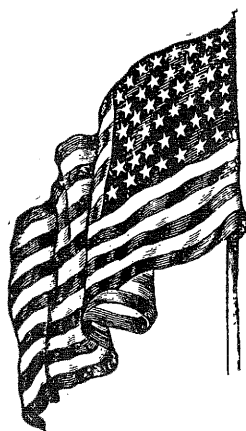
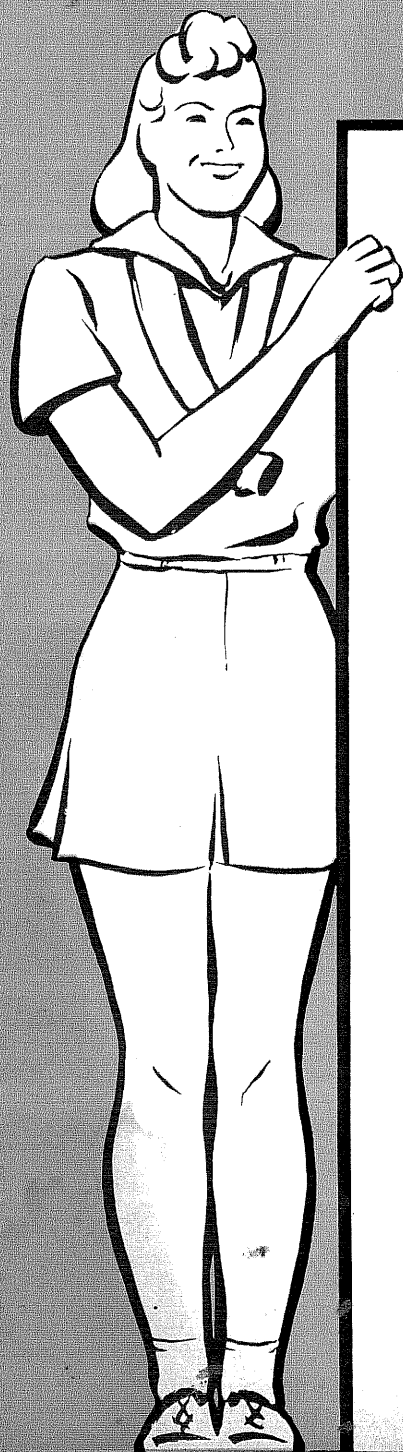


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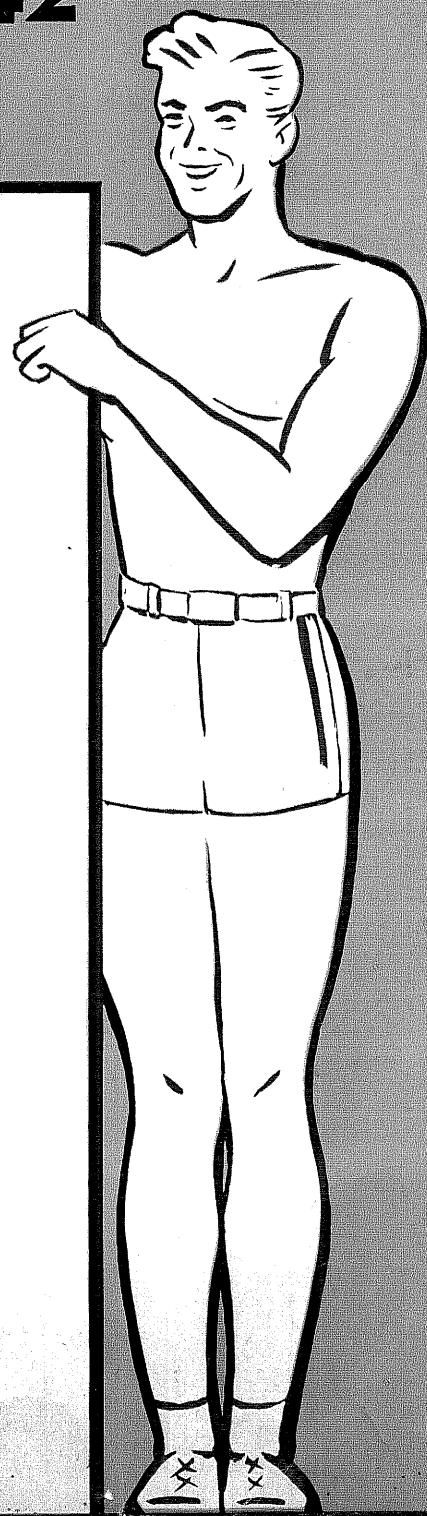
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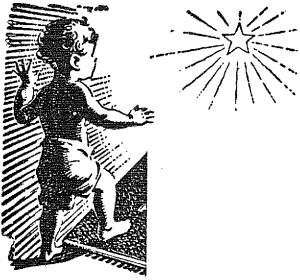
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Diagnosis

