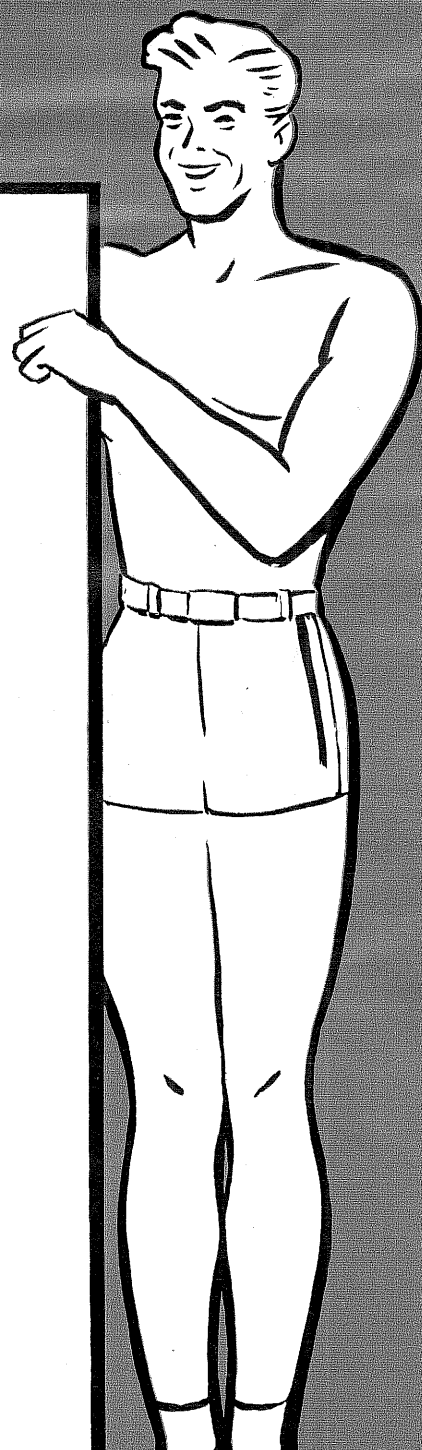
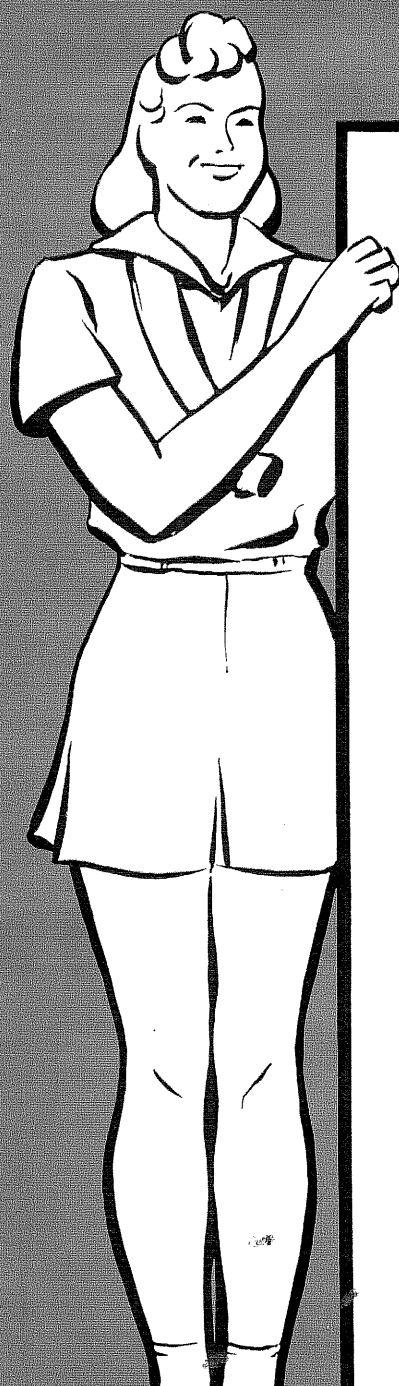


Vitality

A MAGAZINE OF HEALTH

MAY 1942

PRICE 10¢



V

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VIM
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VITALITY
VICTORY





