Vol. XII. No. 5. Estd. Jan. 1923 May 1934.

Health

A Journal Devoted to Healthful Living

Edited By Dr. U. Rama Rau & U. Krishna Rau, M.B.B.S.

Published in

ENGLISH, TAMIL, TELUGU AND CANARESE.

Annual Subscription for any edition Rs. 1-8. Foreign Rs. 2. Post paid.

Editorial and Publishing Offices :—323, Thambu Chetty Street, George Town, Madras.

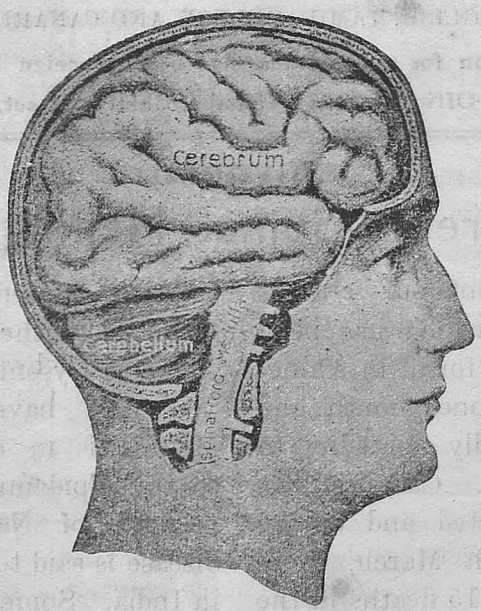
EDITORIAL

Cerebro-Spinal Meningitis

We have to acquaint our readers with this new disease which has been raging in an epidemic form in Ahmedabad for the past one month and more and is now rapidly spreading to other parts of India. Calcutta has already become infected and during the week ending 24th March, there were 19 attacks and 15 deaths in the city and 1 attack and 1 death in the suburbs. Stray cases have also occurred in Bangalore, Bezwada and other places. Quite recently in Madras, one case has been discovered in a patient in Maternity Hospital and immediately transferred to the Corporation Infectious Diseases Hospital in Tondiarpet. This disease is a new addition to the already growing list of infectious diseases in India. At the commencement of the 20th century, India knew only three great scourges, Cholera, Small-pox and Plague. Latterly it acquired a good number, of which Influenza, Dengue Fever, Enteric Fever, Diphtheria, Tuberculosis and Amoebic Dysentery may be mentioned. We now have the Cerebro-Spinal Meningitis in our midst. According to the Epidemiological Report of the League of Nations, Geneva, this disease is said to be comparatively rare in India. Some parts of this peninsula however are affected, the disease being endemic in some parts of Bengal, endemo—sporadic in Burma, Sind and Punjab, sporadic in the Indo-Gangetic plain and the Madras Presidency. The origin of the present outbreak in Ahmedabad is traced to Sind. The United Provinces, Central Provinces, Behar and Orissa and Burma have been practically immune for this disease. In Europe, Great Britain showed the highest death-rate during the period from January 1931 to March 1933.

Cerebro-Spinal meningitis, commonly

known as "brain fever," is an acute infectious disease and is caused by a micro-organism named Meningo-Coccus. This organism is present in the Cerebro-Spinal fluid and in the secretions of the Nose and Pharynx of the sufferers. There are two types of Meningo-Coccus, viz. Meningo-Coccus I which brings on the epidemic form and Meningo-Coccus II which is responsible for the endemo-sporadic attacks. Fever sets in suddenly with intense head-ache and persistent vomiting. This is followed by stiffness of the neck and delirium sets in early. Like Cholera, it belongs to that group of infectious diseases where fatality is more the rule than the exception and occurs within a very short time, unless the patient is removed immediately to the Hospital and given the best treatment. So, prevention should be aimed at here rather than cure.



Brain.

The first and foremost preventive measure is to avoid over-crowding. Over-crowding in cities and towns has been the curse of India and the precursor of many infectious diseases in this country. If you want to avoid being a victim to Meningitis, you must stop going to theatres and cinemas, fairs and festivals and other crowded congregations. You must stop sending your children to schools and the educational authorities would be well advised in closing schools and colleges in places which have been notified as epidemic areas. You must also avoid trams and buses and other public conveyances where the chances of infection are the greatest. Overcrowded houses must be deserted for the time being and the dwellers thereof must remove themselves to thinly peopled houses and localities. As coughing, sneezing and spitting distribute the contagion, you must take care not to cough, sneeze or spit in public places or in the presence of a number of people. You should see that others also act likewise. While sneezing or coughing, the nose and the mouth should be covered with a handkerchief. As the discharge from the nose and pharynx is the main channel of infection, you must use nasal douches and antiseptic gargles by way of protection. The immediate contacts, though healthy, are as much a danger to the public as the sufferers themselves, because they may happen to be the carriers of this disease. So, these contacts must submit themselves to segregation. One more duty that devolves on the people is to notify a suspected case which may come to their notice to the Health Authorities concerned, so that they may take immediate steps to arrest the spread of the disease. The Public Health

Commissioner with the Government of India in his report for the year 1931, observed that 'this disease is undoubtedly much more prevalent than was originally suspected and its incidence may increase' and his prophecy has come true.

Margosa Oil as a Preventive against Puerperal Sepsis

By

WALTER S. J. PEIRIS, M. R. C. S. (ENGLAND) L. R. C. P. (LONDON)
Moratuwa, Ceylon.

PUERPERAL Sepsis or Child-bed Fever is one of the most prolific causes of death in connection with Maternity and any measure that will help to minimise this preventable loss of life following pregnancy—a normal physiological process and not a disease—must naturally prove a boon to humanity. Inhabitants in all countries can be divided into three groups—the rich or well-to-do, those of moderate means and the poor or the masses. Those of the first category living under the most favourable conditions of sanitation and hygiene and receiving as they do the best of medical and nursing attention suffer very little loss of life. The second group which enjoy less privileges and opportunities suffer more, whilst the third group living under the most deplorable conditions of sanitation and hygiene in the midst of poverty, ignorance and quackery pay a very heavy toll in maternity lives. Although wealth, education, sanitation and hygiene have proved to be factors conducive to a reduced maternity mortality rate, the occurrence of a large number of deaths from puerperal sepsis in England and Wales whose standard of sanitation, obstetric practice and maternity service is very high would indicate that, if the mortality figures in connection with maternity are to be lowered, something more is needed.