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CHILD HEALTH

DR. MARGARET J. SCHMIDT

ELIMINATION

The child's elimination should be watched carefully. The daily bowel movement is as important, or more so than the daily bath. See to it that a regular time is established. This matter of habit is very important. As the child is a creature of habit in other matters, he will be in this if the mother will insist that it be observed. Immediately after breakfast is the best time. During the night the food has been prepared and the nutrient elements have been absorbed by the intestines. The taking of food in the morning will stimulate the bowels to peristaltic action. This is usually followed by nature's urge to evacuate. This urge should never be neglected. When nature is neglected she does not repeat so urgently. The result is often constipation with its train of evils. Cathartics often aggravate the very condition which they are supposed to correct. Water is our greatest solvent so the child must be offered water frequently. When we realize that all foods must become liquid before they can be absorbed then we will appreciate the importance of water.

When the child begins self help, mothers must be observant. Without too much ado, mother must know how often, how much and the consistency of the child's elimination. Play at which the child gets so busy must not be allowed to interfere with habit time.

Often when we are called to attend a four or five year old child, we will ask, "How are the bowels?" The mother does not know. She asks the child. The child does not know. No wonder that there is pain, fever and sometimes other, more dangerous trouble.

Once in the dead of night we were called to a child who was in convulsions. We adjusted the child. She became quiet. The mother gave the history and among other symptoms there was constipation. She had this evening given a cathartic. To the toxins which were being absorbed from the bowels, she had added the obnoxious chemicals contained in the cathartic. I advised that she give the child an enema. The mother cried, saying that she was afraid to. We proceeded to give the enema and found lumps like marbles in the stool. When we returned to see the child the next day, she was in good



spirits. On this second visit the mother told me that she was a registered nurse. Now, if a nurse can be so foolish, we can realize the necessity for reminding mothers of the importance of elimination. And we must not add insult to injury by giving laxatives without first cleaning out the bowels. Clean the sewer from the bottom before beginning to push from the top and the latter is usually not necessary.

Training

This is a matter which cannot be taught like the three R's. It must be repeated again and again until it becomes a part of living. A regular time should be chosen when the child's bowels should move. We call this habit time. It is preferably after the first feeding in the morning. If the babe falls asleep at this time, the mother should watch for the first signs of straining. She should remove the diaper and hold him over the toilet. This is the proper position.—The mother sits in front of the toilet. The babe should lie on the mother's lap, buttock over the toilet, head toward mother's abdomen. Mother holds babe's legs, pressing them gently against his abdomen. If the bowels do not move in a few minutes give enema with small bulb syringe. If this procedure is followed every day at the same hour there will be very few soiled diapers from the time the babe is four months old. Whenever the babe wakes up, if the diaper is not already wet, remove the diaper and hold the babe over the toilet. He will urinate into the toilet. In this way the child learns to urinate and evacuate only when the diaper is off. Thus he establishes clean habits and will soon manifest by his grunts or other noises that he needs attention. It saves a lot of work that is unpleasant. Of course there will be an occasional extra or a mishap but it is a proud

mother who can say, "I have very few diapers to wash." But remember the babe is not permanently trained. He will get into bad habits very quickly if his calls are neglected. Some time between six and eight months most children can begin to use a chair or toilet seat. The same care must be continued, as to time and habits if we wish the child to respond in the same way. The well behaved, well trained child is such a pleasure. Every woman should have several.

Questions and Answers

Dear Doctor: Our eight year old boy is slow in school. He seems willing but does not go quickly to do things he is told to do. I do not know if he is just lazy or whether there is some physical reason for this. When I ask him why he does not hurry he says, "It feels like a rock is tied to my leg."—Mrs. M. G.

