

VITALITY

A MAGAZINE OF HEALTH

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A New Deal for the Eyes

Frank L. Finnell, D. C.

It is my wish in presenting this subject to leave in your minds seeds for thought from which may grow and develop a mighty wave of rebuttal education in regard to wearing glasses. Our Medical Friends and the Optometrists (and many others for that matter) think first of glasses when the eye shows signs of trouble. Our eye education has been greatly neglected and especially in this commercial age in which the dollar sign is paramount.

It is easy and profitable to fit glasses, especially to those who are schooled to the theory that when anything is wrong with the eyes, "they need glasses." Personally, I think it is bad practice to put children's eyes behind glass power, when a few treatments and the proper education would be all that is necessary in most cases.

Why doctors have accepted the glass theory is more than I can tell, because any doctor or layman who has any power of observation whatsoever can very easily find plenty of flaws throughout the whole structure.

Many, many doctors continue putting glasses on the same patients year after year increasing the glass power steadily, and at the same time they tell the world by radio, newspaper and other advertisements: "Save your eyes; glasses protect your eyes; relieve your eye-strain; check by our twenty-one point double-check precision examinations, and what have you."

Of course, the doctor is not altogether to blame in all cases. There are many people wearing glasses who would not take the time necessary for treatment and work on their eyes. They want the easiest way out. And there are many of these people who wear glasses with perfect ease and comfort, at least, seemingly so. Their change in glass power is rare.

Visual acuity may be defined as that perceptive power of the retina to accept stimulation. This perception depends also on the adaption of the retina to light, on the general illumination, on the intensity of the illumination, and on the sharpness of the retinal image, which is due to the refractive condition of the eye.

The sense of sight lies not in the eyes but in the brain. The retina is the receptive medium. It does not see, but merely receives, the stimuli from which the mental appreciation is obtained. Acuity of vision ranges from light perception, which is the lowest, to form,

which is next, on to color, which is the highest. The distinction between light and darkness is the lowest form of light perception. This grades on up as the intensity of illumination increases and as the retina gains adaptability to accept the same. No perception of light is blindness.

Man comes into contact with the world more through the eyes than any other organ and to a degree we have a certain amount of control over the contact. We direct and govern the visual act. We look at a thing directly or indirectly. We can turn our eyes away from a sight we do not want to see, or we can close them and shut out all visual stimuli. We cannot really close our ears to sounds or our nose to odors that are unpleasant. The special sense of sight is more greatly developed than that of hearing or of smelling. Man depends on sight more than any other animal, and when this natural set-up is interfered with, the first wedge of strain comes in, and the more difficult it becomes for us to see, the more we try to force it, until at last strain is an established thing and finally is manifest in one way or another. This is the place and time for treatment and eye education. Nine out of ten of these cases can readily and quickly be cured.

Eye strain is an abnormal condition of eye function, the causes of which are legion and manifest symptoms nearly so. The commoner causes, as you know, are overwork, glaring lights, insufficient light, misuse and abuse. Then there is a legion of hidden causes in nervous disorders, physical conditions, both external and internal.

These are grouped under headings according to visual manifestation: Myopic, nearsighted; Hyperopic, far-sighted; Presbyopic, old-age sight; squint or cross-eye; and Astigmatism.

Strain as a rule is not the sudden breakdown of function, but is the result of continuous misuse or abuse—conditions that throw an extra load on the eye. This may be conscious or unconscious, and the strain is never manifest until the eye and nervous mechanism of vision give up. Then the manifest symptoms of pain, loss of vision, etc., appear.

Strain may be very great without any other symptom than that of lowered visual acuity. The Myopic eye, is a good example. They complain of no pain or distress whatever—just cannot see well. There are few Myopic patients that have headaches or other symptoms, and yet I consider Myopia the worst of all the

functional strains. I say worst because it slips up on you in such an insidious way that many go blind before they realize they are in danger.

Myopia literally tears the eyes to pieces. The retina is torn loose from the head of the optic nerve, exposing the choroid. Other lacerations are to be seen through the fundus. The retina is pale and anemic-looking. The arteries are thin and few. The visual acuity is cut down to inches. Glasses will increase the range of vision, it is true, but at what price. All Myopic eyes are not necessarily of the malignant type, but they are dangerous, and especially so when you see them requiring change of glass power to keep up with the standard of vision.

Eye strain is dangerous in all cases because no one knows or can tell when or what the end will be. Functional conditions do not remain functional, but pass over into pathological states in the eyes, just as in other organs of the body.

Cataracts and Glaucoma are examples of functional states that have passed into the pathological or diseased state.

We non-medical doctors are in a very select position to help this great multitude of eye strain sufferers.

Our newer theories of vision are, the eye is both a voluntary and involuntary organ, mainly voluntary. These theories work out by the fact that refractive errors of strain such as Hyperopia, Astigmatism, Myopia, are being cured, and they are curable they are preventable.

There are many things that make the picture of retaining eyes to function in a normal manner. Vision as you know is a NORMAL FUNCTION, all eye training and treatment is to that end. A RETURN—to the normal.

Eyes out of focus must be re-trained to focus.

Weakened conditions, from whatever cause, must be built up, and the CAUSE eliminated.

Nervous disorders and nerve irritations must be found and eliminated.

The visual elements must be rebuilt or reconditioned in many cases. Years of strain or excessive strain over short periods, devitalize the NERVOUS ELEMENTS of vision to such an extent that they are unable to perform their natural normal work.

Exercises, passive and active, are essential for healthy strong eyes as they are for healthy, strong bodies.

Strong muscles are built by systematic exercises.

Strong eyes are no exception, you can

Continued on Page 14

Diet and Health

An army doctor stationed at Fort Lewis visions regiments of Super-Soldiers—fighting demons—developed by the simple method of Vitamin and Mineral feeding. Diet will do the job, he says, and will produce fighting men superior to any in the past, or present. And this modern scientist is not far from the truth, in what appears, at first, to be a most extravagant claim. But why limit such exuberant, such magnificent health and vitality to our fighting troops?

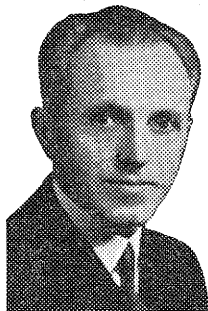
Look forward if you will to a nation in which all of the citizens young and old are loaded to the gunnels with Vitamins and Minerals and ready to lead the world in peace and production, or war, if such becomes the necessity. The good doctor's claim is indeed potent for the common good. I for one am in favor of dumping overboard most of the dope and pills and serums and what have you as methods of an ancient and quite dishonorable system of witchcraft, and substituting Natural Vitamins and Minerals for the real building of a nation of athletes possessed of almost unlimited resistance to disease.

If this advanced thinker (the doctor at Fort Lewis) gains permission to perform his experiments in feeding our troops and his experiments succeed even moderately, will it not prove that the system of medicine as we now know it, has been and is a rank failure, as regards the needs of this nation both in military and civil life?

I believe that the doctor-dietician at Fort Lewis will be successful, if allowed to feed the soldiers as he would like to. I believe also that you who are one of the millions in civil life can build the same stamina and vitality that this super-soldier is to have. Vitamin A and Vitamin G and all the other Vitamins will serve you just as well as they will serve the warrior man.