In England and Wales the highest maternity mortality rates are met with in the most rural and sparsely populated areas or in industrial and mining districts, where medical assistance is not available in time to deal with an obstetric emergency, where the houses are scattered and difficult of access, population sparse and means of communication difficult.

In Ceylon the rate is highest in the urban area which is well served by hospital facilities, specialised and otherwise skilled assistance, including the services of qualified midwives often available free of charge, thanks to various Municipal and District Councils, and Local and Sanitary Boards.

The contribution of the rural area which is least supplied with skilled medical and hospital facilities is the lowest and even lower than the Island rate.

In England and Wales and in other countries deaths from sepsis is greatest in the rural area and least in the urban area where skilled assistance

and hospital facilities are available. Why there should be a reversal of results in this country demands an explanation and awaits a solution. There ought to be some very formidable reason to account for this difference between the two countries.

These comparative statistics suggest that either the measures for controlling puerperal sepsis in England and Wales are less effective or that the conditions under which women in Ceylon give birth are more favourable. The former can at once be dismissed as impossible since the facilities afforded by Prenatal Clinics, Maternity Homes and Hospitals, free Midwives &c., in Ceylon, are not even a 1000th part of what they are in England and Wales. The latter reason, too, is out of the question since the sanitary conditions, the financial stability, general intelligence, the nature of the assistance at the confinements &c., are all very much inferior in the case of Ceylon where the majority of women are delivered in most insanitary surroundings under the most deplorable conditions of poverty, ignorance and quackery. The wonder is not that so many women in Ceylon die of puerperal sepsis but that many more do not die from it.

It might be suggested that the more favourable record of the rural areas in Ceylon is due in part to incorrect certification of the cause of death in the rural areas where the Registrars of Deaths are non-medical men and in part to the tendency of mothers in rural areas to seek Hospital Aid. Puerperal sepsis or childbed fever is a term that is well and thoroughly understood in the rural areas and whatever incorrect certification there may occur in respect of cases such as embolism &c., a case of puerperal sepsis will never be reported as otherwise. If anything at all, cases that are not due to puerperal sepsis may be reported as such. The number of complicated cases transferred to town hospitals are so small as to be able to influence the rates appreciably. Even after making due allowance for this unfairness the urban rate is far too high considering the greater hospital, specialised and other medical facilities available in the urban area. This excessive urban rate is not an accident since it is a recurrent feature.

The reason then why the figures in Ceylon for the rural area are the lowest, is because women give birth without any added risk of infection from internal examinations and particularly to the use of margosa oil as a Uterine antiseptic.

Chemical composition.—Margosa oil is obtained from the seeds of Melia Azadirachta Synonym A. Indica by extraction with pressure. The expressed oil of the seeds is of a pale yellow colour; it has a garlic like odour and a bitter taste. The oil is contained in the seeds to the extent of about 10%. It is a fixed oil soluble in chloroform and ether but not in alcohol. Margosa or Neem Oil contains sulphur in organic combination in addition to margosic acid, glycerides of fatty acids, butyric acid, a trace of Valeric acid detected as volatile acid, a small quantity of eutray resin, two other acid resins and a small quantity of an alkaloidal substance.

Action.—The oil is stated to be antiseptic, antiparasitic, antiperiodic and febrifuge.

Uses.—Margosa oil, therefore, is used as a dressing for foul ulcers. It is a favourite application in tetanus, leprosy, erysepelas, skin diseases, etc.

In veterinary medicine it is used for mange in dogs and in cattle for hoof and mouth disease. It is a remarkable and noteworthy fact that the Ayurvedic classics, Sushruta Samhita and the Charakka Samhita make no mention of margosa oil in connection with Puerperal disease.

I believe that the use of margosa oil does not come within the range of Ayurvedic teaching and it belongs to the Siddha or Unani system. Margosa oil is an indispensable article in the lying-in rooms of Ceylonese women-at least of the Sinhalese and Tamils of the poorer classes. It is a common practice to give a mother half an ounce of this oil with the addition of about half an ounce of each of the juice garlic (Allium Sativum) and fresh ginger (Zingiber Officianalis) soon after the expulsion of the placenta or afterbirth and the oil is applied to the parts. The rationale of this treatment is as follows:—

The external application of the oil to the parts is supposed to heal the wounds and the abrasions by virtue of its antiseptic properties and prevent infection arising therefrom. Both margosa oil and garlic are used because of their internal antiseptic properties with a view to render the uterus or womb aseptic if possible or in the alternative to disinfect it.

Ginger is used to whip up the circulation and increase the warmth of the body with a view to prevent chills and collapse and also secondarily to increase the circulation in order to promote lochial discharge. Garlic which is a reputed emmenagogue is also expected to increase the flow of the discharge. Further for a period of about 30 days the lying-in chamber is fumigated with this oil twice daily for the purpose of disinfection. Considering the utter want of cleanliness on the part of quack midwives and friendly neighbours who assist at village confinements the comparatively small number of cases of puerperal sepsis can be accounted for only in this way.

In the case of cramps, shivering fits and convulsions following childbirth margosa oil is rubbed all over the body and the body is warmed by means of hot fomentations, very often with hands warmed over a fire of live coals. In some instances the oil previously warmed is applied and then the body is fomented. Further the ears are plugged with rags soaked in warm margosa oil both as a routine practice to prevent chillness being reflexly induced by cold air beating against the ear drums and in case of chillness following delivery as a cure for the trouble. All decoctions given for diseases or disorders arising as complications of childbirth contain either the bark of the margosa tree or margosa oil and all pills, *Kalka*, *Churna* and whatever preparation is used-are given in the medium of margosa oil.

Lastly for about a month after childbirth the vagina is fumigated by burning margosa oil. It is believed that the denuded placenta site in the uterus or womb is thus rendered aseptic or is at least disinfected and encouraged to re-generate very quickly. This procedure is further credited with aiding not only the involution of the uterus

or the return of the womb to its pre-pregnant size but also of the vagina thereby preventing displacements of the uterus or womb particularly prolapsus uteri or "dropped womb".

