretofore been placid and amiable under nearly all conditions may develop a sudden and apparently unaccountable tendency to irritability and self-sufficiency. The egotism of this stage of development is, indeed, often perplexing, and if parents show a lack of consideration at this time they may, to a considerable extent, lose their personal influence over their children for all time. It is essential under such conditions that there be manifested a wise forbearance and charitable attitude. In this way the parents can exert a wholesome direction of the mental processes during the most formative period, and after a year or two will be rejoiced to see the good results follow this method of meeting the situation.

Because the boy or girl that has always been tractable and easily managed suddenly becomes stubborn and rebellious is no indication that the child is going to the dogs. It is merely the manifestation of personality without that proper balance of the common sense and good judgment which under fair conditions will be seen later. There is probably no better corrective for the cocky self-satisfaction of this period
than a little wholesome ridicule. When adolescent egotism can be made to appear absurd, it soon subsides, for adolescence is peculiarly sensitive to the appearance of being inconsistent. It is those who are past middle age who feel that they can afford to be inconsistent.

Some parents have an idea that it is undignified to explain the reasons why they disapprove of the plans of their children at this age. This is a mistake. There should always be a reason given whenever it is necessary to exercise any unusual degree of restraint, as boys and girls in the early teens are very likely to develop a high sense of personal dignity and importance. If this dignity is ruffled unceremoniously and ignominiously it breeds a feeling of resentment which is very unfortunate.

There is no such important contract ever undertaken by parents as the education of their children into capable, responsible, and well-meaning citizens. If the father hires a young clerk, he expects to show a reasonable amount of patience in training this clerk to become useful. He gives the reasons why such and such things should be done. In a similar way the mother of a household who engages a young domestic expects to have to devote a considerable amount of time and patience in training this helper so that she may know what to do and the reasons therefor. If such policy is pursued in the ordinary business affairs of life, it follows that in the development of men and women a much greater amount of judgment and patience is required in order that the children may re-
tain absolute confidence in not only the affection, but also the good judgment, of the parents.

It does not follow, however, that, through zeal to exercise the most helpful supervision over their children parents should manifest any lack of confidence. It is an unfortunate situation indeed when children feel that it is a smart thing to be able to "fool" their parents by doing prohibited things on the sly. It is a natural thing to expect that some children at this stage of development will occasionally overstep the bounds of their parents' wishes, but they will not do this to any harmful extent, as a rule, if they understand their parents' motives in exercising restraints.

In extending a guiding hand in the regulation of their children's affairs parents are commonly actuated by two purposes: First, they wish to safeguard their children's health; second, they wish to guard them against improper associations. Here, as before mentioned, it is not sufficient that parents should lay down a rigid rule of action, but that they should also explain the reasons for any restriction that they should place about their children's movements. Gradually these suggestions become absorbed, and the children develop protective faculties of their own. The two basic factors of the future social usefulness of these young people are health and morals. There should be sufficient time devoted by parents to explaining these details so that their children may fully understand their importance.

Unfortunately, while it is theoretically possible for parents to exhibit adequate judgment and wisdom in
meeting the problems of adolescence, practically few parents have sufficient knowledge to deal with these questions without bringing the family doctor into consultation. Whenever a boy or girl of this trying age shows a finicky appetite at the table or manifests unusual mental traits, or has failed to develop a symmetrical physique, it is as important that a competent physician be brought into the family counsels as it is that the child be sent to the dentist at regular intervals. Every stoop-shouldered boy or girl needs medical attention, unless their parents possess much more than the average knowledge of hygiene. At this age the parental admonitions to "straighten up" no doubt help; but if the recipient of this advice be sent to the doctor to talk over the case an impression would be made that is likely to be of much more benefit. Some defect in diet or other hygienic habit will be revealed that will furnish a clue to the cause of the physical deficiency.

Busy housemothers of reasonable intelligence usually try to see that their young children adopt the habit of brushing their teeth, but, owing to the peculiar adolescent temperament, a few emphatic words from the family dentist will usually create a greater impression than oft-repeated reminders by the mother.

One of the advantages of poverty is the inability of the children of such households to indulge themselves in the alternation of sweets and pickles which figures so conspicuously among certain pampered offspring of the prosperous. The children of the aver-
age poor are neither overfed nor overclothed, one of the interesting consequences of which is the development of an apparent immunity to certain diseases. They become accustomed to hardship, although frequently stunted in growth, and, of course, placed at a disadvantage in mental development. Nevertheless, the city family in poor circumstances which may be deprived of its bread winner is generally far better able to look out for itself than the middle-class family accustomed to all the usual comforts and suddenly thrown upon its own resources.

It is commonly reported that recruits for the army who come from city slums bear up under the hardships of army life much better than the boys who come from comfortable homes even on the farms. Although the farm boys are used to outdoor life and present a healthful appearance, they are not prepared to endure wet clothing and broken hours of rest. With such well-established facts it should be possible to make very useful deductions.

A housemother who is wise enough to see the advantage which may result from having the assistance of the family doctor when her children are at the adolescent stage, can probably see greater benefits result from a few dollars thus expended for professional fees than could possibly be obtained from much greater expenditure in any other way.

The boy or girl of twelve to fourteen years of age may have become practically immune to the constantly repeated words of counsel from parents as to the importance of observing certain hygienic rules. But
when they are taken in hand by a physician and it is explained to them that their future health and usefulness may depend to a very considerable extent upon their adopting the right mode of living at that particular stage of their development, and the reasons therefor are explained in a general way so as to be thoroughly comprehended, it cannot fail to make a beneficial impression. It can be taken as an accepted fact that practically every boy or girl has an ambition to appear to advantage in the eyes of his or her young associates. If it is made clear to a growing boy that by avoiding certain hygienic errors he will become more rugged and athletic, and the general principles of nutrition, ventilation and exercise are made clear to him, as any intelligent physician can easily do in a few short interviews, it may easily result in a complete change of attitude. By similar reasoning, if a young, growing girl is made to realize that the adoption of a rational system of eating will have an immediate and beneficial influence upon her personal appearance and practically ensure robust health in later years, she may in that way be induced to avoid some of the customs which have contributed far too often to that delicacy of physique so commonly observed in many American families in easy circumstances.

Two correlative facts may often supply the determining motive in turning these useful citizens in the right direction, viz., the adolescent male secretly desires to appear at a physical advantage in the eyes of his young feminine associates, and the adolescent feminine, however indifferent she may appear on the
surface, has some underlying motive for appearing at advantage in the eyes of the boys. If these children can be fully impressed by the physician with the importance of proper nutrition, suitable clothing, correct posture, and ventilation as a basis for good looks, the problem is practically solved.

One of the hopeful tendencies of the present period is the custom among dentists of noting any abnormality of the mucous membrane of the mouth and throat and advising consultation with the doctor. It is certainly equally desirable that the family physician call the attention of parents to the importance of consulting the dentist when the necessity is apparent. The value of the child is, of course, great in the family circle, but the child is also an important asset to the community, and the sooner all social influences are directed to the conservation of child health, the better for all concerned.

It is a regrettable fact that the majority of parents fail to appreciate the vital importance to their children of having them receive the right counsel and supervision of health at the adolescent stage. It may even be excusable by comparison to exhibit some apparent neglect of younger children, but at this period of development care and watchfulness is all-important. Physical growth is likely to be rapid, and proper nutrition is of the utmost importance. The boy or girl at this period craves plenty of meats and other nitrogenous foods, which should be supplied in abundance, even if some self-sacrifice is involved on other members of the family. It is about this stage that
the germ of tuberculosis may be implanted and secure a lodging place. Nothing is more discouraging to the same germ than to have the blood richly supplied with protein elements. Abstention from such foods a few years earlier or later may not be so harmful, but at this particular stage it is dangerous. It is for this reason that the physician should be given access to the situation. Parents who read periodicals have great opportunities for acquiring ideas on diet, nutrition and general hygiene. Unfortunately, many of these suggestions are furnished by faddists and enthusiasts, and are misleading rather than beneficial. The doctor who knows the family history is the authority who should have the say about such matters whenever a question arises. The doctor is in position to explain the inconsistency of many so-called hygiene experts who have contributed to the great oversupply of literature on this subject. The large appetite for wholesome food which is manifest at this period is or should be a source of gratification to parents.

Perhaps there is as much that is unreliable in the suggestions for clothing and ventilation as in any other department of hygiene. There are writers of repute who make great claims for the beneficial effects of what is generally regarded by parents as insufficient clothing. Their hobby is the importance of children being "hardened" so as to become immune to changes in temperature. It is easy to carry this idea to very harmful excess. It is a well-known fact that young farm animals thrive a good deal better if they are not
required to shiver. Young cattle don't make the proper growth unless they are shielded to a reasonable degree from exposure. As in so many other matters, it is simply a question of moderation. Just because cattle kept in a warm and unwholesome atmosphere will develop bovine tuberculosis is no indication that they should be kept during the cold weather in open sheds. So while it is very desirable that children should have good air to breathe and not be swathed with such an abundance of clothing as to make them tender, it does not follow that they should be required to go half clothed and subjected to a degree of hardship which inevitably reacts upon their health and development. In cases of doubt the family physician should be asked to give his ideas as to what will be best adapted to the individual case in hand.

A physician of note recently published in a prominent medical journal a review of dress and its relation to health. Contrasting the prevailing modes of feminine dress with that of the men he attributed the comparative immunity to catarrhal colds enjoyed by women to their mode of dress, which he says is rapidly approaching that of the Scotch Highlander. He suggests that men would be equally immune if they were to clothe themselves less warmly, entirely ignoring the general structural differences between the male and female. A little reflection shows a very different reason for the ability of women to withstand cold, the average healthy woman being supplied with a development of adipose tissue directly under the skin, which not only contributes to the rounded symmetry of her
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figure, but also provides a warm, fatty blanket, which naturally withstands the onslaught of cold air. As these anatomical differences are manifest at an early age, it is apparent that there is a perfectly natural reason why boys' clothing in general stores will be found on examination to be much heavier and warmer than that supplied in the girls' clothing departments.

Children that are too warmly or not sufficiently clothed are very prone to catarrhal conditions of the upper respiratory tract. These states aggravate any abnormality of the nose and throat of congenital origin, and if allowed to go uncorrected may very materially affect the future health and even the intelligence of the child. Therefore it is the duty of all parents who naturally wish to do their very best to secure lives of future health and usefulness for their children to have their adolescent boys and girls carefully examined by a competent physician at reasonably frequent intervals, in order that any structural abnormality may be detected in its incipiency and promptly corrected if possible.

Naturally in family and social importance the question of morals is not secondary to that of health. Numerous writers have supplied a great abundance of literature which they designed to provide important biological information for the comprehension of the adolescent mind. It is doubtful if these books have accomplished 10 per cent. of the good they are recommended to produce. The average healthy boy or girl is not naturally impressed by the denatured information which may be suitably incorporated in books
for them to read. If parents, as may frequently be the case, desire to have information dealing with the reproduction of the species passed on to others than themselves, there would seem to be no more suitable person to assume this responsibility than a physician, especially in urban communities, where feminine practitioners are available. But the real impressive moral lesson can generally be best provided by the parents themselves in pointing out the real significance of the occasional social tragedy which unfortunately occurs often enough in almost every community to at least provide the desired moral effect. Such instances are concrete and real, and their consequences are apparent, and at this age the impression produced is almost invariably lasting.

If it were not really a serious matter, it would be amusing to consider the importance which is sometimes attributed to adolescent eccentricities. In point of fact, these children are often far wiser than they are given credit for being. If they can be supplied with the knowledge of the real facts they are liable to conduct their affairs with much more judgment than might be expected. Mistakes made by the immature are usually due to an ignorance of the facts. It is the parents’ duty to see that so far as possible the children are enabled to act with the intelligence that comes from general information. Because a boy or girl commits some act which indicates turpitude is no indication that when they understand the possible consequences of such an act that they will not change their course of action. A resident of a rural neighbor-
hood, just about leaving his home, overheard a conversation between his wife and a small girl of the neighborhood, whose home environment was not what it should be, in the course of which the girl told a pitiful story to the effect that her mother was quite ill in bed and wished to borrow a small quantity of tea. The request was granted and in the meantime the man had started down a shady lane in the direction of the residence of the girl’s family. As he was nearing a thicket by the roadside, the small girl passed him on the run, going around a curve in the road. The next moment the alleged sick mother emerged from the bushes and eagerly asked the girl, “Did you get it?” An interesting detail of the case is that the girl thus employed in such a devious errand a few years later made an excellent marriage to a young man of good family and became an estimable woman exhibiting no apparent trace of the bad training she had received from a worse mother.

The intimate relation between good health and good morals justifies further consideration of the subject. Social workers have found that the main essential of health and morals is intelligence. A person may be educated and still be sadly lacking in intelligence. Conversely some very intelligent people have little education. The all-important thing in laying the foundations for the future healthfulness of children is to so develop their intelligence that they may be able to appreciate correctly the relations between cause and effect. To accomplish this very important object it is necessary that the parents or natural guardians
create a capacity in adolescent children to estimate the daily routine details at their true value. This, reduced to its lowest terms, constitutes intelligence. Some parents attach a wholly unnecessary importance to children’s quarrels, whereas they should always endeavor to have a participant in one of these disagreements understand, if possible, the point of view of the other. This gives the child poise and self-restraint, and creates the habit of understanding that, inasmuch as we are all human, it is only to be expected that we are all liable to make mistakes, and that the good qualities of everyone should be brought into the balance to weigh against their bad qualities. The mental equipoise thus secured is worth a great deal more than it could ever cost.

Perhaps the most important foundation of equable temperament is a good digestion. Nevertheless it is perfectly possible for a person to find a good digestion to a considerable extent a handicap. A magnificent digestion and intellect are frequently strangers. The ox has three stomachs and probably knows little of the pangs of dyspepsia. The horse, on the other hand, has a more delicate digestion and requires much greater care in feeding. Nevertheless the span of life of the horse is double that of the ox, while the grade of intelligence of the horse is probably four times that of the ox. A somewhat similar comparison may be made between the turkey and the goose, about the only points of similarity between them being that they are nearly the same size and both wear feathers. The turkey knows practically nothing except to eat,
whereas the goose is comparatively intelligent. The
days of the turkey are usually short and full of trouble,
but the goose may live to a great age. And so if a
child is fortunate enough to be able to appreciate the
real significance of the daily happenings and to esti-
mate them at their approximate importance, this habit
of analysis will persist during life and exercise a
marvelous influence upon the functions of both body
and mind.

The discomforts of life are either physical or men-
tal. To be able to appreciate the causes of these dis-
comforts naturally tends to eliminate them, thus pro-
ducing equipoise and normality.

It is at about this period of development that
young girls acquire a passionate fondness for certain
articles of food and an equal distaste for others.
When such occasions arise a trip to the doctor is very
much to be recommended. The protestations of the
mother may not prove equal to the situation. But
the doctor can explain how important it is that a
person should be able to eat almost all varieties of
food. They can make clear to these incipient young
ladies that it is not exactly good form to be fussy
about eating when being entertained. That in itself
has some weight with a bright young girl who does
not wish to appear at a disadvantage in that way.
Further than that it can be explained that the use of
some of the coarser foods and vegetables is absolutely
necessary to the proper functioning of the intestinal
canal. With an understanding of the real scientific
facts the matter will take on a very different aspect.
Every normal boy or girl desires to be vigorous and thus be able to avoid illness. If all this is made clear, and it is understood that the use of diet restricted chiefly to meats and starches will tend to a more frequent development of indigestion, rises in temperature, and a muddy complexion, the parents’ task with that girl will be much simplified. It cannot be impressed upon the public too strongly that the less the digestion has to do the less it is capable of doing.

The chief qualifications of the family physician are his technical knowledge of the healing art and his philosophy of life. Of these two factors in professional success, the latter is often of the most importance in dealing with normally healthy children. The influence which a wise physician may exert upon the adolescent boys and girls of his clientele is practically without limit. An interview with a doctor at this age may be retained in the memory throughout an entire lifetime. Many physicians acquire a great aptness of speech in meeting different situations, and the thing to be regretted is that they do not come in contact with many of their patients often enough. The following illustrates this desirable qualification on the part of the practitioner. A woman who had considerable bronchial trouble visited her dentist one morning and he told her a certain tooth should be extracted. Knowing her physical history, he suggested that perhaps some form of anesthesia would be an advantage, but that she better have her family doctor decide what it should be. She accordingly went to the doctor, who was just starting on his
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rounds, and put the question to him. His reply was prompt and effective. "The best thing I know of to use in your case is a good dose of spunk." And that, indeed, proved to be all the anesthetic that was required.

Nothing meets with so quick a response from the family doctor in his relations with children as an appeal to this same quality, spunk. A child accustomed to the sympathetic ministrations of an anxious mother will often develop great reluctance to the taking of medicine or otherwise submitting to the requirements of the situation. When the family doctor airily appeals to their spunk, and assures them that he knows they are game, and that they are not going to whine and make a fuss over something that is going to put them back where they can play and have a good time once more, the response is pretty apt to be satisfactory. Some of the bravest patients are children, who become brave because they are stimulated by the doctor’s manner into forgetting to be sorry for themselves. Self-pity is just as depressing in adolescence as it is in any other age, and is one of the greatest of handicaps in disease or in health.

In the average family the boy or girl that has passed through the various perils of early childhood and reached the age of twelve or thirteen with an appearance of reasonable vigor, is generally considered to have ceased to be a hygienic problem. It would be better in many instances if it were otherwise. The adolescent of either sex often requires even more careful watchfulness than the younger child,
for the reason that it is the age when physical defects are accentuated, and unless properly corrected are made permanent.

An astigmatic child can usually get along with reasonable comfort in the earlier years, but will often be seriously handicapped before entering the teens. Therefore the status of the vision should be accurately determined and the question decided whether or not glasses are necessary. Mouth breathing in early childhood disassociated with adenoids may often be attributed to a condition of coryza which is quite common at this period, but if it persists after the age of ten or twelve, something is wrong and a physician should be appealed to. Parents should never feel that they have done their duty by their children until they have a correct knowledge of the conditions of the teeth and upper respiratory tract. Abnormalities of this nature are practically sure to produce permanent stigmata and constitute a handicap through life.

There are many intelligent parents who exercise excellent judgment in the care of their children during early childhood and adolescence, but the quality of their judgment is best determined by their readiness to have their children subjected to medical inspection at frequent intervals.

About the only thing of value in the correct rearing of children that does not carry with it a considerable financial cost at this period is fresh air. Most people are so situated that they can at least supply that important element to their growing children, and it is
probable that the importance of fresh air to breathe is recognized by most families of any reasonable intelligence. It is not sufficient, however, to supply the fresh air. The child must be taught how to utilize it to the best advantage. This involves not only ventilation, but the development of correct breathing habits. Probably no better investment for any family could be mentioned than payment of a small professional fee to a competent physician in order that the breathing capacity and habits of a child may be carefully estimated and proper instructions received for the correction of any defects or bad habits. The man or woman who knows how to breathe properly and can exercise this function without handicap through some obstruction of the respiratory tract has a great deal better chance to become an efficient citizen than otherwise. It is not enough that parents should appreciate the importance of this. They should see that their children have the benefit of professional supervision, as the doctor of the most ordinary attainments must of necessity possess a greater knowledge and better judgment for the correction of any defects of this nature than the wisest parents ignorant of technical medical science.

One of the occasional tragedies that comes to the attention of physicians is the child with a condition of the joints which the parents optimistically diagnose as rheumatism. It would be well for society in general if the public could be made to understand that in childhood there is practically no such thing as chronic rheumatism of the joints. Any condition of this na-
ture which persists requires most careful consideration by a competent physician. To average parents it seems entirely unnecessary that a child in apparently good health should be required to rest in bed for a period of weeks or months because of some sensitive knee or hip joint. It often happens, therefore, that children thus afflicted are either allowed to go without medical attention altogether or, when a doctor is consulted, his recommendations are not carried out. Such carelessness may and often does result in a permanent crippling of the child.

It is not at all surprising that parents who would look upon any failure to carry fire insurance on their house and contents as reprehensible carelessness should habitually take chances in safeguarding the healthfulness of their children. Custom sanctions that form of negligence, and in a measure physicians encourage it themselves. The attitude of some doctors when repeatedly consulted on hygienic problems is one of amused tolerance or even raillery. Parents don't like to appear in the eyes of their neighbors as "making a mountain out of a molehill," so they "guess" that the child that has a good appetite and no rise in temperature will come out all right. But the time is rapidly approaching when the attitude of both physician and parents will be changed. It is certain there should be no more congenial task for a physician whose attention is largely directed to the care of serious cases than to be able to discuss questions of individual cases where the principal problem is one of hygiene.
If the custom of greater professional supervision of growing children should be established, the nature of a physician's duties would be materially changed. The greater the amount of time and talent devoted to prevention, the less the mental strain and professional care involved in rectifying the consequences of neglect. It is merely another application of the formula that the stitch in time saves nine.

It is not sufficient that the parents of adolescent children should be of good intentions. Some very satirical comments have been made from time to time about good intentions. Whenever they are in doubt, it is the duty of parents to secure advice from a physician.

The mother of good intentions often wonders why it is that her boy or girl is so "delicate." She caters to their whims and prepares delicacies to tempt the deficient appetite, but far too often she does not see any occasion to consult a physician. Physicians of experience can usually guess pretty nearly as to the dietary habits of a twelve-year-old girl by the appearance of her tongue. He can form a fairly accurate idea of the hygienic requirements in a three minutes' inspection. It is therefore eminently suitable and business-like for parents, instead of fumbling about in their comparative ignorance, to have a competent physician lay down a hygienic program to be carried out carefully and systematically.

One of the common mistakes made in cases of depressed nutrition, as per above, is where the mother, instead of taking her young daughter to the doctor's
for a general overhauling, manages to consult him herself, incidentally with some other errand. Naturally the doctor is rather guarded in his decision under the circumstances. He guesses that financial prudence underlies this method of bringing the subject before him and offers a few suggestions on general principles which are out of deference to the apparent good intentions and social position of the mother. The general social welfare requires that he refuse to make any suggestions whatever until after a careful inspection of the patient. Country doctors, however, often hesitate to take this position out of regard for possible economic factors which may enter into the case. Let us hope the time is not far distant when they may be more outspoken.

The adolescent child has a value to the public as well as to the parents.
CHAPTER VI.

THE HOUSEMOTHER WHO WORRIES.

It is unfortunate that the woman who, in fulfillment of her destiny, marries and rears children should in so many instances add largely to her domestic burdens by allowing the germ of worry to gain a lodgment in her mental system.

When the carefree maiden assumes the responsibilities of looking after a household she has to bring about a complete readjustment of her mode of life. If she is of an optimistic nature and of reasonably good health, the process of the change need not be especially burdensome. But if she is lacking in self-confidence, even ordinary household cares will weigh heavily. When to these are added the nurture of children, it is only necessary that the habit of anxiety be added to prepare the way for a life of physical and mental strain, if not eventual invalidism.

There is probably no one who can do so much in a few words to inculcate a healthy mental attitude in the young housemother as the family physician. Some doctors, realizing this, endeavor to correct any morbid tendencies which they may observe, but many others refrain from what might possibly be construed as an intrusion into family affairs, and ignore this unfortunate characteristic, to the very considerable detriment of the victims of such habits.

There is probably no mental habit among American women which is more laden with evil physical
consequences to that element of society in which it is found than the anticipation of trouble. Women who are possessed with this anxiety neurosis find abundant opportunities for the entertainment of this undesirable mental guest. Any slight indisposition in the family circle assumes a menacing form. Through fear that trouble will come to them, they seem to go out and hunt for it. They see slights among their friends where no slights are intended. The grocer of the best intentions cheats them. They are suspicious of their maids, question the motives of their children, and keep themselves in a continuous ferment of unrest. Carried to its logical conclusion, such tendencies take all the pleasure out of family life.

When a physician has occasion to prescribe for a nervous woman with husband and children, he needs to become a veritable sleuth. More times than otherwise the real cause of this class of physical ailment is based upon some form of mental perversion. It is practically impossible to catalogue the consequences of this propensity.

Examples of this perverted line of reasoning are found where women with the worry habit are left widows with the maintenance of young children on their hands. Suspicious of the motives of their real friends, they will often listen to suggestions for investment which are made by plausible strangers, frequently with disastrous consequences. The woman thus left to battle alone who rises to the occasion and rears her children to be good citizens is usually the
optimist whose mind is not poisoned and depressed by doubt, fear, and suspicion.

Any trained business man will agree that mental depression distorts the judgment and oftentimes reduces the business capacity to the lowest minimum. The same rule of psychology which applies in business applies in the household, and no one is so well prepared to make these lessons clear to the housemother as the family physician, familiar with the physical conditions of the different individual members of the family, and with the economic conditions as well. There is little advantage in prescribing digestive tonics and nerve panaceas unless the corroding cause of this trouble can be removed. Comparatively few of the lay public appreciate the untold possibilities associated with mental depression. An example is the following.

A clergyman who was naturally apprehensive and who by rigid economies had succeeded in saving a little money was induced by a relative to invest this nest egg in a business enterprise. A little later the borrower became financially involved and the poor clergyman found himself in danger of losing all he had. In the bankruptcy proceedings the clergyman was placed upon the witness stand and subjected to vigorous cross-examination. Although there was nothing hostile in this line of inquiries, the clergyman took it very seriously, and his anxiety and anguish at what he considered to be a crisis in his affairs were so great as to bring about complete prostration, with collapse of the digestive functions. He never recovered his health.
This instance illustrates the natural morbid consequences of the worry habit. This clergyman was possessed of the anxiety neurosis which reached its culmination when he was subjected to a little unusual strain.

It is said that there are only two classes of men who do not understand women: the men who are married and those who are not married. It is probable that in the abstract the average doctor understands the married feminine better than anyone else. It is to the doctor, therefore, that appeal should be made to save the neurotic housemother from herself. Things which to an outside party are the simplest possible to understand are often the most difficult for a certain type of woman to estimate at their real value.

Every grown-up man will remember that in the elementary schools the girls were generally the quickest to learn numbers; but the modern high-pressure woman seems to have forgotten that there is such a thing as addition and subtraction, at least as relating to her reserve energy. She wastes this vastly important dynamic reserve with a prodigality that often produces a subconscious question in the mind of the onlooker as to whether the woman is quite right in her head. Very often this is the crux of the whole situation in building up the overtaxed mother of a family.

In a great number of cases the doctor will find that all such details as diet, tonics, and recreation are in reality subsidiary to the main question, which is to prevent the patient from squandering her nervous en-
ergy. When it can be fairly impressed on a woman of this type that it is not only possible to overdraw this reserve, but, on the other hand, to build it up, much will have been gained. Great significance may be associated with success in this endeavor. The doctor who has taught one of these victims of misdirected zeal to appreciate not necessarily her limitations, but her capacity for rebuilding under fair circumstances, may have changed the entire history of a family.

In providing this essential line of instruction it is important that nothing be done to arouse apprehension. To tell any person that he must do certain things or he will become prostrated is often to hasten the untoward event itself. While he may need the warning, he needs encouragement more. Therefore the stress that is placed on the desirability of building up a nervous efficiency that will enable the interested party to stand the jolts of ordinary wear and tear opens up an exceedingly attractive vista, and is encouraging and constructive rather than the reverse.

One of the common manifestations of a progressive loss of nervous reserve is thus seen in the woman who works “on her nerve.” A counterpart to this is observed in small children who remain in the city through a hot summer. At the beginning of the heated term they will become unduly active as the weather grows hot. After a few weeks evidences of exhaustion will appear, and they will become languid and indisposed to activity. Naturally the proper policy with both types is to restrain such unnatural activity at the outset, thus holding in reserve, so far as pos-
sible, the natural nervous energy. Everyone knows how exasperating it is to overwrought children to tell them they must not persist in the play that engrosses them, but must stop as it is bad for them. However, to divert their attention to something more quieting and picture out to them how nice it would be to get a good sleep and rest and feel fine the next day, somehow appeals. One policy is pessimistic, depressing; and the other is optimistic and constructive. The comparison between the overworked housewife and the child that plays too hard will not seem illogical to those who have had actual experience with both types.

Again comparing the high pressure housemother with her children, you find a marked dissimilarity in attitudes. The greater the anxiety on the part of the mother, the more marked the self-sufficiency of the child. The mother who allows her children to know that she is anxious about them plays into their hands. The teacher in the schoolroom who displays a similar mental attitude soon knows the meaning of trouble. The lack of poise on the part of the mother supplies an almost superhuman poise on the part of the children they are trying somewhat unsuccessfully to control. The distracted hen who has hatched out a flock of ducks and has seen them march out deliberately, heedless of her protest, into the water, has her human counterpart. In fact, the anxiety which hens often manifest over their offspring may in a measure account for the interest which many women take in poultry raising.
At no time does woman conserve her health and energies so well as when assuming that attitude of calmness, repose, and self-poise which has characterized most of those women whose names have come down through the records of time. The girl who, in the premarried state, kept her admirers "guessing" has only to retain this pose in the management of her children and the power of suggestion will do the rest. So we see on every hand the two types of mothers; the one, calm, self-possessed, an enigma to her children, and who controls them with apparent ease; and the other urging and imploring her children to do the right thing and so evidently afraid they will not do the right thing as to reveal her entire incapacity to govern. The same relates to other relationships, friends, relatives, maids. The woman whose social and family attitude is always more or less of an imploring one, naturally dissipates her health and energies and eventually loses all her personal force and influence.

These considerations may seem somewhat remote from the routine of the busy family doctor, but they constitute the crux of a great number of clinical problems.

To live a normal life one must systematically accumulate a sense of fatigue as the day draws to a close. The person who has put in a busy day and feels "tired as a dog" and to whom the bed "looks good" has prepared himself for a good night's rest and a refreshing sense of renewed strength the next day, provided that the tax upon the nervous system has not been out of proportion with that upon the muscles; hence the su-
preme importance of teaching those adults who are carrying heavy burdens, especially women, to make a study of preserving this proper equilibrium. The physician who educates his people in this respect will find he is appreciated all out of proportion with what might seem to be the value of the service. It enables a person to make a proper estimate of his reserve powers. Such is just as useful in its place as any other knowledge of the daily routine, and is calculated to dispel the habit of worry. It is the vague, mysterious, impending calamity which is prostrating to the average man or woman, and to know how to dispel worry is to enter upon a new existence in a large majority of cases. Many functional disorders seem to disappear with the banishment of worry.

When the mother of a family with an anxious trend of mind has had made clear to her by the family physician the functional disturbances which are more or less surely identified with apprehension, it stands to reason that any person of tolerable intelligence will endeavor to avoid mental habits which invariably lead to physical discomfort. By being able to associate the effect with the cause, even the most primitive type of individual must instinctively seek to prevent that which inevitably leads to the unpleasant effect. One great advantage in these interpretations by the family physician is that it teaches parents to recognize early signs of abnormality in their children, who, under the circumstances, are naturally brought to the physician for attention before such conditions have become serious. This raises the standard of medical practice to
a much higher plane. There is nothing especially romantic or alluring in relieving the unpleasant consequences of gluttony or any other form of excess. The physician who can lift his daily routine to the study of the correction of moderate abnormalities in people who should easily develop a good physical condition is sure to have an opportunity to extend that field of endeavor and will acquire an increasing zest in his professional work rather than that sense of weariness and disgust which eventually overtakes the physician who is constantly trying to correct the results of gross ignorance. Satisfaction of accomplishment of actual results that are a permanent benefit to the community is great, and no day is ever quite long enough for the physician who is engrossed in such congenial tasks.

A familiar salutation of a generation ago was “How do you think you feel?” This was before the days of specialists in suggestion and so merely a catch phrase. In these times it has a great deal of significance. While a person’s health depends upon fairly efficient function of the basic bodily organs, and while, if busily employed at congenial tasks, these functions may be maintained perhaps for years, nevertheless the real sense of well-being which makes life worth living is based upon a natural optimism, which, reduced to its elements, simply means taking a cheerful view of everything. It would be well if the words “keep cheerful” could be incorporated in every prescription written by a family doctor. This does not imply a selfish lack of sympathy for the world’s mis-
fortunes, whether they are personal ones or more remote. We hear of people who are "as cheerful as the mourners in the rear coach." It is not probable that these same mourners in the rear coach are lacking in sympathy, but that they have accustomed themselves to the trials of this life so as to be able to throw off the incubus on all possible occasions. Women who are disposed to take a sombre view of life should be advised to sing at their work when possible. The woman who sings and the man who whistles generally keeps cheerful and thus relieves the drag upon the bodily functions.