When there is a feeling of weight in any of the skeletal muscles it indicates that that particular muscle is not receiving its proper amount of nerve energy. For this reason the opposing muscle exerts a greater pull on this muscle causing a feeling of weight. Take this child to a chiropractor. He will trace the nerves and find the cause of this feeling of weight and correct it. By the same correction the imbalance to which this mental lethargy is due, will be corrected. An upper cervical vertebra may be subluxated. This will interfere with the blood supply to the brain. When this is corrected the child's intelligence will find proper expressions.

Dear Doctor: Anne, who is fourteen years old, gets out of breath when she runs. Her heart beats at a very rapid rate. Is there cause for alarm?—Mrs. B. N.

Your child may have what is sometimes called adolescent heart. It is due to rapid growth. Veins and arteries grow long and large. The heart has difficulty keeping up with this growth. Therefore it is under strain. There is always cause for alarm when the heart is under strain. Anne should not run, she should also be excused from gym during this time of rapid growth. It is a critical time. Chiropractic adjustments will keep the nerve paths open and therefore will help establish a balance between the heart and blood vessels more rapidly.

Elizabeth Rawlins

And to those people who express a disbelief in Vitamins, we say that they then must disbelieve in breathing and in eating. Just as oxygen is a metabolic agent, so is Vitamin B and Vitamin C and so may others be. Just as our forebears rightly but unknowingly used hot lemon in a fever to increase its natural action, so we now turn to Vitamin C in concentrates, that we may do the same with greater ease, greater



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Safeguards of Life

DR. C. E. STEWART

(1) URINALYSIS

An engineer wishing to obtain a reasonably correct idea of the habits—commercial, economic, social and otherwise—of the inhabitants of a city could do so by making an analysis of the sewage output. Here is collected all the waste, some of it capable of decomposition by bacteria, some of it, the cellulose, unaffected by any such sanitary agencies and here also are fluids from factories, creasote, brewery wastes, etc., which suspend the beneficial action of the bacteria.

A doctor in like manner can tell within reasonable limits what is happening in the body of a patient by making an analysis of the fluid wastes which are voided in the urine. He will be enlightened in a way which is not possible by any other method to date. Of course, the work must be properly done if it is to be done at all. It will not do just to make one or two tests. The job must be thorough and complete.

In order to understand what is sought by some tests, it might be well to discuss for a moment where the urine comes from and how it is produced. As to the latter, doctors are not yet at one. No one knows with absolute certainty just how urine is elaborated, but we do know that it is done by the kidneys.

The most recent view is that it is secreted by special cells which have the capacity to take from the blood substances and fluid which it is necessary for the body to get rid of. Some hold that a considerable portion of this fluid, after having served its purpose, is reabsorbed into the blood stream again.

In a healthy person, of course, these filters extract only what should be taken, thus ridding the body of poisons.

In some forms of diseases, the kidneys may be incapable of detoxifying the body or they may allow substances which should not be excreted—sugar, albumen—to appear in the urine. Thus, we may have a retention of toxic substances or a loss of necessary substances.

We have said that a person should be sure that he is dealing with a competent and honest doctor in the matter of urinalysis. It has happened that a cloud of phosphates, not essentially dangerous, has been diagnosed offhand as albumen, or a color due to some food or medicine the patient has been using as blood.

Again, there are urines which are clear as crystal and yet actually show

very dangerous conditions. Nothing can be definitely decided until an analysis—chemical and microscopic has been made.

What is it that the test should reveal? First there is proper concentration, a correct relation between the fluids and solids. Here let me state emphatically that a test cannot be properly made unless there is a definite time set for collecting such urine. Twenty-four hours is the rule and when anyone undertakes to make a really scientific analysis without first procuring such a sample, he is bound to come out wrong. This does not mean that emergency tests may not be made from single samples. It does mean that where such a need does not exist, the twenty-four hour method is the only proper one.

Then, there is color, and this is important, but must be read properly. If one is taking drugs without the doctor's being aware of it, he may discover your secret in the analysis. It is better, of course, to tell him. He ought to know if he is to treat you properly.

Then, sugar, albumin, indican, urea, should be searched for. Sugar in the urine is generally bad. It comes from the blood and it may mean that the kidneys are incapable of holding back what would be ordinarily a normal pressure or that the body is unable to use the amount of sugar consumed. In any case, something should be done about it at once.

Everyone knows that diabetes is indicated as a rule by the appearance of large quantities of sugar in the urine. But it may appear as the result of overwork, the taking of thyroxin, ex-

haustion, emotional stress and from other causes.