I feel thoroughly convinced that experience has established a very good prima facie case in support of the use of margosa oil as a uterine antiseptic in obstetric practice. Scientific men like medical men no doubt would demand scientific proof of the beneficial effects of margosa oil before they can make up their minds to use this drug. After all is said and done there are so many drugs we use empirically. Rational treatment is very often evolved from empirical use. May I, therefore, appeal to my medical brethren in India especially those who have special facilities to put the use of margosa oil in connection with childbirth to a searching and scientific test to give it a fair trial since if the claims of margosa oil are established it will prove a boon not only to us but also a benefit to humanity all the world over. The only drawback to universal use of margosa oil, as far as I can see, is its disagreeable smell. This can, I believe, be overcome by using margosa oil that has been deodorised. The Calcutta Chemical Co., Ltd., has patented a special process for this purpose and I believe they supply margosa oil minus the smell.

Overcrowded Slums

By

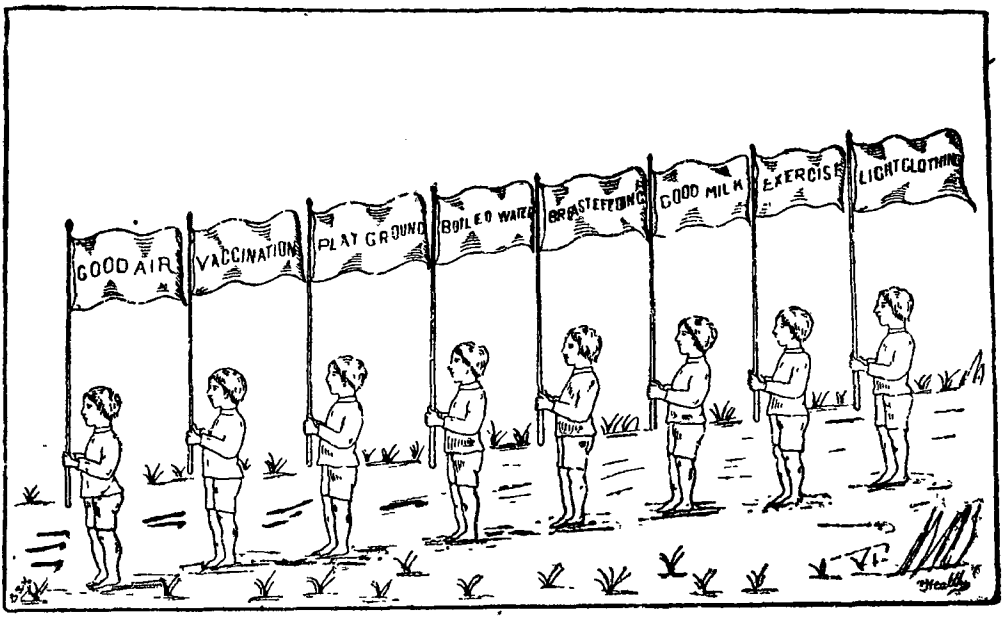
DR. SORAB C. HORMUSJEE, M.D., P.H., L.R.C.P., M.R.C.S.,
Bombay.

THE breathing of fresh air is as essential for the maintenance of health and life, as the drinking of pure water and the eating of good food. Everyone knows that while starvation kills human beings after some days, deprivation of air proves fatal in a few minutes. Impurity of air, and the absence of sunshine, which are common features of overcrowded slum areas, are known to be the most important of the causes of death and disease. Fresh air and sunshine are gifts given by the Great Architect of the Universe to His creatures, but, owing to the existence of slum or congested areas in all Indian towns, this priceless gift is not enjoyed by the large mass of the poor people of this country.

Evidently, sanitarians in India were not sufficiently impressed with the importance of proper regulations for streets and houses. Hence every old town and city in this country, presents examples of narrow streets, winding lanes, close aggregation of buildings forming an insanitary area, which cannot be efficiently cleansed, and in which the air remains almost always stagnant. Persons living in such congested or slum areas, have a low vitality and a predisposition to various diseases, particularly those of the chest, and owing to the ease with which contagion or infection can pass from the

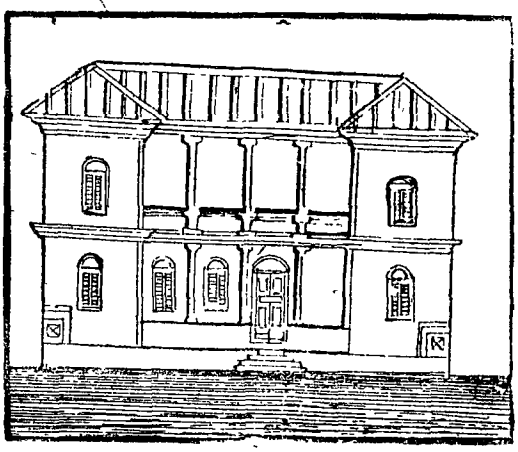
sick to the healthy in such localities, various infectious diseases, such as small-pox, relapsing fever, measles, influenza, and cerebro-spinal meningitis, are more prevalent than in open localities. The air of such places is and the amount of open space to secure a free circulation of air for each of them.

Such slum or unhealthy areas can sometimes be rendered habitable, by clearing out a portion of the interior



What the children of slum areas urgently need, to preserve their strength and vitality.

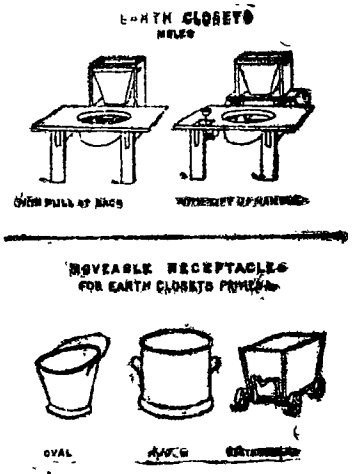
particularly injurious to infants and children, and furnishes one of the causes of high infantile mortality in Indian cities. It is therefore very necessary that in existing towns, and also when it is intended to build a new town, provision should be made to lay out the streets on a definite plan, and when so laid out, the houses erected in it, should be subject to regulations as regards their height, depth, site, the area they occupy, their relation to one another,



A Sanitary dwelling.

of the blocks, and providing open spaces behind the houses, with back-lanes for drainage and scavenging purposes. It is also a good plan to reduce the depth of houses, by demolishing the central rooms and providing instead, an interior open space whose width in one dimension should be half the height of the building. A third plan is to demolish every alternate house in a long street, so as to widen the area of open space left between two neigh-

bouring houses. But if these alternations are found to be insufficient or impracticable, the only remedy lies in complete demolition of the area, and re-building it on sanitary lines. This last mentioned scheme is bound to prove very costly, but any money spent



Scavenging arrangements in slum areas

for the health and well-being of the masses, should always be regarded as well-spent.

