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EDITORIAL

PREVENTION AND CURE

PREVENTION is, indeed, better than cure in all respects. That is to say, it is better economically, morally, socially, politically and religiously.

The difference between the one and the other is that prevention is a thing to be practised throughout life, whereas, the necessity of cure arises only at the rise of disease. In fact, the cause of disease is failure in preventing it, as the whole life, in order to be healthy is nothing but a process of prevention. The living body has got a nature to repulse the attacks of disease germs, and heal wounds. A truer view of life, from the medical point of view, is that birth means the beginning of a struggle to prevent disease and death. Life is, therefore, a natural and regular process of prevention.

Now, to say prevention is better than cure means to say that life is better than disease and death. This is too plain to be worthy of quotation at all. Then what is the meaning in referring to this saying? It means

that man does not realise that prevention is the natural activity of the body. Instead of encouraging the forces of prevention of disease, he often encourages the forces of disease, of course, unknowingly, and sometimes carried by the force of circumstances. In the war between perpetual prevention and adventitious disease, he should take the side of the former and fight the latter. But he is not doing so.

The fault lies not only in the individual ignorance, but in the incapacity of the modern States also. Cure has come to stay as fashionable and practicable, whereas prevention is thought impracticable for the plain reason that it is a life-long principle, and not a thing to be advertised, patronised, manufactured, bought or sold. Cure is a commodity whereas prevention is disciplined conduct. Everybody knows that it is easier to buy a thing than to practise a principle. Hence prevention has almost stopped and

everybody is ready with curing materials awaiting the disease to visit, leaving in the meanwhile, his body weaker and helpless.

It must, however, be accepted, that prevention, though better than cure, is more difficult to be practised by people by themselves. Some authority, namely, the State, must take the responsibility of enforcing and encouraging and popularising preventive living among the masses. The State should abolish unhealthy practices and encourage healthy ones. In India, for instance, there are many traditional and modern customs and habits which are extremely healthy and of preventive nature, while there are a few which are not. The State should make the

healthy ones compulsory and stop others completely. The State must be bold in doing so. By this, we mean, the governing class should be composed of such men as would appreciate this healthy policy. The problem of prevention, therefore, finally resolves itself into that of a first class political problem with a deep moral aspect, and as such, soluble only when the governing class itself happens to be of that sublime standard. Since it is not easily possible for human beings to convert overnight centuries-old governing classes of unhealthy habits into those of healthy and scientific habits, outlook and wisdom, we believe, that only a miracle can change this world of Cure into a world of Prevention.

RURAL MALARIA

“As many as 200 millions (out of nearly 400 millions) of people suffer from malaria in this country, and 2 millions of people die as a direct or indirect result of this disease. It is therefore justly considered to be the most important of India's public health problems.

“Many reasons have been given to explain why malaria still continues to be a major problem despite the various weapons tried to lessen the morbidity and mortality. Among the reasons, one stands out which is easy to remedy. This is the apathy of the villager to any problems affecting health of his own or that of the community. This is particularly unfortunate because malaria is one of those diseases which can be controlled more by a common effort than by individual effort.

“The rural population of India sit quiet and pray to the ‘Sircar’ to provide this, that, and other amenities, but do not strive to improve themselves. The lethargy and indifference must be shaken off, the ignorance and superstition must be dispelled, a

strong desire to live *like their brethren in other countries* must be born and the requisite enthusiasm and energy to help themselves must be built up. Social workers must be found in every village with a genuine love for the people and an undying desire for service and sacrifice. They must educate and unify the people, awaken their dormant sanitary conscience and make them contribute in terms of community labour if not in money and effect through the medium of self-help societies whatever improvements are possible for ridding the villages of malaria.” So says The Indian Medical Gazette in its “Public Health Section” in a recent issue.