WAR TIME FOOD

JEAN T. SHADDUCK

VICTORY GARDENS

I am wondering whether all of you are as thrilled as I am in watching the victory vegetables coming bravely through and showing in long green rows with a promise of fine salads and vegetable dinners this coming summer. I think, perhaps, that the Victory Garden will prove of more value than was first thought. It will serve a double purpose in that not all the health will come from eating the vegetables, but from the work of raising them as well. This last week as I have limped and stumbled into the house in the later afternoon with a lame back and aching muscles and gently lowered myself into a warm bath with a sigh of relief, I have felt that the reconditioning of my muscular system in good hard work is of as much importance as eating vegetables, and most certainly the two go together very well. The fresh air and sunshine, the smell of freshly turned earth, and the pride one experiences in doing useful work are all very fine for the spirit and takes much of the trouble out of a troubled world, so here's to bigger and better Victory Gardens!

We will soon be having all the berries we can eat, and let's all eat them three times a day, they are of a cleansing and purifying benefit to the system. Those of you who have enough and to spare of your own berries may press out the juices and have berry juice drinks, they may be served as cocktails before meals or as a cold fruit soup and they act as a real tonic. Then it is a good idea to serve as many fruits and berry salads as you can. Combine berries with other fruits and with cottage cheese and make glorious salads that are pictures to please the eye as well as the palate. Raspberries and bananas go well together as do strawberries and bananas.

FRUIT AND CHEESE SALAD

Take your largest glass platter or salad bowl and use your favorite green, either lettuce or watercress are good—then use peach halves, pear halves, bananas split and then halved, apricots and as many different berries as you can get together. Use a mound of cottage cheese in the center and arrange the fruits and berries around the cheese with attention paid to the color arrangement. Have all ingredients chilling in the refrigerator ahead of time, but do

not arrange until serving time so that when it is brought to the table, it has a breath-taking freshness about it that appeals to all. Above all have the plate or shallow bowl it is arranged in chilled as well as the salad materials. A good bland dressing for this is very cold whipped cream with a mild sweetening of honey.

When the garden really gets under way you will find that you can have at least two dinners a week comprised of all the different vegetables, combined with the fruits and berries in season for the dessert.

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SAFEGUARDS OF LIFE

Urinalysis

DR. C. E. STEWART

Bile has always been regarded as indicative of a bad disposition. A bilious person is certainly not a happy one, for there is no more harrowing experience than what is called a bilious attack. In ancient days the doctors who knew very little and most of that wrong, used to talk about black bile and thought it was the cause of death. Of course, there was no such thing but it served to cover up when an explanation was needed.

Bile is really a vital necessity. In the right place—that is, in the intestines—it helps with the digestion of food and the lubrication of the bowel. But when it appears in the urine it is a sign that something has gone wrong with the liver, the blood cells or with the passage leading from the liver to the intestine.

The liver, under ordinary circumstances, produces bile from special cells whose name is legion and whose activities are enormous. There are literally hundreds of thousands of these cells at work all during the twenty-four hours of our day. Arranged in serried rows, these cells have trickling from between them the gold-green rivulets of bile. These journeying with others as tributary rills unite to make a brook. Then the brooks unite into fair sized streams until at last they converge into the common bile duct.

This rather large tube conveys the

bile to the small intestine. It has by the way a sort of side pocket into which a reserve supply of this heavy fluid is stored—the gall bladder.

Let us suppose for a moment that a stone escaping from the gall bladder creeps down in the duct and gets stuck, failing to reach the intestine. This means that the flow of bile is stopped and begins to back up. In a few hours, the liver is overloaded and dangerously distended within its capsule. Now the bile, seeking escape, finds its way into the blood and is carried throughout all of that system. Through every internal organ, through all the veins and arteries of the skin it seeps, producing that golden color in the skin known as jaundice.

It is, of course, a foreign substance in the blood. Reaching the kidneys, therefore, it is so treated and an attempt is made to filter it out into the urine. This is generally successful and the doctor who is careful enough to have a urinalysis made is informed of the existence of bile in the waste fluid. He is, thus, able to clearly understand the case.