Many people seem to be under the impression that if a town has a pure water-supply and efficient drianage, its good health is assured. Water-supply and drianage have undoubtedly a very great value, but much of the failure of such sanitary measures in India is due to the carelessness and indifference displayed in regard to adequate regulations for streets and buildings, which have encouraged the existence of insanitary and overcrowded slums. Such slums are not uncommon in European countries, but they are more common in India, and their evil effects are more pronounced here, on account of the climate and the age-long insanitary habits of our poor and uneducated people.

The slum problem is being vigorously tackled in England at the present moment. A few days ago, it is learnt, the British Government issued a White Paper outlining an ambitious scheme of slum clearance, by which they hope that the slum problem in Britain will disappear in five years. It is proposed to demolish over 250,000 houses and build nearly 300,000 new houses to replace them, by which 1,250,000 persons will be removed from slums and re-housed in up-to-date premises. The capital cost of this scheme will amount to £. 115,000,000 over five years, the exchequer contribution beginning at £. 600,000; rising to over £. 3,000,000, and continuing for a period of forty years. The local authorities will also be contributing, beginning with £. 250,000 annually and rising over £. 1,000,000 for forty years. The Chancellor of the Exchequer, Mr. Neville Chamberlain also very recently announced the intention of Government to launch a big new housing scheme for the very poorest people on the Tyneside at Newcastle. England is a rich country and can well afford to inaugurate such ambitious schemes for the amelioration of the condition of its poor. Unfortunately India is comparatively a very poor country, but still it behoves the Indian Government to copy the example of the British Government, by finding the necessary money for eradicating the slums wherever they may exist in this vast country. In fact more money should be spent on Public Health measures than is being done now and greater attention should be paid by municipalities to the sanitary housing of the poor, with the help of Government.

Social Reform Essential for the Prevention of Tuberculosis

By

RAO BAHADUR M KESAVA PAI, M.D., O.B.E.,

Director, Tuberculosis Institute, Madras.

In a previous lecture the deleterious effect of early marriage on the incidence of tuberculosis in this country was explained and the important part that the Sarda Act will play in the public health of the coming generation was outlined. Under the present conditions of poverty existing in the country early marriages, early and frequent motherhood with large and unwieldy families and limited incomes could only end in malnutrition and disease especially tuberculosis which is pre-eminently a disease resulting from insufficient and ill-balanced nutrition.

Amongst the important social evils leading to ill-health and tuberculosis in India is the purdah system prevalent amongst many sects and communities in the country. Whatever the justification may have been for this custom in the old days, there seems to be none whatsoever now, when education and culture are progressing fast and women are rightly demanding the political, social, legal and other rights and privileges that hitherto belonged to men alone in this country. The purdah system is an evil in several directions. It not only deprives the female of the social freedom and amenities enjoyed by men, but, in its true conservative form, it enjoins the high walls and closed windows barring both sunshine and pure air and the "burga" cloth which makes the woman breathe the polluted air over and over again and restricts her bodily movements. Besides these physical disabilities the purdah further involves other restrictions which narrow the mental and intellectual outlook of the women. Education can make little progress in the socially restricted atmosphere of the purdah and the physical and intellectual progress of the community as a whole with ignorant and unhealthy mothers can be anything but satisfactory. It has been ascertained that the mortality from tuberculosis amongst young purdah women between 15 and 35 years is three times greater than amongst the men of the same age. To add to the curse of the high mortality due to the above causes there is the further menace of gross house infection resulting from the larger number of open cases of consumption that must of necessity die within closed, dark and dingy rooms, undiagnosed and untreated, with no precautions taken regarding disinfection, as no social worker, physician or health officer has access to the unfortunate victims. In fact the disinfecting power of fresh air and sunlight cannot play its part in the room of the purdanashin, which will remain as a reservoir of active infection for weeks and months, clouds of tubercle bacilli laden dust being time

* Being the Radio lecture No. 11 delivered last year and specially sent to Health for publication.

after time raised in the air during the sweeping operations, infecting all the inmates, especially the young children and the crawling babies. The experience of out-patients departments of hospitals in this country bear ample testimony to this unfortunate fact by the large number of purdah females and their young children attending as out-patients for different types of tuberculosis in their various stages, especially the advanced and highly infective stages. The sooner the purdah is thrown away in this country the better the national health and material prosperity of the country will be as a whole.

There is yet another social evil which directly and indirectly accounts for the high mortality from infectious diseases. That is the joint family system. In spite of the spread of education and the introduction of western ideals it is not uncommon especially in the villages to find old ill-constructed houses occupied by large joint families. The evils of the joint family system become evident during epidemics and during the recent influenza epidemic such joint family houses had to bear the brunt of the mortality in different parts of the country. The joint family necessarily involves insufficient individual attention to the large number of inmates and difficulties of segregation and disinfection. Such joint family houses are the 'nets' of consumption especially amongst the poorer classes, where, with careful health visiting, it can be proved that the majority of the children and a large number of adults exhibit signs of active tuberculous infection.

Spitting, which is such a promiscuous vice in this country has been put down as a fertile cause of tuberculous infection. There can be no doubt that this is so and though the tropical sun may effectively destroy the bacilli in the sputum discharged in open spaces, there is even here the great risk of the bacilli working their mischief before they are actually killed by the sunlight. The danger of infection within the houses especially of the dark, ill-ventilated type, where sunlight and fresh air do not obtain access, is evidently very great, judging from the mortality in the slums and congested quarters of the cities and towns.

To sum up, if early marriage can be put a stop to by law and social reform amongst the masses, if the purdah system be discarded by the progress of female education and evil and unhygienic habits like spitting be shaken off as a result of better enlightenment and culture, the spread of tuberculosis can to a great extent be controlled especially if economic conditions improve side by side with the social.

Disease is from of eld and nothing about it has changed. It is we who change as we learn to recognize what was formerly imperceptible.—Charcot.—American Medicine.