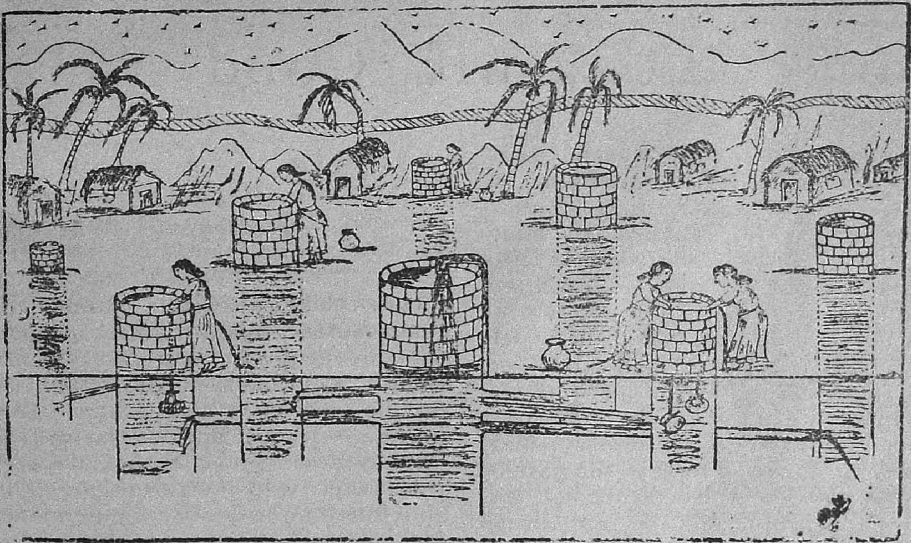
The magazine then adds “The question naturally arises as to how the change in the outlook of the villager is to be brought about.

“With the political awakening of the people of India and the introduction of responsible self-government in the province, it is encouraging to note that in some places genuine attempts are being made to revive in

the villager his old love for his village and to obtain his willing co-operation and help in all measures directed towards the improvement of his environment in general and the eradication of malaria in particular."

This gives us the clue to find out the root cause of all the sufferings of Indians individually or collectively. The root cause is the lack of political awakening and responsible government as rightly suggested above. There is a good number of people who say "what has the foreign government to do with the sufferings of Indians? In what way does such a

children imitating their own parents. With the advent of the foreign rule, villages are left to their own fate. The consequent gradual evacuation of villages broke 'their dormant sanitary conscience', for there is nobody of sufficient power or respect to question or take them to task if they fail in their socio-religious customs (for, in India, sociology and religion mean one and the same thing). The villager has subsequently grown so ignorant that he generally does not even know that there was any other language than his own, and what to talk of his having to entertain a



The villager is apathetic to any problem affecting the health of his own or of his fellow villagers. Picture shows utterly unsanitary condition of the rural water-supply system which serves as the hot-bed of malarial parasites.

government stand in your way of keeping your own house and village clean and healthy?" But, masses are ignorant as children, and learn things, like children, by examples and force, and not by precepts, press or platform. Whether a villager or a townsman, the average man acts only after a superior whom he regards as an example. People regard Kings, Officers, and in fact, any one with a superior power, as their examples and instinctively imitate him in their private and public lives, just like

"strong desire to live like their brethren in other countries"! Had the foreign government at least exhibited one-hundredth of the love for the masses as exhibited by the Congress, the villager of India would have become an example for his brethren in other countries. The incredible progress made by the villager of other countries, such as Russia, is such because the national governments there considered nothing too big a sacrifice to bring about the villager's uplift. Hence it is the

nature of government that is directly and absolutely responsible for the nation-wide miserable state of public health in India. The public health problem is one of the greatest problems of any country, and involves nation-wide organisation and huge expenditure of money for which latter contingency no foreign government can have any serious thought to give.

But what is the actual course to be followed by the government to reduce malarial morbidity and mortality in India ?

The answer is simple. It is common

sense that a healthy food gives and increases the power of the body to resist invasions of unhealthy germs. So, it is a matter of a decade or two for the Government of India, if they at all choose, to bring about a healthy economic revolution with a view to supplying proper and sufficient food for the starving masses. The problem of food, properly solved, will solve a hundred others automatically. Believe it, or not, it is the poverty and the lack of sense of security that rendered the Indian a prey to diseases and general ill-health.

Some Toxæmic Conditions

THE layman very often asks "what is toxæmia?". Before defining it, it is more beneficial to know first what *toxins* are. Toxins are some poisonous substances introduced into the body from without, or generated from within, which have a harmful effect on the human body and which are incompatible with the health and the functions of one or more of the organs. For example, those introduced from without are found in ptomaines, from decomposing food in the gastrointestinal tract, tobacco, alcohol, tea, coffee, ferments and certain drugs like strychnine, opium etc. Those that are formed within the tissues of the body are of a proteïn nature and belong to two general classes viz., the uric acid series which cause pain, irritation, fever, nerve-tension etc.; and the second one is the lethal class causing subnormal temperature, stupor and coma. For instance, in diabetes when the formation of uric acid ceases, this class of toxins begins to generate and causes coma and subsequently death.