The warrior must have the best eyesight it is possible to develop. Good eyes are essential to operation of the modern mechanisms of war. Good eyes are determined in a great measure by the intake of Vitamin A, plus of course other essential Vitamins and Minerals and still other food factors. Fifty thousand units of Vitamin A will serve you in civil life just as effectively as if you were in the army. Perhaps you need only ten thousand units of A and again you may need ten times ten thousand units for a short time, taken each day as the case demands. Anyway, you can't have normal eyesight in the presence of

Ralph I. Shadduck, N.D.
Specializing in Nutrition



Vitamin A deficiency.

Actually you may suffer from serious destructive disease of the eyes, even total blindness from a prolonged lack of Vitamin A in the diet. Night blindness is very common among our people due to Vitamin A deficiency. Plenty of green vegetables grown out of doors in good soil will supply you with carotene which is converted into Vitamin A in the process of digestion.

Carrots, yellow turnips, parsley and nearly all of these fine garden vegetables are rich sources of this important Vitamin. Fish liver oils are of course literally loaded with Vitamin A. For those who want specific units of dosage, the concentrates of fish livers oils best serve the purpose for quick action.

Vitamin A has also many functions in addition to nutrition for the eyes. Resistance to infections of various kinds is said to depend greatly upon the Vitamin A intake. Children and adults as well are inclined to weakness and lowered resistance to infective bacteria when Vitamin A is lacking in the diet. This Vitamin also has to do with growth in general and is closely related to other Vitamins concerned with the generative glandular tissues. Weakened conditions of the female and male glands are associated with Vitamin A deficiency.

The natural diet free from demineralized or devitaminized foods builds healthier and stronger bodies. White flour and white sugar foodstuffs are all deficient in Vitamins and Minerals and are responsible for widespread exhaustion, weakness and disease among the entire population. We may be sure that military doctors in charge of diet will not attempt to build a super war machine with sugar, white flour, vinegar, sauces, condiments, demineralized mush and similar dietetic garbage.

Many persons are alert, wide awake and filled with enthusiasm and are able to put worlds of pep into their chosen

work. Others are dull, tired, slow, stupid two sets of people is largely of dietetic and exhausted. The difference in these two sets of people is largely of dietetic origin. We of course make allowance for heredity and all other factors, still the truth is that scientific health building with a correct diet will build up the weak and even increase the strength of those already strong.

The following facts concerning Vitamin A are of vital concern to you and to every living person: Vitamin A promotes growth, lactation in nursing periods, development of children, resistance to infection, many body functions during pregnancy, certain diseases of eyes, membranes of head, throat, respiratory organs, and the entire digestive tract. Vitamin A is needed in abundance when there is trend towards Flu, colds, sore throat, boils, carbuncles, etc. It has to do with calcium assimilation and works with Vitamin E in functioning of the sex glands. Likewise it works with B Complex in preventing disorders of the brain and nervous system.

Vitamin A strongly influences general strength, vigor and vitality and so is closely associated with longevity. A deficiency of A leads to certain skin diseases. Serious diseases of the kidneys are in part due to Vitamin A deficiency. Kidney diseases are among the most serious of all those which affect the American population. The formation of kidney stones is linked closely with a Vitamin A deficiency. Dissolving of kidney stones demands a very high Vitamin A intake.

One may be assured that beauty as well as buoyant health are both impossible without a ration of Vitamin A. Good health then is possible for each and every person if the diet is selected according to Vitamin and Mineral content. It seems logical to me after more than twenty-five years of study and experience, that disease should be diagnosed from the standpoint of chemistry; that each symptom and condition should be known for its food factor deficiency and a correct diet prescribed. Remember—no other thing can take the place of right diet.

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More About Your Head

By Virgil Mac Mickle, N. D.

In our preceeding discussion (*), we pointed out the distressing and sometimes disastrous consequences of untreated or improperly treated focal infections of the head—of the teeth and jawbones, of the nose and its accessory sinuses, of the ear and of the throat, including the tonsils. We also stressed the importance of early diagnosis and proper treatment. And we mentioned the fact that many of the most outstanding specialists were now trying to obviate surgery wherever possible in favor of better and more conservative methods. And we did agree that—thanks to the delayed diagnosis or incorrect treatment—there were still cases—all too many of them—in which surgery was necessary. Our hope was to convince people that they would save misery, mutilation and money by early diagnosis and proper treatment.

What People Want to Know

Response to that discussion was prompt, emphatic and enlightening. Queries fell roughly into four categories: First, how to prevent such infections; second, how to get rid of them; third, can surgery be avoided; and fourth, what could be done where surgery had already been tried and found wanting or worse.

Salvaging Surgical Failures

Let us dispose of the last question first. And let's be quite honest and fair in so doing. The art of healing is like everything else in the world, an evolving—and therefore a changing—thing. This is as true of the various specialties as of general practice. Also, it must be remembered, it is a very human tendency to cling to that which we have learned until we learn something better. And it so happens that most of the men now specializing in ear, nose and throat work have been earnestly taught—and have sincerely believed—that the best, if not the only, answer to many head infections was surgery. Indeed, if the intelligent laymen were to scan most of the textbooks and reference works in this field he would arrive at the conclusion that their authors had been convinced that nature had filled the head with anatomical gadgets whose main purpose was to become infected so that alert and enterprising surgeons could whittle or chisel them out. And so, much surgery—some of it helpful, some of it futile, some of it positively injurious and a great deal of it totally unnecessary—has been done on nose, throat and ears. Now, it matters not that much of this surgery was done

by men whose high-mindedness and sincerity of purpose we need not question. The unhappy fact remains that we are frequently confronted by the problem of what to do for those in whose cases surgery failed. And that is a problem the details of which differ so much from one case to another that the solution must necessarily be different for different individuals. That being the case, it is impossible here to offer any advice other than that such sufferers should consult some physician skilled in the use of the newer and better methods, foremost among which are the various forms of electrotherapy and physiotherapy. And this, with rare exceptions, means a non-medical physician.

How to Avoid Surgery

Now let's back-track to the next question: Can surgery be avoided? The answer is that it can in most cases if early and correct diagnosis is made and adequate treatment started and followed thru. Early diagnosis rests largely with the patient; even the best of diagnosticians can not make an early diagnosis if the patient comes late. But correct diagnosis rests with the doctor: if he be a competent and honest one, a correct diagnosis is made. And adequate and proper treatment rests with both the patient and the doctor, for it requires the thoroughgoing cooperation of both. If the doctor is a good one he knows both what he should do and what the patient should do—and specifically instructs the patient what to do. Assuming that the patient does what is his doctor in the use of electrotherapy he is instructed to do at home, he can then rest assured that the more skillful and other physiotherapy modalities, the better are his chances of avoiding surgery. More about these non-surgical modalities in what follows.

The Proper Treatment

Back-tracking now to our second question: how to get rid of focal infections of the head, it must be obvious that the same methods that are good enough to avert surgery where surgery threatens to be necessary are also quite adequate to the job of eradicating the less extreme types of head infection. Since the health of the head does depend upon the condition of the body as a whole, treatment will be both constitutional and local. The latter is almost wholly up to the doctor. But since the former depends greatly upon the patient, let us briefly indicate the nature of the required constitutional measures first.