The Science of Diet

Our human body is composed of *Oxygen, Hydrogen, Carbon* — which contains fat, *Nitrogen* as a basis for muscles and other solid tissues, *Phosphorus* which is the most important mineral element and a source of great vitality, *Calcium*—for bones, *Fluorine, Sulphur, Chlorine, Sodium, Potassium, Iron Magnesium, Silicon*—which is found in nails, hairs and teeth. Now all the above fourteen elements should be supplied to the body by means of the air we breathe through our nose and skin, the food we eat, and the water we drink.

Good Health depends principally on the right quantity and selection of the food we take. As a rule the animals and birds select their foods according to their natural instincts and requirements. For instance if a piece of meat is given to cow she will leave it aside after smelling it. But in the case of man, who is admitted to be the God's greatest creation and masterpiece, we find that he is transgressing the laws of Nature at every step. The result is most miserable and prevalence of all kinds of diseases is enormously on the increase every day.

Nuts, dried fruits and fresh fruits, all kinds of fresh vegetables, fresh milk, cereals especially the whole meal bread are the best food for human consumption. They supply all the essential elements in right proportion required for the normal development of all the faculties of man both mental and physical. Of course there will be a difference of quality and quantity according to the individual requirements

With the help of right natural food alone we have been able to cure even the worst hopeless cases, that had defied all the skill of the medical Science.

For a growing young man the best food should contain plenty of fruits, raw vegetables, bread made with unbolted wheat, *i. e.*, (out of which Bran has not been taken off) mixed with milk or butter-milk or cheese—all of them abound in muscle and brain feeding materials.

The childern should never be given bread made up of fine flour, candy (except that which we find in fruits) and other stimulants such as tea, coffee, vinegar, tobacco, peppers, pickles and masalas and hot sauces, which are to a great extent the cause of sending lot of children to premature graves.

The above stimulating foods when indulged in by the children of tender ages tempt them to fall into bad habits thereby shattering all the future hopes of the youngmen to attain to a perfectly well developed body.

For the general information which I am sure, will prove to be of great interest and benefit to every one who cares even a bit for his or her health, I am giving the names of the different foods specially indicated in certain ailments and diseases of the human body.

Curative Foods in Specific Ailments.

AILMENTS	CURATIVE FOODS
Acid Stomach	... Apple, orange, lemons.
Asthama	... Fig, honey, orange, Malabar nut.
Blood poverty of	... Apple, banana, quince, spinach.
Blood-vomiting	... Flat bean, loquat, pomegranate, purslane, spinach, water chestnut.
Boils	... Celery, green figs, honey,

AILMENTS	CURATIVE FOODS
Cancer	... Celery, cinnamon, garlic, onion.
Chest complaints	... Almond, fig, garlic, mulberry, onion, orange.
Chilblain, kibe	.. Garlic, lemon, onion, turnip.
Cholera	... Camphor, coffee, lemon, onion.
Cold, coryza	... Black grapes, fig, mulberry, sebestian, plum, turnip.
Constipation	... Almond oil, butter, castor oil, hot water, olive oil, rose.
Consumption	... Cabbage, caraway, carrot, cinnamon, dates, garlic, grapes, honey, orange.
Cough	... Black grapes, figs, mulberry, sebestain, plum, turnip.
Diarrhoea	.. Aniseed, apple, cardamom, coffee, raspberry, rice.
Dysmenorrhoea	... Cardamom, cocoanut dodder, guava, mango, quince.
Eczema	... Carrot, lemon, walnut.
Epilepsy	.. Apple, celery, figs, pumpkin, syrian Rue.
Fainting	... Apple, asafoetida, fig, mint, pomela, sour pomegranate.
Fever ordinary	... Apple, barley water, grapes, lemon sweet pomegranate.
Gout	.. Apple, carrot.
Headache	... Apple, cinnamon, coriander, grapes, orange, pineapple.
Indigestion	... Aniseed, apple, cheese (salted), lemon, orange, omum seed.
Inflammation of eye	... Apple.
Influenza	... Cinnamon, garlic, orange, hot water.
Intestinal Tuberculosis	... Carrot, garlic.
Itch, general	... Plantain.
Kidney disorder	... Apple, banana, beet, castor oil, celery, flat bean, garlic, orange, pomegranate, spinach.
Liver weakness	... Apple, banana, carrot, cheese, endive, grapes, lemon, spinach, tomato,
Lung diseases	... Apple, cabbage, carrot honey, quince.
Malaria	... Grape, lemon, orange, pomegranate.
Melancholia, hysterics	... Apple, custard apple, lemon, orange, phalsa, pineapple, pomegranate, pomela.
Palpitation of heart	... Amla apple, lemon, pineapple, pomegranate, pumpkin.
Piles	... Apricot, bajra, carrot, Isapgul. Nim, rice, spinach, white gourd.
Pimples or freckles	... Lemon.
Pneumonia	... Cinnamon, honey, tulsi.
Quinsy	... Garlic, lemon, Mulberry, pineapple.
Rickets	... Almond, butter, gram, milk, potato, walnut, wheat, sunbath.
Skin ailments	.. Garlic, gram, lemon, onion, orange, tomato.
Small-pox	.. Celery, lettuce, grapes.
Sore-throat	... Garlic, honey, mulberry, onion, radish.
Sore-wind	... Lemon, orange, raspberry
Sprain	... Banana.
Stomach-ache	... Aniseed, gur, horse radish lemon, omum, seeds, onion.
Stone-in-bladder	.. Apple, bitter almond, cardamom, honey, olive oil, pomegranate. (quince spinach, tulashi.)
Tuberculosis	... Apple, butter, carrot, fig, grapes, honey, mango milk, orange, poppy, seeds.
Weakness of brain	.. Apple, banana, grapes, pineapple, pumpkin, sweet pomegranate.
Weakness of general body	Apple, banana, barley, carrot, gingely, pears, spinach.
Weakness of intestines	... Aniseed, apple, lemon, orange, pineapple, quince
Weakness sexual	... Apple, spinach.

—*The Herald of Health.*

The Age-Long Malady of Speech

By

"T. M. K." (K. M. Talageri), Sagar

Stammering? Why, stammerers existed even before the birth of Christ. Moses was a stammerer, and so was Demosthenes, the Greek orator of repute. So, this is an age-long malady of speech.