Not all bile in the urine is due to stoppage of the duct by a stone. Sometimes a nest of intestinal worms may be responsible. Then again the duct may be inflamed and become closed by catarrhal adhesions. It may not be the duct at all, however. The liver itself may be diseased or under pressure from the outside. Actually, this organ has no real shape. Its form is due to the organs with which it is surrounded. Above, the diaphragm molds it into a dome. Below,

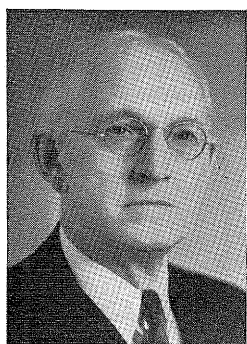
the large intestine indents it so that a groove is produced. It is very soft and pliable unless diseased and, thus, easily susceptible to pressure disturbances.

It is also the largest organ in the body and is always heavily charged with blood. Bile is made from the destruction of the old red cells which, having served their usefulness, are turned again into a valuable substance. So the presence of bile in the urine may be a sign that the "reds" are being destroyed too rapidly and that anemia is in sight.

Then again the wholesale destruction of the liver cells themselves may produce an overflow of bile and cause it to show up in the urinalysis. There is also a disease, due to phosphorus poisoning, which bring about this result. Strong emotions will also sometimes increase the flow of bile to a point where some escapes into the blood. Faulty diet, lack of exercise, alcohol or some cathartic drugs are also amongst the agents producing liver damage.

Thus, from the above it should be apparent that bile in the urine is always a sign of disease, either developing or well advanced. Remember that the doctor owes it to his patient to use every possible means at his command to discover what is wrong. A good doctor will always do this and the patient should not attempt to hamstring his efforts by objecting.

No diagnosis is complete without a chemical and microscopic examination of the urine. It may be the means of discovering a dangerous disease in an incipient state. The fluid wastes of the body will give warning in time and, if their story is revealed and heeded, grave issues may be avoided.



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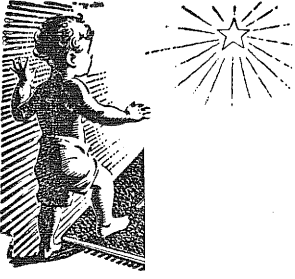
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CHILD HEALTH

DR. MARGARET J. SCHMIDT

CLOTHING

There has been a great revolution in the manner of dressing children in the recent years. Most of this is to the good. We are well rid of the many long petticoats with all the tucks and ruffles. One of the greatest departures is the discarding of the binder. The tiny new-comer does not need a binder to retain the abdominal wall or to prevent hernia. In fact hernia may sometimes have been caused by the binder. When the abdomen is held too tightly the strain of crying will be exerted against the inguinal region. However the babe comes from a pretty warm place. The flannel binder is pretty cozy. The babe is content when he is comfortable. His hands and feet should never be allowed to become cold. Cold hands, feet and abdomen are a prolific source of colic. Clinical observation proves this to be a fact.

Aside from this it is a matter of fashion what the well dressed infant will wear. When considering a babe's clothing the crib must also be taken into consideration. The mattress should be flat, there is no need for a pillow. The coverlet should be light but warm. The crib should not stand in a draft. The child should not be too warm. He should never perspire perceptibly. Do not have too much light. Remember the babe comes from a pretty dark place. Let him adjust himself to life in the world gradually. So many adjustments have to be made we sometimes marvel that

any of them survive. We favor stockings or long booties among other things for infants. So—enough clothes to keep the babe comfortable and warm, not perspiring.

For the older child the same thing holds true. Clothes should be light and warm in cold weather, light and cool in hot weather. I am sometimes amazed that children are able to carry the clothes some mothers put on them. One mother's little son used to come in for treatment, wet with perspiration. His clothing must have weighed eight or ten pounds. She could not understand why he took cold so often and why he did not gain weight. A few chiropractic adjustments helped him overcome the cold from which he was suffering. Then we eliminated the heavy clothing, substituting light but warm clothing and using the cold back washings which have been mentioned before; he soon was as robust as any other child. Mothers must anticipate the need for more or less clothing, for their children. Do not wait until the child shivers or perspires before you put on more or take off a coat or sweater. Some children's bodies adjust themselves more readily to temperature changes than others do. This is all a matter of growing and developing tolerance to the various changes in their environment.

I am often asked, "Doctor, do you approve of socks on children in winter?" To this I must answer, "Yes and no."