Constitutional Measures are of two types: (a) what the patient can do; and (b) what the doctor can do. The patient can—and, of course, should—follow the doctor's instructions on general hygiene. He should eat what the doctor orders, abstain from what the doctor boos, and follow the doctor's instructions as to the taking of supplemental vitamins and minerals, as to rest, bathing, exercise and as to other hygienic rules. And the doctor may want to administer any one or more of the following constitutional procedures in his office: Colonic Therapy, Artificial Fever, Correct Manipulation, General Ultra-violet Irradiation or any other procedure which bolsters the patient's general health. Thus the patient be assured of developing the highest possible general resistance and so giving the doctor's local treatment the best possible assurance of success.

Local Treatment must, of course, depend upon the knowledge, skill and good judgment of the doctor. He will, if he is adequately equipped, be able to give nasal irrigation, suction out the sinuses, drain, wash the external ear canal, administer zinc ionization via galvanism, use air-pressure dilation, apply localized ultraviolet, bombard the infected area with infra-red, catch them in a crossfire of short or ultra-short-wave energy or do any one of a number of other things which, in his best judgment, will most effectively operate to kill off the infection and normalize the tissues.

How these scientific methods produce their splendid results is itself one of the most interesting subjects in modern therapeutics. But, unfortunately, it is a subject requiring far more space than we now have at our disposal. And so, I leave our first question: **HOW TO PREVENT HEAD INFECTIONS**, it will have to be postponed to a later issue of VITALITY.

*(Footnote, VITALITY—Vol. 1—No. 1, Jan. 1941).

The Mutual Benefit Health and Accident Association and its companion The United Benefit Life Insurance Company of Omaha, Nebraska; President C. C. Criss and Neill C. Criss, vice president, according to the government standards rating scales for such companies recognizes the work of Chiropractic and Osteopathic physicians and pays such compensation as the policy calls for.

The Greeks Had a Word For It: "Dyskinesia"

By Dr. Harry V. Reeves, D. C.



Constipation has well been called the "Mother of Diseases" because of the number of troubles that so often follow in the trail of this disorder. Perhaps more of the upsets of the body can be traced to constipation than any other one cause.

Constipation is merely the failure of the bowels to cast out from the body the waste matter that is left in the large intestine after the useful portion of the food has been assimilated. Neglect is one of the chief causes of constipation, and when once started is likely to become chronic. The bowels are responsive to habit, and irregularity will quickly start trouble. Consider, for example, a healthy individual with a good appetite and a well balanced diet, plenty of exercise at work and recreation, and who has trained the bowels to move at a regular time each day; he finds that an unexpected business or social obligation interferes with the regular response to nature. The habit time is broken and as the day is a busy one the desire does not come again, next day the urge was not strong enough to cause an evacuation, so again the act is delayed. After several days the condition becomes acute and a cathartic is taken. A violent fluid movement results. The strong irritation of the intestine causes exhaustion of bowel muscles for a time. The daily habit has been broken, and another victim becomes the slave of the vicious cathartic habit. A one way ticket to trouble is in the offing. Too much sitting, lack of exercise, heavy, rich, soft foods, insufficient water drinking, defective secretion of bile by the liver are also causes of constipation.

Governing factors of bowel movement: In the normal process of digestion, the sight and smell of food cause a flow of gastric juices, this causes the pang we call hunger. When food enters the stomach, the stomach muscles churn and mix the food with the digestive juices, and when this act is completed, contraction waves force the stomach contents into the small intestines and it is here that the nutritive elements necessary to life are absorbed. The residue is carried along into the large intestine where the water is extracted. After the food is eaten, it takes the residue about 24 hours to reach the lower end of the large bowel. When a sufficient quantity of feces has accumulated in this receptacle, vigorous contraction waves begin and the sigmoid

raises up and forces the feces into the rectum. This brings about the desire to stool. Until the feces enters the rectum there is no desire to stool, but when it fills, the pressure and distention induce a desire. If this desire is disregarded, there is a voluntary contraction of the muscles of the anus and the fecal mass is retained in the rectum, or it is carried back to the sigmoid, where more moisture is absorbed, and the fecal matter becomes dry and hard. The normal stool is well formed, soft and moist. It is composed of about 25 per cent solids and 75 per cent moisture. The volume of feces of a constipated individual is about half of that of the normal. The deficiency is largely moisture.

Many patients come into my office, and when asked, "How are your bowels?" they say, "Oh, pretty good, but I have to take a pill every day or so. I have tried every kind of physic, but I just cannot get them regulated." The laxative way is the sure way to become more and more constipated with its trail of misery; headache, all-fagged-out feeling, piles, colitis, nervousness, neurasthenia, hysteria, polluted blood stream, etc., an easy victim of serious maladies. Constipation is not a simple thing, it can be serious. Its proper treatment is important to your physical and mental well being. Take Chiropractic treatments, establish a habit time, stop eating highly refined foods. Eat bulky, moisture-retaining foods—fruits, vegetables, salads, honey, jellies, jams, etc. Exercise.

And try this: First, a morning cocktail—nature's own. Two glasses of hot water, the juice of half an orange and half a lemon in each glass. Drink to better health. Now get in front of a mirror—take a few bending and twisting exercises. Loosen up that spine. Yesterday's activities may have caused some contracted

muscles that your night's rest failed to remove. If allowed to remain, they become the means of holding vertebrae from their normal range of movement. They may become so solidly fixed that it will be necessary to consult a Chiropractic physician and have them adjusted back into the normal position. I must emphasize the importance of a normal spine, to correct or prevent constipation and to insure good health. The spine is the line shaft of our body. Incased in the bony tube formed by the vertebrae are vital nerve centers from which emerge tiny but highly important nerves. They are like electric wires and they carry vital forces to and from the brain and they connect with every organ and tissue in the body. They coordinate the vital organs: heart, lungs, stomach, bowels, regulate the size of the blood vessels; direct the movement of the muscles, cause glands to secrete; in fact, they are the master tissue of the body. When abnormal impulses travel over the nerves ill health results. There is a lowering of the vitality and a loss of pep. The spine must be scientifically adjusted by a Chiropractic physician.

Bend that spine — stoop forward — straighten, now sidewise to the right, to the left. Twist that spine, turn from side to side.

Loosen those tight ligaments, relax those stiff muscles, pep up the flow of vital energy, supply every part of that neglected body of yours with health-giving nerve impulses. Breathe deeply of fresh pure air—it's free, but of untold worth. If you are tired or in a hurry, then this is enough, as a starter-out. Add other exercises gradually. Keep your spine straight and supple. It is the line-shaft of healthy bodies. If there are any kinks consult a spine specialist. Take a shower bath, regulate the temperature and duration to suit your health and age. A peppery rub down with a coarse towel, dress. Chin up, chest out, walk briskly.

Breakfast? You bet!!! Milk, eggs, fruit, whole cereal. You will be looking for a large day's work, and then an evening of fun. Good health to you.

A LESSON IN OSTETRICS!

Prof.—What would you call a baby born in less than nine months?

Newly-wed Student—I'd call it a "Blitz-baby."

An American Malady

By J. W. Noble, N.D., D.C.