What is the cause of stammering? It is like this: Look at a person who is learning to drive an auto-mobile. He is too conscious of the mechanism and that leads him into trouble. Such is the stammerer's state. "An over-active brain, in many cases," says Carl Winkler. The stammerer stammers because he has an unusually quick brain. The victim thinks faster than he can talk and so the confusion results. "The active brain," says Winkler, "is so far ahead in thought, the speech processes cannot keep pace with the mental impulses. Therefore, the forming of mental impulses through the speech processes in a manner too rapid for the speech equipment to receive them causes a mental confusion; the mental confusion causes a mental blockade, and the stammer begins." Stammering and stuttering are real afflictions. And he alone who is a stammerer knows the mental anguish caused by this impediment.

The average stammerer is very intelligent, according to Mr. Winkler. Stupid persons rarely stammer. It is usually the unusually intelligent child that stutters. And the adult who stammers is a bright person, nine times out of ten, and the average, Mr. Winkler thinks, is better than that. So much so, when you deal with the stammerers or stutterers, you are up against some real brains. It is gross fallacy to consider a person with a speech defect to be a "dumb bell". If he were dumb, he would not stammer.

So, we see that stammering and stuttering are mental defects which can develop some complexes. There is the "inferiority complex" (the most prevalent), the "mother-and-father complex" and the "teacher-and-playmate complex." Usually, the speech defective person is self-conscious, sensitive, impressionable, bashful, and nervous.

There are many theories regarding the remedy of this defect. Some have mechanical devices for the mouth, like pebbles etc., some stammering schools teach mind distraction. But Carl Winkler declares that they can be cured only through mental re-education. To quote him further, "When a person learns to drive a car, he must first make conscious effort to learn its mechanism. He becomes conscious of the starter, the clutch, the brakes, and other parts. Later, the operations become automatic, and he does not think of them.

"The stammerer learned incorrectly to operate his voice, and his mental hazards began. He stuttered on words beginning with B, P, L, M, T, and S. He believed that these sounds were impossible to produce. No one showed him how to produce them and pro-

nounce them, and so, he stumbled on.

To correct this, Mr. Winkler believes, the process must be reversed. Each defect must be analysed and the stammerer shown how to make the correction for himself. He wants to know why his lungs lock, if that is the trouble, or why his throat becomes constricted, the tongue stiff and the lips adhesive. He wants to know, conclusively, why these happen and the method of correction. He must have no doubts in his mind; otherwise there will never be a correction of his speech defect.—*The Journal of Ayurveda.*

Ancient Religions Forbade the Eating of Animals

The first laws of which people have remembrance, religious laws, which have ruled the first centres of civilization, prescribed to man a diet exclusively vegetarian. The sages, who have left to us the Vedas and their innumerable commentaries, where are found in germ all of the ancient and modern philosophical systems, have not been without seeing the effects of the daily food on the character and health of man. They have had need to forbid him the flesh of animals. The soul being passed through the body of beasts, it was sacrilege to put an end to their existence. When people were divided into castes, the priests and savants were put in the first place—the Brahmans; but in conceding all advantages to them, they required of them both a more severe diet and purer morals. Those that came from the mouth of Brahma became the example.

In the Code of Manu is found, probably written a thousand years before Jesus Christ, this wise counsel: "He who conforms himself to the rule and does not eat meat as a vampire, wins the affection of everybody and is not afflicted with sickness."

These hygienic principles were always preserved, in spite of the multiple transformations to which the old Vedic religion submitted them. The Jains sect which developed them rendered them more severe. When the great Buddhist movement was produced, when the pious and gentle Chakyamuni, escorted by his beggar brothers, traversed India, preaching the *new doctrine*—equality and fraternity between men, the old society was overthrown, but they scarcely touched these laws of hygiene. As in the past, flesh foods proscribed.

In like manner, the "son of the star," the sage, Lao-Tseu, the father of Chinese taoism, prescribed to his followers a frugal diet. Among his priests, the "men of the mountain" ate in their retreats herbs, roots and fruits.—Extract from *Good Health*, (U. S. A.)

Noise is Bad for Business and Health

Methods for Soundproofing the Home

By

HOMER KINGSLEY

SOUNDS, when uncontrolled and discordant, are labeled noise, and become an enemy of efficiency and health.

Manufacturers of modern equipment have turned their attention to the elimination of the noises caused by machinery.

Mechanisms that used to click and clatter or whirr and whine now do their work without advertising their presence so blatantly. Noise acts as a brake on business efficiency.

Unnecessary noises should be prevented. Laws are needed for the suppression of unnecessary noises. Scientific discovery has in recent years developed methods by which noises can be combated. It is found that certain substances absorb noises. It is now even possible to construct window ventilating boxes which will admit air while excluding noise.

A short time ago sound tests inside of a moving railroad car were recorded by Dr. William Braid White, consulting acoustical expert for Chicago's newly created noise-abatement commission. While the tests primarily concern transportation industries, the results have a far-reaching effect in principle applicable to business generally.

Dr. White studied car noises and discovered that the familiar plush covering of upholstered seats tends to absorb the high-pitched sounds which are of the type that cause the most annoyance.

Effect of Upholstery.—Using a microphone and other acoustical devices, he photographed the sound waves of cars travelling at speeds varying from ten to fortyfive miles an hour. As between various furnishings within the passenger cars, it was very evident from his findings that heavy cloth, such as velvet and plush, blotted out much sound that would otherwise echo and resound only to grate on nerves of passengers.

This finding of Dr. White is similar to the tests of Dr. Donald A. Laird, psychologist of Colgate University, who applied the results of his research for his own benefit; he placed various kinds of sound-absorbing materials about his rooms to capture the noises that entered.

Said this psychologist: "If you have looked over an empty house you have doubtless been impressed by the way in which your voice and footsteps reverberate and echo through the bare rooms. This is due to the walls reflecting rather than absorbing the sound waves. Tests have shown me that a sound once set up in a bare room will bounce back and forth for as long as ten seconds. Thus, instead of but one sound there will be a piling up of sounds so that even speech cannot be understood as a result of the interference of the reverberations of words spoken five, six or ten seconds previously.

"As soon as the house is occupied, many of these reverberations disappear

because rugs and draperies absorb the noise. Thus materials that have this power to absorb sound to a high degree can be used. Various decorative materials have been found useful."