The hardy ones survive. It does them no harm. However energy used to keep the body warm cannot be used for activity. In this case building materials (body foods) may be consumed for that purpose. If the body is constantly fighting to adjust itself to normal temperature, so as to sustain body comfort, it is a strain on the nerves. With the small child as with the infant, cold feet may be the cause of irritability. We must avoid extremes in clothing as we should in all other matters. We must use

Continued on page 10

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Vitamins Limited

Elizabeth Rawlins

A professional man recently assured me that he thinks Vitamins are a lot of nonsense. He has never used them. His determined disbelief in them has prevented his ever wasting his time in foolish pursuit of the study of Vitamins, nor does he even now consider that the science warrants his attention.

And so, with this minimum of information upon which to base his conclusions, he warns his patients to beware lest they, like us, become the victims of Vitamin consciousness. For if you ever expose yourself to Vitamin education, your goose is cooked and you're likely to retain enough knowledge to enable you to put Vitamins to the finest kind of personal use.

If you have never investigated Vitamins, or read about them, or used them, surely you don't know the difference between a Vitamin and a split pea and therefore are no judge.

Another man, a pharmacist, states bitterly that there's no sense to oral Vitamins; that only intravenous and intramuscular Vitamins will work.

He forgets two things. Had it not been for oral Vitamins there'd have been no needle madness on the score, for only by the manual isolation and oral administration of the concentrates were the researchers able to demonstrate their efficacy in the first place. The needle is the new baby. Furthermore, certain of the Vitamins cannot be hypodermically administered.

Come to think of it—what does the guy believe Vitamins ARE? Must be he regards them as a new invention dreamed up by a smart advertising agency to lend spice to the merchandising world.

And another man tells of his utter disillusionment in the use of massive doses of Vitamin A, because of the nasty reaction in some one case of which he'd heard rumor. Well, we'll skip the specific case and study only a condensation of Youman's opinion that there are no contraindications to the use of the most fantastic potencies in Vitamin A proper, inasmuch as any toxic or deleterious effects lie not in the Vitamin, but in the slipshod processing which allowed the "A" to remain in its original bed of supporting oils. That the histamines and stearates are not the property of the Vitamin A, but may readily be characteristic of the environmental oils from which we remove the essential element. Therefore, depending on the modus operandi by which that particular "A" was obtained, the after-effects shall be determined.



Another man, but at least an amenable character, asks how a person decides which Vitamin to prescribe when two are necessary and only one good formula is economically possible. The patient in question is underweight despite good appetite, inclined to fatigue, generally Vitamin B deficient, but also shows evidence of progressive Vitamin A deficiencies.

Well, since Vitamin B has much more to do with digestion, food utilization, and elimination of wastes, perhaps his Vitamin A deficiency is primarily the result of the Vitamin B deficiency. Tho the man may have been enjoying a reasonable diet insofar as the "A" was concerned, it is obvious that assimilative processes of all of the foods is inhibited, including those foods normally depended upon as potential "A"-providers. The introduction of a good "B" therapy would automatically increase food utilization, effecting the "A" assimilation and improving the picture throughout.

It is not as reasonable to suppose that all objectives could be as readily (albeit deviously) attained by the use exclusively of the "A" therapy. "A" alone would help, and would do a great deal of general good, but it would be the more indirect approach.

Needless to say, whatever organs may be suffering an "A" deficiency, a "B" is not valueless. Nor is a "C". And in a "C" deficiency, a "B" is beneficial, and so is an "A". Simply because of that one fact which can stand noisy reitera-

tion incessantly . . . Any Vitamin must create some improvement someplace and, creating improvement someplace, must create improvement throughout. But the real art of Vitaminology, however, lies in the mastery of hitting the nail on the head, selecting the specific, the fastest, the most direct approach to the most urgent need. Like plugging the boat instead of bailing.

There can be no precise summary of Vitamin requirements. Too many factors enter in. Such charts as are offered the public deal strictly with the requirements presumed (by the individual authors) to be necessary only for the maintenance of "optimum health." This means for the maintenance (but not the creation) of a state of creditable well-being. And even those charts should be drastically variable, to allow for alteration in living habits, eating habits, climatic considerations, and even international jitters, which create a greater demand for certain of the essential elements.

It is absolutely impossible to establish any set of rules as to curative amounts of Vitamins. This would require a stipulation of daily-requirements-plus the advisable extra amounts for a mild, a severe, a chronic, or an acute condition, and would hinge on the patient's age, environment, term of pathology, sympathetic symptoms, inherited predispositions, and many other factors.