Now, the definition of that mystic word *Toxæmia* is more clearly understood. Toxæmia is a condition of the

By

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human body in which poisons or waste matter, called toxins, accumulate to such an extent as to cause disease. A cold in the head, bronchitis, asthma, colitis or any other excess discharge from a mucous membrane such as nose, throat, bronchial tubes or intestines are all crises occurring in individuals who are for a number of days or weeks saturated with toxæmic substances within their body. One might have noticed that the colds, coughs, tonsils and other pathological conditions of the air passages have been always preceded by some catarrh of the stomach and intestines. Doctors know by experience that when the catarrh of the stomach and intestines is treated and made to take flight, the other symptoms of disease in other parts of the body also disappear simultaneously.

It must be remembered that toxæmia is the root cause of most of the diseases or manifestations of ailments. Unless it is relieved by the

proper kind of treatment in time, it continues to accumulate until the limit of toleration and resistance is reached, when other diseases begin to manifest. Prolonged and repeated colds end in asthma or hay-fever and not infrequently pulmonary tuberculosis in persons debilitated by long standing fevers and uncontrolled complications after delivery. If nature does not find a vent to relieve the system of its deleterious accumulations, other serious conditions as rheumatism, Bright's disease, pleurisy, peritonitis, etc. develop.

Among the other toxæmic conditions one comes across daily may be considered eclampsia. This disease occurs in pregnant women, in epileptiform attacks, which are manifestations of cerebral intoxication during the last three months of pregnancy. It is chiefly due to the retention of the normal urinary toxins owing to a failure of function of one or both the kidneys. A considerable percentage of deaths can be prevented if the lay people have some general idea of the premonitory symptoms of this dire disease and also the actual symptoms and the preventive treatment. The early symptoms are as follows: some flashes of light before the eyes, giddiness, a sort of drowsiness, headache, mental depression, tendency to vomit and pain in the pit of the stomach. There may be a rise of blood-pressure which can be ascertained by the medical man. In such cases, the urine may contain albumen. So, from the sixth month of pregnancy, it is always safer to get the urine examined by a doctor rather than wait till the serious fits develop and frighten every body at home.

The actual symptoms begin with the onset of the eclamptic fits. These fits may begin either before labour or during it or after it. The most common time is before or during labour pains. The rarest is after labour. Last month the writer of this article treated a case of fits immediately after the delivery at full term. Usually, a fit lasts from one to one and a half minutes at the end of which the woman becomes unconscious. In the early stage, the eyelids twitch very rigorously and the respiratory muscles become rather spasmodic. The patient lies with all her muscles contracted. Froth appears from her mouth. The duration of unconsciousness may last either a few minutes or even one or two hours. In severe cases the fits come on frequently. The heart grows weaker, the pulse is rapid and the temperature rises in some cases upto 103°.

Preventive Treatment.—To those women whose urine contains albumen nothing but milk and barley water should be given for a week. After the albumen has disappeared they may be given orange juice, sago-conjee or rice conjee and vegetables, but no eggs or meat should be given for another week. The bowels must be kept free by $\frac{1}{2}$ oz. Epsom salt in warm water, as intestinal stasis is a potent source of puerperal toxæmia. It must be seen that the kidneys also function regularly, as any diminution of urine is a danger signal towards the last three months of pregnancy. If the quantity of urine becomes diminished inform the doctor, as he alone can prevent in time the oncoming fits caused by accumulated toxæmia.

Reserved

According to the Minister of Transport, the following are entitled to have compartments reserved for them on a train—persons suffering from infectious diseases, corpses, high service officials, lunatics, convicts and Cabinet Ministers.—“*Truth*”, London.—*H. Affairs*.

HARMFUL HABITS AND IDEAS

OF LAY PEOPLE

BY

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I AM narrating only a few common habits and ideas of village folk which help to increase sickness and avoidable disabilities amidst them.