All Furnishings Help.—Dr. Laird's experiments showed that while ordinary net or lace curtains help, heavy drapes, which hang in folds, have still greater absorption value. Even cretonne has some efficacy and tends to produce quiet. Upholstered chairs are better than the bare wood and even velvet table runners help.

Floor covering, too, can be chosen to give greater quiet. Footsteps, of course, are softened by rugs, but in addition a thick pile rug has great power to absorb noises from the outside. When every inch of the floor is covered, a room is less noisy than if scattered rugs only are used.

Dr. Laird suggests that "noise-absorbing material can be worked into many places. I have used scraps of sound-absorbing wall board, for example, to line the bottoms and backs of my bookshelves. By this simple method fifty absorption units have been added, more than if a second rug nine by twelve feet had been added to the room.

"Folding screens suitably made have been found to be beneficial.

"Three practical things to bear in mind are: (1) We have to pay a price for noise; (2) we should keep all possible noise out and (3) all possible noise which forces its way in should be absorbed."

Experiments by the scientists of the Federal Bureau of Standards at Washington indicate that it is entirely possible to secure the comfort and peace of silence by comparatively simple methods of furnishings, firm or tight window panes that do not vibrate "sound traps" as open windows, and the use of absorbent wall coverings.

Effect on Sleep.—Dr. Laird noted in his experiments that sound has a definite reaction upon the nerves of people awake and even of people asleep. While some may not be as sensitive to discordant sounds as others, nevertheless the constant beat of noise on the ears reacts upon the health of the body. Using a very sensitive apparatus, it was found that merely walking past a sleeping person caused the muscles to tighten although the sleeper did not awaken. It is easy to imagine the effect of greater noises in comparison.

Undoubtedly it is the high cost of noise that has stimulated business interests to clamp on the rubber heels of silence. The fact that quiet gives wings of speed to office and factory workers as well as peace and rest in apartment houses and homes, adds impetus to the anti-noise campaigns.

A noted New York editor has his desk on the topmost floor of a skyscraper. Will Hays, feeling the mental drag of the unwelcome clatters, has an office thirty-seven stories up, more than five hundred feet above the sounds of the streets. Noise is wasteful and costly, and silence is not only "golden," but gold.—*Good Health*, (*U. S. A.*)

Faeces

A doctor who conducts a newspaper column and whom I have had occasion to criticise before, scoffs at the idea of auto-intoxication.

While I am opposed to the habitual use of laxatives, so common today, I believe that daily elimination should take place. Faecal matter is dead matter. Any micro-organic life that may be in it is not part of the life of the human body. Like all other dead matter—dead skin, dead hair, dead products of combustion—it should be expelled from the body as soon as it is ready for expulsion.

The odor of faeces retained in the body for several days is distinctly different from that of faeces promptly eliminated. It has a putrid odor. The high heat of the body has set up decomposition in it, and surely such decomposing matter cannot be good for the body.

I wonder if medical science has paid sufficient attention to the faeces and the crepitus ventri. Sir Richard Burton says some interesting things about the crepitus ventri. He speaks of an Egyptian fellah whose principal article of diet was beans and who could break wind fifty or sixty times. He said he once saw on a friend's table about fifteen books or pamphlets about the crepitus ventri alone. I once heard one say that he knew a man who could play a tune with the crepitus ventri.

There is a saying, "Suus crepitus cuique bene olet" ("Every man's wind smells good to himself"). The cat, and perhaps other animals, is accustomed to smell its own dung. The cat feeds on a varied diet. Perhaps by smelling its own dung it instinctively learns what foods it should eat, and what foods it should avoid. Man, whose diet is very varied, might follow the same practice. By taking a whiff or two of his own excrement after it has been passed, he might instinctively learn by the quality of the odor whether his diet is right or not. I myself have instinctively followed this practice for many years. No doubt other persons do likewise.

Healthy human ordure should float on water, and have a fresh and not unpleasant odor (to the voider himself, not to others). I do not think it matters much whether the faeces are in soft mass form or in turd form tho' I think that the soft turd form is the healthiest.

It is a curious circumstance that the odor of the faeces of women is distinctly different from that of men. No doubt this difference has a sex basis.

An interesting volume could be written about the sex characteristics and manifestation of the faeces and urine of men and animals. A dog that accompanies its master on a walk may void a few drops of urine a dozen times or more against trees, posts, and other objects. Undoubtedly there is sexual significance in this repeated act. It is either a notice to females or a challenge to other males.

Since I am on the subject of the faeces, I should like to call atention to a very important matter. Every one who walks a little off the beaten way, has been offended by the sight and smell of human ordure lying on the ground. All those who obey the call of nature out of doors should follow the old Jewish practice (see Deuteronomy 23-12-14), and dig a hole in the

ground and covef their dirt. This is a necessary sanitary practice, but I suppose hardly any one follows it.

Shakespeare says: 'There are more things in heaven and earth, Horatio, than are dreamt of in your philosophy." Doctors need to learn this lesson. So far they have drawn only a cupful of water from the vast ocean of the knowledge of the body.—*Charles Hooper in Western Medical Times.*

Health Tit-Bits

Prosperity and the Birth rate.—(*New York Herald-Tribune, Nov 1, 1933.*) New and somewhat unexpected considerations have been injected into the much-disputed question of high or low birth rates by recent researches of Dr. Liebmann Hersch, the distinguished professor of statistics at the University of Geneva. Traditional nationalistic doctrine has it that high birth rates are desirable to provide young men as soldiers; opponents of the theory say as "cannon fodder". Conventional Malthusian doctrine, on the other hand, insists on the desirability of low birth rates so that the productivity of the soil may not be exhausted or the world's inhabitable region overcrowded by mere excess of human beings. Whatever the theories, there is no question that world birth rates actually are falling. One effect of this, Professor Hersch unexpectedly concludes, is to aggravate and possibly to have caused the present world-wide disturbance of business and depression of industry.