It might be as well, perhaps, before we dismiss the subject to explain briefly just how sugar tests in urine are made, but before we do, let it be said that if there is sugar in the urine, one should have a blood sugar test as soon as possible. In that way, the doctor will be able to determine where the fault lies.

Well, sugar is detected by a very simple chemical reaction. Most of these tests are conducted by using a solution of copper salt—which is blue. Now it happens that if we put certain sugars in a container with this copper solution and apply heat the fluid turns green, yellow, or brick orange according to the amount of sugar present. That is to say, the sugar displaces the metallic copper and makes it visible. It is simple, yet it is scientific and there is no substitute for science.

Continued next month.

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Volume 1 Portland, Oregon, February, 1942 Number 13

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APOLOGY

Readers who missed Vitality in January should rest assured that circumstances over which we had no control intervened. Here we are again however, and so we shall continue.

Well Deserved Recognition

At the latest meeting of the state Public Welfare commission, it was unanimously decided that, henceforth, osteopaths, chiropractors and optometrists, will receive the same recognition in regard to payment for their services to relief cases as physicians. This decision covers only licensed members of the professions mentioned, and excludes other types of practitioners not licensed under Oregon laws.

Scarcity of Doctors

That a scarcity of doctors is pending seems indicated by the available facts. It is said that when the armed forces are all mustered in some 15,000 physicians and surgeons will be necessary to take care of the physical troubles of this great aggregation of young men.

There are, however, only about 155,000 such professional men licensed in the United States. Since it is obvious that the health and safety of the civil population is as essential to morale as is that of the troops, a problem of considerable dimensions is presented to whatever "coordinator" has this particular "coordinating" job.

It has been suggested that all senior and third year men in medical schools be added to this list. This would, of course, help some but is by no means an answer to the problem. In the meantime, may we again point out that there is available a very considerable number of non-medical physicians who, up to this writing, have been studiously ignored by the medical powers that be.

These are competent men and women skilled in the sciences and arts of healing; physicians who have specialized in physiotherapy, hydrotherapy, adjustive technique, dietetics, and so forth, who are being drafted into the army without regard to these facts.

We suggest that this is contributing to the coming shortage. It would, one would think therefore be up to the authorities to defer those who, at present, are studying in recognized drugless schools and to see that sufficient non-medical physicians are left so that those people who do not patronize medicine may be cared for in the manner they desire.

THE WAR

The coming of the war to America has unseated most of our plans and shattered many of our dreams for 1942. We have, as is here apparent, put ourselves in position to continue the publication of "Vitality" by reducing for the time being the number of pages. The soaring cost of paper and the uncertainty of the future made this change imperative.

That, however, is the way of things and in the face of the implacable facts we have no choice of action. With bomb, aeroplane, submarine, tank, warship and cannon the enemy has spoken. We must answer in kind, though all the pleasant fabric of our days be torn and disrupted.

Like a plague the war has spread across the world. It is the anvil upon which fanatic megalomaniacs are struggling to beat out a new pattern of life for all; a pattern resulting from a monstrous misalliance between the masters of great European and Asiatic industry and collectivism. East of us, it is called "National Socialism"; west, "Co-prosperity of the new order in Asia."

East or west, we want none of it. We have drunk too deeply of a different draught. We fight for freedom. That is to say, freedom of the market-place, freedom of commerce, freedom of the professions, freedom of the worker, freedom to journey forth when we will; to go and come without let or hinderance—**OUR** kind of freedom.

We must make sure that these things are not lost in the great battle now so thunderously joined. They are the foundation stones, the quoins and ashlar to which our most precious political freedoms are anchored. Freedom of speech, of press, of religion, of the right of assembly and so forth become almost impossible if freedom in the ways of gaining a livelihood is destroyed.

And so while we bend every energy to war without stint, let us be sure that the message of freedom shines from the eagles of our legions. The thunder of our guns as they shake the very firmament must proclaim it. It must be blazoned upon the wings of our swift-swooping sky warriors and at the mast-head of our ships of war it should be a standing order of the day.

We do not fight because we love to fight. Or do we do battle at the command of a half demented paper hanger, an ex-socialist journalist gone imperialist or a foolish person who thinks he is divine. We fight for freedom and we must see that when victorious we come to count the cost and make the terms of peace there shall be suspended over that council table a mighty banner bearing the legend, "This war was fought for freedom, let no one betray it."