1. The first and the foremost is going to stools in open soil and letting it become a source of infection of ankylostomes to the community at large. The larvae of these worms, which resist easy destruction stick to the

which dries up with approaching summer. It is a common sight in the villages that such stagnant water is made

use of for personal cleanliness, in the mornings, after defaecation, to wash the face and eyes and even for bath. The harm such a habit engenders is unimaginable. The water is usually green and dirty with peat and moss, and infected as it is with the



It is a common sight in villages that stagnant water, usually green and dirty, is made use of for personal cleanliness of man and beast, and in the mornings after defaecation to wash the face and eyes and at times even for drinking and other household purposes.

bare feet of the pedestrians and work their way up into the system *via* the lung. The havoc of ankylostome infection and the loss of man-power it causes to the community is incalculable.

2. *The use of tank water for personal cleanliness* :—In our parts, tanks are mere ponds of stagnant water

personal filth of the whole village, any one using such water daily is sure to get infected with either scabies or conjunctivitis. The chronic trachoma which is the bugbear of ophthalmic surgeons is, I believe, to a fair extent an avoidable disease, spread solely through such agencies amongst under-nourished weaklings.

Again, the use of subsoil water of surface wells is a common sight in the villages. They are a pregnant source of infection of all water-borne diseases like cholera, dysentery and typhoid.

3. *Defects of Food*:—The South Indians are reputedly a rice-eating race. In these days of mechanisation, it is hard to get hand-pound rice, even in villages. The dearth of vitamin in the milled rice is now known to cause "Beriberi". Again the deficiency of fresh vegetables and the mode of cooking them (instead of steaming) leave the poor villager bereft of useful vitamins. The high cost of wheat is a potential cause of poverty of diet amongst the people.

Amongst infants, the common habit of supplementing mother's milk with unnecessary starch food, like rice, arrow root or barley is productive of a high rate of infantile sickness. When breast milk is plentiful, it is foolish to add heavy starch to the dietary of the infant. If breast milk is insufficient, it is wise to use cow's milk properly diluted and boiled to the point of necessity.

Presents of sweets, chocolates and lozenges to young children should be discouraged to a great extent as such habits invariably tell upon their health both personal and dental.

Again the habit of coffee-drinking is becoming a rage even in the villages. We all know that it is an unnecessary stimulant to elders and how much more should it be to the younger generation? And yet what do we find? Even in the remotest villages, young infants are coaxed to break their overnight's fast with sips of coffee preferably strong, a fetish worth-while relinquishing to the benefit of the rising generation.

4. The common use of tobacco in the form of beedies by the young street urchins of today is an "infective" vice to be scouted and punished by well-meaning parents of all classes of people.

5. The use of bad lights for night-reading is another harmful habit in the villages. School-going children strain their eyes unnecessarily in such imperfect lighting and damage their eyesight all too early.

6. Another common habit both disgusting and unhealthy is to blow air from the mouth to cool hot drinks in the midst of a party. Blowing one's nose of cold and spitting in the midst of a society are best avoided. Coughing and throwing out purulent phlegm is a dirty and dangerous habit particularly in view of the growing menace of tuberculosis in the society. Walking bare with cracks or fissures on the sole of the foot, in pure ignorance of the danger of infection, is a loathsome habit in these parts.

7. Another piece of ignorant belief of the laity is that one should not fast in sickness. How many cases of dyspepsia or indigestion become worse as days pass on, just on account of this belief? If only they know the use of fasting for such ills, no doctor's bills need be paid.

8. Again the villagers do not consult a doctor for infantile convulsions unless the child is moribund. Whether it be due to fever, constipation, worms or wind, they seek the aid of the *manthravadin* for the purpose, usually to small benefit. This habit is particularly galling in the case of eclampsia of the pregnant where no *manthram* is of any use except attention to the kidney and the uterus.

9. Another ignorant and vexatious habit is the mode of "delivery by massage" practised by dhais on pregnant women. This is done by annointing the abdomen with viscid oil and rubbing the foetus out of its location by slow massage. Nothing is more painful or foolish than this attempt to improve upon nature. I have seen a case of primipara with small pelvis in whom the child was delivered into the abdominal cavity by this *coup de force* because it could

not come via the natural passage without medical interference.

10. There is another unpardonable mistake of the villager. He consults the doctor last in cases of labour after every hope of aidless delivery is lost and the mother or child is almost dead or dying. Requesting a doctor's help early in the case is sure to save a good portion of his hard-earned income, for it is quite an established fact that a medical man usually stipulates a high premium against the risk of a bad name in a case handled outside and exposed to infection.