Of course, it might be said that change of scene will accomplish wonders for mental and physical depression. This is so evident that it does not admit of argument. It is unfortunately a fact, however, that comparatively few housemothers are eligible to this form of suggestion. Mostly they have to "stay by the stuff" year in and year out, and change of scene is as much beyond their reach as a limousine. A better suggestion from the family doctor is to urge his worrisome woman patient to look about her and see how habitual pessimism and apprehension works out with others. She will not have to look far to see examples which, in the light of this new suggestion, will be very educational in their influence. What seems to be virtue in the first person becomes very tiresome and unattractive in the third one. It is like getting a real good look in the mirror in a new light. Probably no mental habit is more calculated to dispel the atmosphere of conjugal romance than the
development, by the wife, of a sombre outlook upon life. The average breadwinner prefers to do what worrying seems to be necessarily associated with his business affairs, and, if anything like a normal man, he leaves his business burdens behind when he sets out for his home at night. If he finds his wife oppressed by household cares and prepared to fill his ears with tales of woe, he has the alternative of tackling the hardest job of the day and exerting himself to cheer her up, or of getting through the evening meal as expeditiously as possible and then seeking a more cheerful environment. Too often he adopts the latter course, perhaps with the result of giving his wife something real and tangible to worry about. Naturally the latter state of the woman is worse than the first. So we have, as a result of her yielding to the little warping cares of domestic life, one of those silent tragedies where the husband and wife outwardly present the appearance of conjugal harmony greatly at variance with the facts—that is, unless the mutual dissatisfaction leads to an open break.

Many a woman of anxious temperament, yoked unequally with an optimistic husband, regards herself as a family martyr when the husband is the real martyr or could be if he would. To be sure, an easy-going husband can carry optimism to excess, as indicated by the New England legend which tells of the woman who roused her slothful husband from slumber early one morning and said, "John, do you know that all we have in the house to eat is a turnip?" "Oh! well," was the reply, "it isn't every poor devil
that has a turnip.” So saying, he turned over for another nap.

While these domestic jangles are primarily of social significance, they are so plainly causative of depressed function as to be life shorteners. They therefore come within the domain of the physician. Certainly the clergy will hesitate to interpose in matters so difficult to determine. The mother-in-law who might be supposed to possess some knowledge of such a household is not noted for her success in pouring oil upon the troubled waters. But the family doctor can adjudicate many domestic problems from their association with the inevitable depressing results upon the health. He is in a position to point out the effect and identify it with the cause.

When all is said on this important subject, there can be but one logical conclusion, which is, that all that is possible should be done to educate the American people as to the consequences of overtaxing the nervous system—the national vice. The stimulating climate, social ambition, the desire to have not only the necessities, but the luxuries, all tend to develop an overwrought nervous state. This means a lower power of resistance in successive generations, and especially nervous instability. Many estimable citizens are on the borderline between mental poise and insanity. They need to be told how to read the danger signals. This is a task which rests with the medical profession. The doctor who devotes the major part of his efforts to tinkering on the stable door after the horse is stolen is not getting much satisfaction out
of his profession. Because he does not like to meddle with people's personal affairs he adheres to a rigid conventional code, regardless of consequences, in the families under his supervision. The place to begin that line of instruction is with the mothers of families. The woman who can read plainly the signs of oozing of the nervous reserve, either in herself or in others, must be a very irrational person or she will endeavor to arrest the process of waste.

One of the most valuable services which can be rendered by the family doctor is in developing an optimistic belief in the mother of a family as to the vital force of her children. Many women who are kept in ignorance of family hygiene come to regard the raising of their children to maturity as largely a matter of luck. If a child in the community succumbs to pneumonia superinduced by the gross ignorance or carelessness of its parents, it is but a natural result of a definite, preventable cause. Naturally a physician does not talk about parental neglect, at least specifically; but he can point out the effect which follows bad judgment on the part of parents in the care of their children, and comment on the revealed capability of the child to recover after a hard tussle with some intercurrent illness.

In order to comfort parents who have been bereft of their children, well-meaning friends, and especially the clergy, often refer to the untimely death of healthy children as acts of Providence. This is naturally soothing to a woman who has exhibited gross carelessness in the care of the child; but it is nevertheless con-
trary to public welfare. It would be well if every case of the unnecessary sacrifice of children through the ignorance and neglect of their parents could be definitely made clear to the community.

Given half a chance, practically every normal child will weather the storms of childhood and develop into maturity with a strong, rugged constitution. Exceptions are a small percentage, where through accident or unusual direct exposure to disease a case is hopeless from the start; but a much larger class of fatalities can be traced directly to the ignorance, laziness, and general incapacity of the parents.

The mother of children of fair intelligence, properly instructed, and who is conscientious, should not be allowed to gain the impression that the rearing of her children to maturity is a matter of luck. It is, on the other hand, a matter of practical assurance of success if she uses proper judgment and sees to it that certain physical defects do not sneak in and obtain a lodgment with her children without her knowledge. If instructed that she can safeguard their physical status just as she looks after the well-being of their teeth by occasionally having her offspring inspected by the doctor, and that their safety is otherwise chiefly a matter of giving them the right things to eat and keeping them properly clothed, with plenty of exercise and fresh air, it is calculated to lift a burden of real or subconscious anxiety from many a household.

One of the most depressing symptoms of the housemother who is possessed of the anxiety germ is self-pity. By comparison with some of her girlhood
friends who have acquired the conjugal status without the responsibilities of offspring, her lot seems hard indeed. The more she thinks it over, the larger the "lump" in her stomach. She cannot see why she should be tied down by children and her old chum in high school should be floating around every night with her equally carefree husband. The physician should be alert for the detection of any of this form of mental depression, and should point out in plain American language the great superiority of the wife who is rearing future American citizens by comparison with any married woman on earth who is childless.

Occasionally there is a woman who scorns to entertain the idea that she is a martyr because she has a heavy burden of care of children. A girl of good family in a New England town married a promising young man and there were children. The husband was unfortunate in business and there were more children. Whereupon it naturally followed that the wife and mother of the numerous brood had a pretty hard time to get along and care for her family. In a burst of confidence one day she told an intimate woman friend that it had been a hard struggle, indeed, but the hardest thing she had had to contend with had been the numerous instances of misdirected sympathy on the part of her friends with few or no children, who could not understand how, with her large family, life could be anything but a horror. And yet from an outside standpoint it is easy enough to understand the attitude of the average married woman with the conventionally small family. Overindulgence of
the only child can usually be depended upon to develop characteristics that will make the misguided parents glad, indeed, that they have but one.

A great deal of unnecessary anxiety is endured in silence by women whose children present unusual physical characteristics. Subconsciously they often develop habits of indulging some child with dietetic idiosyncrasies or an unusual nervous temperament. When the doctor gives suggestions as to a proper selection of foods, he often ignores that which is of far greater importance. He fails to make clear to the mother the reason why "one man's meat is another's poison." A child that consumes too many sweets, and has an antipathy for milk, and becomes excitable and a source of continuous care to parents is not necessarily a little angel making a very brief stay upon this planet. The spiritual appearance of the child in most cases should suggest a marked correction in the child's habits rather than the too-fair-for-earth diagnosis. The woman who slaves to satisfy the whims of such a child during its first few years of life can be expected to keep on slaving after the child has arrived at maturity. The physician who has the assurance to convince such a mother of her mistake at the outset has conferred one of the greatest possible favors. The only practical way to rectify such a situation is in explanations of physiology and psychology. Any sensible woman who understands these two sciences in their application to a child of unusual temperament is pretty sure to adopt an optimistic attitude and language which will be reflected in the child itself,
and perhaps completely transform the entire family atmosphere.

Of course, we are all inclined to develop hobbies. One of the most common theories of the mothers of young children is that if the child takes plenty of milk, the nutrition problem is solved. However, this basically sound method of feeding can, of course, be carried to extremes. The child of two years or older should not be so saturated with milk, so to speak, as to lose its normal keen relish for other foods. For this reason, it may be the mother's fault if the child displays a lack of appetite at meal time and too much temperament at other times, which is quite likely to happen unless a properly balanced dietary is arranged to provide useful employment for the entire digestive system. Even the wisest mother or opinionated grandmother is hardly qualified at this present day to lay out such a program.

Among the great achievements of the present age general popular enlightenment is not the least remarkable. Every physician now appreciates more than ever before the transcendent influence of the mind upon the human body and its functions. The benefits of wealth, friends, social position, and a highly developed system of education may, indeed, largely be neutralized by the habit of mental depression and pessimism. Under the baneful influence of a habitually despondent mental attitude, the digestive processes become perverted, the elimination of toxins retarded, and the span of life materially shortened.
Many otherwise highly intelligent people are more or less addicted to this habit, chiefly because they do not appreciate its consequences. Under such conditions a vicious circle is established and the mind and body act and react upon each other.

In determining the contributing causes of the morbid state of health of mothers of families the habitual mental attitude should be weighed as carefully as any other item in the symptomatology. Very often, if the facts were known, the mental state would assume predominant importance. It is not enough that the doctor should advise such a patient to be cheerful. He should take the time to explain fully to the complete understanding of the victim of these vicious mental habits just what the effect is, not only upon the members of the family and the circle of acquaintances, but upon the general functional efficiency of the patient. There are hosts of women who, if thoroughly enlightened in these respects, possess the intelligence to radically change their attitude. It can be done, and the physician with a fair knowledge of psychology can tell how it may be done.

The great panacea for mental depression is the development of a sense of humor. There is not a man, woman, or child of ten years and upwards who does not come in contact every day with circumstances and curious idiosyncrasies that possess in themselves all the elements of the incongruous and the humorous. Everything which will produce a laugh in the household is a therapeutic agent of the highest importance. Indeed, in the general analysis, it often happens that
there is no one who contributes more to the cheerfulness of the fairly intelligent family than the person of abnormal seriousness who can never see the funny side of things. Such people should be, if possible, laughed out of their self-consciousness, and thus forcibly required to become normal beings.

A common figure of speech of an early era described the acquisition of certain mental kinks as having been absorbed with the mother's milk. This theory would hardly bear the light of our present knowledge. Many a mother of children with profoundly serious views of life, and whose children might naturally be expected to develop a sombre temperament, has been laughed and ridiculed into habitual optimism by these same children after they had reached the age of understanding. Perhaps there is an antitoxin in the nutriment supplied by such mothers that exerts a more benign influence than has been commonly believed. Let us hope so at least.

Under the beneficent influence of the optimistic temperament friends spring up on every hand, good qualities of people assume supremacy over their bad qualities, the pestiferous pranks of the small urchin appear in a comical light, the monotonous daily grind assumes a new interest, and the complicated human mechanism takes on a new efficiency. Millions of American housewives possess the intelligence to appreciate these facts at their real value if they could be explained carefully by the family doctor. It is a large contract, but the doctor is accustomed to large contracts.
CHAPTER VII.

THE TUBERCULAR SUSPECT.

One of the greatest questions of the present hour and perhaps of the next century is the correct definition of the rights of the individual.

While it may be conceded without argument that society may and justly should protect itself from the individual, it is a basic principle in all Anglo-Saxon countries that there must be no encroachment upon the inherent rights of the same individual, no matter how humble may be his situation in life. A system of government formulated solely from the standpoint of the welfare of the social state in general is intolerable in the eyes of every self-respecting citizen.

Tuberculosis is a menace from which the community must be protected. In order to accomplish this it is very important that physicians and sanitarians have the confidence and co-operation of the people in the tenements. There is enough social unrest already. There must not be added to any unreasonable feeling on the part of the poorly educated people that they are being exploited economically a further impression that the health authorities are a natural enemy.

Therefore when it becomes necessary that the tubercular patient of the tenement districts go to a state institution, it is not only important that everything be done to remove any feeling of resentment on
the part of the family of the patient through his forced removal, but the patient's idiosyncrasies, his power of resistance to cold, and his digestive peculiarities should be given such consideration that when he comes back to his friends, the reports he makes will be calculated to create a sense of confidence and satisfaction among his relatives and friends.

One of the most important questions which has a bearing upon the prevention of tuberculosis is the rapidly mounting price of milk. While a community may naturally be desirous of excluding from its markets milk of tubercular herds, the wholesale application of the tuberculin test to dairy cattle seems to be inevitably followed by a shortened supply of milk. The question may therefore well be raised whether some system of division of the herds that will permit the milk of apparently healthy cows, which, however, have shown tuberculin reaction, may not under a system of careful pasteurization be used with safety. Otherwise the alternative seems to be so high a price as to induce many people of large families to economize in the use of milk beyond the lines of safety. The rapid expansion of tuberculosis among the children in the war zones in Europe shows what happens when the use of this natural food is too much restricted.

According to the popular mind, a person is either tubercular or not. If a person is affected with tuberculosis, that person is a suspect, an object of question and doubt. If they are not infected with the tubercular germ they are normal. Therefore it is easy to
imagine the sense of dismay and often of despair which overtakes the person who feels that he has been "accused" of tuberculosis.

Of course, this is all absurd from the standpoint of the physician. There are many people who go through life in very good health apparently who might have at some time in their history shown the characteristic reaction from tuberculin. Fortunate circumstances and abundant nutrition have enabled them to overcome this enemy in ambush before they have even suspected its presence.

A prominent physician of ability some years ago after extensive clinical experience declared tuberculosis to be primarily a nervous disease. Year after year he took advantage of every opportunity to emphasize that belief. Naturally, the medical profession in general do not accept that view, believing that the nervous condition associated with tuberculosis is the result rather than the cause of the infection. Nevertheless it seems to be most common among practitioners to look for a tubercular cause for nervousness.

Now, in the instance where a nervous patient falls under the suspicion of a certain type of physician and is told in an impressive manner that he probably has tuberculosis, a sort of panic takes possession of the patient. The physician in such a case departs entirely from the conventional mode of handling the average nervous case, and instead of holding out every encouragement, with the object of building up the patient's confidence and inspiring him with a determination to recover normal physical poise, he practically
destroys such remaining confidence as the patient has been able to retain. The tactless type of physician does this apparently because of the idea that it is his duty to society to point out definitely and positively every tubercular case. Such a policy, even if necessary, can be carried out in a manner little less than brutal. As said before, nothing should be done if it can possibly be avoided that will add to social unrest.

There are cases where patients, naturally optimistic and of iron nerve, may be promptly advised that there are reasons to suspect tubercular infection. It may even be expedient to frighten them a little, in some instances, in order that they may be induced to exercise that degree of prudence which will hold out the hope of arresting the infectious process. But even then it is questionable whether it is expedient to impart such a dismal warning, unless there is conclusive evidence of actual involvement with the dread disease which may infect others.

Allusion has been made to rest and good food as the chief upbuilding factors in all conditions holding out the suspicion of tuberculosis. A third factor may be mentioned which is equally important, namely, an optimistic attitude on the patient's part. It is a difficult task for the physician to inspire that optimistic attitude coincidently with the announcement of what many neurotic patients would consider a death sentence. Suppose, on the other hand, that the patient is allowed to believe that, whereas he has symptoms which are often associated with pulmonary involvement, those symptoms may quite probably be due to
other conditions, and that the doctor is going to act on that supposition until he has reason for a different view of the case. In this way the dread possibility is a sort of suspended sentence which good behavior on the part of the patient will in due course of time render null and void.

Many physicians of material minds seem to discount the psychological element in treatment of patients presenting suspicious symptoms of tuberculosis. Their attitude seems to be that the germ of that disease does not in any way find his offensive slackened by the mental attitude of the patient. But in view of the depression which may result from fear and morbid introspection in states of comparative health and the consequent effects of same upon the digestion and nerve poise, it would seem likely that a patient's chances for building up a defensive status in case of infection must of necessity be greatly increased if he is in a fairly optimistic frame of mind.

A certain degree of camouflage is allowed the physician in most clinical work, but there are physicians who would prohibit it entirely in the treatment of those whom they suspect of pulmonary weakness. On the other hand, there are physicians who at least trespass upon the borderlands of quackery in their endeavors to undo the effects of too much candor on the part of some other doctor. As in many other problems, the middle course is the best, viz., to regard the patient as a suspect where apparently necessary, and at the same time postpone as long as possible any decisions which will lessen the patient's optimism.
Many a heartsick patient, unwilling to believe the unqualified verdict, has resorted to the irregular practitioner, with a pathetic hope that by some magic the evil spell might be lifted. In an instance of this kind a young woman with small children, panic-stricken at the prospect of soon following to a consumptive's grave her husband who had died but a few months before, abandoned all hope of relief from her physician and took a long journey to consult an advertising quack who prescribed a concoction for her which contained, among other ingredients, the ashes remaining from burnt crêpe. Another victim of the disease in the same rural community consulted a spiritualistic medium who claimed to be influenced by a wonderful medicine man. He soon abandoned hope in this instrumentality, however, as the remedies recommended were so markedly drastic as to show that they were a menace rather than any possible help. People are wiser in these days, but human nature is much the same at all times. Of all the remedies at the disposal of the practitioner, nothing equals in efficacy a well-sustained hope of recovery.

When, in the light of our modern knowledge of bacteriology, the germ of tuberculosis is definitely located, it is, of course, unwise to conceal the fact from the adult patient. The great problem thereafter is to establish a routine calculated to maintain, as far as possible, such sense of well-being as may yet remain in the patient. Any feeling of comparative personal comfort is an enormous help in maintaining courage and determination to overcome the disease.
It is said that in some northern climes many elderly people of good health retain such a persistent dread of the coming winter that they cannot even enjoy the present summer. When such a state of mind can exist with people in normal health possessed of means to supply themselves with the conventional comforts of life during the cold months, what must the attitude be of the morbid type of tubercular patient who has existed through a long, cold winter in an open shack? Numerous cases are recorded where patients have endured one such winter in the mountains with a tolerable degree of courage, but have failed to materialize the expected improvement when the summer weather arrived, largely because of a horror and dread of the prospect of going through another open air winter in the great fight against the disease. Many patients arriving at this mental state have clearly stated their preference to die indoors in comfort rather than undergo the hardships of the freezing process of cure another winter. Where the patient exhibits this pathetic mental attitude, some less radical method should surely be adopted.

Therefore it would seem to be a safe conclusion that, so far as possible in the treatment of all chronic diseases, it should be a first consideration to maintain the sense of well-being of the patient and an optimistic state of mind. The expected gains which may be made by resorting to extreme measures which are temperamentally abhorrent to the patient seldom materialize.

Some of the worst sins of the past which have been committed in the treatment of tuberculosis re-
late to nutrition. Acting on the principle that good food and abundance of it was needed, there has been in evidence an apparent belief by some practitioners that more good food would be still better for the patient. There are some people so constituted gastronomically that they can eat more or less continuously and not show any immediate bad results. It is questionable, however, whether some patients are not often injured more than benefited by forced feeding. To be sure, febrile cases of tuberculosis present in their clinical aspects a race between the progress of the disease and the nutritive process. But, in formulating the ration system in such cases the reasonable comfort and sense of well-being of the patient should be regarded as the index.

When the question arises as to which is best for the patient, home treatment or institutional, the financial circumstances of the family should not be altogether the determining factor. One type of patient will welcome an opportunity to get away from home and take chances among strangers in a strange land who are in the same predicament. Some people are disposed to be of an adventurous temperament under such conditions and glad to make their escape from ill-concealed apprehension on the part of friends. In other instances the patient who, in a fair state of health, is diffident and indisposed to mingle with strangers, finds it all the more a tax upon the courage to leave home behind. The psychological effects on such a patient are so radical that they should not be overlooked.
The drawback to all regenerative programs in the home is the difficulty in having the doctor's recommendations carried out. This is due to an ignorance existing among the general public which is far more excusable than on the surface it might seem to be. When physicians are laying out a radical course of treatment, what could be more natural than that the anxious family should be disposed to question a policy of regeneration in conflict with the patient's well-known idiosyncrasies and with the collective opinion of the household? For this reason, it is very important in all reconstructive cases that the physician explain, with the utmost clearness, the reasons for his recommendations, and to make them, if possible, square with the judgment of the family. Such being the case, it ought not to be difficult to secure the intelligent co-operation of the household, thus supplying the patient with all hygienic advantages without the depressing mental drawbacks above mentioned.

Many a case of tuberculosis can be fought to a standstill in the home by means of an intelligent campaign in which physician, patient and family in general all co-operate. The educational benefit of such an achievement is likely to be great throughout the entire circle of friends. When a patient is branded as tubercular and whisked away to some retreat, the psychological effect on the community is very different. It is apt to develop a feeling of apprehension on the part of those of the community who may be suffering from a protracted cold or other form of physical depression. On the other hand, the successful battle in
the home by means which are widely known is not only calculated to inspire a feeling of confidence, but at the same time causes every household familiar with the facts to instinctively and often automatically establish a lookout for any unfavorable symptoms which may manifest themselves in the family circle. The delicate young girl who allows herself to become so absorbed in her studies that it affects her appetite is far more likely to receive proper attention by her busy mother if the details of a hard and successful tussle with tuberculosis have become generally distributed throughout the community. Parents familiar with such instances appreciate more than ever before the importance of a stitch in time.

While it is well known that there is a sound physiological basis for the intense craving which many children have for meats, it is not as well known as it should be that this craving if gratified is calculated to have a life-saving influence in the prevention of tuberculosis. Such important items of information should be widely distributed by physicians, in order that parents may appreciate the importance of furnishing a dietary for their children which supplies these necessary prophylactics in the blood. Too often parents allow their children to fritter away their digestive power by eating foods which satisfy hunger and the special fancy of the individual palate, but which are at the same time depriving the organism of the antitoxic elements which provide the main protection against tuberculosis. At this critical state in the physical development the family physician may not
see a prospective tubercular patient from childhood until some suspicious illness in early adult years spurs the parents to secure his advice. Frequently it is found that a heavy penalty for the careless supervision of adolescence by the parents is likely to be exacted.

In considering the advisability of treatment in the home, much depends, of course, upon the family atmosphere. Unless there can be a habit of cheerfulness among those who come in contact with the patient, removal to a sanatorium is naturally indicated. Too tender a solicitude on the part of an anxious mother is sure to be depressing. On the contrary, a resolute determination to carry the patient through to recovery is a great moral support, imparting courage at the inevitable periods of depression. Mental telepathy is a real and often powerful influence which should be invoked to the limit.

The trite saying that life is a battle applies in intensified form in an active case of tuberculosis. Every item, however trivial, counts. The case presents an array of assets and liabilities and an appalling expense account. Every complication in the process of digestion, every unnecessary cough, every wave of mental depression is so much physical capital wasted.

On the one hand is an active process of degeneration; on the other is the natural resistance of a physical organism planned for development to maturity and a later gradual decline through the processes of senility. To so augment the natural forces that they may resist and gradually overcome the sinister enemy who has secured a lodgment is the problem. The
weapons of defense are rest, nutrition and the mental attitude. Hence the great importance of the avoidance of any errors in the campaign of defense and offense. Abundant nutrition that will not prostrate the digestive organs, together with normal elimination, helps to restore the bodily impulse to fulfill its normal destiny.

As to the individual case, this is a problem in itself. Some patients seem to present little capacity for defense once the enemy has secured a lodgment. The laws of heredity often seem immutable, but more often grave faults in nutrition in childhood have prepared a perfect soil for the invading bacteria. Every growing child deprived of its normal requirements of animal food is being robbed of the first line of defense against tuberculosis. The household that resentfully cuts down its milk allowance because of a necessarily increased price may have that parental error in judgment to account for a weakened resistant power later. Milk supplies not only nutriment, but aids in the development of natural immunity as well. This is so well recognized that milk comes first in the alimentation program of every tuberculosis subject.

A well-known alienist declares that there is much similarity between the tubercular case and the mental patient. The previous history of the breakdown is generally very much the same. There is continuous subtraction of vital force through overwork or depressed nutrition, generally both. A break is sure to come, unless the disparity between physical income and expenditure can be reversed. In the one case the
weak place proves to be the lung, and in the other instance it is the brain. Mental disorder due to overstrain and insufficient nutrition may often be relieved, as also holds good with pulmonary diseases.

In this gradual process of decline it will be found that there has been much digestive friction occasioned by either eccentric arrangements of the dietary or such mental stress as to offset any advantages accruing from a well-selected menu. Whatever the cause, there has been an undue accumulation of toxins in the system, all calculated to depress the bodily functions. Just as in some cases of mental disorder, relieving the patient from an uncongenial environment and placing him upon the proper selected dietary will soon result in steady improvement, so does the same hold good in certain tubercular cases. By producing a state of mental calmness and hopefulness and so arranging the nutritive program as to not complicate the digestive machinery by injudicious food combinations, a marked improvement may soon be manifest.

Many an attractive young woman has been said to have gone into decline because of some unfortunate romance, when the real reason was a reckless disregard as to the food combinations inflicted upon her stomach. Few maidens are so susceptible to the tender passions as to go into a decline because of the idiosyncrasies of some irresponsible male person, provided that she possesses fairly good judgment in feeding herself. On the contrary, a multitude of young women whose romantic affairs have proceeded without a ripple to disturb their placidity have developed
tuberculosis, not necessarily because of any late hours or even insufficient clothing, but rather through a steady decline in their vitality and resistant qualities due to unhygienic and often fantastic habits of eating.

While the febrile patient must be kept in a quiescent state, everything must be done that is possible to preserve an optimistic attitude. Anything which will amuse and not overtax is therefore in order. Even "canned music" may exert a cheering influence on many people. Everything depends upon the digestion, which will not work in harmony with mental depression. The legend has been handed down from antiquity that the consumptive is prone to unnatural optimism; but this was before the era of bacteriology.

Reverting to the before-mentioned simile of addition and subtraction, there must be a lessening of the resistant powers whenever the feeding program is pushed to an extent which upsets the equilibrium. Avoidance of friction in the digestive processes permits of an array of such vital forces as yet remain with the patient in their full integrity. Besides nutrition, much that is in the nature of protective elements may be supplied in the form of milk, eggs, and certain cereals whose elimination without drastic medication may be ensured by the employment of vegetables perfectly cooked. In this way a smoothly working system of rebuilding an incidental defense may be established without rendering the entire defensive resources of the body inert every now and then by some cataclysm of the digestion due to overeating or the ingestion of unsuitable food.
The presence of a febrile tubercular patient in an underfed family is, of course, dangerous. The family which is lavishly fed may also be insufficiently fed. There is, however, little danger of communication of the disease if the patient does not come in intimate contact with others who are having their vital forces properly sustained by a well-balanced dietary. The person who, in average health, is accustomed to a wholesome menu which contains not only meats, fats and starches, but an admixture of vegetables, and secures sufficient rest each twenty-four hours to preserve the essential sense of well-being, is not likely to acquire tuberculosis. Indeed, there are many who believe that occasional contact with the germ of this disease is essential to the development of a proper degree of immunity. The extraordinary susceptibility to infection which has been manifested by the native tribes of America, who certainly had every protection in establishing resistance to disease that fresh air could give them, indicates that there must be a large number of people in the large centers of population who have become immunized through the constant presence of the infective agents.

Fresh air and hygienic environment are most excellent prophylactic agents so far as they go. But the real protection against the invading disease consists of proper nutrition. Many families preserve health and a remarkable freedom from germ diseases year after year who seem to have no appreciation of the value of the ventilation of pure air. The indoor atmosphere in the homes of these people in cold weather
is often repugnant to the esthetic sense. Nevertheless, if supplied with an abundance of well-cooked food in the right proportion of meat, starches and vegetables and the milk and cream which is always identified with good cooking, they exhibit a sturdiness of physique which seems to make them immune to all wasting diseases.

There are many medical problems far too complicated for the average intelligent layman to understand, but the physician who, in his relations with the public, throws an air of mystery about the cause and treatment of tuberculosis is not playing fair with his community. As before stated, every tubercular case treated in the home should be an effective center of education for all the families of the neighborhood. There should be an understanding as to how the condition probably developed and how it could have been possibly prevented and the methods which hold out the most promising results in the improvement or cure. An inherited predisposition to the disease due to some syphilitic taint in the family should not be covered up and the development of the disease attributed to Providence. If the too much indulged daughter of a well-to-do household has undermined her health by social dissipations and frivolous dietary habits, such causes should be known and allowed to serve as a warning. Wholesome living and suitable food provide under any ordinary circumstances sufficient protection against the invading germ. Otherwise the human race would have long ago been wiped out.
CHAPTER VIII.

THE OVERWORKED BUSINESS MAN.

It is one of the curiosities of the practice of medicine that even in the most enlightened communities those most in need of the wise counsels of a competent doctor are about the most frequently deprived of that benefit.

It is only necessary to recall those instances of broken-down hearts and kidneys which occur so commonly among business men in the “fifties” to realize that no helpless infant is in greater need of solicitous guidance than the man of middle age wholly absorbed in business and possessed of the usual meager understanding of physiology. He is almost sure to go wrong.

There are, to be sure, some who have been able to gauge the effects of unhygienic practices and who become wary of the big appetite and the accompanying plethora, or who have heard dismal tales of other men of sedentary habits who have on some tragic day made a sprint to catch a street car, and have resolved to go easy. But few business men go to a physician primarily for information that will enable them to keep in such a satisfactory state of health as to be practically immune to the need of professional treatment.

Now the question may naturally arise as to why the man of business who cheerfully pays a regular fee (128)
each year to an attorney for guidance in avoiding lawsuits should not have some competent physician explain to him the various kinks of physiology as constantly modified from year to year in the development of maturity. Such a relation should certainly prove as congenial to the doctor as it is to the wise lawyer who sees about him prosperous business men who have profited by his safe counsels.

There are various reasons why the logical parallel between physician and attorney does not exist, of which two are predominant. There is no doubt that both the lay public and the medical profession have been greatly influenced for the worse by the prevailing impression that the American business man was prone to work himself to death. This is one of those numerous half truths of which people of enlightenment are beginning to be wary. The American business man works hard, and in far too many instances dies young. Therefore he has worked himself into an early grave, and his associates should take warning and slow up. But, on the other hand, it has been commonly noted that the naturally active man who retires from business and idles his time away is even more likely to go to pieces.

It is time that every useful citizen of almost any age should understand that reasonably hard work is essential to health.

This widespread impression that the business man is a martyr to overwork is one of the reasons why the doctor is not earlier consulted, and another is a suspicion, which many a normally healthy man has, that
if he goes to a physician there will be an immediate search instituted to find some evidence of disease, and that it will be goodbye to peace and comfort ever afterwards.

There is a basis of truth in this impression. The physician is so seldom consulted unless in illness that he might quite naturally conclude there must be something wrong. And as there are few people of middle age who have not found some vulnerable point in their physical machinery, any doctor eager to accomplish the utmost for the benefit of his patient may arouse morbid introspection in a certain type that will outweigh any possible benefits. In such cases the parallel with the wise lawyer would certainly fail to work out. But fortunately there are a great number of medical men who have the tact to keep a weather eye on a busy business man greatly to his advantage and never to his disadvantage.

There are certain physiological axioms, ignorance of which on the part of any useful business man who has a family doctor is more or less a reproach to that doctor. It is the function of the modern lawyer, as before mentioned, to keep his client from making mistakes. It should be equally expected of the physician, when he has the opportunity, to point out the consequences of overthinking and underexercising, the importance of getting thoroughly rested at frequent intervals, and the fallacy of attempting to restore to full vigor and tonicity overworked vital organs by combined loafing and overeating. Getting one's "money's worth" at a sumptuous hotel as a means of building up
the health has little hygienic basis. Little wonder that irregular practitioners of various cults flourish if they are able by various arts to convince the man or woman with an appetite far in excess of their normal requirements that it is essential that they cut down the intake of nitrogenous foods and give the overworked stomach, heart, and kidneys a chance to resume normal function again.

A man of magnificent physique took great pride in the fact that he had practically never known what it was to be ill. Methodical, calm, systematic, his life went on without a ripple until he was seventy years old. About this time he thought it wise to take life easier. In apparently good health his appetite for good food showed no abatement. He ate heartily, and, yielding to the drowsiness following hearty meals, took frequent naps. A year or two later the natural result followed. His arteries degenerated and he died a few hours after an apoplectic stroke. Placed on a suitable diet and the physiology of his situation carefully explained to him by a competent physician, this man should have easily lived to be ninety.

One of the common concessions the heavy eater makes to his digestion is the employment of a liberal addition to his menu of vegetables and salads. He has an evident idea that his stomach is as fond of green vegetables as a cow. If there is an active peristalsis of the bowels associated with this combination he feels that the problem of heavy eating without evil consequences is solved. But he loses sight of the toxic gases which may be thus promoted and of their
mechanical effect on the heart, which becomes tired and sometimes balks altogether. Such things should be explained by the doctor.