In my last article I tried to show that hemorrhoids (Piles) are small veins which, through constant engorgement and strain have dilated and become varicose veins. Varicose veins (piles) of the rectum are identical with those of the leg except those of the leg are usually more pronounced and dilated.

Many people are suffering from hemorrhoids but are unaware that they have them. This type of patient usually has other symptoms which bring him to the doctor's office. He may complain of backache and blame his kidneys, or he may suffer from loss of appetite, loss of weight, suffer with pains in the gastric area and think he has stomach ulcers or have severe headaches plus a disturbed mental outlook, which makes life very miserable indeed.

After examining a patient thoroughly and no organic trouble is found, many doctors are prone to diagnose the trouble as functional or idiopathic (of unknown cause), give the patient some Sodium bicarbonate (baking soda) and tell him there is nothing wrong. Of course, since the seat of the trouble has never been treated, the patient continues to have the same distressing symptoms and wanders from one doctor's office to another, until finally a physician who believes in a thorough examination before making a diagnosis, examines the patient and discovers **internal** hemorrhoids.

When he is told that he has hemorrhoids, the patient is usually incredulous and asks why he has never felt any rectal pain. The reason no pain was felt is due to the structure of the rectal wall, part of which has sensory nerves having epicritic sensibility (power to localize pain) and part of which has sensory nerves having protopathic sensibility (only respond to deep crushing pressure).

When a speculum is introduced into the rectum, the first observable tissue is grayish white in appearance and has the same protective covering as the surface of the body and is richly supplied with (epicritic) nerves. As the speculum is introduced further, the walls change to a pink color (healthy) and the point at which the change occurs is known as the pectinate line. The nerve supply above this line is of the protopathic type which carries very little or no pain sensation and does not localize the sensations it does transmit.

This is why a person may have internal hemorrhoids and have no symptoms of piles, other than referred symptoms,

which I have previously outlined.

If the dilated vein (internal) increases in size, it gradually extends towards the rectal opening, passing beneath the rectal mucus membrane until it protrudes. This is the true external hemorrhoid and cannot be replaced by external pressure.

External hemorrhoids are usually accompanied by severe pain and as the blood is not circulating in the hemorrhoid it usually coagulates, leaving a hard, painful blood tumor on the surface. This is far different from the internal hemorrhoids, which at times protrude, particularly after defecation.

An internal hemorrhoid which protrudes can be replaced by external digital pressure or by applications of cold compresses and will usually remain in place until a heavy strain or bowel movement forces it out again.

So far, I have attempted to explain the nature of hemorrhoids so as to give the reader a better understanding of this painful affliction; and now perhaps a few words as to the cause would not be amiss:—

In order to explain the cause, a brief resume of the anatomy involved will be necessary.

The rectum is richly supplied with plexuses (group or collection) of veins which, as they return the blood towards the heart, gradually merge and become larger in size until they finally join that part of the circulatory system known as the PORTAL system. The portal system collects a very large part of the venous blood from the abdominal organs and all this blood must pass through the liver before reaching the heart.

If there is any dysfunction of the liver, a narrowing of the blood vessels occurs, consequently, the blood encounters more than the normal resistance. This of course, causes the blood to slow up in the rest of the portal circulation and

finally results in engorgement of the hemorrhoidal (rectal) plexus of veins. If the condition becomes chronic, the small veins of the rectum become irritated and inflamed, partly from engorgement and partly from fecal material as it passes over the swollen surface.

Eventually the tissue which binds the vein to the rectal wall stretches or is torn and the dilated vein extends into the rectal cavity and is known as a hemorrhoid.

Another contributing factor is what may be called "a lazy colon" or bowel, in which the muscles have lost much of their tonicity and respond sluggishly, if at all. This throws another load upon the rectal veins, because the fecal material remaining in the colon is being dehydrated (dried) resulting in a very hard mass which must eventually be expelled; and as this hard material passes, it scrapes and tears the dilated vessel, resulting in pain, bleeding and tearing of the rectal wall and often bacterial contamination of the injured areas.

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Before Child Birth

By M. Pendroy, N.D., B.T.A.

So many requests have been received, since publication of the last issue, desiring more information on how the drugless physician relieves the majority of pain at child birth, without the use of "pain killing" drugs, this article will be devoted to answering them all. It would be too great a task to attempt individual answers.

Before answering the question satisfactorily, we must be sure you know and understand the series of events that are responsible for childbirth pains. Let us first go back several years in the prospective mother's life. She has been raised in the modern way of life which means a careless diet, a certain period of working that was office work or clerical work on high heels, a limited amount of exercise and fresh air that did nothing to utilize the majority of the abdominal muscles, girdles have replaced the tonicity of muscles (this makes her clothes look much better). Finally, comes marriage with little change of the ordinary routine of living, except that nights out are replaced by nights in to do the necessary amount of housekeeping.

The physician's first meeting with this young woman take place a few months after pregnancy has occurred, more to verify the fact than for any other reason. When it is established as such, return visits are more to note progress and the general welfare of the mother-to-be, and to check on complications that may or may not develop. If everything goes normally, the prospective mother eventually reaches the maternity ward ill-prepared for the ordeal from a physical standpoint.

How does the non-medical physician change all this? He first requires his patient to come to him at the earliest possible moment when pregnancy is thought to exist. Realizing that the abnormal way of modern living has distorted the structure of the body, and weakened important muscles, he sets himself the task of correction immediately. The prospective mother is placed upon a diet designed to maintain health in the mother and the proper amount of development to the new life within. By proper manipulation and the judicious use of physio-therapy her body is restored to a more normal flexibility of the joints and tonicity of the muscles. By proper treatment, the added bulk and weight is not permitted to exert harmful pressure on vital organs and nerves of the body. This may, or may not, require weekly trips to the doctor, it depends on the condition determined at the FIRST examination. Your non-medical physician

performs the majority of his task in the months preceding delivery. It is hard work, it is hand work, but years of research have proven it to be necessary.

The results thus attained can be accomplished in no other manner. True, it is a tedious procedure, but it is most gratifying to observe the results in the delivery room of a patient so cared for. The woman's nerves are steady, her muscles strong and supple, her joints are flexible, the birth canal which gets its contour from the bony framework of the pelvic bones will enlarge centimeters more, because of the flexibility of the joints. There is no fear of the healthy pains created as the musculature begins the process of labor. There is perfect co-ordination, no frenzy or hysteria born of fear and unnatural pain, and because of this, the time of labor is shortened by hours. When the period of delivery is over the beneficial results are again noticeable in the state of well-being of the mother, and of no less importance the well-being of the baby. There are no anxious days of post-partum watchfulness on the part of doctor or nurse. The dangers of this time have been minimized by the pre-natal care and the conduct of delivery without drugs.

One may ask why more people are not aware of the advantages of drugless care through this all-important time. There are two reasons for this regrettable fact. First, few modern homes and apartments

are desirable places for confinement, and the non-medical profession does not have the use of public money for establishment of hospitals. There are, therefore, too few hospitals open to the non-medical physician. This is because of the politically and financially powerful group opposed to our views. Secondly, the proper care of the obstetrical case is so demanding that few of the non-medical physicians care to devote the necessary time to the work, especially when faced with the first obstacle of proper hospitalization. It is fortunate, however, that younger men entering practice are developing proper hospital facilities and devoting time to the maternity cases in spite of the handicap mentioned. Their success and following is ever increasing. A pleasant surprise awaits you, should you find yourself in their care, when the times comes.