People in the Vitamin industry hardly expect the multitudes to gullibly concur in everything they say, nor stand and cry "Hear Hear" when the pearls are being cast. It's still a pioneer field and any crusade requires an ability to accept new findings as they are proven. Yet outsiders who question that elasticity and regard it as a vice and not a virtue, fail to realize that their own ad- amance is shutting them off from something which has now progressed much beyond the mental capacity of that man who "doesn't believe in Vitamins."

Chlorophyll

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Causes of Cancer



April was official cancer month. No one should object to any effort to enlighten the public about this terrible disease. We believe however that the first phase in its elimination is that the public understand what it is and how to avoid those practices which are indicated as helping to produce it. For that reason we publish again the editorial "Carcinoma" which appeared in an earlier edition of Vitality.

Cancer is not a foreign growth in the strict sense of the word. It is rather a group of otherwise useful cells gone wild.

It should be understood that there is in the body a power which compels all the cells of which it is composed to arrange themselves in such a way as to produce and maintain functionally useful organs and tissues.

Where this power is lost or suspended locally one kind of cells, having great reproductive capacity—the epithelia—continues to multiply in a disorderly and confused mass. This is cancer.

The pre-cancerous period is, therefore, that lapse of time during which an individual is suffering from a threatened loss of the control factor. This is, in plain language, when the vitality, general or local, is below par. That this is true is supported by the fact that cancer generally makes its appearance at the age in life when the high tide of activity begins to ebb—over forty years. It also is more prevalent amongst the poor and needy than amongst the well-to-do.

Local development of the pre-cancerous state is probably due to interference with the nerve supply to the part affected and the consequent failure to maintain proper nutrition and drainage.

On the other hand, the systemic or general pre-cancerous state—there is competent evidence to show—is due to faulty nutrition or to the circulation for long periods of time of toxins either ingested from the outside or occurring internally.

Now, the important thing to remember is that local irritation is only one of the conditions necessary for the development of this malignancy. Let there be suspension of the control factor, locally or generally, together with a long sustained irritating pressure, friction or chemical substance, and the result may be cancer.

It is the conjunction of these two conditions which permits the ungoverned outburst of epithelial cells to occur. Put in this way, it is perhaps clearer. Loss of control factor plus local irritation equals cancer.

The prevention of most types of cancer lies, then, in keeping the body vitality as high as possible, in seeing to it that local areas do not become ready to produce cancer because of lowered nerve supply or lessened nutrition and in avoiding local irritation.

Amongst the last named are, bad oral hygiene, pyorrhea, tobacco, too hot food, too coarse food, condiments, the pressure of undischarged stools in constipation, irritated skin moles, close shaving over bony areas of the face, the use of powerful irritants in vaginal douches, liver congestion, and the abnormal wear and tear of organs and tissues which are suffering from lessened nerve supply or bad blood chemistry.

In support of this, the great Russian scientist, A. J. Speransky, after experiments on thousands of cases over a period of sixteen years says, "We do not know of a single tissue activity (life function including repair) that is realized without the influence of some nervous impulse."

The cure of cancer is also indicated along these lines. Early diagnosis and destructive treatment by surgery, x-ray, or radium is only half of the story. If only part of the money and publicity now spent upon often useless surgery and radiation were spent upon the search for the control factor and its application to the treatment of the disease, the dawning of the day of release from the dread nightmare of carcinoma would be at hand.

Fraud in Advertising

Recently the Federal Trade Commission cited a well-known manufacturer of colon irrigators because of alleged fraudulent advertising. This irrigator is a most up-to-date and efficient machine and certainly can accomplish all that an irrigator should.

The interference of the F. T. C. appears to be quite unwarranted and unnecessary. The advertising matter complained of seems to have been issued solely to physicians. The machine is sold only to doctors and not to lay people.

It is very difficult to see how the allegation of fraud may be made good in this case. Doctors know quite well what water will do in the colon. An over-enthusiastic salesman may do some romancing in this regard but since the prospective customer knows that it is romancing, there is no fraud.

The physician buys the irrigator because he believes that it will benefit his patients. He listens

to the salesman and reads the blurbs only out of politeness. And, certainly, he is not going to admit that the salesman's story convinced him that the irrigator will do more than any handsomely elaborate enema can be made to do.