The cow, as before stated, has three stomachs and seldom experiences the pangs of indigestion. When carefully and moderately fed she may continue to remain vigorous and be useful until twelve or fourteen years old. But the cow who is under the high pressure conditions of intensive dairying begins to go stale by the time she is eight. The combination of heavy grains and ensilage—proteins and salads—is too much for even three stomachs.

It is just as easy for a physician to develop a fad or hobby as for anyone else. Those who have achieved a considerable measure of success in building up the underfed are often led into a sort of subconscious belief that good food and plenty of it will cure almost anything. This, in fact, practically holds good any time previous to full maturity. After that a change in policy is indicated until the digestive and arterial systems have passed through a rest period. Rest and starvation combined have produced startling results in cases of overstrain of function.

A well-known American family comprised four sons, three of whom died in comparatively middle life. The survivor reached a great age, and when questioned as to his longevity in the face of a rather unfavorable family history gave this explanation: "I, unlike my brothers, was blessed with a poor digestion." Of course, such a theory could hardly find support among scientists, but, in a measure, it holds
good. The good digestion as it is usually classed is a comfortable one, whereas a sensitive stomach gives warning of any excess.

Many people seem to think that good form requires liberal indulgence in the foods provided by an urgent hostess. A woman of great charm and sterling qualities was accustomed to assume, when guests in self-preservation saw fit to decline some rich dessert to which the hostess had devoted elaborate care, that it was the fault of the food. She would seem so disappointed and be so self-deprecatory in her interpretation of their object in declining that, rather than cause any disappointment, the dessert would be accepted and eaten, with much subsequent inconvenience. Little wonder that guests appreciative of her splendid hospitality nevertheless often approached her immaculate and bountifully spread table with more or less trepidation.

Stock raisers have long since learned the importance of a balanced ration, which means sufficient, but not too much, food, of a variety that would ensure normal function. A pair of horses worked regularly six days out of seven can be kept in condition by a suitable system of feeding, which is extended over the seventh day in which the team is idle. The intelligent driver of a pair of workhorses may indulge himself too lavishly on his day of rest and awaken to a blue Monday in consequence, but he is altogether too wise to overfeed his horses on their rest days as he does himself. It is probable that the old blue law system of "cold victuals" on Sundays was as much in
the line of correct hygiene as the precepts laid down by Moses. It is not likely that the ancient inhabitants of Connecticut overate on Sundays.

Owing to the lack of correct knowledge on the subject, it is probable that a great majority of the adult inhabitants of this country either eat too much or eat too little. People of middle age coming under these classifications therefore stand in danger of two classes of ailments. Those who are underfed, although probably in most instances beyond the probability of acquiring tuberculosis, are yet subject to a variety of disabilities if they proceed in their low diet program. Underfeeding leads to nervous disorders, general anemia, and, if carried to excess, mental instability in a great many instances. On the other hand, overeating is prone to make manifest various disorders of the heart, stomach, and kidneys, which figure largely as causes of premature death.

These facts would seem to justify almost any physician in utilizing every suitable opportunity for the education of his adult clientele as to what constitutes the right system of feeding and exercise to conform with the person's occupation. To be sure, the physician might naturally hesitate to offer unsolicited advice to comparative strangers, having in mind the oft-repeated anecdote of the humane doctor who, not knowing his occupation, advised the suburban postman to take up a system of walking.

The stout man who has a bad heart in most instances did not acquire that condition suddenly. It may have been coming on him gradually for years,
due to personal demands upon that long-suffering organ that were a little in excess of normal capacity. It is not at all likely that the patient thus affected would have allowed himself to acquire such a very undesirable condition had he possessed a proper understanding of what was leading up to it. He would have been wiser, and made sure that the overstrained heart was given an opportunity to get back to normal function again. Being, however, totally ignorant of what he was doing to himself, and receiving no enlightenment from any source, he has gone blindly on until it is too late to rectify the ailment. In highly civilized states, such as we profess to have here in America, useful citizens with a fondness for a good living and disinclination for exercise should, as it were, have the riot act read to them by physicians who, under our present system, may take notice, but are restrained by an inexorable code from offering the word of warning unless directly asked for it.

Financially this system of silence, lest there be a breach of etiquette, is often not only very expensive to the patient, but to the doctor as well. Numerous middle-aged men and women who have abundant means to pay for medical attention are very prone to leave their family doctor and go to some health resort whereby they are advised, admonished, and sometimes, if not too late, relieved, not only of their bad symptoms, but of a liberal amount of cash. It would be considerably more in the interest of the busy banker or manufacturer if he could be educated and admonished by his own doctor before so much harm
had been accomplished. Being informed, he would be quick to detect any suspicious derangement of function, and would hasten to the doctor to be put in condition again and kept in condition if it were possible.

Large numbers of hustling Americans remain healthy until they become too prosperous. One per cent. of the time and energy absorbed in piling up additional assets, if devoted to the acquirement of a correct understanding of nutrition, would enable large numbers of bright business men to continue the money-making program for quite a number of years longer than they do as it is. Therefore, considered from that first principle standpoint, "does it pay," it is plain that it would pay, and pay largely.

The horse owned by a poor farmer who is unable to provide a liberal grain feed, but has to furnish a larger ration of hay instead, may not present so sleek and elegant an appearance as the glossy, overfed animal that lives in a more prosperous environment, but he is likely to live considerably longer. The dog fortunate enough to live in the open country naturally takes a great deal of exercise. But even with this outlet for his energies he must not be allowed too much protein food. Otherwise his ordinary span of ten or twelve years of life will be cut down to six or eight.

It should not be understood from the foregoing, however, that a reasonable amount of avoirdupois is necessarily an unhealthful condition. The stout man or woman who cuts down materially on the use of
meats after middle age, utilizing the starch foods and a liberal portion of vegetables instead, may not only retain rotundity to an advanced period in life, but enjoy excellent health as well. Milk and cream, which may be taken in so many different ways, will take the place of meats, and the irritating meat elements and their toxins, which are such a burden to the circulatory organs and especially to the kidneys, can be largely omitted from the menu.

A most depressing factor with many generally intelligent adults of middle age and over is the feeling of apprehension which is apt to accompany subnormal physical poise. The man or woman who understands physiology and the various idiosyncrasies that belong to his or her own physical machine can appraise these depressions at their real value and with a knowledge of the probable cause. But the busy man or woman who has either avoided the doctor almost entirely or followed his clinical suggestions blindly without understanding much about their purpose, often attaches a superstitious significance to what to them are vague, indefinite manifestations of some mysterious and threatening physical calamity. This is not unnatural as they recall their friends and acquaintances who have suddenly fallen by the wayside when shortly before they seemed to be in perfect health.

Dread of what we do not understand is the antithesis of that confidence and optimism which is essential to physical poise. The housekeeper usually retains a reasonable amount of cheerfulness, although carrying a heavy load of family care. In the language
of the period she "knows what she is up against." Her husband may be fairly overloaded with business problems that tax his ingenuity and judgment, but he understands the intricacies of his business and has confidence that he can work his way through the maze of complications which may be looming up before him. In both instances cheerfulness accompanies the solution of these various problems. But some indisposition or depressing physical symptom, which appears from the unknown somewhere, may completely change this feeling of confidence to one of dread. It would be hard to estimate the full measure of importance of this depressing mental condition and its cumulative effects in a period of five years. Even a moderate understanding of the physiological cause and effect would lift this form of depression from a great number of citizens.

Just why so many intelligent people should be content to grope their way along through middle age with so little comprehension of what contributes to their physical well-being or the reverse is hard, indeed, to say.

However, in considering this puzzle we should not overlook the feeling of dread which so many useful men of middle age feel as to approaching a physician with the view of having an inventory taken of their physical assets. They seem to feel that a physician thus consulted will make a desperate attempt to justify some long-continued course of treatment through the discovery of some adverse condition, regarding which, if it exists, the patient prefers to re-
main in ignorance. And we must confess that there is some reason for this reluctance.

A good many physicians feel that they have not justified themselves in asking a fee unless they have outlined some form of treatment. In this way they tend to discourage consultation as a means of educating the patient. They are often disposed to look with disfavor upon the person who consults them with an educational motive. They seem to assume that if the layman knew a little something about his case he would immediately start a system of self-treatment, whereas few people of common sense will take such risks, unless for trifling ailments.

The one item of exercise alone is of sufficient importance to men who lead an indoor life to justify the system of general supervision by the doctor. It is really a question sometimes which is the most harmful to the man who spends most of his business hours in an office chair, going without exercise entirely or taking up a system of exercise wholly on his own judgment. Few extremely busy men can take the time, under present conditions, for systematic walking. They alternate from over-exercise to no exercise at all, and the benefits are questionable. The same may be said of golf, unless it can be carried out systematically. Even walking is of doubtful utility for stout men as compared with some form of exercise that brings all the muscles into use. There is probably no exercise which is safer or more beneficial to the average man of middle age, who is in fair health, than farming. The suburban resident of a city who would
undertake the care of a fair-sized vegetable garden, and continue to look after it during the entire season, will have inspired the gratitude of a great number of muscles ordinarily allowed to suffer from neglect. Every one of these muscles will have made some new demand upon the nutritive elements contained in the intake of food, the appetite will have been accordingly benefited, and the mental satisfaction of having actually produced something of value to the population will likewise help to produce that optimistic sense of well-being which makes life worth living.

Every physician who is engaged in general practice should be a specialist in prescribing the right kind of exercise, not only for those who are debilitated, but as well for those in fair health who hope to remain so. There is an excuse for every man and woman, however unlikely it may be that they are in need of ordinary medicine, in coming into a thorough understanding with a physician who is capable of outlining such forms of exercise as will seem to best fit the individual case. And there are few such cases where some improvement in the habitual form of exercise could not be suggested.

Apparently taking the cue from the German idea, certain elements of the medical profession pride themselves upon a brutally frank diagnosis under any and all circumstances. By this we refer to a thoroughly depressing estimate of a patient's condition. In most instances, also, the same brutally frank diagnosis is not only undiplomatic but unscientific. There are often hidden sources of vital force remaining in the
patient which if stimulated by hope and an optimistic environment may produce marked improvement. Of course, it is a wrong idea in the average family of a patient who has been given the benefit of no doubts in the doctor's mind to somehow get the impression that, having gone on record as to an unfavorable prognosis, the doctor will practically abandon his efforts to bring about an improvement.

The influence of mind over matter is so overwhelming that it is manifested in infancy. The older the patient becomes, the more stimulating or depressing such influences may be. The scientifically fed infant in an institution will die, while the baby who is the pet of a poor family, whose home is afflicted with bad ventilation, and who has little to eat will pull through and grow up with a strong constitution. For this reason there is little doubt that a great number of lives of usefulness would be extended a considerable number of years but for this dread ultrafrankness on the part of the physician. It is a bad system which permits a middle-aged man or woman of ordinary intelligence to visit the doctor's office in hope and leave with that same hope supplanted by apprehension and discouragement.

Suppose a person does have a high blood pressure or very badly acting valves, or the analysis shows sugar or albumin in considerable quantity. It is not necessary to pass over a gloomy outlook to such patients. The best possible remedy they can have is cheerfulness and hope. Cases which are taken up from this angle often show surprising recuperative
powers. The optimistic diagnosis gives some of them every possible chance, while the cold-blooded, strictly technical interpretation of such a case to the patient has only ethical justification in some cases, if it even has that.

It would be well for society if there could be a better comprehension of the difference between relaxation and laziness. There are plenty of lazy people who are so insufficiently acquainted with real energetic industry that they could hardly be said to ever know the need of relaxation. The lazy person disintegrates through unwillingness to give various muscles and faculties even healthful exercise. This type of person does not have near as good a chance for long life as the more energetic person, provided that the latter is wise enough to recognize the need of frequent relaxation.

One of the most disconcerting factors in any study of longevity is found in comparisons between the strictly temperate and those who have a moderate acquaintance with alcohol and nicotine in their various forms. Of course, the man who actually acquires the drinking habit is in a class by himself, and cannot be given consideration in these comparisons. But if we compare total abstainers of frugal and industrious habits with those who are given to a moderate extent to the so-called social habits of smoking and occasional, but not habitual, drinking, the probabilities are that, of the two classes of similar intelligence, those given to the moderate indulgences aforesaid have the best chance for advanced old age.
The extremely energetic and strictly temperate man is prone, as he grows old, to be less and less given to recreation and relaxation. The other type is very liable, on the other hand, to acquire the habit of smoking after meals, with the relaxation which accompanies it. If with the physician's consent, he indulges moderately in light wines (home manufactured, of course) it is with the object of rendering a little assistance to the appetite and digestion. In the one case, there is a fixedness of purpose which wears upon the vital organs, while, in the other, the custom of indulgence provides a rest period for those same organs. In exceptional cases nicotine may be a heart irritant, or the alcoholic appetizer may lead to an overtax upon the digestion, but, in eliminating such possible disadvantages, the relaxing influence of these habits, kept within the bounds of moderation, undoubtedly produce much needed rest for a circulatory system which under constant pressure develops into hardening of the arteries and all the incidental discouraging symptoms.

A great number of people seem to confuse the significance of the two well-known terms, recreation and relaxation. The man who works hard all day and gives his evenings over to recreation may keep himself in an optimistic frame of mind for a season and still be seriously overtaxing himself. Recreation is, of course, desirable, but the real complement of tense concentration over business problems is a period of relaxation which will restore equipoise. Many useful male citizens never seem to acquire the art of
Optimistic Medicine.

relaxation except when in bed and asleep. They devote themselves to strenuous business during the day, returning to their homes to find their wives with plans all made for a social evening, which far too often simply provides a further tax upon the nerve energies. Many women feel that if they are shut up at home during the day, it is only fair that their husbands should take them out for an evening of pleasure when they get home from business. The effects are often similar upon both husband and wife, provided that the wife carries a considerable burden of housekeeping problems. But if the wife is so fortunately situated that she can devote part of the day at least to rest and relaxation, she has her husband greatly at a disadvantage. This may easily account for the very considerable number of well-preserved widows of strenuous business men who have been unable to stand the pace.

The man of affairs who is a hard worker by day should have an opportunity for rest and recuperation during the evening. In this way he can go to bed at the normal time with his nerves restored to equilibrium and secure a good night's rest and feel fine and fit for another day's work in the morning. Of course, this does not mean that all evening recreation is a delusion; but much depends upon the character of the recreation.

One of the most useful accomplishments which business men can possess is the ability to go to sleep practically at will. This is an art which can be easily acquired by most people. The man who, going home
from business a half hour before dinner is served, can drop down upon a couch and take a twenty minutes' nap has done a great deal to "knit up the ravelled sleeve of care." Furthermore, he has restored tone to his digestive organs in anticipation of the task before them.

One of the most common customs among people of intelligence who are able to live with tolerable comfort is the fairly substantial breakfast, light lunch and a more elaborate dinner. The moderate noonday lunch presupposes that there has been a substantial breakfast. Otherwise the food intake has not been sufficient. A good many people do not rise from their slumbers with a very keen appetite. If they eat a very light breakfast that is consistent with the appetite, they must indulge in a very liberal lunch or suffer from loss of energy. If they eat an elaborate lunch it affects their appetite for the evening meal. Therefore it seems very desirable that a person should have a fairly good appetite for breakfast. And nothing is probably more calculated to produce that appetite than some form of cold bathing immediately after rising.

A very large proportion of those who are habituated to a morning bath probably fail to realize the maximum benefits from this practice. Only a comparatively few Americans can derive benefit from a cold plunge, as the shock is too great. The warm bath followed by a shower is also too elaborate for a great number of people. They haven't the time nor the patience for it, and they distrust the benefits of it.
Probably the one really sure and safe bath which can be indulged in by all is the quick hand rub, followed by vigorous toweling. The tonic effects are practically unfailing, and there are few people of tolerable vitality who fail to show the desired reaction. After this form of bath, which can be taken quickly, most normal men are ready for the kind of a breakfast which will sustain them during the most active period of the day’s duties.

It is an extremely desirable thing for a business or professional man to be able to start the day right with a good appetite for breakfast and the sense of feeling fit. It gives him an optimistic outlook which is of great service in getting through the daily grind.

After all, the greatest tonic is the optimistic spirit. Under its benign influence annoyances are airily waved aside and the besetting sins of anxiety and mental irritability are overcome. The ability to eliminate unpleasant reflections and to feel a sense of appreciation of the good qualities which nearly everyone possesses, rather than to dwell upon the bad qualities, undoubtedly produces its reaction upon the visceral organs, as well as upon the cerebellum.

One of the chief encumbrances of extreme old age is the associated isolation. Friends and acquaintances of earlier days have passed on. The result is a tendency to melancholy retrospect which cannot fail to exercise a depressing influence upon mind and body. There is no prescription which the physician can offer this type of patient that is quite equal in its beneficial effects to the encouragement of a sense of humor.
People of most any age fight shy of gloom in whatever form it may present itself. The octogenarian who is ready and apt in humorous conversation can always find companionship among younger people. He is made to feel that he is a welcome addition to the social circle, and the tonic effects of such assurance are beyond computation. Physical exercise is desirable, but mental exercise at this period of life is all-important. It keeps the faculties flexible and creates an atmosphere of respect wherever it is in evidence.

As an example of mental flexibility at a very advanced age may be mentioned an old man of eighty-five or ninety who shuffled through the lobby of a popular hotel one day in a country town, and, his sight being somewhat impaired by years, made the mistake to address a somewhat familiar remark to a smart young traveling salesman. The salesman looking over his shoulder saw this somewhat uncouth figure and made an ill-natured reply. "Excuse me," the old gentleman remarked. "I made a great mistake. I thought it was So-and-So. He's a gentleman." Bland smiles greeted the old gentleman on all sides, while the salesman at once perceived that he was in a very uncongenial atmosphere.

Avarice is said to be the sin of old age, which may be true in many instances. However, as long as the instinct and capacity to make money continues, it is a life preserver, providing an interest in life without which disintegration is rapid. Even going through the motions of a useful occupation is far to be pre-
ferred to the vapid existence indicated in the oft-repeated story of the old man who, complaining of a loss of appetite, was advised by his physician to take a little whisky occasionally, say, after he had shaved.

Shortly afterwards a son, with whom the old gentleman lived, came to the doctor much perplexed. He said: "Do you know, Doctor, I am worried about father; I am afraid he is losing his mind."

"What makes you think so?" asked the doctor. The son's reply was illuminating: "He is shaving himself all the time."

It may be reasonably assumed that in the future hard cider or gooseberry wine must figure in this faithful old joke.

It is undoubtedly a fact that most physicians overestimate the judgment and intelligence of their patients to care for themselves. It is a cardinal principle in business life that it is never safe to take anything for granted. Specifications must be clearly defined and instructions must be definite, or there will be a mix-up somewhere. These principles should be applied systematically by physicians in those cases where they have general supervision of elderly people.

While it is not considered good practice to uproot fixed habits, unless they are of a positively menacing nature, nevertheless patients past middle age should be instructed as a matter of routine in all their daily habits. For it is a sad fact that only a small proportion of such people who are classed as intelligent
are sufficiently informed in hygienic matters to avoid excess of some form or other.

The physician who habitually makes it a point to give definite instructions in these matters, which should be thoroughly understood, but which unfortunately are not, acquires a reputation for thoroughness and professional ability which he might not secure through brilliant surgery or a successful battle with a desperate self-limited disease.

The instructed patient who is elderly and garrulous and who believes that his doctor is practically infallible is well worth all the petty instructions which might seem superfluous.

A large number of elderly people succumb before their time to excessive indulgence in meats and gas-forming vegetables and the mental depression which is apt to be associated with such indulgence. To this may be added over-exercise at rare intervals, followed by practical inactivity. If these facts were known to a great number of people who ought to know them but do not, the span of life of many useful citizens would be greatly extended. The physician who could briefly summarize on the back of his prescription blank hygienic hints adapted to the age of the patient would have performed a valuable civic duty and often saved himself considerable necessary explanation.

For, after all, the days of miracles or near miracles are not passed. Patients with everything apparently in their favor somehow seem to fairly ooze away their vitality from every pore and die without apparent
reason. Others whose days seem numbered manifest astonishing recuperative powers and persist in living. Such protracted instances of almost inexcusable longevity can usually be traced up to rational feeding, cheerfulness and a normal amount of either physical or mental exercise.

It may involve a little time and trouble primarily for the doctor to establish such a system of hygienic instruction in his community, but the efforts required will undoubtedly be lessened as time goes on, as the good effects of such instructions will be apparent and passed along by the patients themselves.
CHAPTER IX.

THE EARLY GRANDMOTHER STAGE.

It is often said that, while to the masculine mind woman is a perpetual mystery, it is even more certain that woman does not understand herself. This would seem to account for many of the eccentricities which reveal themselves in normally well balanced women about the time that their first grandchildren begin to establish themselves as distinct entities in the family census.

The predominant symptom in such cases is usually an apparent impression on the part of such women that the family welfare will go to the scrap heap unless they personally supervise about everything that is necessary to be done to conserve the family comfort. The person who can invent an antidote or a serum for this propensity to always being excessively busy will have conferred a great boon upon the human race.

At about the beginning of the sixth decade of a woman’s life her habits seem to have become fixed and only a superhuman effort will prevail in bringing about that readjustment of the point of view of which so many middle-aged women are in urgent need. An extremely active woman has by this time arrived at a state that nearly approaches perpetual motion, while the naturally indolent woman has become a case of hopeless inertia. Of the two states, the latter
is, of course, the more deplorable one from the standpoint of health.

The woman of fifty who has brought up a family in the right way has had a busy life, which means that she should now begin to slow up her activities and conserve her nerve energies in order that she may retain such remaining youthfulness as she still possesses to the latest possible period. But just as the lazy woman grows more and more sluggish, so does the industrious woman increase her activities until some warning is sounded which is so menacing and definite as to ensure its being heeded.

As in so many other tragic instances of prodigal expenditure of an already depleted vitality, ignorance of physiology is mainly the basic cause of such physical wastefulness. And as in other instances, which have already been enumerated, failure on the part of the family physician to issue the required warning is to a considerable degree responsible for such examples of entire collapse.

To be sure, there are fortunately physicians in increasing numbers who are making it a part of their regular routine to explain to these matrons, who in most instances constitute the very cornerstone of the domestic organization and family happiness, as to how they may best prolong their life period of usefulness to the beloved families on whom they have lavished their affection and devotion for so many years. It is hard to conceive of a more suitable outlay of the doctor's time and energy. Professional etiquette is a very concrete and important factor in
The Early Grandmother Stage.

the family doctor's career, but there are occasions on which it has to be strained a little, and certainly there could be no more suitable time and place than to issue a warning where such warning is obviously needed.

The elderly woman whose children marry and settle down at some distance from the old home often misses these absent ones, and looks back with a certain yearning regret for the days when these self-sufficient ones were looking constantly to her for pretty nearly everything that made up their existence. However, it is a question whether the woman thus situated is not considerably better able to keep herself in good physical condition than the woman whose married children are constantly making demands upon her for counsel and sharing with her all their cares and anxieties. It is really astonishing how much selfishness may be manifested by these grown-up children under the guise of affection.

It is about this time in her history that the maternal head of a family resolves that housemaids are more of a bother than they are a benefit. She develops routine propensities which are extremely wearing to her nerves. Her housework becomes something sacred, from which there must be no deviation or shadow of turning. To be sure, that operation is done exactly according to the code; she undertakes to do it herself. She does the same thing and thinks the same thoughts week in and week out. Small wonder that a few overworked nerves, more or less conscious or subconscious of the fact that there are a lot of other would-be useful nerves loafing on
their jobs entirely, rebel, and recourse is made to the family physician.

Then is the time when the doctor should institute a system of psycho-analysis. A casual inspection of symptoms is of little avail unless the curtain is lifted to reveal what lies back of those symptoms. It is a time for professional firmness and heroic resolution. The third degree should be invoked to the extent of finding out all about that beloved routine which may often well be treated with contumely and ridicule. Righteous indignation at the temerity of the doctor who has thus assailed her sacred routine will in itself be helpful, as it will exercise some of those more or less somnolent nerves which are loafing while others work overtime. As to the benefits resulting from such a course, they can perhaps be best estimated by the French-Canadian phrase, "probably will and probably won't." However, perseverance usually brings its reward.

It is quite probable that many of these abnormally busy matrons whose few worked to death nerves have rebelled might, after a period of reflection, be inclined to see some logic in a doctor's theory that having a housemaid to direct would be beneficial because of the incidental ability of the housewife employer to forget her other troubles.

The bane of the average elderly housekeeper is a multiplicity of petty details performed with a feeling of urgency. It is often not the real muscular labor that produces disarranged nerves. On the contrary, the woman of normal health who actually uses her
muscles instead of her nerves may be benefited. A woman of a rural neighborhood for a considerable number of years did laundry work for her neighbors, being well equipped with machinery for the purpose and doing excellent work and getting good prices. Finally, as it was not really financially necessary that she continue this work, she gave it up and went to a neighboring town and lived a life of comparative ease. In a year or two she came back to her country home apparently a total wreck. After a few months, having somewhat recuperated, she again took up her profession as a washwoman and rapidly regained her health.

Many women who are most excellent housekeepers and who travel many miles a week in the kitchen, become alarmed about themselves if they undertake to walk outdoors, especially on uneven ground. They find themselves so much fatigued that they feel that they are much worse off than they supposed themselves to be. Introspection may often get in some of its worst results where this walking experiment is tried out at rare intervals. The facts are that by outdoor walking they have exercised muscles which ordinarily get little use and which naturally soon become greatly fatigued. If this is explained to an intelligent woman by the family physician, it may make a considerable difference with her physical program.

No one can keep in proper physical condition unless practically all his or her muscles receive a reasonable degree of exercise. It is for this reason that the
calisthenics which matronly women are prone to greatly dislike are nevertheless extremely beneficial. Such exercise taken just before retiring will, in a very short space of time, materially improve the physical morale.

The mental effects of an inadequate system of exercise become more and more marked in women past the age of fifty. The ever-present feeling of fatigue produces a habit of self-pity than which there can hardly be anything mentioned which is more demoralizing, especially if the sense of humor is defective. A woman under such conditions becomes obsessed with the idea that she is a martyr, and, as this viewpoint is developed, she exhibits greater and greater persistence in carrying out her beloved routine.

It is absolutely essential in such cases that there be a change of scene or at least a change in the routine. Sometimes this can be brought about and sometimes it seems to be impossible. It would not surprise many people of experience to be told that the influence of a solicitous husband in such cases usually amounts exactly to zero. In fact, it may prove that the opposite type of husband may have more influence. Many middle-aged men living in such an atmosphere of domesticity reach a state of more or less continual disgust, and their caustic remarks, on the principle of the counter-irritant, may actually accomplish some good. As a rule, however, the husband in such cases gradually gives up the struggle and concentrates himself upon his own per-
sonal business problems, and a situation develops in which there is little mutual sympathy. There is little to suggest romance in the life of a woman weighed down by household cares and immune to all suggestions as to relief in association with the husband who has incidentally become a grouch.

It should not be inferred from anything which has been aforesaid that the case of the morbidly busy or the mentally depressed woman of middle age is not often a serious one. Perhaps there is no place where the demands upon professional tact and diplomacy are much greater. Mental morbidity persisted in eventually becomes mental disease and the few muscles and nerves which are overworked may by reflex influences change that which is a functional disorder to an organic one. There is often no time to be lost in changing the viewpoint, and the keynote of the whole line of treatment is in some way or other to provide recreation.

In the average community there are very few people who understand the way these cases develop from bad to worse until there is a breakdown of mind or body. The doctor knows, and his sins of omission in connection with such cases are often serious. Societies of women organized for various charitable purposes often accomplish more for themselves than for the poor unfortunates they are striving to help. The woman who has stayed by herself for months and years and scarcely sees one of her neighbors, and has acquired the reputation of a recluse, may appear in an entirely different light to her
neighbors when they really find out what kind of a woman she is.

The proposition correctly stated is about as follows: The woman has reached the age of maximum development and is a little on the decline. If the exercise of her brain, heart, digestive organization, muscles and nerves is fairly symmetrical, and, on the other hand, she is not indolent and sluggish, the machinery, like the well-cared-for watch, will run along year after year, perhaps losing in efficiency a little, but in the main doing very well, until in advanced years some essential part weakens and a natural period of final and gradual decay follows. This is the way the proposition should be stated. Unfortunately in a great number of cases, it is found that, unlike the one-horse shay, some part has been allowed to become far weaker than the rest, usually through bad hygiene, and this weak part drags down all the others.

If the average doctor would "hire a hall" and put these facts before the clientele, the vital statistics would certainly be interesting reading in a few years. Unfortunately the average doctor is altogether too busy for any such humanitarian program, and besides that, he is not at all certain that it would not be considered as advertising himself rather than helping the community, and therefore things go along about the same year after year, about so many perfectly good machines breaking down somewhere along by the roadside, and the procession, gradually getting smaller, moves on.
It is one thing to prescribe and quite another to have the prescription followed, and one of the most difficult tasks of this kind lies in inducing restless, overtired women to relax. Thought of the various duties unperformed so intrudes itself upon them under such conditions that they gain little or no respite. To learn how to close the door of one compartment of the brain and open another is an art which may add twenty to thirty per cent. to a person's span of life. All these facts are unknown, or at least unappreciated, by a great majority of useful women. To be able to shift the mind from some annoying detail of housekeeping to some episode which presents unusual humorous aspects is to suddenly take the tension off a lot of tired nerves and give pleasurable exercise to an entirely different set.

While diet exercises a profound psychological influence upon the entire human race, these influences become accentuated in elderly women. The woman whose digestive processes and especially elimination suggests liberal use of fruits is quite prone to have little desire for them. A woman will often eat an apple as a medicine, but seems seldom to acquire any special liking for this fruit, so exceedingly useful, especially when cooked. The observer, who frequently eats in a restaurant, will seldom see a woman eating a fruit dessert. Instead, she will prefer ice cream, which is usually exactly the wrong thing for her to add to an already sufficient dinner. Women inclined to be robust and healthy are generally fond of cooked vegetables, which are useful, but a large
number of those for whom vegetables are especially indicated do not relish them. There is no doubt that the substitution of pork and beans for tenderloin steaks would be a perfect panacea to many comparatively inactive women of abundant means who are afflicted with eliminative trouble.

While the case of the woman oppressed and depressed by perverted function often presents a pathetic picture, the situation is often more depressing when there is presumptive evidence that the condition is menacing. Conditions of anemia with suspected pulmonary weakness, heart trouble in plethoric types, high blood pressure and those who have been under a heavy strain, etc., etc., often place a heavy responsibility upon the physician. In such cases he has a seriously depressed physical state heavily burdened with mental depression. The situation calls for the indicated treatment plus large doses of optimism. Physicians who can inspire cheerfulness in such a patient, incidentally establishing an appropriate regimen of rest and a proper diet, are often astonished by the result. The patient acquires new courage and the sinister symptoms speedily abate. In a woman of reasonable intelligence mental stimulus with inspired hopefulness may often persist to a green old age.

Probably no condition which presents itself to the physician is less suggestive of an optimistic prognosis in the woman of middle age than cancer. Nevertheless, there is considerable evidence in support of the theory that even this dread and mysterious condi-
tion may be arrested sometimes by a suitable system of diet. This is certainly indicated in inoperable cases, and affords a certain basis for the encouragement of the patient. The fact that races who subsist almost exclusively upon vegetable foods are seldom afflicted with cancer certainly justifies the physician in making a radical change in the system of feeding, as if by, in a measure, starving the patient, a similar process may be applied to the malignant growth, there is some basis for the belief that the degenerative process may be arrested.

It is said that men and women whose financial future has been provided for through an adequate annuity are much given to long life. Conversely it is frequently little less than a tragedy when the breadwinner of a family dies suddenly, leaving an indigent widow. A woman who has led a comfortable existence up to the age of fifty or sixty and is then left, perhaps with dependents, often seems to lose all courage or zest for existence. Women who look on and witness the tragedy in another's life which might easily happen in their own are prone to acquire an uneasy mental state which is cumulative in its effects.

And so we have the exactly opposite state of mind from that of the beneficiary of a comfortable annuity—a state of worry over ways and means, which places an additional burden upon the general functional integrity of mind and body.