Until about the last quarter of the last century birth rates in Europe averaged in the neighbourhood of 40 to 1000 of population. Rates in the United States seem always to have been somewhat lower, but the difference was not great. Nowadays all over the civilized world birth rates have fallen to below 20 to 1000; in at least one country, Sweden, to lower than 15. There has been no notable decline in total population, since the decrease in births has been matched by medical accomplishments in decreasing deaths. Accordingly, the Malthusians are not especially pleased, but neither are the nationalists, as is evidenced by present propaganda in Europe's two most nationalistic countries, Italy and Germany, toward the reversal of the birth rate's downward trend. Professor Hersch is no more pleased than any one else, but his grounds for disquiet are different ones. Decreasing births have caused, he points out, a sudden change in the age composition of the population. There are fewer children, more adults, many more older adults. Consumers have been decreased in proportion to producers. The result is what he calls "essential" or "structural" unemployment, caused and maintained by this fundamental change in the structure of the population. Whether this viewpoint be accepted or rejected by the experts, it is evident once more that human affairs are seldom so simple as the theorists assume:—*The Journal of the Medical Society of New Jersey.*

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The Housing problem in England.—Recently the London County Council election was fought on such important issues, among others, as slum clearance and the provision of houses at reasonable rents for the masses of people. It may be more than accidental that a week after the elections the Government has announced a "nation-

wide attack on the slums" and a house-building programme to provide 285.189 dwellings for the re-housing of 1,240,182 persons within five years at capital cost of £ 115,000,000. The State is to provide a subsidy to enable municipal authorities to get on with the job. The slums of England are such a disgrace, and the housing shortage so acute and pressing, that nobody should be critical of the Government's plans. Actually they are welcomed with gladness, but they do bespeak a complete change of front in the political and economic fields. One of the first "economy" measures of the present Government was to abolish State subsidies for housing. The second was to put the brake on every municipal attempt to deal with the problem. Then followed the brazen pretence that there was no housing problem at all. The very Minister of Health who is now hailed as a progressive genius and may become known as the "wizard of housing" stated less than a year ago that there was no shortage of houses, and that no bold plan was therefore necessary. Barely a month ago the leader of the L. C. C. Municipal Reformers declared that the sooner the Council could get out of the job of providing houses the better it would be. Now hundreds of thousands of houses are to be built, and the State and the local authorities have got to build them because their provision by private enterprise is seen to be hopeless and the people have shown themselves determined to get houses somehow.—*Extract from the Hindu.*

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The Wonderful Apple.—Of the six hundred or more edible fruits which the world possesses, the apple probably stands at the head of the list for general all around attractiveness and variety in colour and flavor. Recently, a discovery has been made that, aside from these universally appreciated qualities, the apple possesses certain astonishing and mysterious properties which have been wholly overlooked untill their recent discovery by Sir William Bate Hardy of England, who thus describes his remarkable observation:

"A stream of air which has passed over an apple.....contains some subtle emanations which profoundly influence other vegetable forms. Potatoes placed in the stream either do not sprout or, if they do, the sprouts are misshapen dwarfs, more like warts than anything else. Bananas are excited to a much more rapid ripening than ordinarily. It is only elderly apples which pour out these emanations, and the effect on young unripe apples is again curious, for they are stirred to more rapid progress. They ripen more quickly. It is as though the elderly apple were jealous of youth and would destroy it."

The nature of the chemical substances which constitutes the aroma of the apple has not yet been determined, but Sir William describes their physiologic effect upon living organisms as "prodigious."

This discovery explains perhaps the effect that there are certain persons to whom the ordor of apples is highly offensive and who suffer such unpleasant effects therefrom that they are obliged to avoid contact with this most excellent of fruits. No one has been able to answer the question, "Why is the apple endowed with this surprising property?" A lady of the writer's acquaintance who has this antipathy to apples, finds herself unable to sleep with an apple in the same room, because of the unpleasant effects of its aroma.—*J. H. K.* in *Good Health.* (*U. S. A*)

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The Dirty Well.—A single farmer may hold the lives of thousands in the hollow of his hand. A crazy exaggeration? Not at all. A well, to which surface

water has access, may become infected with typhoid germs. This infected water is used to wash the vessels in which milk is stored. The milk thus becomes infected, and, as it may be mixed with milk from other farms, this milk in its turn becomes infected, and so typhoid germs may be carried into countless homes in a far distant town. An outbreak of typhoid follows *because the farmer had never learnt to think bacteriologically.—The Australian Red Cross.*

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What is a Human Body Worth.— According to a writer in the *Sunday Express*, London, the human body costs only 3sh. 6 d. with the following materials.

Sulphur—enough to rid a dog of insects.
Lime—for 6 bars of soap.
Iron—for a six-penny nail.
Phosphorus—for 20 boxes of matches
Sugar—for 10 cups of coffee.
Potassium—enough to explode a toy cannon.

* * *

Vitamin content of Chillies.—"Chillies and their importance in Chemistry," was the subject of an interesting lecture by Dr. T. R. Seshadri, M.A., Ph.D., Lecturer in Chemistry, College of Technology, Andhra University, delivered last evening (3-3-34) under the auspices of the V. R. College Science Association, Nellore. Mr. M. S. Raghavan, Principal of the College, introduced the lecturer.

Dr. Seshadri said that chillies were not only popular in the Telugu country but also among the Tamils and the North Indians. He said that a close study of diet in Europe and South America revealed that chillies were freely used in those countries also. The only difference between the West and the East in the use of this article was that in the West, it was used in the form of powder and the chillies there were milder and bigger than in the East. Historians were of opinion that chillies were foreign to India and that they were brought here from Europe, which in turn had got it from South America.

Speaking of the medicinal uses of chillies, the lecturer said that doctors used it in cases of rheumatism and lumbago, for tooth-ache and sore throat. They constituted a cure for stomach ailments, as a judicious administration would produce large quantities of gastric juice and set right the disorders of the digestive process. It was also used to cure chronic alcoholism. The human system would be immune to snake-bite and scorpion-sting by a continued use of chillies.

The lecturer then outlined the discovery of Vitamin C in large quantities in chillies by Western scientists and the success that attended the efforts of Dr. Gorgy of Birmingham in bringing out in an isolated form the Vitamin properties of the chillies. He said that this research was of great importance to India where large quantities of chillies were produced year after year and where by a careful and scientific system of production, the chemical and synthetic processes could be effected with for greater advantage.

There were several kinds of chillies and it was for the agriculturists and scientists to discover which variety would suit the requirements of the scientist to produce capscism, the chemical substance containing the active principle of chillies or to extract Vitamin C.—*The Hindu.*