Acquired Short Sight

DR. A. BUDDEN

Last month we talked about the experiments of Bates and how he came to the conclusion that it was possible to treat certain kinds of visual disturbances without glasses. We saw that his idea was that if the external muscles of the eye were to become adversely affected, vision would suffer distortion. The eye would fail to focus properly.

Now, it should be made clear at the start that we deal here only with that kind of visual difficulty. We must postpone to some future date a review of the diseases of those structures which are the real organs of sight. But we may say, in passing that these are the retina, the optic nerve and the visual portion of the brain. It is by the combined activity of the above named structures that images are taken up from the outside, reflected along the nerve pathways, impinge upon the brain and are analysed for presentation to the mind. We do actually see with these structures and when any one of them is affected blindness may be close at hand.

The matter may be somewhat clearer if we consider a camera for a moment. The light in this device, as everybody knows, shines through a shutter and an arrangement of lenses. It is then projected upon the film; in the case of the eye, the retina. Now it is of little avail in photography even though the film be fresh and new if the amount of light entering the camera is insufficient or the lens not in focus. The result will be a poor picture. This is true of the eye, all agree. The only difference between the two schools of thought on the matter is that Bates maintained the focusing is done by one set of muscles and his opponents think it is done by another.

Well, you may say, what matter? Let them argue; what we want is successful care of faulty eyes. Oh! but it does matter, for if we believe as most non-medical physicians do, that the large extrinsic muscles focus the eye, then exercise, adjustment and diet are the proper means of treatment. On the other hand, to the people who believe that the small internal muscles do the trick, the wearing of properly fitted glasses is the thing.

Of course it is not quite so simple as that. The non-medical physician would not, for instance, undertake to restore visual acuity to a person whose

eyes are mal-formed; are too short or too long or incomplete. That would be beyond reason. The services of a good optometrist are needed in such a case. No cure is possible, only aid in making the best of a bad job can be offered.

But, if, as many believe, children acquire visual blurring, short or long sightedness, by eye strain at school; if they come into the world with normal vision and by setting up semi-permanent contractions of the eye muscles afflict themselves with one or another of these troubles, then efforts should be made to undo the contraction and restore normal vision. It can be done and it would seem a more scientific and humane way than rushing straight into wearing glasses. Time enough for that when all else fails.

Putting aside, then, for the moment, the discussion as to which of these does the trick, it must be clear to both sides that it is done by muscle.

We know, also, that the controlled movements of muscles are made possible by nerve impulse and that without such impulse there is no proper muscle action. Thus, we have the matter out in the open at last.

It is agreed by all that proper relation between muscle and nerve supply equals movement. It is also, surely, agreed that if that nerve supply is interfered with, the muscle either contracts or becomes limp—tonic is the word.

Now, in the focusing or accomodating of the eye there are definite and observable nerve-muscle actions. It is this way. Let us suppose that a person is reading a book. He is accommodated to short vision. Watching his eye, we ask him to look out of the window. He looks up and at once we notice a movement in the eye ball. He has as we say accommodated to distance.

How did this come about? Well, there was, first of all, an order from the

mind acting at our request setting in action motor nerve impulses which brought muscles into play to raise the eye balls and perhaps the head. As this occurred and at the moment that the eyes were directed to the distance scene there was a similar impulse along another set of nerves directing muscles to open the eye wider and to cause it to focus for the long view.

Let us suppose, now, that the eye does not accommodate, that the person sees only vague shapes in the distance and cannot make out anything clearly, that he is short-sighted. Something has happened to the nerve-muscle combination. It is not the retina, the seeing apparatus that is at fault. The muscle either has failed to respond to the nervous impulse or the nerve is unable to convey impulses. Remember we are not discussing mal-formed eyes.

Well, there's the problem of this kind of short-sightedness. One school of thought maintains that to correct this condition one should wear glasses. The other believes that the method of attack should be along the lines of nourishing the muscles and nerves and of removing any interference which may be present and can be cured.

What do you think? or had you not better wait until you have read the several installments which are to follow?



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Menstrual Relief

DR. ROSS H. ELLIOTT

On previous occasions in these columns we have discussed dismenorrhea (painful menstruation) and much good has been accomplished through the suggestion that young women suffering with this disturbance should consult a non-medical physician and find relief from the cause of their trouble, through natural methods of healing. The urge to again mention the subject at this time results from daily contacts with young women patients who have long been martyrs to needless days of misery, simply because of failure to contact a source of relief. In mentioning young women I do not mean to infer, that older women who belong to this unfortunate group, should continue their neglected course, but would stress a sad regret that any girl should reach the age of seventeen still a victim of such periodical torment.