We suggest that the Commission forget colon irrigators and give a little attention to the allegation that smoking cigarettes will reduce sore throat. Certainly that kind of advertising is blatant and designed to deceive. There are even people who believe it.

Four Years in Three

Recently, the Chicago Round Table, notorious for its radio essays in indecision, lapsed into forthrightness. The subject was "Present Educational Standards." Those who took part in the discussion were men of note in the art of teaching. They agreed that a degree of bachelor of science should be given for two years work and that the academic four year course should be completed in three calendar years.

There has been an under current setting in this direction for some time, in healing as well as general educational circles. Every now and then voices have been raised in medical conventions advising that one year at least be cut from the over-lengthy course. In the piping days of peace such demands went unheeded, but war has made it otherwise.

Many schools and colleges have adopted the four years in thirty-six months rule. Such august names as Western Reserve, Chicago, Johns Hopkins, Vanderbilt, Columbia, Cornell, New York U., Long Island College of Medicine and Minnesota appear upon the roster of the reformed. It is interesting to note, also, that General McArthur instituted thirty-six months at West Point.

There should be no criticism of this. It is up to date and in line with progress. To complete the four academic years in thirty-six months is sensible and sound. We cannot help but indulge a polite chuckle, however, at those who so very recently were loudly protesting that less than forty-eight months would bring ruination to the educational system.

We have always contended that the leisurely thirty-two months schooling extended over forty-eight, was a waste of time and strictly out of keeping with modern ideas. It is a pleasure to see this change. It will, perhaps, make things a little more difficult for the boy who used to work his way

through school. It is believed, however, that this will be more than compensated for by the lopping off of one full calendar year. War certainly does rip out a lot of social bric-a-brac. Let us hope that in this case what Mars has abolished peace will not be able to restore.

Our Present Day Mothers

As I look about me I am gratified to see what splendid mothers our present day young women have become. With all their frivolity, even sometimes a harum-scarum adolescence, their indifferent late 'teens and early twenties, they keep us wondering how they are going to turn out as wives and mothers. Then we see them as lovely brides and later as mothers. On the whole, they make the best mothers the world has ever known.



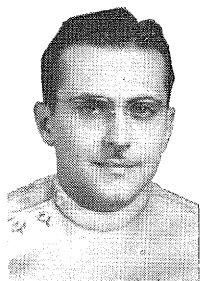
The young mother of today is sensible in that she usually follows the doctor's advice, feeding regularly and putting the child to bed for regular sleeping. Best of all, she thinks for herself. She reasons out everything, doing what is best for baby regardless of what mother, grandmother or great-grandmother may have done for her baby. Most things have a scientific reason, and the young mother looks for the reason or cause of any phenomena which might baffle her. She asks advice from those who make life a study.

Hygiene and sanitation are the present day mothers' hand-maidens. The knowledge of food values is her guide. Our government has been very liberal in the dissemination of information, and I find young mothers availing themselves of this information quite extensively. I find my daughters and their friends eagerly studying and discussing food values, food chemistry and habit-forming lessons for baby. Young mothers are eager to learn about child posture and chiropractic.

It does my heart good to find few cross babies anymore. If the baby is fretful, the cause is ferreted out and removed; the mother is relieved and everybody is happy.

Our mothers—our present day mothers—God bless them.

Margaret J. Schmidt, D. C. Ph. C.



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Food and Life

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The copper content of the infant's liver just before birth is about 10 times and after birth about twice that of the adult liver. Just as food iron is supplied very early in life in anticipation of the time when the high liver-iron stores which the infant possessed at birth will be exhausted, so must copper be supplied to keep the copper stores at the optimal level.

The sources of readily available copper in the infant's diet are the iron-containing foods—liver, egg yolk, whole-grain cereals, fruits, and vegetables. Although cow's milk is almost devoid of copper, some is added in the pasteurization process when the milk is passed over heated copper rollers, or when copper cooking utensils are used.

A healthy 6-month-old infant on a diet that contains about 5 milligrams of iron will also be getting more than 1 milligram of copper. The larger servings of the iron-rich foods in the diet of a year old infant supply about 1.5 milligrams of copper.