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Grist of the Mill

The legislative mills are grinding all over the country and, judging by some the new grist, the usual absurdities are being offered.

There is a bill, for instance, introduced into the hoppers of several states requiring that pregnant women should submit to a blood test for whatever ails them.

Bills of this nature usually have their origin in Washington, D. C., or Chicago, Illinois, where the guardians of the practice of medicine in public health watch always for the main chance.

The futility of such a bill becomes apparent when we consider the imperious nature of parturition. One imagines the chagrin of a country doctor who, having raced the stork through twenty miles of storm and muddy road, found himself compelled to declare an indefinite postponement of the delivery because the lady had been thoughtless enough not to have had her blood test: or will he pack a Wasserman outfit with him?

But, soft! the authors of the bill have foreseen this impasse. It provides that the lady need not submit unless she wants to.

Thus are all parties made happy. The doctor's wife, the lawyer's spouse, the merchant's helpmeet, the university man's better half, knowing the law, will proudly but gently decline the sweet suggestion that she may have syphilis.

It will be the poor woman, ignorant of the law,

who will, if she must, submit.

A friend, unlearned in the niceties of such matter suggests that this is class legislation. He is mistaken; it is merely public health, a la mode.

House Bill No. 203

"Experience has shown that economic insecurity due to illness and disability is a serious menace to health, morals and welfare of the people of the state and a major cause of destitution and dependency."

Thus begins the preamble to House Bill 203, introduced into the Oregon legislature by representative Hosch and fathered by the Oregon Commonwealth Federation.

The bill is long, but its intent is clear. It proposes to tax employer, employee, and the state to provide a fund to attempt to overcome the difficulties stated in the preamble. It is, of course, a pioneer effort, but the fairness of the minds behind it may be judged by the fact that it provides that those who seek its benefits may command the services of the kind of doctor they desire.

Practitioners of all the schools of healing licensed by the state of Oregon are included within its scope. Thus, for the first time in the legislative history of the state, a large and influential body of men and women are attempting to maintain the common law dictum that a man's body is his own and that he, alone, should choose whom he will to administer it. This is public health at its best.

The bill should have passed. The Federation and Dr. Hosch, who by the way, practices medicine in Bend, Oregon, are to be congratulated.

A Splendid Goal Achieved

THE long struggle of Oregon chiropractors and naturopaths to raise their legally required education standards to not less than four years of college work has, thanks to a fair-minded legislature and a progressive governor, finally been crowned with success. Oregon now takes her place as the eighth member of the select group of states determined to see that only the naturopaths and chiropractors of sufficient scholarly attainments to be fully abreast of the best developments in their respective professions may be licensed to practice. Only, according to our present information, Illinois, Wyoming, Montana, Idaho, South Dakota, Colorado and New Jersey have preceded Oregon in granting to these two professions the right to maintain

similarly high standards by legal enactment.

This victory is not only an assurance that the people of Oregon shall have access to chiropractors and naturopaths second to none, but a vindication of those chiropractors and naturopaths who have so long and so ceaselessly—and at such sacrifice—battled to make their aspirations a reality. Desirable as it might be, it is neither necessary nor possible here to give credit, either by name or by description of their individual efforts, to all of those sincere, courageous and self-sacrificing leaders of both professions whose unflagging interest has made ultimate victory possible. Rather, it is better to say that it has been the unfaltering loyalty of the rank and file membership of both professions to the cause of higher professional standards that finally won the battle. That and that unity of purpose which enabled them to combine forces for the common struggle.

Fortunately, both the fight for higher educational standards and the unification of forces had been greatly facilitated by the splendid policies of The Western States College. This institution has always insisted upon higher academic qualifications as a prerequisite to graduation than the law has demanded as a prerequisite to licensure. And the fact that the college had such courageous and uncompromising leadership made it the easy and natural center for the unification of forces. These, the determination of the professions themselves, the very capable leadership of The Western States College and the resultant unification of both forces and standards, were the long-range, underlying factors that led to final victory.

And then, of course, there were the more immediate factors such as:—the intercession of lay persons and organizations interested in safeguarding the public health, the personal friendliness of many legislators for the non-medical physicians in their own districts and the conviction of many legislators that both professions ought to be granted the right to elevate their

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standards as a matter of professional self-protection against any possible influx of graduates from colleges of inferior standards. Also, if we may record the fact without appearing to preen ourselves immodestly, a goodly number of legislators have been kind enough to let it be known that their votes were very favorably influenced by the January issue of VITALITY. And finally the very able work of those who sacrificed time and money to steer the twin bills through the present legislature bore its fruit.

The Battle of the Century

THE United States government and the American Medical Association have locked horns in an homeric combat to decide:

1. Whether medicine is a trade or a profession,
2. Whether the American Medicine Association can deny the use of hospitals to members of other medical organizations.

The battle is being staged in Washington, D. C., and Vitality's special correspondent will bring a round by round description as the conflict unfolds.

Women Active

Amongst the member organizations of the Federated Women's Clubs of Oregon, the Woman's Auxiliary of the O. A. of C. P. is perhaps one of the most aggressive.

Recent activities include participation in fund raising for a central building for the parent association. It is understood that the Federation is to build this structure in Portland.

O. A. C. P. women are earning the warm regard of all concerned for their part in this venture.

"81 or 18"

By Anna M. Finseth, D.C.

Are you up to par in the three "f's"?

The three "R's" got you by in the earlier years of your life, but how about now? You must recognize that **form**, **feeling** and **force** are needed in these strenuous days of making a living.

How about your form—do you look like 18 as you approach people, and then dissolve into a figure of 81 as you disappear down the street? If your foundation stone is off balance, your house will sag and likewise, if your spinal foundation stone is off its balance, the spine as a whole and its adjacent parts will sag to compensate

for strain. See your chiropractor to regain youthful form.

Then, how about your feeling? Are you 81 or 18 in your well-being? If your muscles must contract and be under constant strain due to your faulty posture, they soon become "set" and loaded with acidity which should normally be carried off by a perfect circulation. These acid crystals lodging in the muscle fibres soon make soreness and severe tension and you are 81 instead of 18 in feeling. A chiropractor, who knows how, will soon dispell these contractions and then you will feel like 18.

And, about your force? Do you drag one foot slowly after the other? Do you want to sleep 'til all hours of the day? Are you peevish and irritable? Are you 81 in nerve energy? If your spine slumps, if your muscles are under tension constantly even when you sleep, if your nerves are pressed upon by contracted muscles and ligaments and deprived of their food supply by faulty circulation, then your nerve force is "81" instead of "18". There can be no dynamic force to carry on unless it can be generated in a well-balanced body. You can be "18" instead of "81".

Doctor and Child

By C. E. Stewart, D.C.

The biggest job we have today is the building up of strong, fine children whose outlook on life is wholesome, optimistic and happy.

We, as doctors and parents, have a tremendous responsibility. The patients, and chiefly the mother, have the greater influence. For the mother is with the child the greater part of the day.