Why should the menstrual function have to be ushered in with pain? The answer to this question which is frequently asked, is "it shouldn't." And with women whose pelvic condition is normal or near normal, and their general health good, it isn't. The contributing causes to this trouble are many and varied, but as we have gone into that phase of the subject quite extensively before we will devote our effort to convincing the reader that relief can and should be found for this complaint. When the individual case is being considered, the examination, when that becomes necessary, usually reveals a mal-position of the uterus with tension in the broad ligament, in which the ovaries, tubes and uterus are suspended. This may vary from a slight degree to complete fixation.

When we consider menstruation as a circulatory function and realize that we cannot have free and normal circulation of blood in organs rigid with tension and congestion, it isn't difficult to understand that a lack of co-ordination between the organs entering into this monthly phenomena could easily bring about irritation and pressure on nerves, which are the only structures of the body capable of reporting pain. The nerves which control the functions of the uterus omit from the spinal cord in the lower area of the spine, and in some cases pressure on the nerve root at its source, is the direct cause of the disturbed co-ordination mentioned above.

The immediate relief afforded in some cases where spinal adjustment alone has been used, proves this point. While



spinal adjustment should be used in all cases, the majority also require deep therapy heat currents through the pelvic tissues which brings about relaxation of the tense structures, dilating the blood vessels, thereby increasing the blood supply and scattering the congestion. This overcomes the interference with Nature's preparation for the flow to start which is going on from two to five days, varying with different women, before the actual appearance of the flow. This preparation involves engorging the blood vessels in the walls of the uterus with an increased blood supply and the softening and relaxing of the cervical outlet. Some fortunate women have no knowledge of this preparation until blood actually appears, and then normal flow ensues without distress.

The question is frequently put forth as to why women should be pestered with this ever returning nuisance anyway, and this may be a good time to touch on that point, which is well taken, and may shed some light on numerous aspects of the subject. The writers statements here are not a reflection of any text book lore, but are based entire-

ly upon common sense and observation. Nature very wisely, provided in the female organism for an extra production of blood over and above the body's individual requirements, from puberty to the menopause. This extra blood is to take care of the added responsibility placed upon the mother's body when conception occurs and a new life it to be built.

All the elements of growth which go into the new intra-uterine development come from the mother's blood stream and were it not for this surplus blood production, her own body economy would suffer. Hence, the failure of the menstrual flow to appear following conception, does not mean a change in the blood production program, but that Na-

Continued on page 10

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ASTHMA, HAY FEVER

Dr. V. G. GROVE

Statisticians tell us there are five million people in the U. S. A. afflicted with asthma or hay fever. Regardless of the means taken to arrive at this figure, I claim there has been a miscount, for I find there are only 4,995,000.

However, I am deeply interested in the cause and treatment of this disease. I say "this disease" because the only difference between Asthma and Hay Fever is in location. We so often hear the claim of someone who has a "specific" (or cure) for this condition. We may just as well accept a "specific" for constipation. No one remedial agent will effect a cure.

The air passages, like the intestinal tract, are lined with a nice smooth layer of mucus which reduces friction and prevents the walls from adhering. Let this mucus lining become thickened or impoverished and flake off through faulty diet and lack of lymphatic elimination, the walls will adhere and retard the intake of oxygen.

If we were going to treat a case of constipation, we would first create a greater muscular action of the bowels and cleanse the whole elementary tract and then put the patient on a proper diet of food and water. And so in the treatment of those diseases affecting the air passages and sinuses, we must stimulate the action of the lymph ves- and cleanse the whole alimentary tract of certain glandular substances plus a diet free of mucus forming foods. I know of no condition that requires a stricter

adherence to Doctor's orders than this. He will give you a list of foods that do not form mucus and yet be nourishing, for the more mucus you allow to form in your system the greater will be the clogging up of the lymphatics, sinuses and air passages, and the higher will be the acid content. Elimination, Elimination, and more Elimination,—through the skin, bowels and kidneys. Think what would happen to your furnace if you allowed the pipes to be clogged with soot. That is exactly what happens to your body. You wouldn't pack in a lot of fuel that you know wouldn't burn, but only make a lot of smoke and soot,—but that is exactly what you are doing to your body when you pack your stomach with a lot of indigestible food and swallow it whole in about half the time it should take you to eat. You get fat and stuffy, your blood pressure goes up, your heart pounds, and it is difficult for you to breathe—you remember having sat by an open window and you are stopped up with a "cold", so you think. Remember this, colds don't come from open windows, but closed organs of elimination—and this is what I mean when I tell you there is no magic or specific for the cure of Asthma or Hay Fever, but it can be cured and that without any great sacrifice of bodily pleasure. Certainly it is worth it.