The diet of the pre-school child contains the foods added during the first year of life and other foods such as whole-wheat bread, lettuce, cauliflower, cabbage, beets, apples, raisins, dates,

chicken, and lamb—all of which contain appreciable amounts of copper. Among the foods that may be added to supply the additional copper needed by older children are molasses, nuts, currants, shellfish, and other fish. The copper element of oysters is so high that one large oyster will supply about 0.5 milligram of copper. From 1.5 to almost 3 milligrams of copper are contained in a well-planned diet that supplies from about 8 to 13 milligrams of iron.

Until the requirements for infants and children have been determined by experiment, the daily copper allowance for the infant may be tentatively set at 1

to 1.5 milligrams, for the growing child at 1.5 to 2.5.

Continued Next Month

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Heart Disease Due to Digestion

JOHN W. NOBLE, Jr.

Since heart disease seems to be one of the leading causes of death a few pertinent remarks anent this malady might be in order at this time.

Heart disease doesn't just happen; there must be a cause for it and this must be ascertained before intelligent treatment can be given. Before diagnosis is pronounced the heart should be examined by auscultation, by x-ray and fluoroscope and if necessary, by electrocardiograph. After these details are attended to then particular attention should be paid to other foci of infection such as the lymphatic structure, the teeth, gastro-intestinal tract and any other organ or structure of the body which might harbor infective agents or toxins.

We may find a leaky valve, enlarged heart, broken rhythm, palpitation, skipped beats and other cardiac disorders but to let the matter rest there and treat the symptoms is wrong.

Since it is impossible in a short article to enumerate all the causes of heart disease an attempt will be made to show how alimentary disturbances may be responsible.

The nerve supply to the heart is from two sources, e. g., the Vagus nerve which originates near the floor of the fourth ventricle of the brain, and the sympathetic nerves which originate in the lower portion of the neck and upper dorsal area of the spinal cord. The Vagus nerve also innervates a good share of the digestive tract. The sympathetic nervous system, through the gangliated chain and various plexuses, does likewise, but exhibits an opposing action to that of the Vagus. So as long as the two systems are working in harmony we have balanced action of the parts they supply.

In the event of disease in the digestive tract the sympathetic and vagus nerves become involved and if both are equally affected there will be little reflex disturbance. This however, is not always the case as one or the other usually exhibits signs of increased irritability and this increased activity will soon be felt in other portions of the body.

Should the sympathetic system show increased activity the heart will beat much faster. This rapid action may continue until the muscles of the heart become fatigued or the vagus nerve attempts to regulate its speed and then the heart either slows or assumes an irregular rhythm which is sometimes described as a fluttering sensation.

These symptoms may come at infrequent intervals, may be steady, may wake an individual from deep slumber and



may come with apparent provocation (exertion or emotion) and along with this syndrome comes a feeling of weakness, the individual complains of trembling but no tremor is visible and quite often there will be profuse perspiration.

Coupled with the increased irritability to the nervous mechanism of the heart we have other factors which are primarily mechanical.

As the digestive disorder increases the organs involved usually become distended with gas and digestive end products. The stomach, a portion of the colon and a lobe of the liver are adjacent to the heart with only the diaphragm interposed so any distension or congestion of these organs will exert mechanical pressure on the apex of the heart thereby increasing the load which it must overcome.

The distension of these organs, e. g., the liver, stomach, and colon quite often are responsible for an increase in blood

pressure which in turn throws another load on the already overworked pump.

Over distension of the colon, particularly of the splenic flexure which lies under the diaphragm on the left side, not only puts pressure on the heart but is often responsible for pain in the left portion of the chest and leads the individual to believe that he is suffering from Angina Pectoris (heart disease caused by closure or blood clot in the arteries of the heart).

From the above we may conclude that in a great many heart diseases the heart involvement is secondary to disease elsewhere and it has been my experience that the alimentary tract is the worst offender.

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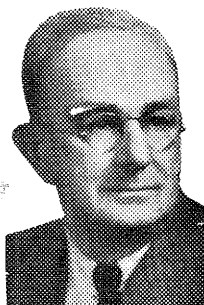
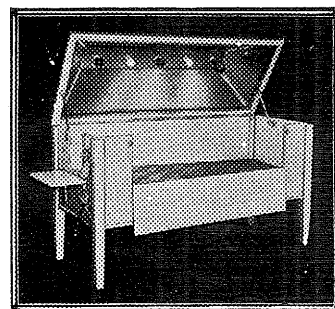
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CHILD HEALTH

Continued from page 4

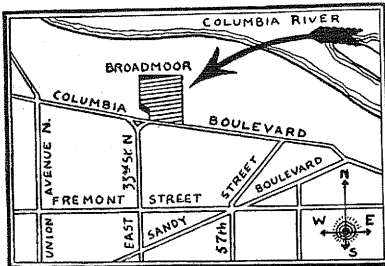
common sense which is really quite uncommon.