11. The foolish custom of treating

a parturient woman as an out-caste during the period of pollution gives rise to grave errors of observation by untrained dhais who cannot ascertain the cause of mischief nor remedy the same by themselves. The poor villager may find a medical man's services too costly. But he can make intelligent womenfolk of his household attend on the patient for the period of pollution. That is itself a great step forward.

I have only referred to a few of the outstanding problems of rural medical relief. I believe they will suffice for the present to focus public attention.

TREATMENT of LEPROSY in

THE two most important points in the present day treatment of Leprosy are :—

1. Preventing the spread of the disease to others.

2. Treating the disease itself.

For preventing the disease from spreading to others, leper asylums, hospitals and colonies are built where the lepers are isolated and their comforts attended. Segregation is most important, for, a wandering leper is a source of great danger to the healthy community. Segregation alone when rigorously employed, can wipe out the disease. It has been found that in more badly affected countries like Phillipines, Hawaii and Norway, the disease has been reduced to a minimum by a rigorous use of leper law. But in India, though a leper act is in existence, it has not yet been possible to enforce it to the very letter as the available space in the leper hospitals is too short in comparison with the number of the afflicted.

In most of the leper hospitals arrangements are made to separate the children immediately they are born, for it has been found that leprosy is never hereditary, and those

MODERN TIMES

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children who are separated immediately after birth grow up in perfect health. (A large number of patients will give a history that they contracted the disease from their parents.) In leper hospitals where arrangements are made to separate the children immediately after birth it has been observed that nearly 95% of the children escape the disease.

Coming to the treatment we find that experience has shown that Hydnocarpus and chaulmoogra oils obtained from the seeds of Taractogenos Kurzii and various Hydnocarpus trees which grow in the monsoon forests of Burma, Siam, Assam, South India and Ceylon are of distinct value in curing leprosy. Research on leprosy dates as far back as 1854 and, during the course of this study a large number of drugs has been tried but none has been found able to stand a prolonged and a thorough test. The

chaulmoogra and hydnocarpus oils are considered as more or less a specific in the treatment of leprosy, and consequently, these have been adopted either in pure or in chemical forms in all the well known leper hospitals of the world.

Potassium Iodide has been used as an adjunct in this treatment as it helps to break the leprosy nodules, and to set free the bacilli which consequently circulate in the blood giving rise to a leprosy reaction, the severity of which depends on the dose of the drug used. The result of this is internal auto-vaccination and production of an immunity more powerful than can be obtained by injecting vaccines.

Counter-irritation is used in connection with this treatment by rubbing either chaulmoogra or other oils, such as coconut oil, and painting of the anesthetic patches by solutions of trichloroacetic or even carbolic acids; and the results have been found to be most encouraging in restoring the sensations of the lost parts. In villages, the patients use the juice of the marking nut and the results are the same.

Since this treatment has been adopted, some patients have been discharged cured, many have been improved while in still more the disease has been arrested and the general mortality among the lepers has been considerably reduced. This kind of general improvement has been uniformly obtained in almost all the leper hospitals.

It is true that in some cases the disease recurs. But here it may be stated that these patients and those who had not received sufficiently intensive treatment as to render their systems saturated with hydnocarpus oil, and that they reverted back to their original insanitary and unhygienic life in their miserable hovels together with irregular and insufficient food and alcoholic and sexual excesses. When the body vitality becomes lowered, some latent focus becomes

flared up again resulting in the recrudescence of the disease.

It has been found that leprosy is largely the result of lowered condition of health as a result of want of good food, cleanliness, healthy surroundings and exhilaration of mind. Immediately these conditions are restored, the disease quickly retrogresses. I have seen several cases where it is very interesting to find how quickly they assert themselves to the general hygienic surroundings and seem to progress by leaps and bounds. Most encouraging results are obtained especially in those cases who submit themselves to treatment very early.

As in other diseases, there is almost always a predisposing cause in those of leprosy too, and this must be adequately treated before commencing the specific treatment, as otherwise, the specific treatment is bound to result in disappointment. The most common predisposing causes among the patients of this district are chronic malnutrition for want of good and sufficient food, constipation, toxæmia as a result of intestinal worms mostly round and thread worms, venereal affections, guinea-worm, and skin conditions such as scabies and ringworm.

Lastly, in order to bring the latest methods of treatment within easy reach of those patients who are either unwilling or unable to enter the leper hospitals, out-patient leprosy clinics are opened, especially in more badly affected localities, supported by suitable propaganda and survey.