It is very unfortunate, indeed, that there could not be a clearer understanding in early life of these psychological burdens of after years. For most
married couples of fair intelligence have thoughtlessly allowed themselves to drift along during their most productive years, always planning to save a nice lot of money in the future, which somehow always brings with it additional burdens of expense. And so we see those who have cheerfully spent their earnings in earlier years suddenly wake up to a realization that they have passed the meridian of life without any adequate preparation for probable less productive years ahead. Such a realization frequently becomes a sort of Banquo’s ghost, persisting either consciously or subconsciously in most of the waking hours.

It is certain that such thoughts are not conducive to health. In fact, it may be doubted if any one factor in human life is more corroding and generally demoralizing than the habit of taking anxious thought for the morrow.

The Freud theory that dreams are but reflections of cravings of the waking hours is still regarded with skepticism by many scientists, but there are few uneducated lay people who have failed to note the disastrous physical effects of the anxiety habit.

Therefore the physician who comes in contact with women who seem to be in generally depressed physical states should start an immediate hunt for the worry germ.

There are numerous family reasons to account for a matron’s sudden change of pose from a habit of optimism to moods of morbid abstraction. To yield unreservedly to such moods is to invite depressed
function and eventually failing health. Hence the need of cross examination, by the physician inevitably brought into the case sooner or later, as to the mental factor.

Of course, it does not follow that, if a woman is worrying over her daughter’s unaccountable partiality for some man whom she herself disapproves of, the doctor can reach forth a restraining hand and interfere with the processes of romance. But he can give the anxious parent some often probably badly needed data on natural selection. He can also explain that in general a young woman exercises much better judgment in selecting a matrimonial partner than an old one does.

Many a young married woman would have figured out her own conjugal problem with fair chances of success but for the more or less indignant pity lavished upon her by a mother with too high a blood pressure. Everyone is the architect of his own happiness. There is an instance of rural philosophy which well applies to this problem. Commenting on a runaway marriage, which had caused a sensation, someone spoke of it as a sad misfit. The philosopher took a different view. He said, “The girl’s family is completely disgusted, and the boy’s folks are perfectly delighted: that evens that part. The girl’s parents are well off, and the boy’s parents haven’t a cent; that balances that side of it. The girl is a hustling worker and the boy is naturally a loafer, which evens that up. I think that altogether, it’s about the evenest match I ever heard of.”
The genesis of that irresistible ambition which has figured so often in the careers of self-made men can often be traced to the early history of great energy on the part of one parent which has been stimulated to the utmost by the natural indolence of the other.

The family physician will naturally refrain from philosophical comments of too personal a nature when he finds his overwrought feminine patient in a state of anxiety because of the bad success of some ill-starred son or unhappily married daughter. But when he comes in contact with a younger mother who is plainly coddling her children he is more than justified in issuing a warning. A coddled mind is usually found in a coddled body, and great numbers of American mothers have passed their latter days in bitter disappointment because somehow a cold and unfeeling world has failed to accept their offspring at the high valuation they had been taught to believe they possessed.

Such is the fatalistic tendency of some women that the diagnosis, by the attending physician, of a malady which, in the observation of the patient, has proved incurable in some instances is sufficient to destroy all hope of recovery. Such cases require a careful exposition by the doctor of the numerous exceptions, and why they were exceptions. To the lay mind, paralysis is about the end of the human career; whereas a large number of paralytics moderately affected have, under the wise counsel of physicians, apparently shaken off the menace of recurrent
attacks and have passed on, after years of comfortable life, as the result of some entirely different form of debility. An instance may be related of a man of fifty-five or sixty who was thus afflicted. Had he been entirely free from business cares he would have no doubt had sufficient time for morbid introspection and have soon succumbed to depression and the apprehension of other attacks. Fortunately for him he was the owner of a large farm, the details of which, together with numerous help problems, so completely occupied his attention that with suitable medical supervision and a simple farm diet he was able to live twenty-five years in comfort.

As in so many problems of the later years, the keynote of treatment for the paralytic, aside from re-education of the muscles, is suitable elimination. It is one of the paradoxes of hygiene that so many otherwise well informed people should be so profoundly ignorant upon this subject of paramount importance to every member of the human family. Too many women through ultra-fastidiousness seem to wish to give as little consideration as possible to this detail, whereas nothing should be regarded as repellent which is essential to health. Of all corrective factors, nothing compares with the habit of eating freely of the common vegetables well cooked, the use of raw salads being often contra-indicated in people of advanced years because of their gas-forming tendencies.

Without intention of casting any reflections upon the gentler sex, candor compels the admission that
many women long since past the stage of physical development are large eaters. With the excessive activity commonly observed in certain types of busy housekeepers, they seem to survive a food intake which would soon produce disaster in a man of sedentary habits. But it becomes necessary, in the event of a less active existence, to materially cut down on the diet, or bad results follow. The person of that often indefinite classification known as elderly should be warned by the family physician that nature does not usually regard the inactive with favor. Hence the necessity of vigorous exercise of body and mind for all who would give reasonably free rein to the appetite for food rich in proteins. Otherwise the kidneys become overtaxed, the arteries subjected to overstrain, and the heart weakened in its functions by the pressure of gases and the excessive stimulation of the surplus food material in the blood. Without an understanding of these consequences, disaster is apt to follow. With such an understanding, the man or woman of reasonable common sense reduces the dietary, both in quantity and quality, to the non-productive basis. No really heavy meals and at least two rather light ones each day are in order.

Far better than such enforced abstention is a continuation of a reasonably liberal diet suitably balanced by a life of vigorous usefulness. Surely there is no lack of opportunity.

An unmarried woman of moderate means employed in a large department store became much
worn by the responsibilities of her position. Living year after year in a boarding house of the common type, she noted the extremely unbusinesslike policy of the proprietress. When the institution had gone to pieces financially, she was in a position to understand the reason. To the utter astonishment of her friends she gave up her position, took over the boarding house and proceeded to conduct it on sound business principles with great success. Incidentally her health was fully restored.

To get the maximum amount of wear out of the human machinery it is necessary that the muscles, nerves, and the mind be exercised adequately and symmetrically. The Bible points out the logical consequences of the person who feels that he has earned a continuous holiday. Disintegration starts immediately.

One of the most common mistakes made by healthy women of mature years is found in inadequate clothing. A woman of fifty or sixty cannot withstand the effects of chilling the body as in her younger days. It is essential that she keep warm and at the same time avoid coddling herself. Otherwise rheumatism or neuralgia gets at work and is quite prone to persist. It is natural that a person who feels a twinge of rheumatism on every active movement should become less active. This depresses the various functions of the body, which, in turn, increases the tendency to rheumatic or neuralgic attacks. In this way physical tone gradually becomes reduced, and the robust healthy woman may find
herself in a few months in a far less vigorous state of health.

Many people have the impression that if they don't actually take cold, there has been no harm resulting from chilling the body. This is a very fallacious view to take. The domestic fowls are well supplied with a covering calculated to protect them from the cold of the winter months. But everyone knows how destructive it is to a hen's "morale" or whatever it may be that causes her to decide to lay eggs, when she is subjected to the depressing influences of a cold henhouse. She goes on an egg strike immediately, even if well fed. Practically all the domestic animals retaliate upon the owners who do not keep them fairly comfortable in cold weather. A fine vigorous calf which has made a very gratifying growth during the warm season can be easily stunted if confined to a cold stable during the winter. They actually seem to shrivel rather than acquire increased avoirdupois.

Many extraordinary ideas are advanced from time to time as to the requisite temperature of dwelling houses during the cold season. Much depends upon the circulation of the occupant. No prescribed temperature is sufficient for a person who is not comfortably warm. Where the thermometer of a room runs low, extra clothing should be worn.

Those cheerful octogenarians whom we occasionally meet will on investigation usually be found to have kept themselves warm and comfortable during the successive winter seasons. A case in point traces
back to a farmhouse in a New England state where winter temperatures often touched a very low point on the thermometer. An old couple lived year after year and to a great age, spending most of their winter days in a temperature which averaged not less than 75 degrees, retiring to warm beds every night. To be sure, there was ventilation, but the temperature itself was always a considerable number of degrees above that advised by the theorists above mentioned. Such indoor temperature may be sufficient for young and vigorous persons who are well clothed or for older people with a high blood pressure who are natural subjects for apoplexy. But for the average person in normal health, however, any indoor temperature which averages less than 70 degrees is frequently insufficient.

There is probably no recipe more valuable for the preservation of usefulness in middle-aged women than the recommendation that they associate as much as possible and enter largely into sympathy with young girls. To be able to be interesting to young people is exceedingly helpful in turning the clock back. The woman who assumes a sarcastic attitude towards the social activities of the young people of her neighborhood has made a great mistake.

The woman who can make her home a rendezvous for young people must incidentally, of course, keep her mind active and alert and in harmony with modern events. This in itself is exceedingly helpful exercise. When in combination with this custom she is able to develop and cultivate a warm and
friendly feeling towards these young people and a tolerance for their frequent inconsistent actions, she is pursuing one of the most hygienic of policies. She is making her life useful and helpful to others and interesting and agreeable to herself. The matron who shows deference to the opinions of her young girl friends in the selection of her wardrobe can usually depend upon making few sartorial mistakes. In comparison with this, how frequently may be noted the extraordinary and bizarre appearance of the woman who has become out of friendly touch with those who usually exhibit good taste in their dress, and who relies solely upon her own unguided and inadequate conception of what is a becoming garb for her.

There is no depression which assails a woman of mature age which is more harmful than the feeling that she is a source of ridicule and amusement to those whom she knows but slightly and who show a chilling acknowledgment of her appearance in public but otherwise remain aloof.

The Fountain of Youth in a woman past the meridian of life can be best found by keeping the mind in warm sympathy with the young. A woman nearing seventy whose husband had recently died was suddenly called upon to endure a second terrible affliction. Her only daughter, a charming young woman, died suddenly, leaving four little children. The grandmother who had reached the age of normal retirement arose to the occasion. She went at once to the home of these children and became prac-
tically a mother and grandmother combined. Instead of being crushed by the weight of care and responsibility, she seemed to take on new youth. Long after the children had reached maturity and left home, the grandmother survived to be the wonder and admiration of the surrounding community. She lived to well up into the nineties.

Life is indeed a mystery; but one fact stands out so clear and definite that all may see. Those who give lavishly in affection and helpfulness seem to continually become richer in health and vitality, while those who deprive others of their kindly good will and helpfulness cheat themselves the worst of all.
Those who have reached middle life in a fair condition of health are reasonably assured of a comfortable old age if they can avoid numerous pitfalls which seem to be continually spread before them.

Many a healthy man or woman with a good physical prospect for the future becomes a victim of one of these untoward accidents, and the ranks of the survivors must close up as the procession goes forward.

There are two great natural enemies of mankind: hunger and cold. In our present civilized state, at least under normal conditions, hunger has, in the main, ceased to be a danger to life. Because of various extremely diversified modes of life, cold continues to be a sinister barrier to longevity.

Researches of many eminent physicians and biologists have demonstrated that the person who remains unscathed in times of pestilence is enabled to resist these dangers through possession of a high degree of personal immunity to the germs of disease. This desirable physical state is maintained by suitable food, exercise, rest, good air to breathe and the avoidance of that chill which reduces the physical efficiency of the body, thus neutralizing the other favorable factors. When, however, a bodily chilling is combined with fatigue, immunity to disease is materially lessened.
Naturally one of the most to be dreaded diseases of middle age and older is pneumonia. That the frequency of pneumonia is closely identified with the prevailing temperature is shown by the fact that it is infrequent during the warm summer months and gradually increases with the opportunities for getting chilled, and subsides at the end of the cold season as these opportunities lessen.

Excessive fatigue is supposed to produce a lowered state of bodily defenses, which leaves the way open for a pneumonic invasion; but, while it is reasonable to think that people become just as tired in dog days as they do in midwinter, such physical exhaustion is not in summer identified with an epidemic of pneumonia. Hence by the process of exclusion we must concede that cold in itself produces just that lowered standard of efficiency in the blood stream which leaves the lungs in a condition to offer a considerably lessened resistance to the germs of this disease.

A large number of physicians can be depended upon to tell their patients, under appropriate circumstances, that it is dangerous to become seriously chilled. Unfortunately they do not as a rule explain the physiological reasons for their words of caution. For this reason a great number of people, very sensible in the main, think nothing of “taking a chance” by riding or walking in the open air without sufficient clothing. If they become uncomfortably cool, they trust to luck that they may throw off the chill without taking cold. Fortunately for the human race, they
usually escape; but as people become older there is an increasing number of chances that some time the trap will snap shut with them in it. Then must follow the battle for life, which, even if successful, often leaves a depressed state of health for a considerable time at least.

Therefore it cannot be too urgently advised that people should not take unnecessary chances. It does not follow from this assertion that any individuals of fair health should go to the other extreme and coddle themselves. As a rule, safety lies in the middle of the road, between the two extremes.

There are numerous other evil consequences which may result from an undue chilling of the body besides some inflammatory process of the lungs. The fact that Bright's disease, one of the most common obstacles to long life in an individual, is far more common in the cold climates affords presumptive evidence that chilling of the body may react upon the kidneys as well as upon the respiratory tract. To be sure, there are plenty of other causes for Bright's disease than chilling of the body. But these causes are not operative to any such degree in warm climates as they are in cold. Therefore the path of safety for those who may at some time or other have shown traces of albumin in the urine is to very carefully avoid getting chilled.

There are several kinds of germs which may cause catarrhal colds which are often epidemic in cold weather. But, although there would seem to be no reason why these germs should not be as highly
favored by a summer temperature as by that of midwinter, everyone knows that a catarrhal cold in midsummer is relatively infrequent. Most people escape such infections during the summer months even if quite commonly subject to them in the cold weather. A few may have such sensitive mucous membranes of the nose and throat that these conditions may manifest themselves as a result of atmospheric irritation. But there are comparatively few people who can breathe properly who, after all, can really make themselves believe that it is unwholesome for them to breathe pure cold air. Therefore the same deduction presents itself as in the other conditions mentioned, viz., chilling of the body is followed by a lowered immunity.

Of course, it is impossible to avoid becoming chilled at times, but if the physiological importance of a prompt reaction is understood, most any person of fair common sense will take the means to establish the reaction. One of the severest tests which is experienced by people in their occupations is in the case of models who have to pose for an hour or two in light drapery or perhaps in very little drapery at all in an unduly cool studio. The model who has had that experience finds that safety lies in re-establishing equilibrium by taking a long, rapid walk. In this way, generally speaking, no apparent harm results, although no physician would probably recommend such a calling as especially healthful.

Naturally we must not overlook the factor of contagion in the spread of catarrhal conditions of
the respiratory tract. Only a comparatively small percentage of the population seem to understand that the development of these disorders in the different members of the family is anything more than due to a coincidence or some peculiar quality of the atmosphere. It is a fact, however, that the person who develops a bad catarrhal cold, which perhaps affects the bronchial tract as well, should avoid contact, so far as possible, with others. If the contagiousness of these colds could be fully appreciated they would probably be much less frequent. The average family physician is by far too busy with his never-ending routine to enter into any arguments with people who are more or less skeptical or indifferent. Therefore he has to devote a great deal more time and professional attention to the consequences of these contagions than to their prevention.

The majority of people regard a severe case of the common type of cold as merely an unpleasant episode. They do not attach sufficient importance to the physical depression which accompanies such conditions, but seem to expect that about once in so often they will have to go through with such an experience, whereas, theoretically at least, it is perfectly possible to practically banish such colds entirely.

There are certain people without any special medical knowledge who have seemed to possess a certain canny good sense which enables them to put the cause and effect together and gradually evolve a method of escaping these conditions. An example
of this kind was observed in a man who had so perfected his system of defense against the common cold nuisance that he announced with the utmost confidence that he never expected to have another cold as long as he lived. He had found by experience that colds resulted from such and such causes, and by eliminating these causes he had for a long period escaped having any colds whatever. Such a rare exception to the common lot of mankind was certainly interesting and worthy of further observation; but unfortunately the amateur scientist in question was such a remarkably sound sleeper that when a fire broke out in his dwelling it gained such headway before he awoke that he was unable to escape.

There is one item of information which physicians should so impress upon their families that they would never forget. It should be explained to them that any catarrhal cold which involves the chest and which is accompanied by a rise of temperature should be the signal for the patient to go to bed and the doctor be called. Such a policy carried out by intelligent families would prevent many serious illnesses and numerous fatalities.

The person who has become, in the popular term, subject to bronchitis has developed a lowered state of resistance which should be corrected. A person in this state of health may have one bronchial cold after another, and eventually develop a condition which favors the incubation of the germ of tuberculosis. When this stage of physical depression is reached, radical action is necessary. The person who
requires three or four weeks to recover from a bad bronchial condition when attending to his regular duties and finds he may only recover from one but to shortly develop another, should be put to bed, as with this policy not only may there be complete recovery in a week or two and the patient be regarded as cured, but the tendency to recurrence will be greatly lessened. One thing is certain, the most skeptical patient will become convinced of the value of this mode of treatment if he has once seen it carried out efficiently.

Those who are unduly exposed to cold and do not develop some catarrhal manifestations should not flatter themselves that they have escaped the consequences. There are numerous other ways by which outraged nature may voice her disapproval. Rheumatism is a common sequel to such disregard of hygiene, and there are at least fifty-seven varieties of this condition. A man of about forty years who had always been a most excellent physical type and enjoyed good health, became convinced that he would be benefited by escaping somewhat from the confinement of a large prosperous country store in some outdoor occupation. He therefore bought a dairy farm and frequently spent his afternoons in midsummer by helping with the farm work. Being naturally energetic, he would become quite warm and perspire freely. Instead of waiting until he had become thoroughly cooled or supplying himself with extra clothing, he would leave the farm and hasten back to the store, riding in the cool breeze. He
developed rheumatism; but having always been well he thought it would soon pass off. Persisting in this custom he fastened this condition upon himself to such an extent that after years of most exquisite suffering he died practically from exhaustion.

That the catarrhal cold is a life shortener in the instance of many people who seem to throw off such colds with comparative ease is unquestionable.

The danger of taking cold from any undue chilling of the body is greatly augmented when a person is habitually clothed too warmly. Such a custom naturally lowers the resistance. People who pass the chill days of winter in a steam-heated atmosphere should wear relatively light underclothing, making up this lack of covering by extra wraps for outdoor wear. There should also be plenty of exercise in the open air.

Probably no one factor accomplishes more for the development of bodily resistance to cold than the hand rub in cold water on arising. This should take place in a fairly comfortable atmosphere and extend to the knees, the feet and ankles being unexposed. The quick rub with cold water followed by rapid and vigorous toweling can be depended upon to produce an agreeable sense of reaction in most any person in a fairly normal state of health. The increased appetite for breakfast and the incidental sense of well-being amply repay anyone for the time and trouble involved. This practice comes as near being a specific for the tendency to bronchitis as could be recommended.
The tendency to acquire the infectious form of catarrhal cold suggests the use of the nasal spray with an atomizer whenever there has been exposure to such disorders. An oil spray is preferable for this purpose. Thus treated, the nasal mucous membrane becomes comparatively immune to outside infection.

The crop of colds which are often prevalent at the Christmas season can be plausibly attributed to over-eating. Theoretically at least, physicians could accomplish much good for their patrons if they would explain the consequences of these dietetic excesses. There are limits, however, to the probable benefits of such warnings, and doctors soon acquire a canny reluctance to meddle with the propensity to over-indulgence on festive occasions. Even the best tempered dog will often resent any attention while eating his dinner.

While it should be understood that a tolerable degree of warmth is essential to health, it is equally important that the useful, but not medically wise, citizen should be made to appreciate the physiological difference between bodily warmth derived from artificial heat and that secured by normal muscular exercise. We have heard the story of the gold mine prospector who, enduring untold hardships in his search year after year and always in the best of health, eventually succeeded beyond his wildest hopes. From that time forward, being free to live at ease, his life became just one specialist after another.

The resistance to cold which comes from useful exercise is a thing apart from being swathed in warm
clothing or seated at ease near a warm radiator. It is the difference between the natural and the artificial. But for the elderly of indoor life caution must always be advised, lest there be over-exertion and undue strain upon an arterial system weakened by the insufficient and usually unsymmetrical modes of exercise to which those who lead an office life are commonly driven because of the protests of outraged nature. Moderate exercise with some useful and interesting purpose in view, the gradual development of a warm glow and incidental perspiration, is normal and helpful to all who are in a fairly healthful condition.

Few lay people of middle age appreciate the morbid possibilities of the acute indigestions. Probably no more fertile field exists for the exercise of a philanthropic spirit of enlightenment by the family physician. People who have reached middle life with a record of a practically unfailing digestive capacity are prone to believe that whatever other physical weaknesses may have become manifest, they need not borrow any trouble as to their ability to digest such foods as their preference indicates, irrespective of quality or quantity. That this is a delusion which frequently brings fatal results is so well known to physicians that it should be much more widely known among their patrons.

The most general indication that the time has arrived for a slowing down in the gastronomic department is habitual stomach pressure or "heart-burn." Certain foods, especially the coarser vege-
tables, are apt to be the principal offenders in this process, and people who have been usually of robust health are perhaps more reluctant to indulge sparingly in these foods than to practice abstinence with most any other part of the menu. Being usually in comparative ignorance as to the mechanical effects of this gas formation, they are inclined to ignore these symptoms or to perhaps attempt to correct them by the use of soda or some other form of antacid.

It is obvious that eventually the more or less constant presence of an undue flatulence in the stomach must exert an undesirable degree of pressure upon the heart, with the incidental lessening of the functional power of the stomach itself and especially of its mucous coating.

When this unhygienic condition is continued right along month after month there may come a time when trouble which is barely smoldering under ordinary conditions may burst into flame. The business man who has never found it necessary to parley with his digestion may, through a combination of circumstances, find himself, while in a state of fatigue and unusual hunger, confronted by a more elaborate bill of fare than usual, and relying upon that good fortune which has always accompanied previous epicurean exploits, he proceeds to satisfy his hunger to the limit. Under such circumstances it is perfectly possible for the long abused stomach to give up the struggle entirely, with the result that the heart, which has been hampered and crowded through gastric extension for a long time, finds the additional
burden too great and, like a wornout clock, suddenly stops beating.

Perhaps a more frequent result of this form of error is found in the gradual irritation of the stomach lining to a degree that produces gastric ulcer. In this event the morbid consequences do not materialize in so tragic a manner, but unless there is a radical change in the mode of eating and very skillful medical treatment, the result is the same, and the person who has been more fortunate than others in the possession of an excellent digestive capacity has been misled into a condition of false security, as undesirable in hygiene as it is in warfare.

The above is merely one type of morbid process which may result from injudicious feeding. Perhaps the heart and stomach are found to be practically immune to such excesses. There remains the abdominal tract to be considered. Granted that the stomach contents emerge through the duodenal outlet without causing any undue disturbance, there is yet the process of intestinal digestion and absorption to be carried out. It is obvious that if the intestinal contents are strictly physiological in quality and quantity it may be reasonably expected that there are no unpleasant manifestations. But, as often happens, defects in that perfect form of digestion, which is so much desired by all, are frequently manifested in the abdominal region. The liver performs its tasks with a stolid fidelity which often results in its being seriously imposed upon. If the burden placed upon this long suffering organ is habitually greater than it
should be expected to bear, some time there may be another instance where smoldering resentment bursts into flames. Congestion of the liver, followed by jaundice, is not usually a fatal disease, but is one which impairs the digestive capacity for a considerable period of time, and in later years there may never be complete recovery.

A not infrequent result of digestive weakness which manifests itself in the abdominal tract after middle age is appendicitis. A professional man of splendid natural physique was specially fond of sweet desserts. Socially inclined, he was often provided with an evening collation in addition to his three elaborate regular meals. His fondness for ices and similar delicacies was a pleasant joke among his friends. He began to have uneasy sensations in the appendicular region, and, morbidly afraid of an operation, he devised a method by which he felt sure he could relieve himself from any dangerous circumstances. Under such conditions, of course, an explosion was inevitable. The operation had to be performed, but all too late. Thus another useful man in the prime of life passed off the stage of earthly endeavor.

It is sad to think of the number of splendid physical types whose very vigor and natural resistance have been their undoing. This should not be possible, except in rare instances, and would not be if physicians would take it upon themselves to explain more definitely the causes of various ailments instead of practically confining themselves to remedial efforts.
While nephritis, or Bright's disease, usually pursues a more or less chronic course, there can be little doubt that in its incipiency the development of albumin excretion is due to some sudden undue tax upon the kidneys. A combination of overwork, a tense nervous state and over-indulgence in albuminous foods may push the excretory powers of the kidneys beyond their normal capacity. Perhaps a temporary reduction of the diet, with rest and relaxation, may restore symmetrical function once more, but these over-indulgences in work and alimentation cause more frequent repetitions of the condition until finally there is a distinct abnormal state which, masked for a time by other symptoms or no apparent symptoms at all, eventually makes itself manifest in such imperative terms that the condition is discovered when it is too late to be rectified.

There seems to be a propensity among many people of great natural energy to become more and more involved in business just at the time when they should begin to relax. In the main, people of average intelligence understand this as applied to others, but they are very prone to regard themselves as exceptions to this general rule. If they could but understand the great importance of the reduced consumption of albuminous foods after middle age and the reasons therefor many unnecessary tragedies could be averted. Physicians recognize these facts, but, as before stated, it is a brave doctor who has the courage to attempt to stand between a hungry man who considers himself in good health and the appetiz-
ing foods to which he has become habituated, and knows no reason to doubt his gastronomic ability.

In this connection there comes to mind a serene old man rounding out a life of great usefulness and activity, who substituted for a liberal use of meats in his diet an even more liberal use of milk three times per day. A small pitcher, containing perhaps a couple of glasses of milk sufficiently warmed to take off the chill, was placed beside his plate at every meal. He had little or no meat, but otherwise he conformed to the family menu. He died in his ninety-second year, being in his last days well poised, cheerful and without the slightest apparent abatement in his natural intellectual vigor.

The fact that the treatment of a majority of the diseases of advanced life centers upon the diet is sufficient reason why those who have not yet developed these undesirable physical conditions should be warned in time. There is no one who can issue this warning with the authority which will be recognized except the physician.

There can be little doubt that the noon-day sandwich has much to answer for in the vital statistics. The young clerk who hastily consumes a ham sandwich topped off with pie and ice cream may in popular phrase "get away with it." But the elderly person had much better acquire the soup habit. It is probable that the abolition of the noon-day dinner has considerable to do with the increased mortality among the elderly. The average restaurant sandwich requires much more conscientious mastication
than it generally gets. The result is that not even
the real nutrient values of a rather limited number
of calories are really absorbed. Under such condi-
tions the sandwich addict arrives at the dinner table
in the early evening with a ravenous appetite, eating
a heavy dinner, the digestion of which may be some-
what interfered with by a late evening lunch, if the
person in question is socially inclined.

In considering the results of such dietetic ex-
plotts, it is well to bear in mind a few general
principles.

Let us suppose that the average man arrives at
the age of fifty years with no perceptible impairment
of digestion, respiration or heart action. He is ca-
posable of passing an excellent examination for life in-
surance. But it is some twenty-five or thirty years
since he reached average physical maturity. His
machinery has been running smoothly all this time,
but there must inevitably be some lessening in the
capability of the same machine to stand hard usage.
Strain which would be passed over easily at twenty-
five or thirty gives his machinery considerably more
of a jolt now. Therefore, according to a reasonable
social theory, this person of fair intelligence should
be instructed by some competent physician just how
to ease up the strain of ordinary living year after
year and thus preserve equilibrium.

As has been stated before, cold is perhaps the
most common factor in bringing about many sudden
and unnecessary physical disasters. When habitual
extreme fatigue and reckless feeding are added, the
outlook is still less encouraging for the green old age everyone seems to desire, although, as the humorist says, few are satisfied when they get it.

It should not impress a person of observation and intelligence as an unreasonable theory that, if the domestic animals must be kept fairly warm to thrive, the *genus homo* might naturally require protection from chill as essential to perfect health. Likewise the unwisdom of overfatigue in advanced years should be perfectly apparent. A young horse may be given a hard day's drive and in a day or two apparently have entirely recovered, while an old horse in evident good spirits at the start of a similar drive may become so overfatigued as to show the effects for a considerable period. Now when we add to these factors the dangers of reckless eating, it is easy to understand why a few who have acquired a more thorough comprehension of these principles will, barring accidents, live well up into the eighties, while those of stronger physique who have disregarded all these basic principles of hygiene may die in the fifties.

There is a popular idea that stout people are short lived; but this is not necessarily true. It depends very much upon their personal habits. Many stout women live to a very advanced age, especially if engaged in household tasks. They thus secure appropriate and regular hygienic exercise.

One of the most common obstacles to longevity of men of corpulent tendencies is the frequent reluctance of such people to take proper exercise, which, of
course, means regular exercise. The heart, which is not only encased with a considerable amount of adipose tissue, but which has the burden of carrying on adequate circulation of the blood throughout so large an area, must be treated with great consideration. This can be accomplished provided the person understands the situation sufficiently to exercise fair judgment. Unfortunately, many of these rotund people are left very much in the dark, and their hearts are subjected to alternate periods of inactivity and excessive bursts of energy which naturally occasion abnormal strain. Under this unsymmetrical system of hygiene this patient organ gradually loses strength and the capacity to meet the occasional excessive demands.

Now, on the contrary, where there is a comprehensive understanding of the mechanism of the heart and the handicaps imposed by unusual corpulence, the person of judgment develops a system of fairly uniform exercise of a nature that does not impose serious heart strain, with the combined result of giving increased tone to the circulation and avoidance of the development of a pendulous abdomen, which is perhaps as menacing to longevity prospects as any physical characteristics of this period.

Posture has a great deal to do with the physical integrity of the corpulent man or woman. Those who do considerable walking or when at home or the office spend a considerable portion of the waking hours upon their feet, are giving the vital organs a much better chance to perform their functions.
Physicians are very much handicapped in their recommendations of exercise. They must give advice which will be graciously received. It would be extremely undiplomatic to tell the plain ungarnished truth to many well-to-do citizens of much avoirdupois and a fat bank account. Hence we hear the legends of numerous roly-poly women performing strange physical stunts in the seclusion of their apartments and see numerous masculine victims of too excellent a digestion wending their weary ways about the golf links. The physician brutal enough to say to those women that the best possible form of exercise they could take would be to assist at housekeeping and who would advise the substantial citizens of the other gender to take up gardening and the use of the axe would not be appreciated, although his counsel might be the very best possible under the circumstances.

The human body is developed by exercise, and tends to remain in a condition of health and integrity as long as exercise is maintained. Whoever substitutes some one of the multifarious systems of diet or hygiene for the muscular activity required by nature is taking a chance. He may get along in a fairly comfortable way for a considerable period, but sooner or later some one of the essential cogs in the human machinery loses its capacity, and then the whole machinery must be scrapped. Those who stop and think of their developing days and of the physical activities of that period and of the sense of well-being they enjoyed and who find themselves in so
different a physical state in advanced years should not attribute the change entirely to age. On the contrary, they should, so far as their circumstances permit, get back into the physical habits of their more active days, cautiously and gradually, of course. To those who get the vision and who are able to act intelligently, there is a grand awakening and a new physical life if they will but act with judgment.

Exercise which does not include the abdominal tract is but a poor substitute for that which is normal.

As before stated, as people grow older they become more and more wedded to their pet notions, especially in the matter of diet. Any system of diet which keeps the intestinal canal in an abnormal state is unhygienic. When such conditions develop, a person should go back to first principles, which means chiefly the easily digested cereals and milk. No person need starve on that form of diet.

Digestion is mostly a matter of chemistry; certain ferments formed by the secretions of the stomach and intestines combine with the food for the purpose of so transforming it that it may become assimilated and thus utilized for the production of heat and energy. If the chemical process of digestion is a normal one, there are no disturbances of function among the activities of the lungs, heart, liver, pancreas, kidneys, etc. But if there is an injudicious selection of foods, the chemical reactions following their introduction into the stomach and their combination with the gastric juices may produce irritating influences which by absorption from stomach and
intestines produce auto-intoxication and involve the vital organs in disordered function. As people become older they become more susceptible to these adverse influences.

The doctor who makes these facts plain to his reasonably intelligent families has placed himself upon a lofty pedestal in their regard. His patients will see to it that his light is not hid under a bushel.
CHAPTER XI.

THE CELIBATE OF FIFTY OR SIXTY.