A mother, swathed in furs, while her child is barelegged and blue with cold, will say, "She likes to wear socks." Would this mother let this child play with a sharp knife, just because she likes to play with it? Of course not. The child does not know what it is that makes her cross and irritable. That is the mother's business. She should know. A child is never cross 'just because'; there is always a reason. If you have studied every possibility in the way of food, rest and temperature and still your child is nervous and irritable, consult a chiropractor. He will be able to tell you where the trouble is. Do not give drugs which are of no avail. Children will get well the natural way if nature's remedies are properly applied.

Next Article: Exercise

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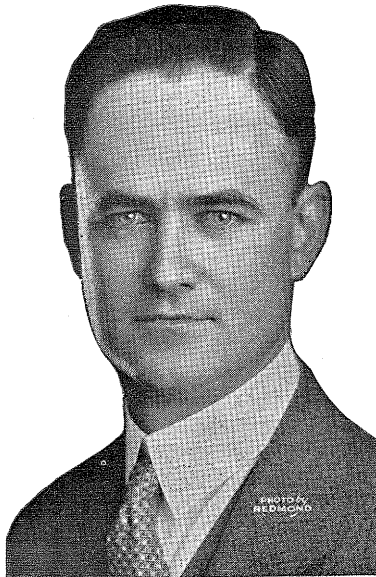
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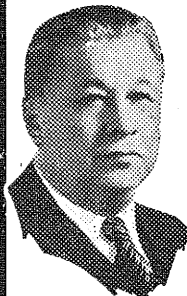
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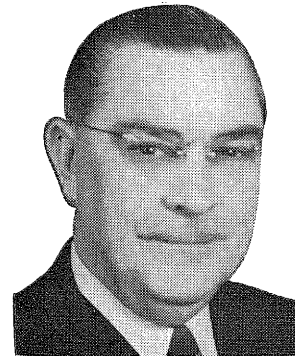
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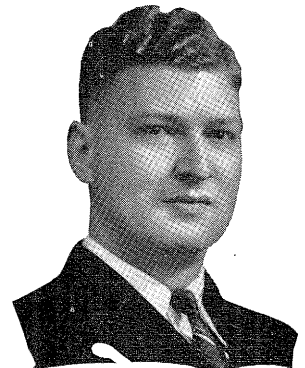
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Vote X 38

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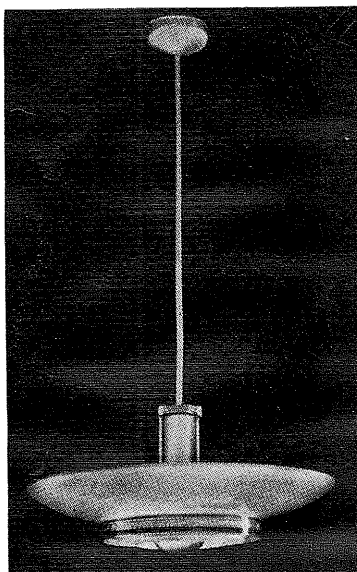
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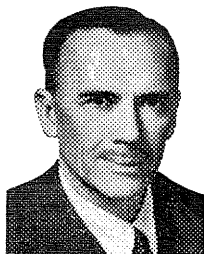
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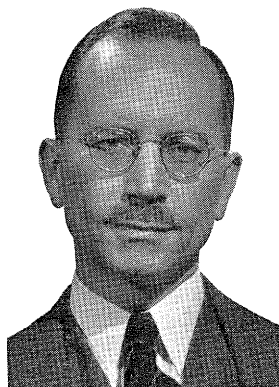
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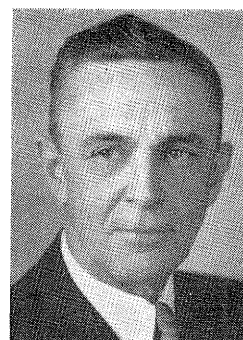


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