Before the child can be happy and contented, he must be well physically. Here is where the Doctor comes in, as he is trained not only to rectify the child's ailments but to be able to instruct the parent in regard to the care of this wonderfully constructed and growing little body. Mother, here is where you can not only assist the Doctor but also assist your child by preparing him to receive the doctor favorably and so give him the opportunity to win the child. From then on he can give assistance in the care and building up of your child in health and general welfare.

Often the child's fear of the doctor is due to lack of proper explanation and cooperation on the part of the parent. This causes lots of unhappy moments for all concerned. May I cite an instance?

Johnny becomes very listless and develops a fever. The alarmed parents bring him to the doctor for examination. The anxious mother, with the best of intentions, proceeds to tell the sick, frightened little fellow not to be afraid; that the doctor will not hurt him; and that if he is a good boy and will allow the nice man to examine him, he will be given a treat of some sort. Now this may sound alright to the parent, but it has put the doctor "on the spot." The child has had fear already installed in his very impressionable mind. If the mother or parents had brought Johnny to the doctor before there was anything in particular to treat him for, he would unconsciously have wanted the man he had confidence in and whom he knew as the one that assisted boys and girls to grow up strong and happy to come and make him well.

So the mother has an easier time in taking care of the ailing youngster; and it leaves all concerned a warm feeling in the heart. For after all, the thing that makes the world go 'round with the greatest amount of ease is cooperation of us mortals, one with the other, and the feeling that someone is vitally interested in

us and in those we love. We parents and doctors have a great calling. Both have entrusted to them the molding and shaping of the lives and bodies of the future men and women in whose hands the world's future rests. We have the great task to fulfill. So let us attempt better understanding between parent and child and doctor for the better health and greater happiness of a future generation of people.

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Let's Not Argue About Vitamins

By L. D. Holland

(The writer of this article, a technically informed person, has, while aiming its shafts more particularly at the profession, contrived so breezy a style that the lay reader should also enjoy it and understand all but its more technical implications. —Ed.)

One of the most interesting,—and moot,—questions of today is Vitaminology. No one person is qualified to issue an edict as to what is right and what is wrong. No one intelligent person would present himself as the criterion of so complex a question.

One of the greatest causes of professional vacillation on this point is the very human inclination to get our education at the hands of a salesman,—blandly ignoring the fact that the salesman's theories will, quite naturally, fit the merchandise he sells.

A more admirable procedure would be to obtain bulletins and reports from such universities as feature a research laboratory in this field. One is not enough, for each will vary in opinion. The adoption (in practice) of the average consensus of opinion should comport with the knowledge that you are, at least, following the majority.

Any one of us is free to pursue a radical tangent and to justify our pursuit of it by holding up one or more coincidental "miracles" of which we may have heard. Pursuing the elusive Truth of any theory is man's privilege.

But to close our eyes and erect a mental barrier against the other fellow's theories is liable to frustrate our purposes

and, possibly, cut us off at the pocket. For only by a broad recognition of the possible value of all theories, are we qualified to "select" the therapy best suited to the individual patient and, by our results, invite a larger practice. The "result-less" chap is rarely recommended.

From the patient we hear questions of all kinds. "If I take these Vitamins, can I do without meals?" is one of the commonest. Try to explain, if you can, why a Vitamin is a catalyst and not a dinner. Then explain why Vitamins (as catalysts) require other catalysts, as synergistic agents, thus establishing the importance of the "Complexes."

Tell the patient to take two Vitamin A perles per day, to obtain 100,000 Units of Vitamin A for stimulus, and the patient is confused as to why she should take two 50,000 unit perles instead of two 1,000 unit tablets.

By this time, you're quagmired in "Unit education" of your patient, and must teach her the therapeutic advantages of potency, the way to evaluate her

formula by the label, and the economical aspects of "Unit per Dollar" purchasing through the various channels of supply.

It would be impossible in this article, to go into the many vitamin approaches, the "Vitamin Saturation" unusual results, and the pro's and con's being batted back and forth. Suffice to say, the greater the doctor's knowledge, the greater the patients. And the more general the education becomes, the more the business houses must concede us superior products, of greater unit-value per dollar. We shall be able, then, to discriminate between "generals" and "specifics" and to unerringly apply the most direct supplement.

From time to time, as opportunity presents, we shall touch on an assortment of theories, confining ourselves to no one authority, and setting ourselves up not as your one answer, but merely as the "pen-man" with a moderately open mind, and an appreciation of the fact that only by disagreement do we individually set out to "prove what's best."

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Avoiding Dysmenorrhea

By Ross H. Elliott D.C., N.D.



From puberty to the menopause there is probably no other physical disturbance which women are subjected to that quite compares with the pains of menstruation or dysmenorrhea, because of its seeming eternal frequency. There is considerable variation in the severity of this condition and there cannot be any accurate statistical estimate of the percentage of women who suffer with it because of personal differences of opinion as to when a slight pelvic heaviness is sufficiently severe to be considered true dysmenorrhea. However, in my judgment any variation from normal would be dysmenorrhea to some degree and I would consider a normal condition as one where the flow appears and proceeds to its conclusion without any symptoms of distress. But it is a lamentable fact that the women who are totally unconscious of menstruation except for the presence of vaginal bleeding, represent a very small minority.

Dysmenorrhea is not a disease but a symptom of one or more pelvic disorders, sometimes with systemic complications, the most common being mal-position of the uterus or womb, as more generally known. Antelexion—a tipping forward of the body of the uterus upon the cervix (neck); retroflexion—just the reverse, or backward flexion; and retroversion—a backward inclination of the organ but with body and cervix retaining their longitudinal alignment, are the conditions more often found.

These mal-positions may be due to congenital influences and where the history shows painful periods have prevailed since the onset of menstrual life, a fairly distinct congenital type of dysmenorrhea is indicated. The pains are usually sharp and cramp-like and as a rule begin the day before the actual appearance of the flow. In cases where the mechanical distortion of the uterus is the major cause of the distressing onset of the period, the cramps will usually cease shortly following the appearance of the flow, which may start either with or without some clotting, depending upon the degree of stenosis or obstruction at the inner end of the cervical canal. If the cramps continue further into the duration of the flow, there is usually a neurotic complication and it is my observation that these cases reveal a high percentage of the scanty flow type. Blood production is subnormal and nature's struggle to coordinate the function of the organs involved in this monthly phenomenon is further handicapped by the hypertension of the controlling nervous mechanism. With many of these cases

the cramps are less severe but more prolonged, with general malaise, headache and nausea. Frequent cases of acquired dysmenorrhea appear which have resulted from childbearing. There are pelvic lesions of various types in these cases, but the finding on examination of a retroversion or retroflexion dovetails, with unusual frequency, with a history of failure to lie on the stomach three or four hours a day beginning with the third day following labor. If the patient lies on her back during the entire period of convalescence in bed, the uterus, by influence of gravity, is settling back against the colon and spine, during its period of involution or retraction. The attending physician or nurse would be responsible for this oversight. Pelvic congestion is found in many of these cases, often involving the broad ligaments which support the uterus, ovaries and tubes, and sometimes to a point of complete fixation. In operated cases and those showing a history of considerable weight increase, adhesions are frequently found to be a causative factor.