In conclusion, it may be said that the disease is remarkably slow, slow in development and slow in improvement under treatment and, as such, great tenacity and perseverance is needed on the part of the patients to stick up to treatment and instructions.

The treatment has been discredited in some quarters, for, it has not been able to restore the lost phalanges and

toes. But it must be noted that no treatment in the world can restore lost members of the body. It may further be noted that no extravagant claims have been made for this treatment, but that it has proved itself to be the best under the circumstances possible and it will continue to remain

so till a more potent remedy is discovered. It is up to the patient to willingly co-operate with the medical man, offer himself to this latest method of treatment and prove its efficiency. Unless he does it, there can be no hope of benefitting him or eradicating the disease.

Health of Married and Unmarried Persons

MAN and woman are social beings and marriage is per-

By

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and the female are found to avoid, as long as possible, a mar-

haps the noblest of all human institutions established since the creation of society of which it is the corner-stone of the whole structure. I am not concerned here with the intricate questions of the sanctions of marriage attributable to religious or legal principles accepted by the followers of different creeds. What I propose to discuss as a medical man is the relation of health of individuals *vis-a-vis* the institution of marriage. Health, we know, is a factor dependent on the environments of the man, and of his various environments, the association of the male and female sanctioned by society is of vital importance to their health. With the present trends in our civilisation our ideas are changing in various respects leading to the so-called reforms of many social institutions not excluding that of marriage. The problem of the health of married and unmarried persons is, therefore, a topic of considerable interest to which serious consideration ought to be given by the advocates of reform.

After adolescence, the age of marriage comes and if a person remains unmarried during this age, some interesting points arise, of which the question of health comes to the forefront. Modern economic conditions have brought such a very great strain on married lives that both the male

rried life. Formerly, a strong and pungent criticism in social circles, especially against a girl if she remained unmarried after the age of puberty is reached, acted as a spur to married life. Nowadays, however, there is no such sharp criticism. Marriage is thus postponed or avoided. But, I do not think this is good in the interests of individual's health.

First, I must point out the normal physiological phenomena which take place in the human system when the age of puberty is reached. This age is different in different countries, in different societies and in different individuals. The signs of puberty are recognised by the development of the secondary sexual characters, which are known to all. This complex phenomena are due to the actions of the hormones. These hormones not only influence the secondary sexual characters but also influence the whole nervous system. The hormones act both as a stimulating agent as well as an inhibitory one. The pituitary, adrenal, thyroid, ovary and testes, all play their respective roles. The ovary secretes oestrin and progesterone. The testis secretes testosterone. The pituitary gland secretes a hormone which is called prolactin and which again is concerned with menstruation and pregnancy. Under the

influence of all these endocrines and the resultant secondary sexual characters, the human being is naturally attracted towards the opposite sex; and the marriage thus becomes a natural union between a male and a female, permitted by social customs from time immemorial.

The question arises: is there any difference, from the point of view of health, between a married and an unmarried life? The married couple settle in society, try to lead a quiet life and become somewhat cautious of their health. They are to look after the health of each other and of their children, and seldom become extravagant.

The unmarried one leads a single life and is generally fond of irregular habits. His passion is often unrestrained. His internal life is often of the "don't care" type. He is prone to indulge in perilous excursions and enterprises.

The main portion of the earnings of a married man is utilised for the maintenance of his family; and thus there may be some deficiency in the family diet causing injury to health; and the married woman has risk of life during her child-bearing period. But these defects are counterbalanced by numerous advantages of married life.

The single person may be financially sound, if the mind and the natural physical cravings be overcome from being led into unrestrained temptations. But the alcohol and the woman appear with all the attendant temptations in the path of life of the unmarried man to the fullest extent. The result is that the persons become victims to various venereal diseases which injure the health to an irreparable limit.

In married persons, the mode of life is somewhat regular and the glandular products getting proper vent sustain the system in a normal condition.

