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THE

Hindu Message

A Weekly Review of Indian and World-Problems
from the Hindu Standpoint.

Medical Supplement

‘चिकित्सात्पुण्यतमं न किञ्चिदपि शुश्रुमः’ । ‘विभेद्यल्पश्रुताद्रेदो मामयं प्रहरिष्यति’

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NOTES AND COMMENTS.

The Bombay Humanitarian League has done us a service in sounding the attitude of the I. M. S. people in this country towards the question of vaccination as a preventive against Small-pox. In a pamphlet entitled, "Vaccination and Small-pox" the league has rightly styled it as "a horror of medical tyranny" which is practised in the name of vaccination. We fully endorse the views of the league and feel that a campaign should undoubtedly be started before long against this tyranny of compulsory vaccination in British India.

Last year a resolution was passed, at the third Dravida Ayurveda Sammelan held at Conjeevaram, to the effect that compulsory vaccination should absolutely be stopped or that the Act should be so modified as to exempt those, who are conscientious objectors from compulsory vaccination. The resolution was also communicated to the Government and the members of the Legislature immediately for taking action. There the question stops and our representatives seem not convinced of the fallacies and frauds of these theories yet.

The theory of vaccination has long been exploded and proved a failure in the extreme by eminent scientists in the West. Notwithstanding the inefficiency of this theory it is strange the Government of the country here and elsewhere influenced by the votaries of vaccination, still persist in penalising the people for non-vaccination. It is a pity that they should be blind to actual facts and make so much fuss of a question which has not got any basis—scientific or moral—to stand upon. We believe that with eyes to see and ears to hear and mind to think the exponents of the vaccination theory will pause to take stock of their position before they persist in their assertion in favour of it. As a great medical man in the West observed it is but a

medical craze of the latest type to persist in the introduction of a dangerous poison into the system anticipating a doubtful prevention of a disease in future. We know as a matter of fact, that vaccination has never succeeded in preventing the onset of small-pox which nevertheless appears in season and out of season in spite of it.

In England however vaccination was voluntary between 1847 and 1853. Then it was made obligatory which continued till 1867. From 1867 we see that vaccination seems to have been enforced upon the people by statutory legislation by the Parliament under false pretences. The public were enlightened of the failure of vaccination as a preventive measure and the iniquity of the law which forced it on them against all common sense and common knowledge. The law has absolutely failed to secure the people the immunity—complete and enduring—from small-pox and the original claims of vaccination have begun to vanish altogether. Every excuse to justify legal compulsion in the matter has now been lacking and the need for compulsion has still to be sought after. The pressure of logic being grown extraordinary the State were obliged to appoint a commission to investigate the question. The Royal Commission carried on the investigations for about 7 years and their admissions were absolutely damaging to the cause of vaccination.

Four of the members of the commission urged its complete withdrawal though the commission as a whole advised, unanimously, the relaxation of the compulsory law. In 1898, as a result of this recommendation a concession was made in the case of conscientious objectors, which was further enlarged by the Act of 1907. "It is now" therefore possible for almost every one in England and Wales, and Scotland, outside some of the Government services, certain private firms and certain country districts, to procure exemption without great inconvenience.

What is Worry.

ITS CAUSE AND REMEDY.

The following is a summary of the lecture delivered at the Institute of Hygiene, London, on "Worry, its Causes, Effects and Prevention," by Edwin L. Ash. M.D.

Worry has always been one of the great enemies of mankind. Its origin cannot be separated from that of fear upon which its sting is really based. At the present time there seems to be more occasions for worry than ever before in the history of living persons. The consequence is that some, whose nervous systems are not over strong, feel themselves scarcely able to bear the pressure of daily affairs and we have to face the tragic news in our papers every week that some find life altogether insupportable. They are unable to adjust themselves so as to escape from the immense weight of depression that worry brings upon them. The call of a distracted world is for peace of mind and one hears in the market place mainly of strikes and war. Never was a time when the individual needed so much the opportunity of gaining mental support as now.

Worry is a disorganisation of mind control resulting in the see-saw movements of thoughts backwards and forwards as it were. Over and over again, round and round the circle go the thoughts of the worrying person. There is no finality; there is no reasonable conclusion. Fear is bad enough, but worry is one of the most lamentable circumstances of mind that human beings have to suffer. However much we may be under the dominion of fear it nevertheless should be possible through mental hygiene and self-training to get rid of worry because although worry is based on the fear that something may not go well with us it is nevertheless not based on the having to face some inevitable fact. Worry is a disorganisation of thought so that the mental machinery is upset and depression sleeplessness and health result. Worry is not the facing of an unpleasant fact. It is uncertainty about it and of course the attitude is rendered painful by the element of fear entering into it. It is possible to worry about quite pleasant things but it is not usual. The common worries of life such as our friends, health, domestic affairs, love, courtship, and marriage, finance, business, ambition and so forth are harmful because of the degree of fear lest things will not work out well that energizes them. Let us see quite clearly then that whilst fear is a special enemy which has to be met worry is one of its allies but not nearly so difficult to control if we study the problem of its origin.

