

THE

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# Hindu Message

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

## Medical Supplement

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

VOL. I. No. 38.]  
Registered No. M. 1904.

THURSDAY, OCTOBER 5—12, 1922

[PRICE: 1 ANNA  
Annual Subscription Rs. 3.]

### NOTES AND COMMENTS.

Speaking of the treatment of hysteria. Head says: If possible, the patient should be removed from the usual surroundings and new influences brought to bear. An attempt should be made to switch the dissociated part into the continuity of the patient's mental life. Every form of persuasion should be exercised to convince the patient that he is able to carry out the action he is convinced to be impossible. Never bully him or accuse him of dishonesty. No one is a greater failure than the medical officer who wishes all hysterics could be shot at dawn. On the other hand, the firm diplomatist with subtle and demonstrable reasons why the patient can stand, walk, or feel, often produces miraculous cures. But it must never be forgotten that in a large number of cases, especially in civil life, removal of hysterical symptoms is only a prelude to the discovery of an anxiety neurosis. The causes for the suppressed emotion must be investigated, or the patient may be left in an even worse condition than that in which he was found. Do the patient no harm by antitherapeutic suggestion; carefully prune conversation, and do not think the diagnosis aloud. Avoid such words as "neuritis." Some diagnoses, such as "floating kidney," are more deadly than the disease. Avoid thinking in terms of surgery when dealing with functional neuroses. At the same time the most brilliant conversation is useless with an hysteric.

E. Escomel reports some striking cases of the successful treatment of hernia and intestinal obstruction without operation. His first experience was with an old woman of 84 the subject of valvular disease whose condition altogether precluded the idea of operation for an incarcerated hernia. As the position was desperate in default of other means he administered paraffian liq. in doses of half an ounce at half-hourly intervals and within six hours was astonished to find that the hernia had disappeared altogether. Escomel has had since no less than fifteen other cases in which either before operating or when the conditions precluded that course, he has carried out the same treatment but repeating the doses at shorter intervals; he has also adapted the method of raising the bed-foot to permit of the bowels' gravitating to the abdomen and believes that in some of the cases torsion or invagination were corrected by this means.

On each occasion he has met with the same success as regards the reduction of the apparently irreducible hernia although in some cases the process had to be assisted towards the end by gentle taxis facilitated in a few cases by pituitary extract injected intramurally. As Escomel remarks, the administration of the paraffin can do no harm even if an operation has to be undertaken eventually.

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Connor states that by placing fish in the water tanks, cisterns, barrels, etc., at Guayaquil, 30,000 of the water receptacles were freed from the larvae of mosquitoes in a very short time and with very little expense. The stegomyia might be called almost a domestic mosquito, he says, as it breeds in or near human dwellings, scarcely ever in marshes. Experiments with top minnows showed that they eat the larvae only when the water is free from organic matter, which they prefer to the larvae. A kind of sardine, known locally as the (chata,) feeds voraciously on the larvae, and it stands transportation well. It has the further advantage that it keeps close to the surface of the water except when frightened. This fish is not found very numerous, so the choice finally fell on the 'chalaco' as the most satisfactory for small receptacles of water. These fishes have been costing half a centavo apiece, but the fish hatcheries now under way will soon provide them in abundance. The fish brought in are placed in a well the conditions of which are like those in the streams from which they were taken. After a few days they are transferred to a second wall of the city water, and no further food is given them. Each inspector is then given the number of fish required for the tanks, etc., in his district, and one or more of the fishes is placed in each one, regardless of the presence or absence of larvae in the water at the time. The press and the sanitary inspectors have educated the public to protect the fish, and many families still have the same she that was given them about eighteen months ago when the antimosquito campaign was begun. The value of the 'chalaco' is evident from the fact that the stegomyias have been reduced to less than 2 per cent, which presages the approaching extinction of this species.

## Sanitation.

By MOHAN LALL.

It is a matter of principle that no branch of science can ever begin to show signs of progress in the world unless its theories, real significance and advantages are very profusely explained among the general masses of the people and the latter, too, in their turn, feel its attainment as essential and indispensable as pure air is necessary for life. Moreover, a demand for rise and progress can only arise where there is a knowledge of better things and where the means to accomplish them are within the limits of practical form. For example, a man, ambitious to enjoy the gifts of good health, must at first know the hygienic rules and then try to abide by them.

It is the opinion of a famous Sanitary savant that "Sanitary instruction is even more important than social legislation." The real essence and the beauty of the phrase would be better understood and revealed if the amount in the development of Public Health Department in the development of Public Health be explained and analysed in the following comprehensive but simple language. In view of the narrow space in the paper, I do not enter into a lengthy discussion but briefly narrate the duties of the Public Health Department in the cause of Public Welfare. On the one hand the science of Public Health follows a person from the time one is conceived in the mother's womb and after birth, through the various vicissitudes in one's life, down to one's final resting place in the grave; on the other hand it also deals with the place of abode which the city or village, in its relationship with conditions that may likely affect one's health. Here one feels the supremacy of the training of this science over that of all others as this only makes a person capable to learn other branches of science and at the same time it is struck to one's mind how far the above axiom is correct and commands a strong plea for the Health education among the general masses.