There are many thankless tasks in this world which must nevertheless be cheerfully undertaken and if possible finished with as much remaining cheerfulness as circumstances permit. To suggest offering good advice to the celibate is to assume that such advice would be appreciated, whereas everyone knows that if good and generally oft-repeated advice had been followed by the celibate, he or she would have long since ceased to be a celibate.

However, when the mischief is done and the willful and elusive maiden has become a sober old maid, and the frivolous beau has developed certain tendencies to physical infirmity and to solitude, much can be done to sustain and cheer these lonely ones who have somehow missed the best that life holds in store.

Two basic principles stand out conspicuously among the laws of physiology. The human young cannot develop normally in a loveless environment, and the human adult shrivels and deteriorates prematurely when deprived of something to love and protect. No social sophistries regarding bachelor maids, no elaborately contrived club diversions, no self-delusive optimism as to the joys of a life free from family responsibilities can explain away or alter these
primordial and racial facts. Therefore, it inevitably follows that the celibate, all else being equal, is physically at a disadvantage. And as sooner or later the doctor enters upon the scene, the question must naturally arise as to what shall be the nature of the psychological panacea which every wise physician dispenses even more fully than the pills and tinctures which nominally make up his stock in trade.

The man of family, if possessed of fair intelligence, is pretty sure to have acquired some workable knowledge of hygiene. Various health problems have arisen in the family which, with the doctor's admonitions and explanations and some study on the part of the family members themselves, will have widened the understanding of the dominance of the mental over the physical. But the bachelor has not usually encountered these questions, and may easily arrive at the age of fifty with a most profound ignorance of the science of self-preservation.

One factor which often handicaps the unmarried of elderly age is the abject fear of anything unconventional. The spinster school teacher or store clerk will so dread any change from accustomed routine as to persist in her round of duties until collapse is near. The same holds good, although perhaps in lessened degree, with the elderly bachelor. Such people seem to feel that to complain of feeling badly would excite contempt. Many untimely deaths result from such morbid secrecy.

In a small town a bachelor of a little less than fifty, in generally fair health, acquired a severe bron-
chial cold. Having apartments in his place of business, he habitually secured his meals at a nearby hotel. The weather was intensely cold, the hotel dining room was chilly, and the bronchitis became worse. Friends of the masculine gender urged that the patient stay indoors and have the care and watchfulness which their various wives would gladly supply. The poor bachelor could not endure the thought of causing so much trouble. He persisted in going to the hotel, pneumonia shortly developed, and was almost immediately fatal.

Some of these well-meaning people who desire to reform nearly everyone but themselves have, in the wide range of their activities, proposed a tax upon bachelors. As none of these patriots have suggested taxing old maids, it is to be assumed that, in their outlook, failure to wed is a masculine fault only. Their philosophy resembles that of the lamented Artemas Ward and his famous soliloquy, "Where, oh! where are the girls of my youth? Some are married; others would like to be." In point of fact, most unmarried people of mature years have simply failed to arouse interest in the right direction until the chains of habit have anchored them.

The physician, who, as a feature of his treatment, can let the sunlight of easy congenial intercourse with others filter through the reserve of celibacy has accomplished a creditable piece of work. If the barriers are once broken down, the expectation of life may easily be extended a decade. Such changes do occur, and happy marriages may result.
But the doctor does not usually aspire to the function of matchmaker between elderly bachelors and spinsters. He ministers to their bodily ills, carefully avoiding allusion to any disadvantages which may result from their lonely estate. However, it is clearly within the bounds of propriety to advise the development of a human interest and the avoidance of introspective seclusion.

One of the physical handicaps of celibacy is this same reluctance by others than physicians to offer useful suggestions on ordinary hygienic topics. The married man or woman is constantly being called to account by the family for any disregard of the laws of health. Usually it may be assumed that the collective judgment of husband or wife plus that of the children is a more valuable guide to some venturesome unit of the household than that of the individual in question. The husband who calls his wife down for too much zeal at house-cleaning time will have his day of reckoning later when he transgresses some law of health. But the single man or woman of fifty or over is usually surrounded by an atmosphere of greater reserve, and associates hesitate to volunteer such words of caution.

The physician's problem with such people is therefore more difficult, and requires much tact in certain cases. Where the married woman will often be profuse in her narrative of symptoms, the spinster and the bachelor as well may be undesirably reticent, chiefly in some instances because of a reluctance to "make a fuss." Too much cross-questioning may
actually seem to arouse unmistakable resentment by these persons.

Another psychological element to be considered in serious illnesses is the lessened incentive for living. The father or mother of a family under such conditions is eager to carry on the accustomed tasks largely for the benefit of those more or less dependent. The unmarried patient may even have a depressing fear of becoming dependent herself.

So it naturally follows that the greatest element in the treatment of the lonely old bachelor or spinster is the development of a real object in life. And this, in the constructive sense, always means a life devoted to others. It is only necessary to contrast the maiden lady who is working for others with the self-centered type to see the physiological benefits. The jolly old maid who is "all bound up" in a bunch of lively appreciative nephews and nieces seems, after middle age, to approximate her married sisters in her general physical attributes. She throws off the burdens of advancing years just as easily and enters gladly into social life. The maiden lady of this type, therefore, seldom becomes an unusual problem to the doctor.

It might be said that the shy, retiring spinster is an infrequent source of professional perplexity, as she commonly avoids the doctor if possible. But when she does finally come under observation there is a question of psychology which often requires solution first of all. The thing to be done, of course, is to secure the patient's entire confidence—generally no
easy task. With the employment of tact, however, it may be possible to arouse a new interest in life, which might easily be worth the discomfort and inconvenience of a hard illness. In brief, the first essential in the treatment of such a case is to so influence the patient as to give her as near a normal viewpoint as possible. This being done, she stands an equal chance with the average woman. The bachelor who in his younger days congratulates himself on his freedom from the uncatalogued problems of family life becomes less assured as to his happy estate as the years advance. Success which is to be shared has a better flavor than success which is to minister solely to self-gratification. As some one has happily phrased it, "Celibacy is a pleasant breakfast, a tolerable lunch, but a very poor dinner"; and as the years go by, and the digestion becomes less reliable, the average bachelor is in a position to attach special significance to this simile.

Therefore, when the more or less dehumanized bachelor becomes sick and in a position to appreciate his lonely estate more than usual, the first step in the relief of his condition is, if possible, to establish that natural bond of sympathy with domestic life which does so much to inspire courage. All the tonics in a well-equipped apothecary shop are not to be compared for efficacy with the removal of the grumpy patient, thoroughly down on his luck, from the bleak discomfort of even sumptuously appointed apartments to the sympathetic atmosphere of a real home, with perhaps a big-hearted married sister or niece,
and some well brought up young children to all take a genuine interest in their usually aloof relative, now brought to earth from his normal seclusion. Of course, the foregoing program does not so frequently happen. More commonly the poor, lone Robinson Crusoe remains in his apartments with a trained nurse or goes to a hospital, from which he eventually emerges to resume his accustomed mode of life. But in either event, if the doctor were really free to speak his mind (which unfortunately he generally is not), he might, with entire compatibility with the code of ethics, point out to the patient the psychological and even physiological benefits of so arranging his affairs as to devote some of his time, energy and substance to the upbringing and education of small children, even if for no other reason than the selfish motive of establishing a new interest in life.

Instances have been known where the lonely old bachelor has become fully convinced of the wisdom of this course and has so revolutionized his mode of life as to marry a widow with a group of small children. Such cases usually turn out happily; but unfortunately this procedure cannot be generally advised, there not being a sufficient number of interesting families available to supply such demands.

However, opportunities are abundant where the untrammelled bachelor can assume the role of fairy godfather if he will. Probably there are few examples of genuine hero worship surpassing the admiration of the small boy who has thus far known little but privation when some big, whole-souled man,
apparently regarding him as "a regular fellow," proceeds in various practical ways to hold out the helping hand. When it is considered how little is sometimes required to shift the life course of the small boy for good or the reverse, and also how much genuine manliness may be hidden behind a ragged coat and a badly soiled countenance, it seems strange that more attention is not given to this most agreeable form of civic duty.

People who have acquired the habit often seem to derive their main diversions from mixing up with the misfortunes of others. The medical profession makes no claim to surpassing rectitude, but can show a gratifying immunity to one common failing of humanity—viz., self-centered indifference to other people's woes. The average doctor is not a grouch. He cheerfully makes great sacrifices of personal comfort when he knows that his only reward will probably be an approving conscience, and even that shining possession loses its luster sometimes when the doctor concludes from abundant evidence that being philanthropic is just another name for being an easy mark.

Just as the physician often charges up 15 per cent. or 20 per cent. of his fees with little expectation of ever collecting them, and lets another 10 per cent. go as pure philanthropy, so there are a few other people who get the helping others habit and seem to enjoy it. But, in the main, the person who is entrapped into some act of involuntary helpfulness deplores the necessity of it as he would the loss of a tooth.
That time-honored medical joke which makes the doctor say to his patient, “Don’t do as I do; do as I tell you,” can hardly be applied to his philanthropy, as in this field of endeavor the doctor does a great deal that can well be emulated, and says nothing about it at all.

If it is better to wear out than to rust out, the doctor certainly should know. Few physicians have time or opportunity for that pitying watchfulness of self which so well exemplifies this corrosion of mental and physical function when the attention is turned from outward to inward.

And so in the case of the elderly celibate, the rapidity of the decline from vigor to senile weakness largely depends upon the degree of personal usefulness. And as the person whose attention is concentrated solely upon self has too much to worry about to have much time or energy to devote to general usefulness, his case is, indeed, hopeless, unless he can be jarred loose from his pet routine.

Now, who can be delegated to issue the necessary words of warning to those who are so plainly in need of it? There can be but one answer. It is the doctor’s job. He and he only can place before the victims of single blessedness, and their narrow sphere in life, the necessity of breaking away and giving their unused brain and nerve cells exercise while the overworked ones get a rest.

The medical problem identified with the treatment of the unmarried man or woman of advanced years is, of course, complicated, because of the handicaps
which have been to but a limited extent set forth. Habits, which are such factors of increasing dominance in the lives of those who have led a married existence, attain a special influence with those whose personal attention is little diverted from themselves and their limited sphere of action. It therefore becomes necessary, in the treatment of such cases, to devote more than usual attention to the probable effects of these personal habits and channels of thought. Nearly everything which is rational may, if carried to excess, become abnormal. About every person of intelligence understands that there is probably no more wholesome article of food than roast beef; but if the consumption of roast beef is carried beyond reasonable limits it may become a menace to health. The prominent characteristic of the elderly celibate is to develop strong likenings for certain restricted articles of food and drink. By a similar form of reasoning there is probably no halfway policy in an old maid's fondness for cats. She either is much devoted to these animals or she holds them in absolute execration, and it is probable that maidenly devotion to cats and parrots is fully counter-balanced by the number of old bachelors who abhor them.

Therefore it may be consistently reaffirmed that, in the treatment of this class of patients, nearly as much attention must be devoted to idiosyncrasy as to pathology. To so direct the treatment as to establish as remedial factors the employment of faculties which have for a long time been dormant is to not only prepare the way for the most favorable prognosis under
the circumstances, but to in certain cases establish new interests in life, a more hygienic mode of daily existence and a considerable addition to the general expectation of life.

It is, of course, taken for granted that any change of habit in these cases will be generally undertaken by the patient with great reluctance, but if the recommendations of the physician under such conditions are sound and based upon well-balanced reasoning, the very evidence of such reluctance is a strong argument in favor of the doctor's insisting upon carrying out the plan.

Next to the advantages to be derived through the association of these elderly celibates with young people is the establishment of personal contact with the useful domestic animals. There is something peculiarly comforting in the companionship of an intelligent dog or horse or in the possession and development of cattle. Of course, it is unnecessary to mention the instinctive fondness of femininity for hens and chickens. No better advice can be given to the elderly and unattached man or woman than the recommendation of these forms of diversion. The importance of establishing these side interests becomes more manifest when it is considered how little there is in the lives of some people to supply that eager determination to recover from a serious illness which is often so encouraging a factor in a married patient. For a woman to have the feeling that her life has been a failure, and that if she lives she may become a burden upon her relatives, may considerably more
than offset all the remedies and professional platitudes the doctor can provide. Nowhere is the pathos of dependence upon the next of kin more apparent than in the cases of gradual decline of health among the indigent and unmarried.

The personal attitude of the physician in such cases is of far more than ordinary influence. Nothing is more helpful to patients of the aforementioned type than to have the breezy, big-hearted doctor show them the deference which belongs to a real personage. Often the best stimulant they can have is a tonic to their self-esteem. Not only does this form of mental stimulus produce almost magical results upon the self-abased patient depressed with a remorseful feeling that she is a burden and a nuisance, but the influence upon the household may be greatly for the benefit of the patient. There is little that reflects less credit upon the medical profession than the fortunately rare instance where, taking his cue from indifferent family members, the doctor allows that unpleasant family sentiment to be reflected in his intercourse with a self-depreciatory patient.

The spinster whose age was enveloped in mystery, but who was reported by some juvenile member of the family to be old enough so that "tea rests her," has her counterpart in the old bachelor and his devotion to black cigars. There comes a time when the same old bachelor is less physically active, and when a heavy meal, followed by heavy smoking, does not produce as pleasant an effect as heretofore. And whereas, with reasonable limitations, of course, it is
not considered to be good hygienic policy for the physician to take an arbitrary stand with the average patient against personal habits which have become second nature, it must, as before stated, always be borne in mind that such personal habits are apt to acquire a greater intensity with celibates than with married people of the same age who are more or less subject to family influences. It will, therefore, require some careful explanations to make it clear that there should be a tendency to restriction in the use of tea, coffee, and tobacco. To be sure, such people are prone to be obstinate and in some instances even resentful over the curtailment of these normally comforting habits. But, as before stated, if restriction is necessary, the doctor is far more likely to make such necessity clear to the patient than could be expected in the case of friends and relatives.

The all-important influence of rational exercise is so widely appreciated among people of intelligence at this time that it might seem superfluous to make special application of this practice to the unmarried who are advanced in years. But it should be remembered that, in order to secure the real hygienic benefits from physical exercise, the effects of such practices must be weighed from the standpoint of their influence upon the visceral organs. A moderate amount of walking in the open air is an excellent thing, so far as it goes, but unfortunately it does not go far enough. There is usually a sufficient amount of difficulty involved in securing the accomplishment of the proper amount of exercise of the right kind by the average
adult. Such difficulties are intensified when these recommendations are directed to those who have acquired an exaggerated idea of the social conventions. The head of an average sized family, realizing the need of a suitable system of exercise, would be more likely to be deterred from carrying out such a program through laziness than because of any thought of what his friends and associates might think about it. In fact, that would be the least of his concerns. On the other hand, the old bachelor who was advised to take up a system of exercise which would occasion amusement among his friends would naturally shrink from it, while the maiden lady should be expected to be even more reluctant to perhaps arouse smiles among her nephews and nieces by some radical departure from her strictly conventional form of exercise.

It is allowable, in this connection, to lay exceptional stress upon the matter of exercise, because it is, to a large degree, the basis of that good digestion and corresponding cheerfulness without which the life of the celibate becomes a very dull affair, indeed.

A depressing factor in the lives of elderly unmarried people is often found in their unfortunate readiness to assume that the average happy-go-lucky family, parents and children, regard them and their accentuated personal qualities in a more or less humorous way. This in itself constitutes a sufficient reason why physicians should regard such cases as something set aside from the average professional routine. Self-consciousness in the very young is at
least not abnormal, but in the elderly it becomes a pronounced personal characteristic which may even develop into mental instability.

Few people probably realize the sense of isolation which overtakes people who have gradually been left to themselves. The celibate is peculiarly liable to this fate. Married friends have become more and more absorbed in their children and grandchildren, and a gulf, narrow perhaps at first, gradually widens until there is little remaining of common interest. All these facts are of much physiological significance, and may eventually become pathological in their application.

No axiom in life can be, with consistency, more frequently emphasized than that "pluck wins." A person in advanced years who develops an organic weakness may secure a considerable probationary period of comparative comfort if he maintains cheerful courage. The kindly affectionate interest of friends, a sense of humor, a wish to comply with the determination of the family members to make a strong fight frequently carry the patient along year after year, until even with the handicap above mentioned the life span approaches the normal. Contrasting this situation with that of the patient isolated through a gradual loss of intimate sympathy with such early friends as still survive, and it is apparent that the combination of circumstances provides a considerable handicap.

Treatment of such patients therefore becomes, to a very considerable extent, a matter of psychology. In order that they may have an even chance they must
be kept reasonably cheerful, which means that their associates must take a real, rather than perfunctory, interest in them. It may seem that this is a field for the social worker rather than the doctor; but, unfortunately, the social worker never can speak with authority, while the doctor can.

Some day a physician of sympathetic discernment will write a modern monograph which will show the pathological influence on the heart, liver, and perhaps even the elbows of the multitudinous forms of misdirected mentality. Until this time arrives physicians will continue, as in the past, to devote as much personal attention as feasible to the correction of such errors, and the clinical results will be largely measured by the intuitive skill thus employed.

Just as the average lawyer is apt to be successful in his profession proportionally as he possesses an accurate business instinct, so should the physician be qualified on appropriate occasions to discuss business problems with women patients whose lives are isolated. Exerting the influence he does, he could no doubt prevent many sad financial mistakes. This field is too broad for anything but the most casual reference here; but there is one general principle on which the doctor might, with propriety, exercise his influence on occasion. The single woman of anything like reasonable judgment naturally has a horror of an old age of poverty. If she has had an opportunity to earn fair wages or has been the recipient of legacies, she is inclined late in life to become very economical. This, of course, is commendable in a way; but there
can be no doubt that the habit of economy carried to excess tends to create a feeling of indifference on the part of such a person’s natural heirs. The shabby old aunt who hangs on to every dollar so long as possible through the morbid fear that she might perhaps in some more or less remote period be in want is not calculated to inspire admiration among her nephews and nieces or those who will naturally inherit her property.

Such problems have been worked out to perhaps a greater extent in England than in any other part of the world. The solution of such a situation in Great Britain would naturally be the purchase of a life annuity. The maiden lady who still has an earning capacity and who has a moderate annuity provided for her lifetime can be of an optimistic frame of mind, can live comfortably, wear good clothes, and experience the cheerfulness which naturally comes with that state of affairs. Her relatives and friends, who, had she followed the opposite policy of accumulating and fanatically saving every cent, might look upon her as a very unattractive person to be tolerated in the hope of what is to come after, will now take a very different view of the situation. It is for their interest, if she is generous, to make it just as pleasant for her as possible, and the single woman of advanced age whose friends and relatives are kind to her is by nature inclined to reciprocate to the best of her ability. Therefore, when we consider the psychological contrasts between the one type and the other, there would seem to be abundant professional reasons why the
physician should, as a medical expedient, exercise the prerogative of his office as above suggested.

So in completing the circle of reflections on the celibate and his or her medical and social status, the conclusions we must naturally reach are that such people must approximate as near as possible in their mode of life those who have reached a similar age in the married state. Just so long as the capacity for usefulness continues, it is physiologically best for men and women to continue their activities. This policy ensures the maintenance of the feeling that one still has a value in the general social scheme which, if associated with a reasonable assurance that there are no dark, chilling problems of poverty in the future, will, with proper medical supervision, provide a fairly attractive outlook.

But it is not healthful to have life too comfortable, as nature abhors idleness. A single woman of fifty-five or sixty, with no near relatives, had saved from her earnings as bookkeeper a snug little sum. She decided to take life easier, and became a companion to a wealthy woman. Shut off from her former business associates, this normally active woman found time heavy on her hands. Having a good digestion, she, however, enjoyed the excellent menu provided by her employer. She had little to do, and although a strong, robust woman, naturally cheerful, the days seemed endless. Of course, physical degeneration developed, which, in this case, took the form of Bright’s disease. Quite likely, had she fallen a victim to the wiles of some mining or oil stock promoter,
and thus lost her savings, this estimable lady might have remained usefully employed to an advanced age, as she would not have acquired the mistaken idea that it was for her interest to avoid all nerve strain and fatigue.

A great deal of misdirected sympathy is poured out upon certain people who seem to be having a rather hard life, but who somehow seem to retain life and vigor to an advanced age. A busy life with companionship is much to be preferred to an easy life that is lonesome.
CHAPTER XII.

Preserving The Special Senses.

About the first sense of which the human family becomes cognizant is that of taste. The possession of this sense of taste wonderfully encourages the small infant to develop other senses.

Throughout the years of lucid human intelligence this same sense of taste maintains its pre-eminence. Plump grandmothers who know they should limit themselves in indulgence in their favorite foods are lured along by the sense of taste until they find themselves very near that status which is known as being just plain fat.

Just because possession of this fascinating ability to enjoy the taste of very suitable food may sometimes lead to excess is far from being a reflection upon that essential healthful faculty. So it seems all the more surprising that some people should allow themselves to lose this priceless possession to a considerable extent, either through badly neglected colds or indulgence in heavily spiced foods, both of which may cause a considerable perversion of this highly valued sense.

A prolific cause of degeneration of the sense of taste is neglected teeth. If we contrast the correct taste of the young child with a clean mouth uncontaminated by decayed teeth or unwholesome dietary habits with that of the person who finds it expedient
to develop a highly artificial flavor in his foods in order to create any appetite for them whatever, it can be readily seen that there has been a great change from that which is normal. To be able to eat simple food with a natural craving denotes a healthy sense of taste and a normal digestion. People of adult years who are continually stimulating themselves to develop an abnormal appetite for unwholesome food might well have their attention called by their family physician to this contrast.

The proneness of poor human nature to fallacy is perhaps never better illustrated than in the tendency of many families to systematically neglect their teeth on the theory that artificial ones will serve the purpose, also saving trouble and much expense. It is evident that there is not sufficient reciprocity between physicians and dentists on these points. If the dentist was a little more prone to send patients to physicians when it was obviously for the patient’s interest and if physicians gave a little more attention to the problems of mouth digestion, the interests of the public would undoubtedly be served to a greater extent than at present.

As it is, we see certain members of the medical profession undermining the dentists, and, in fact, placing them under a certain ban of suspicion. It has become the fad with a considerable number of physicians to credit practically all ills which they locate in any of their patients which are of obscure origin as tracing back in some way to the teeth. Obviously, if some unfortunate patient has been in a state of semi-
collapse of health for a year or two, and his physician confidently tells him that his teeth are responsible for all his trouble, it will create a feeling of prejudice on the part of the patient towards those teeth, and he practically says "away with them, and I will employ in their place a collection of foreign bodies which can be removed at my will." Of course, this kind of primitive sentiment limits the ambition and scope of the dentist to a very elementary form of work. What satisfaction can there be in a dentist preserving a fine set of teeth for a patient only to a little later on have the same patient come to regard those teeth with abhorrence and indignation because of a whole catalogue of miseries dangled before his eyes one by one by the consulting physician?

As before stated, it is desirable that physicians and dentists reach one understanding on these points. Autogenous vaccine has taken the place of the slaughter of many innocent teeth in the treatment of certain forms of abscesses, and it is probable that if a pains-taking x-ray examination of each and every tooth could be made there would be a verdict for acquittal for most of the defendants in the average case.

Just as there are physicians who would advise the wholesale slaughter of teeth on suspicion, and who would eradicate any pair of tonsils that had ever dared to exhibit any exudate, so there are others who would coerce, rather than carry on an argument with the sinuses. There is little doubt that the lay public in general is becoming disposed to fight shy of the professional bull in the china shop who would smash
every organ that did not "carry on" according to the plans and specifications of the textbooks. Right it is, however, that nature, who knows many moods, and who lies down on her job at times seemingly, nevertheless, if assisted rather than interrupted will often perform that which seems to be a miracle. To revive and redevelop the sense of taste which has become perverted or practically destroyed by catarrhal conditions in the upper nasal regions is well worth a considerable amount of expenditure of time and money on the part of the patient and of careful consideration on the part of the doctor.

The gratifications of the senses are the dividends which are paid on the general organism. If they are defective or wholly crippled, life presents just so much less of that which makes it worth while to live. Many physicians have opportunities to arouse their patients to the importance of the care of these special senses, and it is unfortunate that they do not take more frequent advantage of these occasions. The sense of smell may be lost with comparative ease and persist throughout a long life. Such a misfortune is generally unnecessary. Protection of the ability to detect odors may often save life, not to mention the almost inevitable practical occupational benefits which may come from the full protection of this sense. Yet it is nothing uncommon for a person to lose the sense of smell, giving little attention to the possibility of having it restored through careful professional attention, and to go along throughout life thus badly handicapped.
When the average intelligent layman understands the matter clearly, he will gladly and promptly consent to have the underlying structure of his nasal and oral cavities x-rayed in sufficient variety to satisfy the most exacting and conscientious family doctor. The whole trouble lies in the fact that the layman in question does not understand. He thinks there must be some graft about paying $3.00 for an x-ray of a tooth or some other section of the nasopharynx. When he comprehends that the x-ray eliminates guesswork to a large extent, he will show himself to be businesslike enough to enthusiastically endorse all that kind of photography that may be necessary for himself and his entire family. But the trouble with most of these people is that numerous doctors do not take the trouble to explain much about it. They like to feel that their patients repose the most entire confidence in them and their judgment, whereas there is considerable danger that they will expect too much. This is a very literal era. Nearly everybody likes to be shown the reason. It gives an ordinary family a Bolsheviki feeling to think that they have been led on and exploited by a combination of medical specialists, and everything should be done to avoid the development of any such suspicion.

Enormous sums of money are wasted on frivolous things by families who are too ignorant to appreciate the importance of sending their children to the dentist in time to save their six-year molars. As above suggested, doctors should co-operate with dentists in urging the importance of all such conservation methods.
In a vague way, perhaps, the lay public knows as much about the care of the eyes as about any topic pertaining to medicine. But even in this field, and in this invaluable possession, many people suffer seriously through life from the negligence of their parents, due, of course, mainly to ignorance. The public schools are accomplishing a good deal, however, in this direction. Nevertheless, there is something incongruous in having it left for school authorities to detect some serious defect in a pupil whose parents have, perhaps for years, been under the systematic supervision of a thoroughly competent family physician. It is plain to see that any intelligent mother should be educated to the importance of having her children duly inspected as to their special senses by the family doctor. A great deal of harm is done through neglect of this kind, and it is a question whether the neglect on the part of such parents does not, in a large measure, reflect back upon the family doctor.

It is to be hoped as one result of the general world upheaval that there will be a greater appreciation of the dependence of every family upon that medical profession which has accomplished such wonderful results in the restoration of sick and wounded soldiers. In such great crises of life prevention rightfully resumes its proper relation, whereas, in the ordinary hum-drum routine of the average community, children are allowed to drift along well supplied with food and raiment, which may involve much expenditure of money, but deprived of
that which would cost but a moderate sum and take up but a modicum of professional attention, and which would detect errors of vision and conditions of the nose and throat, which, although easily corrected at the outset, may result in positive and permanent physical defects.

There has been a sentiment among the medical profession that they must not, under any circumstances, appear to be soliciting business. This sentiment should be banished to that era when it was considered to be poor husbandry to plant beans in the dark of the moon.

Perhaps more real danger results from neglect of the nasal passages than from any other part of the human anatomy. It would be impossible, within the limits of the space at our disposal, to catalogue all the physical disadvantages which may follow a policy of systematically ignoring conditions of the posterior nares and pharynx.

If we are to attach any importance whatever to the prevention of disease as a civic duty, it should become a routine custom with all family physicians to impress upon the parents under their supervision that any persistent month-in-and-month-out catarrhal state of the child's nasopharynx means a material lessening of that child's probable future usefulness throughout life.

The normal condition of a healthy child—of course, sometimes interrupted by transitory colds—is a perfectly healthy state of the mucous membranes of the upper air passages. This cannot be possible if
there are adenoids or obstructions of any kind in the nasal passage. The tidy housewife who will become semihysterical over the acquisition by her small daughter of a few of those highly undesirable insects which find a lodgment in the child’s hair, will, year after year, ignore, with placid unconsciousness, the far more serious menace of a persistent cold in the head and obstructed breathing.

The consequences of these unrelieved conditions are often constitutional and far reaching, as before mentioned. Locally they may work serious disaster to the senses of taste and smell and especially of hearing.

Few lay people comprehend the direct connection between the posterior nares and the Eustachian tube of the ear.

They have an idea that the ear is a dark, mysterious cavern all shut off by itself. If the doctor could explain to the mother of a family just how direct the connection is between the posterior nose and the ear, it might change the history of many a household.

To those who give the matter casual thought the loss of sight seems to be an infinitely greater misfortune than the loss of hearing. Viewed from the economic standpoint, this is practically correct, but psychologically it is not. The person who can hear can always retain contact with friends, whereas deafness shuts one off into a world of itself.

Therefore it seems a sad reflection upon a member of that profession which has to its credit so many extraordinary instances of self-sacrifice in the life of
practically every physician to shamble along and allow so much mystery and misfortune to develop merely through negligence in looking after the welfare of the various noses, throats and ears whose destiny he holds in his hands.

It ought not to be very difficult for even a busy doctor to explain to some housemother that violent blowing of a nose afflicted with chronic catarrh is likely to cause an extension of the catarrhal process into the Eustachian tube with a secretion which will disturb the air pressure and possibly lead to permanent impairment of the hearing. People could understand those things if their doctors would only take the trouble to explain them, and then if they have something a little the matter with their ears they will go to the doctor's and have it looked after.

Somehow physicians seem to be a little shy of having anything to do with the ears. They perhaps get over-impressed by a few specialists of a type who, through ponderous assumptions of vast learning, are accepted too nearly at their own valuation.

A prominent nose, throat, and ear specialist tells of the time when he attended a meeting of his pet society of specialists and noted among the papers to be read one entitled, "How to Blow the Nose." He said at first he thought that was a silly title for a serious scientific article, but it turned out that the paper when read before the society was the most helpful and practical of the entire series. This could easily be the fact, as a specialist of good judgment and experience could, if he saw fit, indicate a large
number of serious consequences of reckless nose-
blowing.

Every family ought to know that a catarrhal bub-
ble in the ear which is made evident by swallowing is
a condition fraught with danger, and that in that case
proper spraying of the posterior part of the nose and
throat and perhaps the application of air pressure
should be insisted upon until those regions are in a
normal state.

Furthermore, every family practitioner should be
prepared to explain under such circumstances how the
ear-drum, which is liable to become depressed where
there is catarrh in the Eustachian tube, may be
pushed out normally by the patient himself projecting
his breath posteriorly through the same Eustachian
tube. This faculty may be acquired by a little prac-
tice on the part of the patient, and if utilized a couple
of times a day where there is a roaring in one ear may
materially help in correcting the difficulty. Every lay
family should understand the advantages which may
come from massage or counter-irritant applied ex-
ternally. Many an abscess of possible mastoid dimen-
sions might be prevented by such methods.

Among the barbarous and semicivilized races only
the strongest children survived. It is one of the
drawbacks to our highly civilized nation that many
families degenerate physically notwithstanding a more
than adequate system of protection from heat, cold
and hunger, only to develop the marks of physical
degeneration through the neglect of proper breathing
and mastication. The semicivilized urchin is very
glad, indeed, to thoroughly chew foods in their primitive forms, whereas the child raised in Anglo-Saxon countries in particular is pampered with predigested foods which require little use of the teeth, and suffers accordingly.

Nothing brings out the flavor of food like proper chewing. Faddists have apparently talked this subject to death in various periodicals, as we see few references to the question of proper mastication at this period. The subject is therefore left practically undiscussed, whereas it should be one of the duties of the medical profession to explain this matter on every possible occasion.

The child that is not taught to eat properly and breathe properly will be handicapped through life.

Few physicians consulted with reference to conditions of general depression, with poor digestion and lack of appetite, make any thorough investigation of the conditions of the mouth and pharynx. Frequently this region may afford the clue to much of the trouble. For an unclean mouth there is a perverted sense of taste, and every mouth is unclean which contains diseased teeth. A catarrhal state of affairs in the back of the nose and upper part of the pharynx must also exert a pernicious influence upon the doctor’s problem of building up the patient. Prescription of a tonic may help a little, but the removal of the perhaps major cause of the entire trouble would naturally be a much greater professional achievement.

Nutrition is maintained through the intake of food, which is subjected to a process of digestion. It
is just as important that that part of the digestive process which begins at the mouth be carried out scientifically as it is that food be acted upon properly in the stomach. In fact, any perversion of the mouth and throat may greatly reduce the digestive efficiency of the stomach.