KINDS OF WORRY.

Common worries fall into two main groups.

(1) The great worries associated with illness or accident, the loss of friends, financial stress and so forth. These are the great troubles that come to every one sooner or later in one form or another.

(2) Worries concerned with quite small things and the common relationships and circumstances of life.

As a matter of fact the great troubles are not the things we usually worry about, whereas a great mass of worry is occasioned by quite small things. Whilst a great trouble makes a man put forth his greatest strength in the effort to meet it, small

troubles do not produce a reaction of this kind and result in that see-saw or round and round train of thought which leads nowhere and which we call worry.

EFFECT ON HEALTH.

Worry must be considered in relation to health because it is responsible for a great deal of nervous breakdown and organic illness. If you take a list of causes of diseases to be found in any large text book on medicine you will find that worry is mentioned as a factor in producing illhealth in almost every instance. It is a very remarkable fact that worry about diseases is liable to produce them. This is perhaps true occasionally but the chief way in which worry produces disease is lowering the general vitality of the body and diminishing its resistance to dangers. The victim of worry is always a candidate for infection whilst at the same time his energies are so used up by the mental stress that every organ of the body fails in function so that not only is the mind distressed and sleepless and other nervous symptoms occur, but the circulation becomes poor, the heart becomes jumpy and the digestion indifferent. Is it to be wondered at that where worry has reduced vital activities anaemia, tuberculosis, influenza or worse maladies occur?

We have here the making of a 'worry wheel' because not only does worry affect health adversely, but it is equally true that as soon as one becomes run down one is not so well able to cope with the small misfortunes of life and instead of meeting them clearly one begins to dwell upon them and indeed to worry about them. Thus whilst worry produces illhealth, illhealth also favours a state of worry and one factor working against the other we soon have one of those unfortunate consequences of events which are usually described today as vicious circles.

THE ONLY THING TO DO.

Once any one has got caught up on a "worry wheel" there is only one thing to do and that is to make a complete break in daily routine and a complete change in life. It is the one way to prevent bad from becoming worse and to break the vicious circle, and it is at the same time the one thing that the victim of acute worry finds it most difficult to do. It is one of the commonest as well as one of the saddest experiences of the consulting room of all doctors who deal largely with nervous and mental maladies that men and women who are clearly caught by worry find themselves time after time unable to decide to take the only device that can certainly save them from chronic ill-health or sudden breakdown. The reasons for this are not far to seek, and are of course (1) the fact that ill-health has weakened the powers of decision and the unfortunate sufferer is unable to make up his mind to have a change. (2) That the worry is so intense and the possibilities of disaster appear so great that the victim simply dares not to leave his affairs to subordinates. This last is an attitude of mind which is probably aggravated by a false sense of the importance of the ego because the position is really this that the man or woman in a state of neurasthenia through over-work or over-worry is really faced (only they cannot usually see it) with the possibility of complete retirement from active work in life in which case they will have no choice in the matter. Of course where the break is made and treatment undergone it is to be expected that

within a few months, even within a few weeks, work can be resumed satisfactorily and then of course the difficulties will be seen in their true proportion and there will be perhaps no worry at all.

PREVENTION OF WORRY.

A thousand and one worries can be got rid of by simple adjustment of our minds to the real facts of life. One can illustrate this from many examples of small social distinctions and observances and also of innumerable small anxieties engendered by a false sense of egoism. The undue exultation of the human self is responsible for many small worries that wear out health and occasion much distress, all of which can be got rid of by a little simple philosophy.

For the ordinary healthy man or woman the conquest of worry depends on the training of the mind (1) On the training of the "conscious mind" by education and any suitable method of central exercise that makes for increased powers of attention and decision. (2) On the training of the sub-conscious mind which can best be achieved by self-suggestion.

The prevention of worry depends then on the maintenance of ordinary health by every possible means aided by greater attention to mental hygiene, self-training and self-suggestion more than is the rule amongst us. Whilst on the other hand the elimination of worry depends for many on the improvement of health on whatever lines may be necessary. It may be taken as an axiom that a worrying man is a sick man. True enough he may not be very ill but he is probable to be a victim of some impoverishment of health some nervous debility or slight poisoning for example which by lowering the vitality of his physical organ of mentality namely the brain, prevents him using his mind with full efficiency and prevents him exercising that important function of "making it up."

The Fraud of Inoculation.

BY WALTER P. HADWEN, M. D.