Now the point is that on what lines the propaganda of health education should be started. There is no doubt that the elements of personal and civic hygiene must be taught in simple and clear language in schools and colleges, but at the same time there must be some arrangement to train the general public as well. As far as I think the latter part of the duty should be entrusted to the members of the sanitary department, especially the Sanitary Inspectors, as they have comparatively a closer daily contact with public than any other higher official. They should so profusely and clearly preach the main principles of the civic hygiene that they may be able to organise a strong body of public opinion who would discriminate between what is necessary and what is extravagant for the development of public health. It is most incumbent upon the members of the sanitary depart-

ment that they should do their best to cooperate with the public if they really mean to justify their appointments and prove their profession successful. There is no doubt that in some cases the health official has had to combat "educated ignorance" side by side with ignorance of the illiterate and he has also found the former variety the more baffling and hopelessly incurable. Every one having a municipal experience, is fully aware of the fact that there is still present much friction in the dealings of the municipalities, District Boards and the public, which is mainly due to want of proper education and which would most probably be extirpated if the public be equipped to understand the intentions and methods of officials who not only occupy an unenviable position but are innocent furtherers of civic rights. The collision between an ignorant and a technical expert has made coercion a prominent feature in our municipalities and district boards. It must therefore be remembered that for this reason any delay in the progress of sanitation is due to causes for which the lapmen of the public are more responsible than the members of the public health department. Under such critical circumstances the health education propaganda by the Sanitary Inspectors, who have a closer relation with the public, would not only replace coercion by cooperation largely in course of time but their sincere and patient efforts would be crowned with success to justify their employments. The amount of educative work awaiting our best efforts is thus enormous hence we should patiently and persistently adopt such measures so as to gain the goal. But at the same time it must be noted that one should not feel disappointed if he does not see the long-established habits of the people being changed all of a sudden. It has been the experience of our renowned sanitary reformers that we can affect these renovations in a twinkling of an eye as Dr. K. A. Rahman, the learned Assistant Director of Public Health, Punjab, also explained in his presidential address at the informal meeting of Sanitary Inspectors' Conference, held at Ludhiana on 15. 4. 22; but in course of time a sanitary habit can be acquired even by the most orthodox, provided we proceed very patiently and cautiously to teach them. We must therefore be very cautious, cordial and patient in preaching the sanitary laws and rules of hygiene. Our progress will be watched and periodically examined by those who are competent to judge and our responsibilities and powers will be modified or enhanced in the light of our proved capacities.

In the end I appeal to the hearts of both my fellow members of the Sanitary department and the public to co-operate mutually so that the health education propaganda may be efficiently carried on.

*Health and Happiness.*

### Lawn-Tennis Leg.

In the midst of a tennis game, a player suddenly stops short on feeling a sharp pain in the calf or farther down on the leg, Kuttner states. A muscle or a tendon (the Achilles tendon) has been torn. Usually the player is able to limp off the court, but sometimes has to be carried off. A roentgenogram will confirm the usually certain diagnosis, and will reveal the details in regard to site and extent of the laceration, as the tendon casts a distinct shadow on the roengen plate. The roentgenogram is also useful in following the healing process in the tendon or muscle. Formerly such injuries were treated with splints or plaster bandages or even surgical therapy, with operative exposure of the injury and suture. The results were not good, or at least, recovery was delayed, as is shown by Dr. Fane's own experience, since it was nineteen months before he could walk without embarrassment. The only correct treatment is that which lays stress on the rapid restoration of function, does not confine the patient to bed, and induces him to begin walking at once. In mild cases, with a partial rupture of a muscle, this causes no difficulty. With the aid of a cane, the patient should at once make an attempt to walk, which will be painful at first, but after two or three days it will be easier, and after a week a normal gait can usually be reached. In the mild cases, bandages are unnecessary and massage is superfluous. For nervous patients, if the pain is severe, a bandage may be used. For three or four weeks, all violent exercise, including tennis should be avoided; especially in older persons, as the lacerated muscle or tendon will otherwise break down again. Even in severe cases—total rupture of the Achilles tendon—walking should be begun at once, but here, since the pain is great and the foot is weak, the treatment introduced by Hood in England should be instituted. The patient reclines on a sofa and the injured leg is kept in an elevated position. This suffices to check the hemorrhage, to bring down the swelling and ease the tension. The patient is admonished to walk more and more each day. In the severe cases the bandages may be renewed until the patient feels that he can dispense with them. The prognosis is excellent even when the Achilles tendon is severed, but partial rupture of the muscle heals much more rapidly, though pains in the muscle may be left for several months.—*Deutsche medizinische Wochenschrift, Berlin.*