Every family physician has to contend with a certain attitude of suspicion among some of his ultra-thrifty patients. If he is consulted about a child for some trifling ailment and he discovers other conditions heretofore unknown to the parents which require attention, they are often inclined to take these suggestions with a rather poor grace. They seem to imbibe the idea that the doctor is "grafting" upon them. They may retain that idea unless the doctor makes a clear, painstaking explanation of the situation which cannot fail to penetrate their intellectual armor. If this is done, they may entirely change their attitude, and may regard the doctor as the benefactor of the family; at least, a little later on.

But, unless this explanation is made, the family attitude may be that they have been exploited, and they will never appreciate what the doctor's intercession may accomplish for the child a few years later on.

Of course, it does not mean so much to society in general when the doctor investigates the mouth and throat of an adult patient with deranged nutrition, because much of the harm caused by earlier defects will have become beyond remedy. Nevertheless, there is a certain class of middle-aged people who
need to have the riot act read to them by the family doctors, and they are the ones who allow their teeth gradually to decay merely for the purpose of saving a few dollars. Every doctor ought to invent new and epigrammatic terms of admonition and contempt for that class of people. In carrying out this inelegant and unscientific process, it often happens that several years will elapse between the time when the teeth are in a tolerable state of preservation and when they have reached a condition which, as a matter of business, justifies their removal, to be replaced with artificial teeth. During this period it is impossible to conceive the amount of deleterious and germ-laden matter which may have passed along with the food and been absorbed by the digestive tract.

Some day, perhaps, some philanthropist will conceive of the idea of endowing—secretly, of course—a certain number of general practitioners whose purpose shall be to locate where they can come into contact with a certain type of self-satisfied, fairly prosperous, thrifty families. These physicians must be so absolutely regardless of the financial returns of their professional efforts as to in all instances call a spade a spade and tell just as many as possible careless, stingy, or indifferent parents the truth, the whole truth, and nothing but the truth as to the consequences of their neglect of the special senses of the different family members. Of course, such tactics would cause an immediate interruption of all diplomatic relations between the doctor and the patient, but it might happen that these indignant patients would explain to
their friends some of the scathing and contemptuous things said by the doctor in question and that eventually much good would be accomplished. Probably there are few physicians who could not recall smug, self-satisfied parents richly entitled to an illuminating discourse of this kind.

There can be no question that there is a pronounced civic duty resting upon the family physician with reference to these physical defects. Few families of even quite superior intelligence appreciate the possible ill effects of uncorrected defects of the nose and pharynx. They do not realize that restricted breathing may prevent full development of the chest and tend to impoverishment of the blood, which in its turn predisposes to tuberculosis or at best to a neurotic temperament. If the physician makes it his custom to discover such conditions where they exist, and explains to parents the unfavorable results of allowing such conditions to go uncorrected, he has placed the responsibility for neglect squarely on the shoulders of the fathers and mothers themselves. Where parents understand the connection between such unwholesome states and the finicky appetite, bad breath and perversion of the senses of smell, taste and hearing which may easily accompany these conditions, the cases are few where they will not make some effort to have these disorders relieved.

There is little doubt that many a misfit in business life, working with a fifty per cent. mental and physical efficiency, might have had an entirely different career if he had had proper medical attention in childhood.
The outlook of those who are physically and nervously defective is not reassuring at this present era of strenuous competition in the world's commerce. Parents owe it to their children to prepare them for this strenuous life with the least possible physical and mental handicap. If parents, as is generally the case, are incapable of detecting and appreciating these defects in their children, their case is hopeless unless some physician with a discerning mind and sense of civic responsibility finds out these conditions and recommends their correction.

About the only organized efforts to discover and correct the defects under discussion are what is done by medical inspection of school children. This, of course, in the aggregate accomplishes much good, but it is far from adequate. Furthermore, school inspection is largely directed to the discovering of infectious diseases with the object of preventing their spread. It is at best superficial as compared with the real needs of this period. The more people are brought up in comparative luxury and pampered by indulgent parents, the more the necessity that the family physician may exercise the initiative to forcefully place these facts before the parents and if possible ensure action on their part.

Perhaps a surer way to interest parents in these subjects is to invite their attention to the physical shortcomings of their own. A great many people of middle age and older are suffering from neglect which to a considerable extent is personal. They do not take enough interest in having their various individual and
several catarrhs treated to really get much accomplished. There is an opportunity for many warm discourses on the doctor’s part as to the folly and worse of such neglect.

Most people who try to treat themselves with a nasal spray overdo it at first, and then become disgusted and stop the process entirely. This is largely due to the fact that for some reason there seems to be a tendency to the recommendation of these alkaline sprays in a higher strength than is agreeable to the average mucous membrane. All such recommendations should be accompanied with the advice that these nasal sprays be made very mild at first. They should be used in a warm state, at least in cold weather, and careful instructions given as to application. The parent who has been cured of some annoying condition of the nose and throat of considerable standing is pretty sure to take an interest in guarding his children against the same form of ailment.

One of our early colonial flags bore the concise advice: "Mind your own business." It might, of course, be assumed that the majority of the medical profession have adopted this policy for their very own. They are reluctant to offer suggestions to their patients outside of the special limits within which they are consulted, which, while commendable modesty, is often poor civic policy. Everywhere numerous children of school age are seizing upon any excuse to give up their studies and become wage earners. The reasons, while frequently based upon the economic needs of the family, are nevertheless more commonly due to
a feeling of discouragement on the part of pupils who fall behind in their classes and acquire a reputation for stupidity which can be traced in a large number of instances to some basic condition of the nose and throat. When we consider how boys who leave school for such causes may be hampered during their entire lifetime through lack of the education they ought to have secured, it reflects much discredit upon our boasted enterprise as a nation.

Therefore it becomes apparent that every general practitioner should be prepared to do a certain amount of nose and throat work. There are innumerable simple cases which could be relieved without recourse to the office of the specialist, who, however, if there could be a general awakening on this subject, would have his office crammed with patients in need of the more technical forms of treatment. We have a climate which is peculiarly exacting upon the mucous membranes; hot and dry in summer, cold and damp in winter, and the sum total of necessary clinical work resulting is enormous. Let us hope that at no distant day the question of conservation of the special senses, which have their origin in such a limited tract of the human body, may receive the consideration it deserves.
CHAPTER XIII.

RETAINING EFFICIENCY LATE IN LIFE.

As it usually requires a considerable number of years after physical maturity for man to develop full mental efficiency, it is apparent that any material shortening of the years of perfect mental function is a civic as well as individual loss. Therefore when the intelligent man or woman of fifty or sixty drops out of a life of useful activity, the community is weakened accordingly.

If it is in the public interest that such useful lives be perpetuated as long as possible, the safeguarding of these social units by the physician is both a professional and civic duty. Unfortunately many useful citizens of average good sense at least seem to wish to avoid professional contact with the family doctor or any other doctor.

From the standpoint of theory the reluctance of the average busy citizen, especially of the male gender, to seek medical advice is deplorable judgment. Practically, however, many apparently sane people seem to think otherwise. The attitude seems to be: why should a person in health hunt for some flaw in his physical mechanism to worry about as long as that mechanism continues to function properly? However, this natural shyness does not release the doctor from entire responsibility, by any means.

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It is to be presumed that most families of fair standing have some physician in mind to whom they naturally turn in time of need. The physician who sustains this relation to such a family should be tactful enough to exercise a certain amount of influence, even upon those members of the family who have not found it necessary to consult him recently.

The advantages of this policy can be made very great if some form of record be established. Only a very little data thus gathered together may be of great assistance in time of illness. If the physician knows the habits of a certain busy man, he is better able to formulate that psychological influence which counts for so much in the treatment of people of middle age or older.

Suppose a physician knows some busy man of good standing in the community whose family is, generally speaking, under this doctor's care. Coming in contact with such a man in the ordinary way it would not seem to be a strain of professional ethics to urge upon him the importance of taking occasional vacations or in some other way getting out from under the daily grind of responsibility and business care. Surely there could be no impropriety in the physician who knows such a man in a friendly way, in offering suggestions which are conventional and justifiable even among ordinary business men themselves. In this way the doctor may often get a pretty fair idea of the physical condition of the head of a family without that individual himself realizing that he has said anything of any special significance.
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Referring to such cases, we have in mind the semi-obstinate type of elderly business men who, always having been in pretty fair health, see no reason why they should not continue to be. They may, however, be adding to their business burdens rather than subtracting, which is a very bad habit after middle age. Any policy that will enable a physician to exercise a wholesome restraint upon this tendency is certainly to be commended.

There seems to be an unfortunate custom of busy people of both sexes to gradually acquire the impression that they are absolutely indispensable in their various households and business offices. This perversion of mind is perhaps responsible for more premature breakdowns than anything else.

There could be no better professional advice offered to men and women of this type than that they should, so far as possible, unload all the details which they can possibly turn over to subordinates, retaining for themselves the function of directing the household or business without having incidentally to fritter away necessary vitality in tedious duties which can just as well be performed by some one else. The usefulness of any middle-aged person is greatly increased by the adoption of this policy.

A state of good health is usually accompanied by a state of cheerfulness. The exceptions are when the person who is in normally good health is nevertheless so overworked as to be in a state of chronic fatigue. The naturally cheerful person who has gradually become morose is in a bad way, and often the protests
and admonitions of other members of the family are unheeded. Any domestic duplicity which can materialize a wholesome lecture from the family doctor under such circumstances is really justifiable.

One of the first impulses of the person who is chronically overtired is to cut down on the food intake. The appetite is lessened, and often symptoms of indigestion appear. When this state of things is accompanied by an even greater frenzy for work, shipwreck is not far off.

It is unfortunate indeed that the "eight hour day," which is considered so essential in labor circles, could not be incorporated into many a home and private office.

After middle age the tendency seems to be either to overwork or underwork. It is hard to say which is the most injurious. Often the person who is interrupted in his apparently morbid desire for overwork by some unpleasant manifestation of symptoms becomes frightened and goes to the other extreme. In this case introspection gets in its perfect work, and the victim is worse off than ever. The physician who has a working knowledge of the general physical condition of such a patient in ordinary health can much better estimate the requirements of the case in a condition of illness.

From the person who is positively ill, all care and responsibility should be taken away entirely until the equilibrium is once more restored. After that nothing is more encouraging to such a patient than the feeling that he is once more in physical condition to take up
his regular work and push it with a reasonable amount of energy. The mental stimulus resulting from that form of self-confidence is probably the best known tonic.

There are some people who seem to have a marvelous talent for idleness; but, as a rule, it may be assumed that idleness is an inherited, rather than an acquired, quality. The person who is naturally inclined to take things easy often hails some form of physical depression with satisfaction as an excuse to loaf. On the other hand, the person who is naturally energetic is seldom benefited for any length of time by idleness. If he has to lie by and recuperate, it is important that he understand that he is simply filling in time, perfecting himself to once more resume his normal energetic habits. Under such conditions the person of philosophical mind may develop, by a reasonable amount of patience, a gradual accumulation of dynamic energy for performance of future tasks.

It is one of the characteristics of femininity that they frequently show tendencies diverse to the foregoing. There are women who will apparently go the limit until their vital nerve forces are practically exhausted, and then collapse. They feel that they have performed their perfect work as long as their strength held out, and that now they are entitled to a period of recuperation. They lay aside all their customary anxieties and worries and give themselves over in a wholesouled manner to recuperation. Many a woman who was on the verge of collapse or worse at the age
of fifty has in this way been restored to health and lived to an advanced age, apparently much the gainer for the enforced rest period. However, this could hardly be recommended as a scientific method of promoting longevity.

There is a popular theory that there are about so many days' work in a man as in a horse. No doubt there is a measure of truth in this view, but it is nevertheless subject to many modifications. The work horse, highly fed and systematically employed at hard tasks, may appear sleek and healthy, but its span of life is much less than that of the saddle horse, accustomed to regular, but less fatiguing, exercise. Likewise the man with intervals of relaxation and an aptitude for enjoying rational diversion preserves youthfulness, both physical and mental, far beyond that of the plugger with mind constantly bent upon routine tasks. In other words, both man and horse need a reasonable amount of variety.

And if man, as a whole, is benefited by slipping off the usual burden occasionally, it likewise holds good that his various vital organs need a little recreation as well. The brain, stomach, heart, and kidneys will naturally retain vitality and vigor longer if given occasional periods of relaxation.

It is frequently reported of public men that when carrying their heaviest burdens they are accustomed, when mentally fatigued, to read the most thrilling examples of light fiction. The benefits secured when the indoor man becomes bathed in perspiration from exercise in the open air are no doubt largely due to
the sudden relief of the kidneys from their usual duties. The avoidance of meats on Fridays and the substitution therefor of foods easier of digestion is undoubtedly justified as a hygienic measure.

Probably no single word is more expressive of well-being in the class of people under consideration than the word equilibrium. To preserve the equilibrium is to live a normal life to an advanced age. Disturbance of physical poise is always a tearing down process.

The person who can begin the day's tasks after the breakfast hour with a general feeling of well-being may be generally regarded in a state of equilibrium. The digestive function is being carried out normally and the hours of repose have brought a restoration from the fatigues of the previous day. This is the state of affairs which is desirable and normal, and should be preserved if possible.

The normal middle-aged person who naturally becomes a little drowsy after the evening meal if not actively employed in mind or body can generally be considered in a state of health, whereas if there is a restless feeling, all other conditions being equal, it may be assumed that there is at least too much nerve tension, if nothing more undesirable is going on. The person who is in this restless state should, if possible, ascertain the cause for it, and modify the mode of living as soon as it can be brought about. If there is anything that is causing anxiety, the will power should be exercised with the purpose of sidetracking these unpleasant suggestions, and the substitution in
their stead of ideas which tend to promote a state of cheerfulness, and, if possible, that sense of humor which is a balm for so many unpleasant happenings of life.

Probably one of the most depressing physical items in the lives of many fairly robust people of advanced years is the common social custom of eating more elaborate meals on Sunday than on other days. The mind may be taking a rest, but the digestion is working overtime. This does not tend to the preservation of that equilibrium herein mentioned. Two fairly good meals on Sunday are probably considerably better for the average person than three. There are few people, however, who have the strength of mind to refrain from indulging in the extra meal on Sunday.

One of the stumbling blocks to longevity among many people, no doubt, is persistence in eating certain foods which are better adapted to the earlier days of physical development than to the period of late maturity. Such extremely nutritious, but somewhat indigestible, foods as baked beans, pork and the coarser vegetables could easily be left out of the menu with profit in the later years. Chemistry says that there are a large number of food units in the average baked beans, but it is doubtful if any very large proportion of these calories of nutrition is assimilated after middle age. People who find themselves in a state of physical and mental activity late in life have usually long since habituated themselves to simple and easily digested foods. That which is wholesome and safe as
a dietary for a child of five is usually adapted to the person of 75 or 80 years.

All these trite suggestions present no new ideas to the educated physician. But if the physician could more frequently make these points clear to his patients much good could be accomplished.

One of the most common agencies for the production of discomfort among many intelligent people in their later years is rheumatism. Many a man and woman of seventy or over could find life very pleasant indeed were it not for this plague, the cause of which, while, of course, variable, is very frequently due in its incipiency at least to unsuitable underwear. People of that robust type who can reasonably expect to live to an advanced age are quite prone to carelessness in this particular detail. They dislike the sensation of having wool next to their skin, and they postpone wearing woolen underwear until actually driven to it by the chill of winter. There is no question that this habit of procrastination is responsible for a great deal of the discomfort and mental depression which overtakes people who have developed chronic rheumatism late in life. These conditions are brought about partly by carelessness and largely by ignorance.

A fine old man who lived to be over ninety enjoyed perfect health until the very last except for a stiffness of his joints which incapacitated him for all active exercise. He had always had a horror of the touch of woolen underwear and only consented to wear it when it became apparent to him that he was suffering for the lack of it. Although in easy circumstances, it
evidently had never occurred to him that by spending a little extra money he could secure a variety of weights of soft and non-irritating fabric that would afford him perfect protection without the discomfort which he had always associated with "winter flannels." There is probably no moderate investment which yields larger returns of comfort and safety to people of middle age and older than the acquirement of a variety of different weights of woolen underwear of soft texture. Thus equipped there can be perfect protection with no discomfort.

Individual fussiness in the matter of underwear is suggestive of much larger mental problems. The capacity for health and efficiency after middle age is composed of two essential units, viz., the major bodily organs, on the one hand, and the general temperament, on the other. A person with the strongest kind of physique, but burdened with anxiety or an apprehensive mental tendency, is liable to soon be floundering in deep waters, while the man or woman handicapped by a weak heart or some other weakness of the flesh can be buoyed up by an optimistic spirit until the distinction is achieved of being one of the oldest inhabitants. In the one case the mental equipment is a dead weight and in the other is a life preserver.

Many physicians have, as a part of their case records, outline charts on which they can indicate the location of the disease or weak spot in the physical makeup of the patient. It is probable that if some of this space thus utilized could be devoted to an analysis of the general mental outlook of the patient, the clin-
ical advantages would be more than equal to any other data thus assembled.

We hear references made occasionally to the person who has a single track mind, and there is no doubt that this phrase carries with it much significance. As long as a person is in a state of health, his single track mind functions optimistically. But there are many people who, if suffering from some functional disorder, are very adversely affected mentally. They are burdened with apprehension and gloom, which greatly retards their recovery to normal condition. If, on the other hand, the person whose physical condition is somewhat disorganized, has sufficient flexibility of mind to sidetrack the associated load of unfavorable possibilities and get into a cheerful frame of mind, the result, as before suggested, is like taking the burden off the swimmer’s shoulders and placing a life preserver under his arms.

Winter contains added perils as people advance in age. Many elderly people of the practical “single track” tendencies seem to have a semicontempt for taking the precautions against chill which common sense should advise. They seem to have the fear that they will give the impression of coddling themselves. They wish to have it understood that they are just as well and robust as they ever were. This is the type of man who allows himself to become repeatedly chilled during a cold wave and who suddenly develops pneumonia as a plain, direct consequence of the chilling process. If every physician could each winter make it perfectly clear to a half dozen adults
of general usefulness in the community just what the natural results of this exposure might easily be, the aggregate advantages would be of much social value.

Hygiene as applied to many in advanced years seems to be a term of very flexible meaning. Personal habits having become so thoroughly ingrafted upon the individual type, the wise physician refrains from suggesting any revolutionary changes. The man or woman of seventy or over who has a keen daily object in life will often seem to remain about stationary year after year, growing neither older nor younger. But woe be to the active person who suddenly gets out of an occupation.

Many people of slight knowledge of psychology are prone to speak sarcastically of those whom they classify as "money grubbers." They do not realize that this accumulative habit provides for certain types just that purpose in life which makes it worth living. The old man who has but a limited faculty for making friends, and there are many of them, naturally grows more and more lonely as his acquaintances of earlier years drop away. He has found in the course of his observations, no doubt, that there is one kind of a friend that always seems to be faithful, namely, cash in bank. So he naturally proceeds to acquire as much of that friendly commodity as he can, thereby earning the reputation of being just another example of the "avarice of old age." This, of course, applies to those who hoard.

On the other hand, there is probably no more healthful occupation in the world for the elderly than
to develop a keen enjoyment for making money, provided that such accumulations are disposed of in a whole-souled way among the numerous objects that are always available for the consideration of those who are generous. Thus it appears that the person enterprising enough in old age to make money, thus affording a healthful occupation, and benevolent enough to be generous with it, and in this way securing an agreeable form of recreation, has accomplished two important factors in arriving in health and comfort at the green old age so poetically referred to by earlier writers who, no doubt, died young.

Many a hard-working married couple keep up their courage during long years of stress with the mirage before their mental vision of the days of ease a few years ahead when they have made their pile and can give their entire attention to enjoyment. If there is any delusion existing among the general public which reflects especial discredit upon the human race it is the persistence of that idea in these days of enlightenment. Surely every doctor should take enough interest in his patients to explain to them the general psychological impossibility of carrying out such a plan. Rational recreation from month to month and a continuous performance of the general details of regular occupation undoubtedly hold out a great deal more promise for agreeable old age than any other scheme of life yet devised.

It is probable, however, that, notwithstanding the advantages of useful occupation in the promotion of long life, there is one other agency which surpasses
them all. The old woman who keeps herself on intimate congenial terms with her granddaughters, knows all their beaus well enough to call them by their first names, and appreciates all the funny things which happen in the social life of these juniors, has probably come as near possessing the secret of eternal youth as anyone can. The octogenarian who can swap jokes with the boys of twenty possesses the same advantage. The man or woman who cultivates a keen sense of humor can always count upon congenial companionship, and the tonic advantages of a hearty laugh have been known ever since the days of Hippocrates.

Referring again to the problem of equilibrium, it may be justly stated that, in all probability, the question of diet looming exceedingly large in this connection. The physician who is an adept in planning a suitable feeding policy for the elderly is sure to be regarded by such patients as next to being a magician.

Idiosyncrasy plays so prominent a part in the dietary habits of many old people that it is practically impossible to impose a balanced ration upon those who are not exactly bedridden. The main problem, therefore, lies in prevailing upon such people to avoid the two extremes of overfeeding or underfeeding.

It is not enough to lay down arbitrary rules. It is necessary that patients know the reasons. The anemic subject should be made to clearly understand that a low diet usually means lower spirits with a possibility of tuberculosis, nervous breakdown, or an unbalanced mind lurking in the background.
Gross ignorance of hygiene is not alone dangerous to the patient; the patient's ignorance is sometimes a menace to the physician's reputation.

A woman of fifty or sixty became run down in health because of an attack of diphtheria. She was thoroughly convinced that her digestion was a total wreck. Taking his cue from her pessimistic estimate of the integrity of her stomach, the physician proceeded to feed her upon laxative medicines and comparatively little else until she was practically a shadow. Another doctor was called who was an ardent believer in the theory that Satan supplies diversion for the idle stomach and he was able to exert sufficient influence to prevail on the patient to accept a liberal dietary. The result was a rapid and complete restoration to health, an unjust contempt for the first physician, who was really a capable man, and a positive adoration for the other doctor, who had carefully explained the nature of the case to the patient and her family.

Obstinate persistence in some cherished form of diversion with excessive exertion has caused the collapse of many apparently hale old people. Because a man always has been able to climb some mountain is no reason why the feat should be attempted again if there is any lowering of the state of vitality. It is very poor policy to force exercise in such cases beyond the limits of relative comfort. Some of the best hygienic habits are unwholesome at times. A very celebrated actress in advanced years could not bear to forego her customary cold bath even when suffering
from a severe bronchial cold. Her obituary appeared in less than a week.

Considerable professional tact is, however, required in issuing warnings against these pet hygienic hobbies. There is probably no greater opportunity for diplomacy in the practice of medicine than in the case of the young physician with the elderly patient. It is absolutely essential that there be nothing in the professional attitude or in the suggestions offered that would imply the slightest doubt that the patient’s longevity prospects were regarded optimistically by the physician. The patient loses all confidence in the physician as soon as a contrary impression is acquired.

The physician who has been in practice a long time and who finally retires or passes on to another sphere of existence is often sincerely mourned by his patients of all ages, but with the greatest sincerity by those advanced in years. The elderly physician naturally has a personal feeling of a common interest with a patient whom he has known in season and out of season for a considerable period of years. To have to go to some younger doctor who may be much more interested in other phases of his professional work is often a sad experience undertaken with reluctance, and which can only be brought to a happy termination by proper appreciation of the psychological factors in the case by the new counsellor.

It is said that the physician who has the obstetrical practice acquires the greatest influence over his families. This is undoubtedly true in the main, but happy
the outlook for the recently established young practitioner who makes a hit with old people.

The young physician who has the approval of the substantial business men in the full maturity of their intellectual faculties is sure to be, in a large sense, the gainer.

Age may wither and custom may stale the infinite variety of both men and women, but the process is long deferred if the mental faculties remain in that state of vigor which is only possible when usefully engaged. The great mistake made by so many people of comfortable financial circumstances is that they not only lay aside their physical labors, but their mental activities as well. There ought to be a post-graduate course established in the public schools for the benefit of grandparents. Such a course should teach them that too much mental and physical relaxation inevitably means decay. Moderation is the keynote of any healthful system of relinquishment of the problems of existence.

It is, of course, necessary that there be a slackening up of physical exertion and nerve strain as age increases. But it is wholly undesirable that the mental faculties be permitted to stagnate.

Regular employment of the brain under normal conditions is exercise, often of an exhausting type. Therefore the person who is using the brain actively does not require so much physical exercise and may need a fairly liberal food ration to keep in a state of equilibrium. It is obvious, however, that when the person who has been working industriously with both
body and mind for many years suddenly concludes to give up both forms of exercise and "retires," it is a shock to his physical organization. People are often deceived by the benefits they secure from a brief vacation at some point of interest where they are actively employed in sight-seeing or social diversion for a few days and naturally resuming their regular life with every indication of benefit. They ignore the fact that the diversion which has accompanied their period of comparative idleness kept their minds occupied in a very beneficial way. Let those same people give up their regular employment and settle down for a life of mental and physical ease, and they soon approach a condition where the strain on some important item of their physical machinery is greatly intensified. Persistence in this mode of life almost inevitably means decay, unless the food ration is cut down to the basis of mere subsistence.

It has always been noted that women leading a life of retirement seem to hold out a great deal better than men. The reason is obvious. Almost any woman who is inclined to be industrious can find some form of occupation that will take up her attention, and provide not only amusement, but mental and physical exercise. The retired farmer or mechanic, on the other hand, who has nothing to do is soon in the position of the favorite driving horse suddenly withdrawn from the active list, and he gets stale at an alarming rate.

The moral of these reflections, therefore, is that if there is a lessening of physical exercise there must be
a corresponding increase of mental exercise in order to preserve the proper balance. Physicians can accomplish much good for their communities by making these physical factors better known.

But the greatest professional benefit which any family physician can confer upon these real old people is to maintain in their mind, so far as possible, a general feeling of optimism. It is but natural that a person of seventy-five who has seen numerous elderly acquaintances snatched away by attacks of pneumonia should become alarmed if afflicted with a bad bronchial cold.

The attitude of the physician may easily determine the outcome of such a condition. If he is able to assure the patient that only a reasonable amount of care is required to accomplish complete recovery, then the courage of the patient will often do the rest. Unfortunately, many young doctors of relatively limited experience seem to be unduly impressed by the age of an elderly patient. They consider the case from the standpoint of vital statistics rather than from that of psychology. It is not the old people alone who die from discouragement. There are enough of a much younger age who succumb to the pessimistic belief that their case is hopeless. The price of pharmaceutical products has greatly advanced within a few years, but every doctor carries within himself a remedy which, if he will use it, will often surpass anything that comes from the drug store, namely, the ability to establish hope and optimistic confidence in the patient.
It will be noted that those who have reached an advanced age are usually well endowed with the sense of humor. This helps greatly to smooth away the friction of everyday life. It is said that a man is as old as his arteries, but it might also be said that a man is still young if he possesses a keen appreciation of the almost innumerable instances of the incongruous.

Exaggerated dignity may well be a liability rather than an asset if it repels those who take a humorous view of many everyday happenings.

The possessor of a highly dignified demeanor has his place in the general scheme of things, but it is a lonely place. He has to contain great resources of self-amusement or he deteriorates rapidly after his active days are past. The contrast between these august personages and the jovial type of ancients is often remarkable.

If every cloud has a silver lining, so do many annoying incidents reveal their funny sides. To be able to appreciate to the fullest extent these phases of untoward events is to get the most possible out of life.

If old age must bring with it a reversion to second childhood, let it be with as much of childhood's light-heartedness as possible. Far better it is to be capable of the interpretation of modern slang than to be ruminating day after day upon scenes of the distant past. The doctor who can impart a spirit of jollity to old age is more than a successful physician—he is a philanthropist.
CHAPTER XIV.

MAINTAINING THE VITAL ORGANS.

The human organism, like any other organization with various functions to carry on, acts with a varying efficiency which is dependent to a great degree upon the bodily morale. It is needless to say that this essential element which we have termed "morale" is dependent to a large extent upon the mind. Indeed, the mind is the balance wheel of the human body.

Many so-called heathen tribes comprise numerous types of what would appear to be relative physical perfection. Nevertheless these splendid examples of apparent robust health are exceedingly short-lived because, in the common phrase, they do not know how to take care of themselves. They have no proper understanding of cause and effect, and when they fall sick resort to various fantastic incantations and absurd devices which, if not followed by immediate improvement, leave the patient in a state of hopeless dejection from which he seldom rallies.

It might seem impossible for similar tragedies to be enacted daily in every American city, but unfortunately for the vital statistics it is altogether too true. If disease kills its hundreds, panic and hopelessness kill their thousands, largely because of the dense Stygian darkness of ignorance of physiology, perhaps more frequently found in the mansion of the capitalist than in the farmhouse far back in the mountains.

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So we can consistently speak of "morale" as the first essential of health, because morale is that all-desirable quality which leads to all real achievement. This attribute is based upon intelligence, or, in other words, education, which can be assimilated and utilized in a perfectly practical manner. It is probable that, if the hygienic impressions and delusions of many people of quite distinguished appearance were to be presented like a bundle of bank notes for exchange into the real coin of practical intelligence, the percentage of discount would be equal to the present rate of exchange on the Russian rouble.

It is, therefore, rational to conclude that with the degree of physiological intelligence possessed by average busy men or women they may be regarded as having been placed in charge of a complicated machine of which in its inner working they have little accurate knowledge. It is accordingly most natural that they should be occasionally dropping a monkey wrench into the works, with results more or less wearing to the parts. And if the doctor, who is asked to readjust things and get them once more to running with as little jar as possible, will just look wise, say little, and leave the patient in the same dense ignorance in which he was found, the chances are that after a short time the physician will see that patient joining the other dupes of the irregulars, who at least pretend to impart a little information. Fortunately for the general good, this type of physician is becoming more and more infrequent. It is to be noted that the general practitioner most sought after is the one
who aims to make his patients understand so far as practicable the purpose he has in view in his recommendations.

The Bulgarians are said to be the longest lived people in the world. This is supposed to be due not only to their simple mode of life, but to the use of soured milk as a conspicuous feature of their daily food. Such a diet combined with a regular outdoor life leaves little of the complex in their hygienic problem. However, civilized modes of living may be said to stretch all the way from Bulgarian simplicity to that of the pampered favorites of fortune in the gorgeously appointed family hotels. And as people become more proficient in the technical processes of our modern civilization, their need of medical supervision increases.

The habitant of the remote fringes of organized society may have little real contact with a graduate physician during a long lifetime, and relying upon simple home remedies and certain canny common sense in their application may seem to be able to dispense with real medical advice and suffer little inconvenience. But the more complicated the mode of living, the greater the variety of medical problems developed and the more the supervision of the high-grade physician becomes essential. If the patriarch on the mountain farm lives to be ninety, and his ambitious son, who establishes a prosperous business in the large city, only reaches the age of seventy, and the grandson who inherits the business dies of heart failure or pneumonia or diseased kidneys at fifty, what is
to be inferred as the cause of such physical decay in a robust family type? The conventional answer is that city life leads inevitably to racial deterioration.

There is probably nothing that reflects less credit upon this generation from the medical standpoint than this tradition.

At a time when plagues that have existed in greater or less degrees of severity for centuries are being wiped off the face of the earth, and when the science of nutrition can estimate the number of food units in every edible substance, the mortality among middle-aged people, even with the most sanitary surroundings, shows a distinct advance. It is evident that there is a serious gap in the science of self-preservation. Otherwise it would not be a fact that the more people have available to provide them with food, shelter, and wholesome enjoyment, the shorter their period of realization.

Now, while it is true that modern life is strenuous and many useful people break up at a comparatively early age, it does not seem reasonable that such disregard of the laws of nature should be with deliberate intent. The business man of sound judgment in personal and public affairs is not throwing his life away wilfully. He goes to pieces because, in matters of health and self-preservation, he is even more ignorant of how to solve his personal problem than the illiterate Bulgarian peasant.

Some most commendable measures have been instituted with the object of lessening this appalling waste of the lives of the most useful citizens, but it is
doubtful if they have accomplished much. In fact, this question would seem to the average citizen to be a trail leading directly to the office door of the family doctor.

The problem briefly stated is this: the more complicated the business and social life, the greater the necessity that the individual leading such an intricate existence should understand how to so live as to avoid putting undue strain upon his nerves, circulatory organs, digestion or excretory system. The only person who would, to the trained business man, seem to be competent to solve this problem as a personal one is the practical, experienced physician.