Inoculation is the latest medical craze. It is the panacea for every ill. It will prevent disease in the case of typhoid and tetanus, but it will not cure. It will cure in the case of tuberculosis and boils, but it will not prevent. And it will prevent and as well as cure in the case of diphtheria, cholera, plague and a few other diseases. That is the claim.

When a patient is inoculated against a certain ailment and does not subsequently contract it, the inoculation gets the credit. If after inoculation a mild attack supervenes, it is the inoculation which saved from a severe one; but should a severe attack assert itself and the patient just escapes with his life it is the inoculation which preserved him from death. When, however, death itself claims the subject of inoculation, we are informed that there must have been something wrong with the prophylactic or that the patient was inoculated too soon or too

late, or in an unskilful manner. The operator is often thus given away to save the credit of the nostrum. Nothing must be said against inoculation. It is the fashion of the hour, and resembles the image which Nebuchadnezzar set up; for everyone must bow down to it and worship, or the fiery furnace awaits him.

The history of medicine is largely the history of changing medical fashions. We have universal bleeding at one time; mercurialisation at another; huge doses of alcohol for fevers at another. This characteristic of ever changing fashions was acknowledged by the "British Medical Journal" more than eleven years ago as follows:—

Remedies and modes of treatment like systems of philosophy and fashions in dress have their little day and cease to be.

Never was this better exemplified than in the case of anti-typhoid inoculation, of which millions of doses were supplied during the late war to all the British and Continental armies at a fabulous cost in salaries and outfit. So long as the troops were supplied with good water or were located in such positions as the Army Service watercarts could reach and the sanitary and hygienic conditions could be maintained, there was no typhoid fever; but when Flanders became flooded, or the men were out off from the good water supply and were compelled to drink polluted water which they found around them, typhoid fever claimed its victims, and the fetish of inoculation proved unavailing. As the bulk of the English Army on the French front was well-cared for from a sanitary and hygienic point of view, inoculation obtained the credit of prevention which should have been accorded to the sanitary service.

Advantage had been taken of the success of the sanitary service in preventing typhoid fever among the English troops on the French front, not only to extol the prophylactic powers of anti-typhoid vaccine, but to claim, that it is owing to inoculation that so few were attacked with typhoid compared with the number who fell victims to the ravages of this disease during the Boer War.

The scandal of the Empress of Britain in 1917, gives a good instance of what inoculation meant. Seventy five of the men were so ill and presented such inflamed arms that the second inoculation had to be abandoned. One man had to have his arm amputated; others had to have theirs strapped to their sides when lowered into the boat for landing, and at least ten are officially acknowledged to have died. To cover up disasters are a disgrace to the military authorities.

I view the whole inoculation system—no matter to what disease it is applied—as a scientific error of the grossest description; so blind and wilful error that it constitutes an imposition upon the public. The efficacy of inoculation has never been proved. Its

unscientific nature, its uselessness and its danger have been established beyond dispute. If health is to be maintained, the constitution must be safeguarded by sound sanitary and hygienic conditions; but to suppose that disease can be prevented by inoculating the system with the products of disease is as sensible as to invoke the power of Satan to cast out sin.

—Truth.

Effect of Long Residence in Tropics.

Elkington discusses the results of an investigation which threw much light on the effect of residence in the tropics on white persons. Nine families of originally north European or mixed north European and native blood have persisted on Kisar for more than 100 years and have bred to five and six generations. In the case of one family, the known date of birth of eldest Kisar born child of European blood was 1789. His descendants down to the year 1914 numbered thirty-eight at least and possibly more. His father was born at Macassar in 1767, giving an uninterrupted period of tropical residence for this family of 154 years on the paternal side and at least 135 years on the maternal side. This has not been accompanied by loss of European characteristics of complexion and features, except as a result of admixture of native blood, and that even when so diluted the European physical characteristics still come out strongly in the fifth and sixth generations. The European standard of mentality, as shown by reaction to European methods of education, persists in substantial degree after five and six generations. These characteristics have survived in spite of environmental conditions and associations lasting for sixty years, from 1819 onward, and probably for seventy years or more, which are generally supposed to be totally unsuitable for persons of European stock. These conditions have included native standards of food and food supply, endemic malaria, the psychologic effect of what must have been for the earlier generations an acute sense of abandonment by their own race, life under the rule of native chiefs, constant association with a native race of low mentality, loss of European language and European religion, interbreeding to a high degree and constant exposure to a tropical climate. There is nothing in the available history of these people to show that a tropical climate per se has tended to produce degenerative effects on them or to limit fertility. Whatever evidence they may have shown of lowered physical or mental activity in the past can be fully explained by the environmental conditions of food supply, malaria and particularly of native association, aided, possibly, by the accentuation of stock weaknesses arising from interbreeding over several generations.—*Medical Journal of Australia, Sydney.*

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