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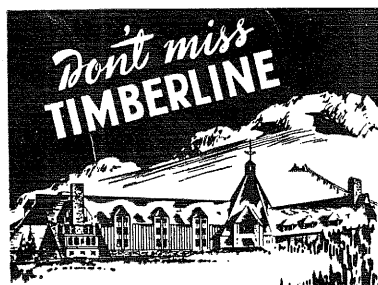
Continued from page 8

ture is now using the surplus for the purpose intended, so that child bearing need not produce any unusual strain upon the mother's body. If the babe is fed at the breasts after coming forth to continue its growth in more spacious quarters, the mother in a normal condition, will not menstruate until about twenty eight days following the weaning period.

And again this is not due to any change in blood production, but Nature is guarding against possible weakening of the mother's body by supplementing her blood stream during this period of added responsibility. When there is no further use for this surplus blood within her body the mother again returns to her periodical menstrual habit, when the pressure in the blood vessels reaches a point where relief is necessary. If blood were not expelled from the uterine wall, vicarious menstruation, such as nose bleed or hemorrhage from other organs might follow. The frequency of the menstrual cycle as well as the amount of blood expelled, depends upon how well the blood producing organs are doing their work. The red marrow

of the long shaft bones and the spleen build the red blood cells, and as with any other type of production, proper materials in adequate amount, must be available if a good job is to be done. And here we are, back again at that old subject of body feeding, because the variation between twenty and forty or more days in the menstrual cycle of women, as well as the difference in amount of blood expelled, has a very intimate connection with diet, digestion and assimilation.

Utilization of the materials for blood production, by healthy blood building organs, which are doing their normal work as part of a healthy, non-toxic body, will support a normal lunar month menstrual cycle. Those who develop more frequently than the normal twenty eight days, even though the flow is quite heavy, need have not concern if there is no sense of weakness at the finish. However, there is good cause to check the living habits because this condition can be regulated. In fact, women are foolish to suffer the inconvenience and distress of any of these variations from the normal of this periodic function, because they can be helped. Those who run over the normal spacing and perhaps have a scanty flow when it finally does appear, need building up with supplemental nutrition. And most of all, women who dread the menstrual approach because of the suffering to be endured, should not delay in seeking relief. Drugs taken for this purpose are hard on the heart and afford no permanent benefit.



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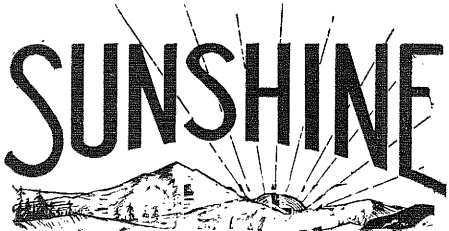
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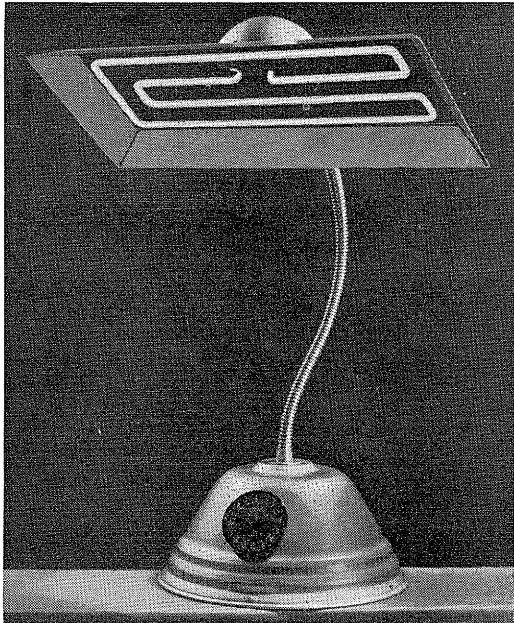
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