So, unless the medical profession as a body undertakes to supply this important information in a practical way, a very considerable number of useful lives must continue to be cut short by ten or fifteen years, with all the coincident family bereavement and disturbance to business and social life. Every doctor can recall a man here and a woman there who seemed to possess an unusually practical knowledge of the ways to avoid errors of hygiene and also avoid the unpleasant habit of morbid introspection. There is not much professional glory in attending a patient during the last illness, but there is a great deal of satisfaction in carrying some cheerful patient up into the eighties or nineties. So the question naturally crystallizes into how to impart the secret possessed by the few to a considerable number of others.

This is the doctor's problem; no others can qualify.
What is it that the wise ones know that carries them along year after year to a ripe old age of which the others are ignorant with such sad results? It is often not what could be regarded as any profound medical knowledge, but rather a sort of practical ability to estimate cause and effect at their real significance. These people know when they are overworking or underworking. They plan so they can lay aside the burdens for a time when they detect in themselves the plain indications of strain. They know how to marshal their creative forces so as to operate them smoothly, and thus avoid nerve strain. They know how to select foods that will supply the requisite nutrition without overtaxing the powers of digestion. They avoid the extremes of exposure to cold and of keeping too warm. They do not systematically seek to restore one set of nerves by, under the guise of recreation, overtaxing another set. In a word, they understand the importance of moderation.

Analysis of the temperamental characteristics of the octogenarian will usually reveal a naturally friendly disposition which cherishes no ill will toward acquaintances who may be less amiably disposed. The habit of throwing the mantle of charity over the shortcomings of others and at the same time fully appreciating their good qualities is undoubtedly a life lengthener of first rank. To maintain a feeling of resentment week after week is to experience far greater ill results for one's self than can possibly accrue to the object of the ill feeling. The scriptural injunction not to let the sun go down on one's wrath
has great moral value, but its hygienic significance is equally important and generally overlooked. Every bodily organ suffers from an attack of wrath, and even "righteous indignation" is too costly a luxury for frequent indulgence.

If the patient of irascible temperament were to be advised by his family doctor to take a saline cathartic immediately following each attack of wrath, to be followed by a very simple diet for at least twenty-four hours, it is probable that the effects would be very beneficial, both physically and morally. A man of robust physique who had become prosperous and who, with agreeable family relations, found much leisure time for rational recreation, had one very unfortunate habit. He was given, on apparently insufficient cause, to pass into a state of rage which would so prostrate him that he would be compelled to go to bed. It is hardly surprising that he should have died at a comparatively early age.

While the person of average amiability undoubtedly suffers severely from the occasional lapse into extreme ill temper, there are certain types who seem to be able to carry ill temper for a great many years. These generally are of the class who take pride in being "plain spoken." Ill nature may, therefore, become a sort of cult, in which case it would seem that antibodies had been developed to counteract the toxins which normally result from the surly mental attitude. In a certain rural community a woman was referred to as being of a very uncertain temper. "I don't know about that," said a local philosopher present. "I think
she is the evenest tempered woman I ever saw; mad all the time."

There are occasional people of a naturally un-social, though amiable, type who seem to be immune to the ravages of time. They contrive ways of supplying to themselves in a limited sphere sufficient mental and physical exercise to preserve functional equilibrium. They live a life apart from the world even when they are wage earners. Sometimes they possess some small inherited means which by careful economy is sufficient for their wants. Although such people seldom seek medical advice, they are well worth analytical study by the physician, as they seem to demonstrate the normal tendency for the human machine to function smoothly for a long time when excessive strain is avoided.

An example of this variety of the human species was noted in an old man who lived almost entirely to himself in a couple of rooms. He had an income sufficient for his wants, which were small. He occupied his time partly by ingenious contrivances for his personal housekeeping. He could prepare his breakfast while lying in bed. By a system of wires he could light the fire in his small cooking range, set the coffee boiling, submerge the eggs for the necessary time in hot water, etc., etc. Although in every sense a recluse and a social nonentity, he lived to enjoy a good old age, apparently because he had not only succeeded in reducing mental and physical strain to the minimum, but also had satisfactory resources within himself for amusement.
Starting from this example of the symmetrical development of longevity in its simplest equation, we see the same process carried out in various ways in the lives of citizens of the highest usefulness. It is a problem of supplying nutrition in quantities sufficient to produce the extra energy required for whatever mental and physical tasks are carried on without over-taxing the nerves, heart, digestive and renal system. A few people seem to understand this problem by intuition, but most busy men and women need the practical instruction which only the capable physician can impart. It is a sad fact, as we have repeatedly stated, that, because of the reluctance of many doctors to seem unduly inquisitive and a corresponding reluctance of average busy men and women to appear "fussy" about themselves, this necessary instruction is often not given in time. Too frequently it is the old story of providing the lock for the stable door after the horse is stolen.

In the fields of nervous and mental disease much is said by medical men as to the borderland cases. It can be stated without exaggeration that this expressive term applies with equal logic to numerous other impending, but not fully determined, organic diseases. Most reasonably intelligent citizens are keenly alive to the serious possibilities of a neurotic patient who is on the verge of becoming actually unbalanced mentally. But they fail to recognize other conditions of equally sinister significance.

As an example of this unfortunate and inconsistent obtuseness, we see entire family groups in a high
state of anxiety over some semihysterical woman whose probable expectation of life should be estimated by conservative physicians as anywhere from twenty to sixty years, while the quiet, pale, anemic sister of high nerve tension, but carrying an air of forced cheerfulness, passes unnoticed. Careful medical inspection of the latter case would often reveal a condition requiring immediate professional attention to ward off, as a most natural development, a fully outlined case of tuberculosis. The establishment of even a greatly modified form of the forced feeding which may be regarded as routine treatment for real tuberculosis might not only rapidly build up such a suspect, but educate the patient, with lifelong benefits.

Of even greater frequency are the unsuspected borderland cases of cardio-renal significance. In many instances there is little doubt that a period of rest and carefully regulated diet would relieve the strain and thus permit restoration of normal functional capacity. Unfortunately, cases of this kind are usually of the type which works hard and eats generously, developing a sort of feverish zest for business which, in later life, is apt to be in itself a pathological indication. It is the strenuous life experienced by the heart and kidneys, a tensiety which admits of practically no vacations, which finally leads to their undoing. The capable man of business who admits the importance of liberal allowances of time for the recreations of his employees, often shows no mercy to these long-suffering organs. Even in the hours of slumber they are kept struggling with the tasks im-
posed in the form of big dinners and heavy smokes following a tense day of business. It is not reasonable to believe that people of sound judgment would thus overtax themselves if they had any coherent understanding of the consequences.

The average man and woman knows of a certain working organization which is designated as a "system." A heavy cold through the "system" entails discomfort. Just how it affects the individual working parts is often as obscure to a bank president as "engine trouble" usually is to the automobile passenger in the back seat. One of the surest paths to success in general practice is for the physician to explain the workings of the wonderful human engine so the patient may comprehend the individual, as well as collective, functions of the various parts, which, although standardized, are unfortunately not replaceable. Great benefit would undoubtedly accrue from a better general understanding of methods by which strain upon the organs of digestion, the heart and kidneys could be materially lessened at frequent intervals. Such periods of comparative organic rest would restore normal balance on many occasions when, if the truth were known, they were in a dangerous condition of superfunction. Few average citizens realize that such intensity of function may naturally produce gastric disease or enlargement of the heart and Bright's disease. They go blindly on under the delusion that a keen appetite for steaks and chops and the comfortable or even uncomfortable resulting sense of repletion is an evidence of superior
vitality and health. Such are the strange contradic-
tions of human nature that the nervous patient with a
blood pressure less by fifty points will haunt the doc-
tor's office, while the man whose digestion is his pride
and joy feels abundantly competent to be his own
physician.

An example of this form of superb self-confidence
was exhibited in the instance of the proprietor of a
prosperous drug store. Smiling, bland, and rotund,
with a ruddy complexion, this man was always on
duty at his store. His appetite never failing, it was
his custom to carry home a thick steak and broil it
himself for a midnight supper after his family were
in bed. This unhygienic practice was abruptly ter-
minated when he was about fifty by a profuse gastric
hemorrhage. Gastric ulcer soon performed its perfect
work. A timely word of caution by some one of the
physicians who knew him intimately might have
changed the history of this case.

It could hardly be expected that the average per-
son of even respectable general information can be
made to comprehend in a short conversation the in-
tricate technic of the various activities of the human
organism. But it should be possible to make it plain
that excessive function, of the heart for example, is
pretty sure to shorten the career of the seventy-year
clock. Viewed as a digestive problem, the lavish eater
may scoff at the necessity of moderation, while the
person who is always suspicious of the good intentions
of his stomach will continue his policy of under-nour-
ishment. But regarding himself as a machine to be
kept running with proper efficiency and with the least possible friction, the problem becomes more concrete.

It is probable that most people of average experience have a more clearly defined idea of the respiratory function than of nutrition and circulation, although the terrible mortality from pneumonia among certain types might well indicate the contrary. Much depends upon the hygienic customs of different families. There are households where nearly every inmate beyond early childhood has either recovered from cases of bronchopneumonia or has narrowly averted passing through this ordeal. In such instances it is fair to presume that the ruling members of the household are quick to perceive the significance of the menacing symptoms and lose no time in either calling in the physician or in instituting prompt measures themselves, frequently both. Where families possess this canny knowledge the deadly fear of pneumonia becomes transformed into a watchful wariness when suspicious indications appear.

Contrasted with these are many unfortunate instances of apparent total failure to comprehend the significance of conditions which soon develop into serious types of this dreaded disease.

It would be well for people in general if they could realize a little more clearly the tendency of nature to commit serious blunders under certain conditions. If there is a fractured limb in a person of tolerable health, nature hastens to rectify the matter as soon as possible. But unless a competent surgeon supervises the beginning of this process, nature is
liable to make a very bad botch of the affair. In a similar way nature seems to hinder rather than help in certain affections of the pleural regions. Under such conditions it is often desirable to stay the hand of nature by the employment of the hot pack, designed, of course, to relieve this well intentioned, but undesirable congestion. Nature’s policy in such cases seems to resemble that of the mob in the case of a bad accident. It shuts off the air supply by rushing an unusual volume of blood into the affected region, which interferes with the mechanical processes of respiration, thus constantly increasing the local irritation, with consequent distress and danger to the patient.

It is, therefore, altogether desirable that physicians, so far as possible, instruct their patients as to the mechanical action of the regions of respiration, as by such comprehensions the average family will recognize the necessity of promptly utilizing such simple measures of relief as may be available before the doctor comes on the scene. The possibilities associated with the wet pack, hot or cold as conditions and localities may indicate, should be recognized and appreciated by every family. However much the physician may be in doubt as to the "little knowledge" and its dangers there can be no disadvantage in explaining the processes of physiology and the employment of heat and cold as simple therapeutic agents.

While the heart and lungs must continue busily at work at all times, their labors are often much augmented by heavy tasks imposed upon the organs of
digestion and excretion. The heavy strain thus produced upon the mechanism in general is very wearing, as before suggested. It is often a blessing in disguise when a nervous breakdown occurs instead of something more serious.

How much more practical it would be to devise some formulœ that would ensure a slowing down of digestive and renal activities occasionally, thus permitting a general resting up of kidneys and heart! This can, perhaps, be best accomplished in the warm months by the use of simple, nutritious foods so calculated as to maintain nutrition with the minimum digestive effort, incidentally providing a vigorous, but not immoderate, system of exercise that will cause copious perspiration. Under such conditions the kidneys at least may be considered as taking a comparative vacation, which, if they have been subjected to rigorous tasks right along, will naturally tend to restore them to a normal standard of efficiency.

This clearly explains the sense of elasticity experienced by the tired business man who takes a rational vacation. If he can develop a keen appetite for simple and wholesome foods by vigorous, but not immoderate, exercise, and can incidentally perspire freely, he experiences a remarkable sense of rejuvenation. He feels like a new man. He attributes this to the unusual opportunity for vigorous muscular exercise, whereas it is the temporary relief from labor of the digestive and renal systems which is chiefly responsible for his unusual sense of well-being. To be sure, it is extremely gratifying to unused muscles to be
brought into action under favorable conditions, but the vacation or outing that is accompanied by the feeling that the chief burdens of life have been laid aside is undoubtedly, when reduced to its origin, an expression of gratitude from the almost invariably overworked kidneys.

This phenomenon, if such we may term it, is inversely brought to the consciousness of physically inactive people when a considerable period of warm summer weather is followed by a cool spell. The active perspiration which may have persisted for some days or weeks is suddenly checked and the elimination which has been thus brought about is automatically transferred to the kidneys. These organs, which have been having it comparatively easy, are thereupon obliged to get down to hard work again, sometimes with all the evidence of considerable jarring of the machinery after this transformation has taken place.

The damaging effects of pepper, mustard, essential volatile oils, spices, etc., on the kidneys is not well known. Many cases of Bright's disease (inflammation of the kidneys, albuminuria) are due to the use of these kidney irritants in large quantities. Numbers of men have died of kidney disease as a result of eating their food made black with pepper, with too much salt in other food, and the use of mustard, spices, etc. These things should be used sparingly. Table salt is a necessity in food, and is needed in all food; but should not be used in too large a quantity. The public should be taught to avoid these excesses. Be temperate in all things.
Maintaining the Vital Organs.

That the Bible is the source of all wisdom is too commonly stated perhaps to justify repetition, but there can be no doubt that the notification that "By the sweat of thy brow thou shalt earn thy bread" is based upon the soundest hygienic principles. The luxury which permits those not versed in the laws of hygiene to indulge their preferences is seldom helpful to the vital statistics. It should be understood by all fully developed adults, as well as those of younger age, that reasonably profuse perspiration, in the warm seasons at least, is absolutely essential to health. Moreover, any rational system of exercise which can be devised during the colder months that will cause perspiration at comparatively frequent intervals is undoubtedly likely to retard the development of renal congestions, with their long train of morbid consequences.

Of course, it does not follow that the production of perspiration is a remedy for all ills. The hot countries, where this function of the skin is carried out extensively, are far from being desirable places of residence. The strain which is lifted from the kidneys seems to be transferred to a considerable extent to the liver, and, of all the major organs of the body, the liver is not least in its capacity for making trouble.

The indoor worker whose appetite has flagged naturally expects to acquire a keener zest for appetizing foods if he takes abundant exercise in the open air. In the tropical countries, where such exercise is not expedient except for those native born, it is the custom to resort to alcoholic stimulants in order to de-
velop the appetite which seems so essential to maintaining the bodily strength. Under such conditions the strain seems to fall largely on the liver, and the strength and vitality will be materially lessened unless there are occasional vacation trips to the cooler climates. These facts, so well recognized, lead to logical conclusions as to our proper mode of action in the temperate zone. While it is desirable that there be more or less abundant perspiration, such benefits should not be neutralized by habits prejudicial to the integrity of the liver. Active exercise, with profuse perspiration, does not justify a person in incidentally indulging in heavy meals through artificial stimulation of the appetite. To get the maximum benefit from such exercise the diet, although liberal, should be simple. Otherwise the tendency is to develop conditions parallel to those existing in the tropics, when every evening meal has a few cocktails as a prelude. The conclusions to be reached, therefore, are that the conditions most conducive to health and longevity through maintenance of bodily efficiency involve, as an essential factor, exercise of the perspiration function of the skin at frequent intervals, with cool sponging as a safeguard against possibly increased susceptibility to chill.

Unmeasured benefits would accrue to average intelligent families if they could be made to appreciate the fact that the functions of the skin are no less important than those of the organs of the heart and lungs. Unfortunately many quite well informed people seem to regard the skin merely as a necessary
covering to hide a lot of tissue which naturally would not be pleasing to look upon. Nearly all the real up-lift work that is being done for the education and edification of the public regarding the functions of the skin is that contributed by the toilet soap manufacturers. Unfortunately, people are disposed to regard the suggestions of these people as inspired chiefly by self-interest. The fact that soap and water have become recognized as the best possible sanitary agent in producing a healthful habitation has, no doubt, a parallel application in matters of personal hygiene.

It seems, however, that some discretion and judgment is required in the application of soap and water. The ancient Greeks carried warm bathing to such an extent that it became a cult, and historians have rightfully or wrongfully attributed their decline to the enervating influences of their fondness for the bath. Too much warm bathing, like too much clothing, has a depressing influence upon the skin. Submerging the body in warm water in a close, warm bathroom has an entirely different hygienic influence than that produced by the use of the cool or tepid sponge bath, followed by vigorous rubbing of the towel. Each has its place, but the latter method of cleanliness is far more conducive to bodily vigor and immunity.

Just how essential soap is to these processes is rather uncertain. The North American Indian of the Revolutionary War era is reported to have been much given to cold bathing, naturally without soap, and probably became more immune to extreme cold in proportion to the amount of clothing worn than any other
tribe in history. The robust farmer of the Balkan states is an example of vigor and longevity, and is said to have his undershirt carefully sewed on to him by his wife at the beginning of winter, where it stays until, by the approach of the warm spring season, it is no longer needed as a protection. Whereby we again reach the conclusion that, the more simple the mode of existence, the less dependent people are upon the "many inventions" that seem so essential to a highly developed civilization.

The skin seems to be as much benefited by contact with pure air as are the organs of respiration. Hence the desirability of clothing which is porous. The thick, but loosely woven, sweater is a far healthier garment for those exercising in the open air of winter than the fur or sheepskin lined coats now so popular with both sexes. There is, perhaps, no better proof of this statement than the robust vigor and highly developed bodily immunity of the boys of the navy, exposed, as they are, to the chill and penetration of the salt breezes of the winter season. Under such conditions the skin reaches a high standard of functional ability.

The medical style of writing indicated by the Gospel of St. Luke has often been noted by commentators, while physicians have frequently expressed their appreciation of the very evident knowledge of medical science indicated by the writings of Shakespeare. But perhaps there is no more impressive example of medical allegory than that well-known humorous poem of the late Dr. Oliver Wendell Holmes, "The One Horse
Shay," which tells of a vehicle the component parts of which were of such exactly uniform durability that at the end of one hundred years they all collapsed at once.

Theoretically at least, the wear and tear on the human frame should be so equally distributed that death should only occur from the general decline and exhaustion of extreme old age. Practically, such equal division of strain seems to be unattainable. But it does not seem unreasonable to think that, if people of fair intelligence could acquire a clearer understanding of the functions of the various essential units of the physical machinery, they could detect the warnings and interpret their meaning in time to relieve the pressure at threatened points, and thus avoid some local disaster which will drag down the entire mechanical structure.

And so with perhaps wearisome repetition another plea is made that it is the physician, and the physician only, who can properly enlighten the people walking with blinded eyes among the hygienic pitfalls which seem to be found even more frequently among the mansions of the wealthy than among the cottages of the industrious poor.
CHAPTER XV.

Mental Torture of the Body.

From the earliest days of comprehension the child's body is more or less dominated by apprehension. This condition of mind may easily exert a most depressing influence upon nutrition and produce a nervous bias that will persist during the adult years. Wise parents, therefore, do all in their power to banish fear from the child mind lest the unfortunate habit be formed.

During the stages of highest mental and physical efficiency, from the age of twenty to fifty, these morbid mental propensities usually remain in the background; at least, in times of normal health. But when through illness or advancing years there arises a consciousness of physical depression, the troop of old familiar hobgoblins begin to emerge from their lurking places, and are perhaps even more unwelcome than in the days of childhood.

It is logical to excuse child terrors on the grounds of ignorance natural at such early ages; but it is unfortunately quite the common thing to ridicule the apprehensions of the adult patient. This is a commendable practice only when it is possible to give a clear and valid reason why the patient's fears are without foundation. It is often noted that the introspective chronic invalid will persist in living along year after year, while the hale and naturally robust will suddenly
seem to collapse and show a surprisingly slight resistance to disease. This often unexpected breakdown is usually attributed to some unsuspected drain upon the vital forces, or exhaustion from overwork, but it is likely that one important factor is overlooked. This demoralizing element is panic.

That the exact diagnosis is helpful to both doctor and patient in the self-limited disease is doubtless true. And that the same holds good with the physician is true in all cases when tact is exercised. But the physician who calmly informs some active and socially essential man or woman that the condition under investigation has been determined beyond doubt to be a fatal malady has usually thrown aside the best possible remedy which could have been employed for the patient, namely, hope.

This holds good in particular when the patient has heretofore enjoyed practically unbroken health.

When a man or woman has experienced numerous ups and downs in health and has rallied from various menacing conditions, the attitude toward an unfavorable diagnosis is more philosophical. The patient has acquired a certain wholesome self-confidence in that vitality which has proved equal to previous emergencies, and is quite prone to secretly resolve to convince that doctor that he may be considerably mistaken, after all. This is a very desirable state of mind for the patient to be in, unless it leads to a tendency to ignore the doctor’s suggestions. But the patient who has always enjoyed good health is apt to be affected very differently, and, believing that if the doc-
tor is right, there can be little hope, enters into a state of semi-nervous collapse which has more than once proved fatal to people who had very little that was really the matter with them. It is really astonishing the loss of morale which can be exhibited by a robust man under such circumstances. We have a fair illustration of this panicky condition in the comparison between even the average type of woman and the strongly built man in perfect health when there is occasion to interview a dentist. The woman will endure the pain without flinching, while the man will often procrastinate visiting the dentist until the last possible moment and exhibit little nerve or capacity for punishment when the visit can be delayed no longer.

Hope is, beyond question, the best remedy for the organically sick patient. While it is true that in such conditions restoration to perfect health is unlikely, everything which builds up a patient’s confidence is a therapeutic asset and everything which produces discouragement a liability. The physician of tact can easily find ways to maintain such a patient’s courage if he will. Unfortunately there are doctors who believe that unless the patient can be thoroughly frightened, there will be a tendency to underestimate the importance of the treatment recommended. But, as without a reasonable degree of hope all other measures for relief are often unavailing, the doctor assumes a very considerable responsibility in telling an active man of business who has hardly ever had a sick day, that he has Bright’s disease of the kidneys, as there are other ways by which patients can be ad-
vised of their condition that will be less likely to break down the morale.

A physician reported to a medical journal an instance of a long protracted search he had made for the evidence of tuberculosis in a certain case under consideration. The patient was in a somewhat run-down condition, with more or less bronchial irritation, and the physician kept up a continuous system of examination of sputum for weeks and months. It appeared from his review of the case that he became early convinced that it was a case of tuberculosis, and he tells proudly of the time when, after many repeated failures, he actually succeeded in detecting the germ in the sputum submitted. The report of the case would indicate that the doctor had as much gratification over the fact that he had located the evidence that his diagnosis was correct as would an inventor who had at last discovered some secret of far-reaching importance in the laboratory. It is easy to conjecture the psychological influence upon the patient of these continuous attempts to secure the actual evidence. There are fortunately a large number of physicians who would gladly have given up the search, after a few failures, and encouraged the patient accordingly. Only a willingness to eliminate all hope of recovery as a factor in the case could apparently justify a doctor in thus continuously harrowing up his patient in order that he might finally exult over the vindication of his diagnosis.

The first essential in average medical treatment is to keep the patient optimistic. All else is secondary.
An example of what this means was shown in a certain army base hospital during the influenza epidemic. The mortality had been high and a dread of going to the hospital had developed throughout the entire camp. Boys who had to be sent to the hospital were greatly depressed. In their own expressive phrase they were "out of luck." A solitary woman nurse appealed to the commandant. She was in tears. She told him it broke her heart to see those boys dying there through lack of courage. Hospital orderlies, however faithful, were not sufficient; she wanted some girl nurses and quickly. They were procured and supplied that one great essential heretofore not available by requisition, courage. The change for the better was immediate and marvelous.

One of the most adverse and even destructive influences in taking over into a receivership the physical assets of an active business man is to break up his established routine. Even a healthy man with no sinister forebodings of approaching fatality experiences a shock when required to lay aside his regular mode of life. A complete cessation of routine tasks is as undesirable as that frenzy of over-attention to duty which is manifested by certain overwrought men and women who may be suffering from acute nerve tension or the toxemia of incomplete function. When the physician makes some discovery that indicates organic perversion, a little time devoted to explaining the normal physiology of a person of that age and the importance of maintaining as nearly perfect normality as possible provides an abundant excuse in the mind
of the patient for the general line of treatment marked out by the doctor. To be sure, the patient may have some misgivings that the condition is far from a strictly healthful one, but nothing has been said to take away the hope and incentive for faithfulness in carrying out the doctor's recommendations and with a view of bringing about the proper physical balance. In other words, all the impetus of the patient's hopefulness and courage is being utilized as a distinct asset.

Of course, there are not many physicians who will bluntly and directly inform a patient that he is suffering from a fatal disease, and that his days are numbered. Leaving out a few so-called specialists, who pride themselves upon being oracles in their department, such psychological methods are not the vogue. The results, however, frequently figure out to be about the same if, as commonly happens, the doctor takes the patient's family into his confidence and lays before them a very unfavorable outlook. When this is done the invalid is very liable to get a fairly accurate idea of what the doctor's opinion is, and the depressing influence is established.

Much has been said of the absurdity of mind cure, and with abundant reason, but, after all, it is not entirely a delusion. The attitude of the physician should be encouraging on every possible occasion, and, in fact, he should not allow himself to cherish in his own mind anything but an optimistic view of every case so far as possible.

It should not be forgotten that human nature is apt to revolt at the unfavorable diagnosis, and to ac-
quire the impression that, if the physician has such a hopeless idea of the case, there is no use in continuing longer under his directions. It is under such conditions as these that the quack gets his innings. Whatever else may be lacking in his brain equipment, it is not optimism. He blandly assures the patient that he can bring about an immediate improvement, and in those instances where he does apparently accomplish this result it is largely mental healing. Where there is some remaining foundation to build on he often wins, and if the victim should grow steadily worse, as often happens, the family have the consolation of knowing that the reliable and thoroughly professional family doctor had already warned them as to the probable outcome of the case.

It is not nearly as depressing to the middle-aged adult to hear that the kidneys are not quite right as it is to be told in the plainest language that there is a large constituent of albumin and that the blood pressure is 220 degrees. In the lay mind a person can have "kidney trouble" for a long time, whereas with a more definite graphic explanation the depressing influence is very marked. Likewise most people of observation have heard of numerous individuals who had "bad hearts," but who seem to get along with tolerable comfort year after year. It does not seem necessary that the patient with a badly enlarged heart should have his courage taken out of him entirely by absolutely frank diagnosis.

Styles are continually changing in medical practice, and whereas years ago many physicians, espe-
cially those who practiced in the country, would wheedle along their heart and kidney patients to live a long time and get considerable out of life, an era of realism has developed in recent years whereby a certain type of doctors consider it their duty to lay aside these old-fashioned ideas of justifiable camouflage and place the exact facts before the patient; all of which might easily account, to a considerable extent, for the recently much increased mortality among people of middle age and over.

It is true that some harm has been accomplished through reluctance of physicians to harrow up the feelings of their patients by revealing unpleasant facts as to the physical condition. But it does not necessarily follow that neurotic, depressed people who have been worrying about themselves for weeks and months should continue to be kept in a state of nerve tension on suspicion. According to the jurisprudence of most civilized countries, any man or woman is to be regarded innocent until proved guilty. In like manner, every optimistic suggestion which the ingenuity of the doctor can concoct should be dispensed freely with other tonics whenever a neurotic or depressed patient comes under observation.

A physician in an eastern city established a far-reaching reputation as a successful practitioner. His clinical methods embraced three predominant factors. He prescribed laxatives freely and insisted upon a lavish diet for his patients. His third and most important principle of cure was the administration of large doses of optimism on all occasions of contact.
The patient who had become convinced that he was not long for this world would acquire an entirely different idea after ten minutes at this doctor's office. When it was for his patient's interest he told them just exactly what was the matter with them if he knew, and gave them the benefit of the best possible guess, if he didn't know. They became partners in the enterprise of building up abounding health and vitality. The patients who had become discouraged while under the capable care of some other physician would be advised to see the genial optimist, whereupon they would often make a quick recovery, preparations for which had perhaps been carefully made by the other doctor, and the optimist would get the credit.

We are told in the Good Book that we should avoid the appearance of evil. There is nothing more repugnant to the honorable, thoroughly competent physician than the smug, bland self-assurance of the quack. The graduate of a high-grade medical school, who has also served a long and non-lucrative apprenticeship in a well-equipped hospital, is prone to ignore the hopes and fears of the ignorant. But such an attitude, however commendable from the standpoint of ethics, frequently works to the disadvantage of both doctor and patient.

The urbane quack thrives best when in competition with the serious minded regular practitioner who considers it unwise to go much into details with his clients. Hounded by their own fears and misgivings, patients will recklessly rush to the quack, because they
hear that he is a jovial kind of man whose patients immediately begin to get cheered up whether there is any reason for it or not.

Again referring to the Anglo-Saxon code of jurisprudence, we find that every citizen is entitled to his "day in court." By similar reasoning it may be said that every patient should have the benefit of all reasonable doubts as to prospects of recovery. There are few clinical cases passing under review by the physician which do not present certain hopeful elements. And the anxious patient, like the prisoner in the dock, is entitled to the benefit of all reasonable exceptions. An optimistic outline of the non-discouraging features of the case may greatly stimulate the patient's courage. An attitude of calm resignation may be eminently fitting to an undertaker, but is not appreciated in the family doctor.

Happily there are not so many instances where contact with the family doctor is depressing to the patient. Most practitioners contrive to present a fairly cheerful exterior. But the doctor who can impart some perfectly good reasons for encouragement to the patient himself can appear as gruff as he pleases and all will be forgiven. However, the practitioner who takes the time to clarify the case to the patient, who exults in every apparent element of improvement, and who furnishes a logical and hopeful explanation for every setback has, irrespective of the outcome of the disease, acquired the gratitude and confidence of the patient, the patient's family, and all the family's remotest relatives.
Enforced rest for recuperation is a remedy which must always be employed with due consideration for the mental influences which may incidentally result. The man or woman of middle age with a history of thirty or forty years of activity in congenial tasks must lay aside the accustomed routine in a spirit of cheerful acquiescence, or possible benefits are likely to be more than counterbalanced by depression. The most perfect machine requires a certain amount of "breaking in" before it will operate smoothly. The tasks which seem so monotonous to young people are apt to become the very breath of life after a period of years. It is accordingly a mental and physical shock when the person with evidence of organic deficiency is required to lay aside the usual occupations.

Idleness or travel for recreation, with the cheerful realization of a well-earned holiday, may be productive of much benefit if there is a prospect of again taking up the beloved tasks a little later. But travel for health purposes is a hollow mockery if associated with the idea that one's work is done.

Nothing is so cheering to a person under the handicap of a pessimistic diagnosis as the consciousness of yet being able to produce something for the common good. A patient under such circumstances intuitively seeks to take a hopeful view. "There is life in the old dog yet."

The optimistic physician has a sugar coating for every unfavorable condition. He tells the patient with a bad heart or suspiciously acting kidneys that nearly
everybody of that age has something or other the matter with him. If it were not one thing it would be another, because there is always a weak spot somewhere. He explains how to take the strain, so far as possible, off the affected part, and how to preserve equilibrium by letting the other parts of the machine do the work. Work! The very name carries magic with it to the man or woman with a useful life behind him. Nothing is more stimulating to his courage and fidelity to the doctor and his recommendations than permission to work.

Just contrast with this the case of the middle-aged patient when the family physician advises consultation at the office of a certain type of specialist. The specialist has never seen or heard of the patient before, and probably never expects to see or hear of him again. Whatever else he may lack, it is not frankness. He calls a spade a spade, and it is safe to say that in a large number of instances the family doctor can never quite get the patient back to where he was before this ill-fated visit.

Of course, there is a certain excuse for the realistic methods of the specialist. He must maintain his reputation as a correct diagnostician. Fortunately, the family doctor who knows his families and their characteristics is under no such obligation. He can indulge in cheerful generalities, and by sustaining the courage of the patient will often be greatly surprised by the capacity manifested by such people to rally, for a considerable period, from depressing conditions, to accomplish much that is of benefit to them-
selves and their families, and with the personal gratification which always accompanies such ability.

Reticence on the part of the patient is undesirable. It is for the interest of the patient that he relieve his mind of all anxieties and doubts. It is for the interest of the physician that he have both a physical and mental blue print of the case. Some garrulous patients, to be sure, seem to forget that the doctor could have anything else to do but listen to symptoms. One interview, however, will usually give the physician the cue, and he can thereafter confine the exhibit to the essentials. The patient who leaves the doctor's office thoroughly reassured has received a handsome equivalent for the fee, whatever it is.