The number of cases of dysmenorrhea from these latter causes are few compared to the number due to developmental defects, underdevelopment and constitutional and functional problems. Girls with good musculature, stable nervous system and good circulation, the result of proper living habits during their formative years, have little trouble with this disturbance. Hygienic and physical culture measures practiced before the age of puberty and during the early years of menstruation may exert a profound influence in normalizing the menstrual function. Girls should enjoy an active early life which will aid in developing all organs to their full capacity and stimulate a strong circulation.

Both before and after menstruation begins, all factors that might contribute to nervous irritation or exhaustion should be avoided, worry over school work, etc., while aids to the general circulation should be encouraged.

Proper food, exercise, fresh air, sufficient

rest and, above all, good elimination through the excretory organs, to insure cleansing of the body of all toxic wastes. Proper guidance of a young girl's physical life in many ways is more important than a young boy's and, from a gynecological standpoint, it might be an act of wisdom to tag each baby girl at birth with instructions to the parents regarding proper preparations for the menstrual functions ahead.

The conditions found when many of these girls are first seen by a physician are the result of improper activities over several years. Bad posture, poor muscular tone and development, sluggish circulation, irritable nervous system, malposition of the uterus and general constitutional debility are likely to be present.

These anatomic and functional disorders, which are quite definitely traceable to congenital and development factors must now be carefully and intelligently handled if correction is to be brought about and relief afforded.

The treatment of these cases is to improve the general condition of the patient by clearing up any focal infections, build up the blood with foods rich in all vitamins, sunlight, exercise, hot sitz baths, plenty of rest and always adjusting the colon condition if constipation is involved. Most cases can be relieved the first month if treated a day or two before the cramps are apt to start, with deep therapy high frequency electric modalities, to relax the pelvic structures and increase the blood supply to the organs responsible for this important function. Spinal manipulation and adjustment, to relieve tension at the spinal nerve roots removes interference to the normal coordination of these organs, and a happy patient is the invariable result. Occasionally more radical treatment is necessary involving some dilation and repositioning of the uterus before complete correction is brought about, but immediate relief will result even in these rare cases. The extreme dilation of the cervix necessitate in childbirth, also proves a corrective for many if proper care is taken toward the objective during convalescence, but unfortunately indeed is the girl or woman suffering with dysmenorrhea, who fails to find competent help long ere the approach of that blessed event.

Dr. H. H. Judd

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"Aspirin"

By A. Budden, N.D., D.C.

It is little use to rail against the universal usage of anything, least of all a "pain killer". People naturally wish to avoid the sharp anguish of tortured nerves and will do practically anything to achieve that end: And who shall blame them?

Nevertheless, they ought to know that there are penalties to be paid for such short cuts to the kind of ease aspirin brings. This drug, of course, cures nothing. It may, however, dull a pain which is giving clear warning that a grave disorder is demanding attention.

That it is a poison of no mean calibre there is no doubt. It has even been accused of being habit-forming. And, even if this is not so, the constant roaring which echoes through the avenues of publicity "take an aspirin" has almost elevated this spurious dictum to the status of a conditioned reflex.

Current literature, the cinema and the radio have united to give the sales of this drug a handsome lift. That a song has not yet been written extolling its virtues, awaits no doubt, only the settlement of the current quarrel between ballad writers and radio stations. Thanks to this life, the manufacturers of aspirin have done well by themselves. In the year 1937 alone 5,143,672 pounds of this people's pain killer was sold in the United States. This average of 48 tablets per person represents no mean achievement even in a society hag-ridden by the high dogmas of salesmanship.

Introduced forty-one years ago by the chemist Dreser, aspirin, at first, had hard sledding. Doctors were not so prone to advise the use of proprietary drugs in those days. But, better times were ahead. The United States patent office stepped into the breach and gave to this country the doubtful distinction of being the only one in the civilized world to issue a patent on this product.

In 1917 the "Bayer" rights came to an end and since that date the number of firms manufacturing aspirin and, consequently, the output increased rapidly until today it has reached the enormous total indicated above.

We have said that aspirin is a poison and indeed it is. Twin brother to phenol or carbolic acid and off-spring of winter-green, another deadly substance, its effects, according to eminent medical authority, are often disastrous.

Its principal danger lies in the fact that, while it may be used for the quieting of pain, it often sets up other diseases and difficulties which neither the patient

nor the doctor associates with it. For instance, aspirin depresses the heart, despite the agencies of sales agencies to the contrary. And, constant depression—that is poisoning of the heart muscles—cannot be carried on for long without inviting heart disease.

It has been accused of producing miscarriage in pregnancy and it is certainly true that when the A. Z. test is used; that is, a small quantity of the urine of the supposed future mother is injected into the veins of a rabbit, that rabbit will die speedily if the woman has been using aspirin. Under ordinary circumstances; that is, where the blood stream, and consequently the urine, are clear of deleterious substances, the animal lives and the test will be completed.

The drug will cause itching and burning skin rashes, some of which even go on to form ulcers and, occasionally, the complete decay of the tissue commonly called "proud flesh."

Then, in those who suffer with diabetes, its effects are disastrous and, to people who have kidney difficulties, it is irritating to a dangerous degree. Wine bibbers and the devotees of J-Barleycorn also should avoid aspirin, it has a serious nervous reaction in such cases.

It may produce, in some people, a curious red, tight swelling, generally on the finger ends, under the eyes or in the lips, called "angio neurotic edema" while those who suffer with asthma should certainly avoid it.

The drug may even be the harbinger of death. The London Lancet states that aspirin killed 150 people in England in three years and wonders mildly why this substance, which caused 65 deaths in one year alone is not classified as a poison.

It will be news to the average person also to know that experiments carried on for a considerable length of time have shown that aspirin will rob the teeth of calcium.

Usually when this occurs other calcium-

bearing structures, the bones, for instance are affected, although no evidence of this has appeared at this writing in relation to the drug under discussion.

Here surely is an indictment of sufficient force to give pause to the most heedless. Yet so great a grip has the aspirin habit on the people that its dangers are either unheeded or discounted. We live in a strange world indeed when it may be said with truth that people consume a powerful and irritant drug as children's candy. A drug which unlike candy, however, has not even the saving grace of a sweet savor.

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Due to the generosity of the above contributors, Western States College basketball team has now blossomed forth in fine, new, and colorful uniforms of purple and gold.

The Chiropractic and Naturopathic professions can justly be proud of this fine representation in the world of sport.

Their unbroken record of victories in the

series speaks well for the practical application of our non-medical philosophy.

This team was first organized in the Fall of '39; and, while their uniforms were far from standard, their playing ability and commendable sportsmanship swept them through to victory, giving them possession of the Intra-Mural League trophy, presented by the Y.M.C.A.

At present they are playing their second series at the Central Y.M.C.A. gymnasium. All interested in seeing these boys in action are cordially invited to attend the games every Monday evening.

For definite games schedule, call Western States College, East 8919.

Frederick William Loffler,
President of Student Body.

A New Deal for The Eyes

(Continued from Page 2)
not continue to misuse and abuse your eyes without paying for it sooner or later.

Co-ordination of eye function through harmony of muscular balance is imperative for good vision.

