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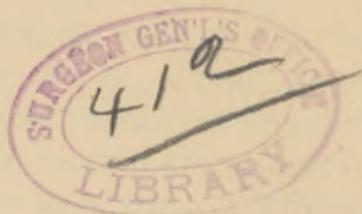
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BY

HAL C. WYMAN, M. S., M. D.,
*Professor of Principles of Surgery and Op-
erative Surgery in the Michigan College
of Medicine and Surgery Detroit*

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Diastasic Food in the Treatment of Chronic Diseases, AND DEFORMITIES OF THE BONES OF CHILDREN.

By HAL C. WYMAN, M. S., M. D.,

Professor of Principles of Surgery in the Michigan College of Medicine
and Surgery, Detroit.

Rickets, caries and curvatures are among the most frequent diseases of childhood. Every community numbers its cases of suffering, crippled and deformed children. Not a doctor of any standing but has under his care some of these cases. Too often he treats them reluctantly because he has little faith in any treatment. One child will have its ribs flattened, its breast bone protruding (the pigeon breast), a hump on its back, a hip raised and shoulder drooping, a veritable Richard III. Another is pale and sickly, drags a limb between crutches, smiles feebly and piteously when the surgeon speaks a word of sympathy and hope. Pus and putrefaction are permeating its tissues, degrading nutrition and making rapid the

journey to the grave. Another has its head misshapen, its legs are weak and muscles flabby; its skin is shrunken. It has suffered from diarrhœa, dysentery, cholera infantum. In infancy its head may have rested on its occiput too long, or the nurse may have carried it constantly on one arm. Its teeth are irregular, blacken and decay prematurely. There may be an inherited disease which gives an old look to what ought to be a child's face.

Surgery—chirurgery, as the Greeks called it—the handwork or manual part of medical art is, single and alone, unable to cure these cases. She can incline the tree as it ought to grow. She can lop off a limb here and there. She can straighten and train, but she cannot make the parts grow. There is a something in these cases more subtle than what the eye sees, which is at fault. The fountains of nutrition are perverted. Chemistry shows us that the food sources are impaired. We say the general health is bad, the lime salts are insufficient, the fats are wanting, the blood is thin and poor.

A few cases will illustrate the points which I wish to bring out in this paper :

A CASE OF POTTS DISEASE.

Ella K., aged eleven years, residence, Detroit; she began to exhibit the symptoms of Potts Disease five years ago. She was then treated with a plaster jacket; she did badly, failed steadily in health until her physician was obliged to remove the cast and

open an abscess which appeared below and near the angle of the left scapula. Angular curvature in the upper part of the dorsal region developed suddenly. Metal braces were made by an expert instrument maker and applied to the spine for the purpose of straightening it. They failed. She improved for a few months in general health after the pus began to discharge freely, but finally the constant drain began to wear her out and she became restless, fretful and sleepless. Plaster was again resorted to with a fenestrum through which to inject and clean the sinuses in the back. She ran down worse and worse. Her left thigh became flexed upon the abdomen and an abscess appeared in the ham and required to be opened. She was suffering from Septicæmia; her urine was scanty, tongue furred, breath bad and bowels moving with a frequency and fluidity which carried food through them almost as quickly as it was taken. Cod Liver Oil had been freely given, but without helping the patient. She came to me with the above history. I found the abscess running freely, but there was an extent of pyogenic surface lining the abscess and sinuses greater than the existing reparative powers could heal. Antiseptic washes had been injected often.

I decided to try two plans of treatment, one addressed to the food and nutrition of the patient, the other to the pus cavities and sinuses. The latter I thought best to wash three times daily with hot, freshly boiled water, which contained no chemical an-

tiseptics ; I had it applied by means of a hose attached to a fountain syringe. The nozzle of the hose was inserted as far as it would go and the water allowed to flush the pus channels. The plan has steadily diminished the quantity of pus. The nutrition I compassed with the Diastasic Food made by the Trommer Extract of Malt Co. Other foods were given at regular intervals. No severer test of the ability of good food and good dressing to restore bodily vigor could be had than was presented in this case, and the results were most gratifying. After six months the sinuses were healed and the patient was able to use her limbs which had been so long drawn out of position.

RICKETS.

F. C., aged five, residence Detroit, was brought to me by her parents to see if she could be taught to walk. She had a singularly old face and was very precocious. She had been under the care of doctors more or less constantly since an attack of cholera infantum during her second summer. Her teeth developed slowly. Her father had chancre two years before she was born. Her mother had never had any symptoms of local or constitutional infection. The child was strikingly deformed. Not a long bone in either extremity was straight. The bones of the fore arms were bent backward so that her hand stood almost at right angles with her arm. Her legs were bowed and her thighs were crooked. The most unusual deformity was her skull, which presented a tri-

lobed appearance which looked as if it had been caused by tying the cranium with cords after the manner of doing up packages. She could not walk, and crept about dragging her legs on the floor. It was apparent that the arms had been bent creeping. Her muscles were markedly weak and flabby. Some one had tried to teach her to walk by fitting iron braces to her limbs, thinking to strengthen the knees and ankles. They availed nothing. I put her at once on Diastasic Food with a diet of gruel made of beans and corn meal boiled together. Milk I prohibited because the history showed that it had never been digested readily, and constipated the bowels with large scybulous curds. Instead the Diastasic Food was mixed directly with the gruels. She was given freely of fresh beef finely divided before cooking. The medicines given were iron carbonate and lime water, three grain doses of the former in tablespoonful of the latter, three times a day. Then the nurse was directed to lay the patient on a table and rub her muscles with sweet oil three times a day. The legs and arms were pulled and rubbed in the direction in which they should grow, at the same time; the child was also trained by the nurse to swing by her arms on a horizontal bar suspended in the door of her room. It was placed high enough so that her toes could barely touch the floor while the exercise was in progress. Great patience was required to induce the nurse and friends of the patient to persist in the diet, medicine and training; but after a time, (six months),

Improvement was observed. The limbs had grown strong and easily supported her body. She, a little later, learned to walk. The crooked bones under the improved nutrition of the bones and muscles are growing straight. The skull has grown and its trilobed appearance is rapidly vanishing. It is now nearly two years since she came under treatment and it is clear that the disease, rickets, is checked and its ravages pretty nearly corrected.

Pathologists have long recognized the scarcity of Lime Salts, and particularly Phosphate of Lime, in the bones of rickety patients.

The soluble phosphates present in the food prescribed for case related, supplied the Lime Salts needed. They combine readily in the system to make the Phosphate of Lime and thereby restore the element wanting in the bones of rickety patients.