It is probable that even the most communicative patient seldom unfolds more than a small part of the worries which harass most of the waking moments of certain neurotic types. A woman with a sick husband can, under the burden of anxiety, easily project before her mental vision the death of her husband, the funeral, and her own struggles to maintain and educate her children, and all in the space of a very few minutes. Under the depressing influence of fear the domestic animals, whose capacity for thinking under the most favorable estimate is but rudimentary, do not thrive. Man, while responsive to the glad emotions, with all their exhilarating influences, is conversely subject, in intensified form, to the same depression of fear and morbid apprehension which any stock breeder will exorcise from his herds so far as possible.
The mental emotions constitute a keyboard which, under the stress of overexertion or toxic disorder, may become badly out of tune. The physician of experience manipulates the keys through mental suggestion, carefully eliminating any underlying basis for discord. He looks carefully for the evidence of apathetic depression, on the one hand, and the nervous exhilaration of hypertension, on the other. Too little occupation is as undesirable as too much. It is unfortunate that more people do not understand and appreciate the psychological benefit they receive from their doctors. They are very apt to give all the credit to the prescription they receive. But, as before suggested, many doctors have themselves to thank for this ungracious attitude on the part of their patients.

In Hawthorne's masterpiece we read of the toxic influence upon Hester Prynne's nursing child as a result of her mental emotions when standing in the pillory exposed to the gaze and comments of the mob. Only a most rudimentary knowledge of physiology is sufficient to make the reason clear. Of course, not many crises arise where the mental emotions may reach such an intensity; but it is accepted without question that even the most ignorant adult with a cheerful nature has a better chance of living to a good old age than people of the opposite type.

So it seems that in these days of enlightenment not only should the average person be taught to understand the far-reaching importance of a cheerful mental attitude, but he should also comprehend the benefits which may result to him from a visit to the family
doctor even if he has no array of ordinary "symptoms" to place on inspection before the doctor. A depressed mental state is as much benefited by contact with a thoroughly competent physician as a case of lumbago.

It is interesting to conjecture what might happen to a large number of parasites upon the healing art if the thoroughly competent, high-grade family physicians would acquire the habit of considering every case which comes under their observation the subject of a mental diagnosis as well as physical. It is probable that the ranks of the peddlers, barbers and manicurists would be very considerably increased by those fakers who now profit by the habitual disinclination of competent physicians to take the mental kinks and pessimisms of their patients as really valuable diagnostic material. To be sure, the disgust which many physicians have for the querulous, self-centered, 100 per cent. selfish types who apparently "enjoy poor health" is most natural, and might be commendable were it not that these people, when treated with the scant consideration they may seem to deserve, exert a bad influence; for every one has an influence.

Fresh air and suitable foods are important aids to the physician in practically every case. But the melancholic temperament can easily render them of little avail. An examination of the blood may reveal much that throws light upon an obscure problem, but no microscope as yet can detect the hidden poison produced by hate, envy, or the consciousness of a deadly wrong committed and not atoned for.
Mental Torture of the Body.

It would, perhaps, be rather unconventional for a dignified practitioner to tell his morose, self-centered patient that to develop a feeling of cordial friendliness and good will toward acquaintances was likely to help largely in accomplishing a cure; yet there are many instances where such a mental change would work an apparent miracle.

Naturally these considerations apply with greatest force where no serious morbid changes have taken place. Even then any optimistic development of the mental attitude is helpful. But that the cheerful temperament is of great importance in imparting vigor and efficiency to the vital organs in the performance of their functions is so often demonstrated by certain exceedingly cheerful people who reach a hale and hearty old age that the prescribing of optimism as the chief preventive of the diseases of middle age would seem to be a professional duty as well as therapeutic policy.

There can be little doubt that economic problems are largely responsible for much of the life-shortening gloom which descends upon many people of middle age. The financial outlook is not cheering, and depression becomes chronic. The trend toward the cities is, in a large measure, responsible. Fear of being unemployed holds many potentially capable men in routine positions until natural adaptability to something better has been lost. The country doctor can say to the worried housewife, "Why doesn't your husband look for a better job?" He can even go out of his way to recommend such a man to some employer
in need of a reliable man. In the city the husband’s identity may be actually submerged, and it is only when some kindly disposed person goes out of his way to actively intervene that the round peg is at last cosily established in the right niche. Such a prescription by the big-hearted family practitioner may produce record results in health and happiness.

The comparative brevity of the span of life of many splendid physicians has been ascribed to excessive professional drudgery. But there can be no doubt that the inevitable depression caused by contact with the misfortunes of many luckless patrons is a productive factor.

It is evident that the interests of the doctor and his patients can be best served by more frequent intercourse, with the object of a greater amount of professional attention being devoted to prevention and a less degree of professional stress being devoted to cure. The family physician whose patients turn to him when they are “down on their luck,” and who get cheered up and instructed along the lines of conservation, is not wearing himself out with the anxieties and depressions which naturally are associated with treatment of a desperate case with economic disaster looming up in the background. The physician who realizes that a considerable number of families are keeping in that good health which results from intelligent application of the laws of hygiene, and who has educated his patients to appreciate the importance of consulting their doctor whenever the condition of mind and body falls below standard, has prepared the
way for an old age of comfort and professional usefulness, and especially that satisfaction which comes from having ably performed his part in making the world a more comfortable and agreeable place to live in.

While every adult man and woman has a certain conception of the various bodily processes, these ideas are as various as the individuals themselves. No doubt, teaching physiology in the public schools is a help; but the picture thus presented to the child mind is painfully inadequate even as to normal function. As to the influences which pervert the action of the heart, kidneys, and liver, there is no idea whatever.

Most people who succeed in avoiding the pitfalls and arrive at a healthy old age have little to thank for it but good luck. This is certainly not in accord with other branches of modern sciences.

And yet it should not prove difficult to explain how hypertension affects adversely the heart and kidneys, which may always be taxed to their normal capacity, or how anxiety may depress the digestion and flood the system with toxins, thus also adding to the strain upon the kidneys. These are but a few of the suggestions which, passed along to a reasonably intelligent patient, will be received by the majority as a distinct revelation. Few patients thus enlightened will ever forget the lessons thus set forth, nor the doctor, either.

The solution of this question lies with the doctor. It is for the interest of the doctor, although, of course, more in the interest of the public. The patient who secures a prescription may come again. The patient
who secures useful instruction that will enable him to understand danger signals heretofore entirely obscure is sure to come again, for there are always new problems to engage the attention of the enlightened mind.

Following such a policy, it happens, as a matter of course, that the physician has more and simple office problems and probably fewer and fewer night calls. And he is not likely to complain of such a development. Far better it is in advanced years to be known to the grandchildren of early patients as "the good, old doctor" than to have been cut down in the prime of life as the result of constant struggles to cure desperately ill patients who should have known better how not to be sick.

Every man or woman, as soon as the days of enlightenment arrive, must undertake to steer his course along the channel of natural development, maturity, and decay. The stream may appear placid and free from danger, but those who are not enlightened and who rely upon their own judgment are prone to trouble. They have no chart to steer by. The hidden rocks and quicksands are known to the doctor, and the only real safety lies in having him for a pilot. Just so long as people consider that good health is a matter of luck, they are ready to take their chances; but when it dawns upon them that self-reliance in matters beyond their comprehension bespeaks ignorance and fool-hardiness rather than good sense, they begin to look around for some one to guide them. With a few simple instructions and the clear-headedness
which comes from an optimistic temperament, they stand an excellent chance to reach the desired haven.

Therefore, in view of the fact that it pays much better to hire a pilot than it does to incur the expense of salvaging a damaged boat, even if it does not go to pieces entirely, there is every reason to suppose that a great number of people who delay consultation with a physician until they are in a really bad way might, with a more clear understanding of the case, place their physical fortunes in the hands of a competent practitioner, consulting him frequently enough so that he could detect incipient dangers promptly, and thus save all unnecessary shocks. Such a policy, if generally adopted, would greatly increase the average tenure of life, not only of patients, but physicians also. A sufficient number of physicians have already tested this plan and proved that it is workable. Let us hope that it may become of universal application.
CHAPTER XVI.

GETTING BACK TO THAT WHICH IS NATURAL.

It seems almost incredible at first thought that one person may be as old at forty as another at sixty-five, yet such is the fact. The reasons, while yet obscure enough, are becoming more and more tangible to students of physiology, and it is extremely important that enlightenment on this subject may become more general.

The development of a normal nursing infant carefully watched over by a healthy, competent mother is marvelous to behold. Such a child seems to be a perfect incarnation of health. The changes from day to day are a constant revelation of the workings of a thoroughly co-ordinated machine. Just so long as the healthy mother can supply abundance of nourishment for such a child, the development persists rapidly and symmetrically.

When the time arrives when other foods must be employed, there follows the introduction of the element of human judgment, always more or less faulty and capable of errors; hence the perils of the "second summer" and subsequent periods. Properly fed and cared for, however, the development of the child continues in a satisfactory way, and the child becomes sturdy, thoroughly optimistic, and practically tireless, inasmuch as restoration from the incidental fatigues following child activity is accomplished by a good
night's rest. This situation, therefore, illustrates the human machine as it functions properly.

It does not seem unreasonable to believe that, if it were possible for a person to pass through an entire lifetime under conditions as hygienically correct as during the period of childhood before mentioned, the number of centenarians would become so great as to cease to excite interest in the average community. Unfortunately, rugged health, with quick recovery from normal fatigue and often from comparatively frequent unhygienic practices, is apt to produce an undue sense of confidence which leads people to various forms of excess on the unfounded calculation that they are so strong and vigorous as to make it unnecessary for them to exercise that prudence which people of more delicate physique find essential to physical comfort. In consequence of this fallacious feeling of self-elation, it follows that deaths occurring among those of middle age or even younger are quite commonly instances of this unusual early vigor and vitality misapplied, and that those of more delicate constitution who have from necessity found it essential that they exercise better judgment are quite prone to find themselves in their later years in much better general health than their more vigorous associates of early life.

It is true that the majority of adults find the all prevalent economic strain a prolific cause of that gradual change from perfect normal function to that which is more common and which provides such a large proportion of the clinical material with which physicians
come in contact mostly during their professional careers. But it must be remembered that most of the persons who exhibit various disabilities by the time they are forty or forty-five have been acting without any adequate knowledge of hygiene. If they could but understand more fully just what perfect health is and how various personal deviations from normal hygiene may increase the wear and tear upon the organs of digestion and circulation in particular, they would find ways of modifying their habits of living with a view of relieving this strain so far as possible.

The first essential of perfect health is, of course, nutrition. The human body requires about so many nutritive elements in order to maintain itself. Logically the less strain upon the assimilative powers of the body which may be incident to taking up this amount of nutrition, the better the chances for perfect health and longevity.

The cost of living is a factor which at present enters very personally into the lives of most people. Fortunately, even under present conditions, most of the more expensive foods are not so actually necessary as many ill-informed people believe. Even at present high prices, milk is perhaps the cheapest food obtainable. And yet there are many families who stint themselves upon milk in order that they may spend much larger sums for other articles of food which impose a much greater tax upon the digestive faculties in proportion to the benefits received.

People are prone to regard the selection of foods as merely a matter of preference; whereas if they
could but be made to appreciate the real facts, as could be easily set before them in a few minutes by a competent family physician, an entire family history might be changed.

The first marked deviation from normal physiology in the individual who has passed through the first years of a perfectly normal and healthy childhood is usually developed as a result of the abnormal desire for food, which reaches its maximum at adolescence. Everything which is eatable is attractive at this period, and there is much that is eatable that is not wholesome. The rebounding vitality in this stage of development is such, however, that recovery usually follows such instances of over-indulgence. However, if persisted in there gradually ensues a modification of the chemical action of the digestive fluids, with more or less toxic influences upon the entire system. When these toxic conditions are made manifest by discomfort in the gastric region it often serves as a warning to people of fair intelligence, who are thus enabled to trace cause and effect and to modify their mode of nutrition accordingly. Unfortunately there are many who do not seem to be able to connect certain morbid conditions with the real underlying cause, and who therefore must pass the remainder of their lives under this great handicap.

The human stomach seems to possess an almost incredible ability to adapt itself to unfavorable conditions, at least in early adult maturity. In childhood, on the contrary, this noble and patient organ is more prone to rebel and reject its contents on justifiable oc-
casions. But as years go on there is developed a stomach tolerance for many foods which are, nevertheless, very unsuitable individually or incompatible in combination. People of fair intelligence are usually able to comprehend the unsuitability of certain foods, which they, nevertheless, habitually indulge in merely because the resulting difficulties of digestion do not present an acute cataclysm.

One of the chief reasons for this common use of certain foods unsuited to the individual is the dread of being regarded as eccentric. Conventionality is, in this, as in many other principles of life, a governing influence. An eminent American once classified American citizens of the strictly conventional type as "white Chinese" and apparently with abundant reason. The parents who emphatically insist that their children of varying individualities shall "eat what is set before them" are, of course, carrying out this idea of strict conventional endorsement of the family menu whatever it may happen to be.

Such is the influence of this idea of strict conformity that most people fail to derive any special lessons from the occasional acute indigestions which are apt to come to nearly everyone from time to time. It would be natural that one might think seriously of the stomach upset which is corrected by castor oil and the subsequent diet for a day or so of milk toast or thin soup, in combination with some delicate form of crackers, and would begin to comprehend that a system of feeding which produces more or less discomfort, even if it does not actually result in an explo-
sion, might naturally require some modification. Unfortunately, so long as the ordinary state of health persists, people give little or no thought to any question of interior chemistry, and proceed stolidly along, exactly the same menu being provided for the robust outdoor worker as for the slender overwrought school teacher of the family, equal disregard being shown for the difference in ages of all those who are able to sit down at the family board.

A gradual tolerance is built up in the digestive tract for all kinds of unsuitable and ill-combined foods. But, because there is no frequent explosion or acute indigestions, it does not follow that the more or less abnormal chemical reactions in the digestive tract are not producing the results which may easily be expected to follow if one stops to consider the foregoing facts. When the stomach contents are abnormally acid, it is inevitable that the intestinal tract be similarly affected and that the blood system will also be influenced. In other words, the bodily functions are all laboring under the handicap of unnatural interior fluids. It is not surprising that there is eventual premature impairment of the functional integrity of the bodily organs.

We are taught that one should not listen to the complaints of these various units lest the habit of introspection become established, in which case practically every function of the body will seem to the owner thereof to be perverted. It is said that those who watch their stomachs for symptoms will always have stomach trouble, and so on along the list. To be sure,
morbid introspection is a very bad habit to acquire, but the chauffeur who carefully avoids listening to any complaints of the working parts of his automobile, lest these complaints should cause him annoyance, would not be regarded as a very safe driver. The better policy would seem to be to find out what is wrong and correct it if possible, and afterwards throw off dull care so far as these matters are concerned.

Most people have experienced the sense of relief and often comparative elation which follows a normal and fairly complete elimination of the bowel contents, but they fail to connect with that sense of physical satisfaction the fact that the relative failure of this function is a sinister warning that the selection of foods for the digestive processes is not properly adapted to the individual. And yet so long as there are no actually pronounced morbid symptoms the average conventional person eats exactly what every other average conventional person eats, and regards such policy as essential to good manners.

To be sure, the economic problem is sufficiently prominent in most families to make it impracticable for each member of the family to have a separate menu. Nevertheless, if the same average family could acquire a practical knowledge of what constitutes for each one the most suitable combination of foods, even where there was but a limited selection, it would be possible to avoid a great many instances of over-taxing the digestion, with incidental under-assimilation. The result would be that the aggregate health and vitality of such a family would be greatly in-
creased. There would seem to be no more appropriate function for the family physician than, so far as practicable, to undertake to educate his families with reference to such important factors in their physical welfare.

A few years ago there was a very prominent Philadelphian who maintained a commanding position in the general business and financial affairs of the city until he was well up into the nineties. Day after day, when long past eighty, he could be found at his office busily occupied with, not only his own business affairs, but with matters of public interest. He had one unusual habit which his friends often noticed. Instead of sitting at the ordinary desk, it was his custom, while engaged in the daily routine, to stand at a high desk. It would not be a very great stretch of imagination to make it appear that this unusual postural habit in a measure accounted for the maintenance of this man's mental and physical vigor for so many years beyond the average span of life.

Some anatomist of renown, in a course of extensive studies as to posture in connection with health and hygiene, has supplied some very plausible and convincing reasons for various forms of human ills which, no doubt, materially shorten the average span of life. This authority tells us that the conventional posture of civilization is unnatural, and that the human frame, even after centuries of gradual adaptation, has not yet accommodated itself to these changed attitudes. However much conjecture there may be in these ideas, the fact remains that the Englishman who
leaves the dinner table to stroll about his estate or in severe weather stand before an open fire, is giving his digestive organs a much better chance to perform their duties than the American club man who eats a hearty meal and then sits down in a luxurious easy chair to smoke a heavy cigar. Likewise the housewife who gets up from the dinner table to assist in clearing away and washing the dishes usually enjoys better health than her sister who lives at ease at a high-class hotel.

Theories on feeding and digestion are, of course, innumerable, but a few general facts stand out conspicuously. People who exercise judgment and restraint, not only in the quality of foods, but their combination, and who carry out reasonable symmetrical forms of exercise, derive sufficient benefit from such habits as to thoroughly justify the time and attention devoted to a little study of these problems.

There are probably few families of average social position, even including those who have been comparatively well educated, who have any real comprehension of the chemistry of the alimentary canal. One fact alone, if explained to them, would no doubt produce a great deal of benefit. If they could understand that nearly every case of indigestion was accompanied by an undue excess of acid in the stomach and bowels, that in itself would give them a clue as to how they could avoid that dietary excess which produces such conditions. If they could be led to understand that various forms of excess acid and toxemia are regarded by many physicians as the causes of a good
proportion of the ills of later life, they would naturally see the advisability of modifying their selection of foods with the hope of more nearly approximating the normal benign conditions of childhood, when, as before stated, the bodily machinery functions so smoothly and perfectly.

It is probable that the chief basis for that old and oft-repeated statement that "while there is life there is hope" rests more completely upon the capacity of the digestive tract to recuperate if given a fair chance than upon any other detail of bodily function. Very astonishing results often follow a change from an unscientific, ill-adapted mode of feeding to one which is suitable to the age and condition of the individual. The digestive function seems to possess a wonderful power of recovery to normal if given the right treatment.

There are probably not many people who can arrange their daily routine with such absolute freedom as John D. Rockefeller, considerably past 80, and who is reported to be in a very satisfactory state of health. Fifteen or twenty years ago he was supposed to be in a very much depressed physical condition, but a suitable diet, with a reasonable amount of outdoor exercise, has made him probably younger at eighty than he was at sixty. There are plenty of men and women who have to earn their living who could, nevertheless, if properly instructed, so adapt themselves to conditions as to acquire a new lease of life and often comparative juvenility. There are few physicians in this present era of splendid preparation
for professional work who are not perfectly capable of instructing their families as to how they may avoid the consequences of these hygienic errors and get back nearer to the resonance and rebounding vitality of youth. And, when all is said and done, the problem resolves itself chiefly into the question of diet and exercise.

There are physicians who attribute the rapid increase of cancer to faulty nutrition. In fact, that is probably the generally accepted theory as to the cause of this dread condition. But it is not necessary to report cancer as an exceptional instance as the result of these errors. Many of the most common ailments of elderly life can usually be traced back in some way or other to this cause.

It should not, however, be inferred that diet alone can accomplish the desired results. There must be exercise of the right kind, and an abundance of it. No person can expect to keep in good health who lives a life of complete indulgence. It is simply one of the things that cannot be brought about. Therefore, it is just as necessary for the widow whose hard-working husband has departed early from this footstool, leaving her abundantly "provided for," to have some useful occupation that will occupy her mind and muscles as it is that the less fortunate woman who is doing scrub work should secure a reasonable amount of rest that she may recover from the exceptional fatigues of her occupation. In fact, if there is anything which has gone to prove that there is always a fly in the ointment, it is the state of health resulting to
those whose financial situation is such as to enable them to live lives of absolute indolence.

All the above statements are, of course, trite and uninteresting to an educated physician; but it is different with the lay public. Their ideas on these subjects are so nebulous and generally vague as to be amusing if they were not tragic.

At no time in the world's history has there been such a general overhauling of social theories and analysis of motives as at present. A large number of so-called poor people are being taught by cranks and crooks, chiefly the latter, that they are ill treated by those who are better off in this world's goods. A great deal of altruistic work is laid out for all classes of intelligent people, and it is important that these problems be taken up and worked out. Physicians have certainly done their full share in philanthropic work among the poor; at least, as regards the treatment of the sick. But it is doubtful if they have done as much to instruct these people how to keep well as the interests of society and of the physicians in particular require.

Ignorant people who know practically nothing of hygiene avoid the physician as long as possible. They indulge themselves in gluttony and other forms of excess when they have opportunity, all of which conduces to extreme poverty and its unpleasant consequences. The less intelligent the family, the more reckless they are, if they have the means available, in the purchase of foods. It is well known that the average well-to-do family is much more economical
and careful in its marketing than the poorer classes, and there is much to be learned by even an ordinary family of fair intelligence.

The physician who undertakes to instruct his families along the lines of hygiene and kitchen economics is, in reality, simply building up for himself in the not-distant future a class of practice that, while equally profitable, will be far less taxing than the treatment of cases resulting from gross ignorance. There is no angle from which this subject can be considered where it is not in the direct interest of the physician to systematically carry on this program of general enlightenment.
Aborigines. The first inhabitants of a country.
Abscess. A collection of pus in the tissues of the body caused by micro-organisms (bacteria).
Adenoid. Swelling of the lymph glands in the roof of the nasopharynx.
Adolescence. Youth; period between puberty and maturity.
Albumin. The white of an egg; the nutritious farinaceous matter stored up with the embryo of an animal or plant.
Albuminous. Like or containing albumin.
Albuminuria. Presence of albumin in the urine; Bright's disease; nephritis.
Alimentation. The act of giving nourishment; the function of the alimentary canal; food.
Alkaline. Having the reaction of alkali; opposed to acid.
Anatomical. Relating to or according to, the laws of anatomy.
Anatomy. The science of the structure of organized bodies, specifically of the human body.
Anemic. A person with diminished number of red blood corpuscles.
Antacid. A substance that counteracts or neutralizes acidity.
Antibody. Substance in the blood and tissue juices of animals rendered immune by inoculation that antagonizes certain toxins.
Appendicitis. Inflammation of the vermiform appendix of the cecum.
Appraisement. The act of setting the value; a valuation.
Approximate. To bring or carry near; cause to approach.
Assimilate. To convert into or incorporate with the substance of the animal body.
Astigmatic. Pertaining to or affected with astigmatism; blurred vision.
Atmosphere. The air encircling the earth.
Autogenous. Originated within the body. As applied to bacterial vaccine, the term denotes those vaccines which are made from the bacteria found in the patient.
**Autointoxication.** A form of autoinfection usually due to imperfect digestion of food in which the waste products of digestion are absorbed into the blood, poisoning the system.

**Autosuggestion.** The apparently spontaneous occurrence to the mind of ideas derived from impressions received in the hypnotic state; self-suggestion; imagination.

**Basic.** Pertaining to the base; fundamental.

**Biological.** In accordance with principles of biology.

**Biologist.** One who studies or is skilled in the science of living forms.

**Bombastic.** Swelled; high sounding; big without meaning.

**Bright's Disease.** A form of kidney disease characterized by the presence of albumin in the urine.

**Bronchopneumonia.** Inflammation of the lungs and bronchi.

**Camouflage.** To misrepresent; to disguise.

**Cancer.** A malignant tumor or growth, soft, friable, bleeding, eroding.

**Cardio-renal.** Pertaining to heart and kidneys.

**Cataclysm.** A deluge; flood; a violent or sudden physical change of the earth's surface.

**Catarrh.** An inflammatory affection of any mucous membrane accompanied by increase of the mucus, especially from the nose.

**Catarrhal.** Pertaining to or produced by catarrh.

**Cathartic.** A purgative medicine; a medicine to cause the bowels to move.

**Charlatan.** A quack; a pretender to medical skill.

**Chemistry.** The science which treats of the properties of elementary and compound substances.

**Clinical.** Pertaining to a clinic or to the bedside.

**Code.** A body of classified laws or regulations; a system of signals.

**Coherent.** Sticking together, cleaving.

**Co-operation.** The act of working or operating together to one end; joint operation.

**Co-ordinate.** Being of equal order or of the same rank or degree; working together; simultaneously.

**Corroding.** Eating away gradually; impairing; wasting.

**Coryza.** Cold in the head.

**Counterirritant.** Producing a counterirritation; a derivation agent.
Glossary.

Credulity. Easiness of belief; disposition to believe on slight evidence or no evidence.

Croup. A disease characterized by laborious and suffocative breathing; laryngeal spasm.

Data. Something assumed, known or conceded for the basis of an argument or inference.

Diagnosis. The recognition of a disease by its symptoms.

Digestion. The process or act of converting food into material fit to be absorbed and assimilated.

Diphtheria. A contagious throat disease characterized by the formation of a false membrane in the air passages.

Duodenal. Pertaining to the duodenum, the part of the intestine joining the pyloric end of the stomach.

Eliminate. Causing an evacuation; to get rid of.

Environment. That which surrounds; external circumstances of an organism.

Equilibrium. A state of balance or equipoise; a condition in which opposing forces exactly counteract each other.

Ethical. Pertaining to the ethics; moral.

Ethics. The science that treats of the principles of human morality and duty; moral philosophy.

Eustachian Tube. A tube which leads from the cavity of the tympanum of the ear to the pharynx.

Exorcise. To expel by prayers or incantations.

Exudate. An excretion thrown out by any of the body tissues due to disease.

Faculty. Any mental or physical power; mental capacity; skill obtained by practice.

Febrile. Pertaining to fever.

Formula. A prescribed method of preparing a medicine; a recipe.

Fomentation. The act of fomenting; warm or medicated liquids applied to a diseased part; incitement.

Function. The special normal or proper action of any part or organ.

Functioning. Executing or performing of anything normal to the part thus acting.

Gastric. Pertaining to the stomach.

Gastronomically. Pertaining to good eating.
Glossary.

Germ. A microbe or bacillus; a spore.
Glandular. Pertaining to, resembling or having glands.

Handicapped. Encumbered or hindered.
Hemorrhage. Bleeding from the lungs, arteries, veins or anywhere.
Hygiene. The science of health, its preservation and the laws of sanitation.
Hypertension. Abnormally high blood-pressure.
Hypnotic. Inducing sleep; pertaining to or of the nature of hypnotism; a drug that induces sleep.

Idiosyncrasy. A characteristic peculiar to an individual; an unusual harmful reaction to a certain substance, as to a drug.
Immunity. Exemption from any duty, office or tax; freedom from natural or usual liability; freedom from a certain disease; resistance to a disease that effectually overcomes its attacks.
Injudicious. Indiscreet, unwise; lack of good judgment.
Introspective. Inspecting within; examining one's thoughts or motives.

Jaundice. A disease characterized by yellowness of the eyeballs, skin, etc., caused by biliary derangement.

Kidney. One of two oblong flattened organs which separate the urine from the blood.

Laxative. Loosening; purgative; a medicine that gently moves the bowels.
Liver. A glandular organ secreting bile which aids in absorption of fat from the food, etc.
Longevity. Extended age.
Lumbago. Rheumatism of the muscles of the loins.

Mastication. The act of masticating; chewing.
Mastoid. The hard piece of bone behind the ear.
Mental. Pertaining to the mind; intellectual.
Modicum. A little.
Morale. Moral condition; that mental state which renders a man capable of endurance and of exhibiting courage in the presence of danger.
Morbid. Pertaining to disease; sickly; unhealthy.
Mucoid. Like mucus.
Mucous Membrane. A moist glandular lining of some of the cavities and canals of the human body.
Mucus. A sticky fluid secreted by mucous membranes.

Nasal. Pertaining to, affected by, or pronounced through the nose.
Nasopharynx. The cavity behind the nasal cavities and above the mouth.
Nephritis. Inflammation of the kidneys; Bright’s disease.
Nerves. Gray fibers which convey sensations from all parts of the body to or from the brain.
Neuropathic. Pertaining to or characterized by a nervous disorder.
Neurotic. Pertaining to the nerves; pertaining to or affected with a neurosis.
Neutralize. To make neutral; render inactive, as acid neutralized by alkali or alkali neutralized by acid.
Nitrogenous. Pertaining to or containing nitrogen.
Nonagenarian. A person more than ninety years of age.
Nutrition. That which nourishes; food; the action of promoting growth or repairing waste in organic bodies.

Obstetrical. Relating to childbirth.
Octogenarian. One who is eighty years old.
Opiate. A remedy containing opium or some of its derivatives.
Optimism. The doctrine that everything in the present state of existence is for the best; state of being constantly in a good humor despite adversity.
Oracular. Of the nature of an oracle; dogmatically magisterial.
Oral. Of or pertaining to the mouth; spoken by the mouth.
Organism. Organic structure; a separate living entity; the human body.

Peristalsis. The wormlike movement by which the alimentary canal propels its contents.
Perverted. Turned from the true end or proper purpose; misapplied.
Pessimistic. Pertaining to, or characterized by pessimism; gloomy.
Pharmaceutical. Of or pertaining to pharmacy or to preparing drugs for medical purposes.
Pharynx. The musculo-membranous sac at the upper part of the esophagus.
Physiological. Pertaining to physiology.
Physiology. Science that treats of the vital functions performed by the organs of animals and plants.
Plethora. Having excess of blood.
Pleural. Pertaining to the pleura, the membranous bag enveloping the lung.
Pneumonia. Acute inflammation of the lungs.
Poise. Weight; balance; equilibrium.
Posterior. The hinder parts of an animal; the back of anything.
Powwowism. A superstition in which incantation is used to exorcise disease.
Practitioners. Those engaged in the exercise of any profession, especially medicine or law.
Primordial. Original or primitive; of the simplest and most undeveloped character.
Prognosis. Knowledge of the probable result in a disease from its symptoms; predication of the outcome of an illness in a person.
Propensity. Natural tendency.
Prophylactic. A preventive of disease.
Primitive. Pertaining to the beginning; original; old fashioned; crude; antiquated.
Prudish. Like a prude; affectedly precise, nice or scrupulous.
Psychological. Pertaining to psychology or the science of the mind.
Recuperation. Recovery.
Regimen. Systematic regulation of the diet or habits.
Remedial. Affording, or intended for a remedy.
Renal. Pertaining to the kidneys.
Respiration. The act or process of breathing.
Respiratory. Pertaining to respiration.
Rheumatism. A painful disease of the muscles and joints accompanied by swelling and stiffness.
Rudiments. First principles; anything in its first or undeveloped state.

Saline. Like salt.
Sinus. A recess, hollow space, or cavity; also venous sinuses containing blood.
Sinuses. Large cavities within.
Solicitous. Eager; anxious; concerned.
Glossary.

Specialist. One who devotes himself to a particular branch of a profession.

Specimens. Samples; part of something to show the quality.

Sputum. Saliva; spittle.

Stimulus. That which stimulates; a spur; anything exciting to action.

Superfunction. Excessive activity of an organ or structure.

Symptom. That which indicates the existence of something else of which it is the effect, token or sign.

Syphilis. A contagious venereal disease producing skin eruptions, sore throat, loss of hair, destruction of tissue, insanity, etc.

Syphilitic. Affected with syphilis.

Temperature. State of a body with respect to sensible heat.

Temporizing. Yielding to current opinion; delaying.

Therapeutic. Treatment of disease.

Therapeutically. Relating to remedies used to cure ailments.

Thyroid. The name of a large ductless gland situated in the neck, the enlargement of which produces goiter.

Timorous. Fearful of danger; full of scruples.

Toxin. A poison produced by the action of bacteria upon organic matter.

Tuberculosis. A lethal disease accompanied by the formation of small tubercles in the tissues, destruction of lung, hemorrhage from the lung, and wasting of the body.

Toxemia. A blood poisoning.

Turpitude. Moral depravity.

Ulcer. A sore, attended with a secretion of pus.

Unethical. Not according to the principles of ethics or moral philosophy.

Unphysiological. Not according to normal, physiological action of the bodily organs.

Vaccine. A therapeutic virus prepared by cultivating disease germs, then killing them with heat, and injecting this into the sick person.


Volatile. Diffusing freely; capable of changing from a liquid state to a gaseous condition very readily, as benzine.

X-ray. The Röntgen ray; a radiogram or x-ray photograph.
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