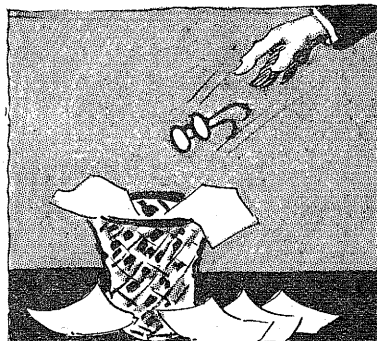
This is a long way from the idea of wearing glasses, and rightfully so. Glasses add nothing whatever to the strength and power of the eye. They do not relieve eye strain. They only give temporary relief. They do not cure the cause of strain. You continue to wear glasses—change from time to time—get stronger glasses, and in the end become an eye cripple and glass addict.

What is needed is education not exploitation. Treatment instead of crutches.

Off the Press Soon!

"SEEING
WITHOUT
GLASSES"

The information in this book by Dr. Emery C. Ingham will enable you to throw away your glasses and see with your eyes.



Health Research Foundation

The West Coast Eleemosynary Institution for the Care of the Sick by Non-Medical Means and the Advancement of Health Education.

Amongst Its Activities Are:

EDUCATION

The Foundation grants scholarships to enable deserving young men and women to attend college in order to qualify for the degree Doctor of Chiropractic or Doctor of Naturopathy.

CHILD CLINICS

Clinics in which a child, whose parents are unable to afford the services of a private physician, may obtain proper diagnosis and necessary treatment every Tuesday and Saturday at the Foundation building. Associated clinics at Gresham and Pendleton.

The Foundation appeals for support to all who believe that the benefits of non-medical health methods should be made available to everyone. Make a small donation, or, better yet, become an Associate Member.

For Further Information, Write:

DR. A. BUDDEN

Chairman of Board of Trustees, Health Research Foundation, 1536 S. E. 11th, Portland, Oregon.

Fanaticism Defeats Itself

Fanaticism is a tremendous driving force. Notwithstanding that it often produces results quite contrary to those it had in mind—as in the case of prohibition—it does generate the energy and determination for prodigious effort that often leads to the most surprising and far-reaching consequences. Someone whose name now slips my mind has written a treatise showing how often in human history those whose purposes were, or seemed to be, evil have wrought the most amazing good; while, contrariwise, those whose aim seemed so good, have caused such dire effects. His picture, like so many others, may be somewhat overdrawn and distorted, but it does, nonetheless, convey an underlying truth.

A case in point is the fanatical determination of certain political leaders of the American Medical Association to see to it that non-medical physicians are exterminated. In state after state they have done their very worst to make sure that not only should non-medical doctors not have any laws governing their own professional standards but that they should be placed utterly beyond the pale by manoueuering the passage of laws making it illegal for them to practice at all. And had their original aims been accomplished, had every non-medical physician been driven from practice, they would have stood as an outstanding example to the contrary of what I have just been saying. But what, instead, have they accomplished?

Well, thanks to the fact that our people are fundamentally fair and just and decent!, just about the opposite of what they set out to do was accomplished. Either of two things has happened in some states. Either these medical politicians have succeeded in having laws passed banishing non-medical physicians, only to find that drugless doctors, responsive to the wishes and the needs of the common people, have not only continued to practice contrary to unfair laws, but that their number have been greatly augmented. And, moreover, in the face of their persistence and increment, the courts in such states have eventually sustained the rights of the people to employ such physicians and the corollary rights of such physicians to exist to answer the call of the people for their services. In short, juries have refused to convict and judges have refused to sentence. And so, many such states now have more non-medical physicians than they had before.

Or, in other states like Oregon, the

non-medical doctors, with the active cooperation of progressive citizens, have succeeded not only in defeating laws of extermination but in passing laws designed to protect and raise their professional standards. And so, in Oregon and a few other states, neither legislatures nor courts any longer treat chiropractors and naturopaths like quacks and imposters. These professions have, by their insistence upon higher and higher educational standards convinced both courts and legislative bodies that they are men of intelligence and good-will and scientific training, and so are entitled to a fair hearing and fair treatment. More than that, the reputation of Oregon for her insistence upon high standards of excellence upon the part of her non-medical professions and the knowledge that this state has in the WESTERN STATE COLLEGE, an educational institution that demands of its graduates even higher standards than the law requires, has spread not only to many other states but to Canada as well, with the result that graduates of that college are in demand all over North America. Indeed, the demand for men and women from this institution so far exceeds the supply that many graduates who are needed to keep up the ranks of the non-medical professions in this state are being lured to other places. This is a serious situation, imposing upon non-medical doctors everywhere, but particularly in Oregon, the duty of seeing to it that a constant and ever-increasing stream of new applicants find their way to the Western States College. If every Oregon chiropractor and naturopath—not to mention those practicing in other states—would meet this situation by seeing to it that he sent at least one new enrollee to the college each year, not only would other states be able to meet the demand for competent non-medical physicians but Oregon would be assured of at least enough new licentiates to meet the home demand and keep up the necessary numerical strength of the non-medical professions in this state.

The conclusion is obvious: fanaticism has, in this field, so far defeated itself; but whether or not it remains defeated depends upon whether we as individual practitioners have the wisdom to see what we must do to augment our ranks, our strength and our high standing, and the initiative to do it. One new student apiece per year sent to the college should tax neither our intelligence nor our initiative. Can we do it? Will we do it?

V.M.

DRUGS INEFFECTIVE WITH COLDS

From the Illinois Health Messenger, publication of the Illinois State Department of Health: "Drugs have failed to shorten significantly the duration of colds. If any drugs so far recommended as a remedy for colds were especially effective as a cure or a preventive, surely the mass experience with drugs would have demonstrated the fact clearly. Treating colds with drugs or strong vasoconstrictors may do more harm than good. The inflammation which makes colds so disagreeable and which leads to the excessive secretions from the nose is an important part of the natural process of ridding the body of infection. The inflammation takes place because the sensitive forces of the body have been concentrated at the point of infection. To use inhalations which constrict tissues, therefore, runs counter to nature's curative processes. Drugs which hinder ciliary action, moreover, also run counter to the natural defense process since ciliary action is depended on to receive the secretions thrown out from the inflamed area."

GIVE YOURSELF A CHANCE?

When you investigate chiropractic and naturopathy and decide that you would like to undergo corrective adjustments—give yourself a chance! Give the chiropractor the same courtesy of time and effort as you would extend to any other professional man. Remember, broken-down bodies cannot be built up as quickly as you may think. It takes time to make structural corrections, particularly since the chiropractor and naturopath cannot use nails and wire to hold these parts in place. Be fair with your chiropractor and naturopath and he will be fair to you.

DOCTORS . . .

Because I am made to give up the operation of my physiotherapy laboratory, I have several machines to be disposed of; among which is my much prized Radio Ray. Its a hook-up of high frequency with the ultra violet ray in circuit. Its value has no equal in mechanized therapy. I will sell it at an extreme sacrifice. For an appointment, see

E. JOY

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The study of blood chemistry as taught at the W.S.C. is of vital importance to the successful practice of the healing arts.

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Chiropractic and Naturopathy

Recognized throughout the American continent as an educational institution of high standing.

Accredited by the American Naturopathic Association and by Chiropractic Examining Boards from Alaska to Florida.

— OFFERS —

Four year collegiate courses leading to Degrees of Doctor of Chiropractic or Doctor of Naturopathy.

Register now for September classes. These are the last two uncrowded professions. They hold open the door of opportunity.

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1536 S E. 11th Ave.

Portland, Oregon