### Dermatitis from Dyed Furs.

In the course of 2 months Dr. Rasch has seen 9 cases of inflammation of the face and neck, the cause of which was at first obscure. Gradually he came to the conclusion that foreign dyed furs were responsible. All the patients were women, aged between 24 and 47, and the relapsing dermatitis extended in the worst cases from the nape of the neck to the lower part of the face and chin. In 2 cases the lobes of the ears were also affected, and in another 2 cases the constantly recurrent itching-erythema was confined to the chin. The appearance of the dermatitis varied considerably; in some cases it was erythematous, in others eczematous or lichenoid. One patient was much distressed by a vesicular erythema with swelling of the lips. In another case there was swelling with itching of the eyelids in addition to the rash on neck. In

most cases there was very troublesome itching, with a sensation of burning and pain. In a couple of cases it was stated that the rash was most severe on the day after the patients had spent much time out of doors. In every case a few weeks or months before the outbreak a new coat had been bought and all were trimmed with the same kind of brown fur. This was probably rabbit's fur dyed so as to imitate beaver, and known by the trade name of "biberette." In the German fur industry paraphenylenediamin or "ursol" has been used for many years to dye furs brown. Prof. Blaschko pointed out as far back as 1913 that this substance is highly irritating to the skin. Some patients suffered most from the rash on the day after they had been out in the cold for a long time, which suggests that they had turned their fur collars up, and had become wet from rain or snow. Such wetting would doubtless facilitate the action of the dyed fur on the skin. In every case the rash disappeared within 5 to 14 days of discarding the furs. The treatment was of the ordinary conservative character: hot water compresses, powders and a zinc lotion or paste were prescribed.—*Clinical Journal.*

### The New German Venereal Disease Law.

For some years the German Anti-Venereal Disease Society (D. G. B. G.) has been agitating for a new and comprehensive anti-venereal disease law which should give expression to the authorities. The draft of the new law has been under discussion for sometime, and its passage through the Reichstag has not proved uneventful. It has however, survived its critics, and it promises to become an effective weapon against persons who have hitherto been able to disseminate venereal disease with comparative impunity. The new law provides for as much as three years imprisonment for the offender who propagates venereal disease, knowing or suspecting that he or she is in an infectious state. Another important clause deals with continuity of treatment. This is to be free to all who cannot afford to pay, but the benefit of free treatment carries with it the obligation to submit to it as long as the medical authorities consider necessary. The corresponding English Society, the N. C. C. V. D., is agitating for the provision of continuous treatment. Its hands will be strengthened by the fact that this has been made compulsory in Germany. It would be difficult to overrate the importance of this measure, as the failure of specific treatment when they, but not their medical attendants, were satisfied that complete recovery had been effected. The German law also provides penalties for the exposure of persons to infection; is put out to nurse by persons who conceal this fact, or if its guardians allow a syphilitic infant to be suckled by a healthy wet-nurse, concealing the nature of the infant's disease, penalties may be inflicted. Provision is also made for wet nurses

to hold health certificates, and for their employers to insist on the examination of such certificates. Much harm has been done in Germany by unqualified practitioners who profess to cure venereal disease. The new law provides penalties both for the quack and for the medical practitioner who undertakes treatment by correspondence. Other clauses provide for the control of offensive and misleading advertisements. A striking feature of the new law are the obligations imposed on the doctor who undertakes to cure venereal diseases. He must give each patient full instructions about the nature of the disease and how to prevent its further spread. In the case of patients under age, such instruction must be given to the patient's parents or guardians. The doctor must also give the patient a resume of the new law and explain its penalties. Thus, though the competition with the quack promises to be eliminated; the duties and responsibilities of the medical practitioner are considerably increased.—*Hos. & Health Rev.*

In the matter of prognosis in Diabetes Mellitus before treatment is begun a valuable index of the gravity of the disease, Lyon states, is the degree and rapidity of body-wasting that has taken place. For practical purposes the best guide to the severity of the condition is the total amount of glucose lost each day in the urine, but this sign, like nearly all others, fails to distinguish between temporary and permanent damage. Laboratory tests show that in cases of diabetes a degree of hyperglycemia may still be present even when sugar no longer appears in the urine. Mere estimations of the gravity of the disease when the patient is first seen give no sure guide to the future, since some cases, apparently severe, do much better than others whose signs are less marked. It is therefore recommended that no definite prognosis be given until the character of the patient's response to treatment has been studied.

As regards the influence of fatigue on health the data presented by Vernon appear to indicate that in men of good physique the fatigue of heavy works has, as a rule, but little direct effect in sickness and longevity. It is probable that the excessively exhausting work of the steel melters forms an exception to this dictum, but it seems highly probable that the heavy work of the iron puddlers, of the tinsplate mill men, and of the rolling mill men has no injurious effect on health except indirectly, when it induces the men to sit about in damp clothes. The men may be working nearly to the limit of their strength, but the mere fact that they have to continue on the same class of work week after week and year after year must deter them from overstraining themselves, unless they do it unwittingly.

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