In unmarried persons, the glandular and even the normal metabolism is often upset. In my experience, specially among single women, the defect in calcium metabolism is found to be marked, and some disturbance in menstrual cycle is found to be constant. Perverted appetite in all its forms (hunger, thirst and sex) are more common, sometimes leading to the physical wreck of the individual. Above all, it tells upon the nervous system in a severe manner. Neurasthenia is common among unmarried persons. The continence as well as the abuse are the chief causes. Pain in the spinal column is most common. Phosphaturia is also a common symptom. Palpitation of heart is often complained of. Dyspepsia is generally present and constipation becomes marked. Eye trouble is common. One becomes irritable. Mental work becomes impossible. Certain phobias may develop. Insomnia and bad dreams are sometimes troublesome. Hysteria may be manifested. The remedy of all these troubles lies in the natural married life.

Permanent abstinence of any healthy person rarely exists; moreover, for a person living in the modern civilised society, it is perhaps impossible. The effect of long continence brings various sorts of physical and mental disorders leading even to insanity. Neurasthenia is the most common ailment. Other diseases may also appear and affect the health to a varied extent. If continence is to be followed, the mode of life should be different. Nature demands reproduction and the two sexes have been created not in vain.

To sum up: the expectation of healthy life of a married person is greater than that of the unmarried. In other words, the married persons live longer and enjoy better health.—
I.M.J.

BENEFITS OF PUBLIC HEALTH LEGISLATION

(Contd. from page 15 of Jan. '42 Issue of 'Health')

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THE so-called Devadasi system should be stopped by state legislation. Much has also been made of that other seemingly atrocious sin of untouchability, unapproachability and unspeakability of a certain section of the lowest strata of society. This had been sought to be tackled in a manner that smacks more of putting the cart before the horse. Social uplift of the untouchables should be first made a settled fact, before any such religious privileges are advocated for them. "Deserve and then desire" should be their motto as for every one of us. Without personal cleanliness and tidy habits in their own homes, how can they expect any such privileges to be recognised by their betters in social status? It may be argued, on the other side, "are the Brahmins and other high caste people themselves acquitting themselves as per rules laid down in the Sastras"? The answer is plain enough. Times have immensely changed from what they were when our *Smṛitikaras* laid down rules for our daily life. Circumstances have also changed considerably. If the poor Brahmin of today is to lead his life as enjoined by the dharma-sastras, he will have to be driven to the wall and must allow himself gradually to be wiped out of existence. The struggle for existence is everywhere so keen, and it is always a survival, not of the fittest, but of the mightiest or the most favoured. "Yatha raja tatha prajah"—so goes the proverb. The modern kings do not grant them rent-free quarters or *agraharams*, and do not allow them to live free of land tax. Naturally, they are forced to compete with others; they are practically the

depressed classes nowadays since the present-day tendency is to discourage them, as far as possible, from Government service, where most of the appointments are ear-marked for the Non-Brahmins under the plea that the Brahmin element is over-represented. By dint of his own energies, the Brahmin always pushes himself to the top, and the present-day tendency is therefore to give the minimum privileges for Brahmins. Whether the Brahmin lives his spiritual life or not is a question which should not engage the minds of those so-called social reformers. The inexorable doctrine of *Karma*, from the mighty grip of which even the greatest and divine dispensers of justice—Brahma, Visnu-Rudra or Surya—cannot disentangle themselves, will take care of them. Manu speaks of *Karmachandalatva* in the following verse :

विहि ऽस्य अननुष्ठानात् ।
निन्दितस्य च सेवनात् ।
अनिग्रहात् च इन्द्रियाणां ।
नरः पतनमृच्छति ॥

By not performing the prescribed duties or *नित्यकर्माणि*, by resorting to prohibited practices, and also by not keeping the senses under restraint, a man goes down in the spiritual scale. Even Rama fell as a result of his *Karmachandalatva* as he himself

acknowledges. If the person's actions are so heinous, he will realise the fruit withinside of three years, or even three months, or sometimes three fortnights and even three days. There is a God to punish the miscreants, why bother about that ourselves? It is therefore quite reasonable that the Sanatanist's point of view should be met half-way. He sincerely believes that the sanctity of the sanctum sactorum of the temples will be polluted if the unclean untouchable, dubbed as such by God Himself perhaps because of some un-understandable *apurva* or actions of his previous birth, enters temples.

Further, it must be understood that the untouchable himself, steeped in superstitious ideas for centuries, has no desire for polluting the temples because he has been bred up all along in that blind faith that his domestic happiness will be ruined if he is guilty of such sacrilege. These so-called reformers rush in where angels fear to tread, and, desirous of having a good case for themselves, tutor some untouchables here and there to rush into temples with religious fervour. Their stock argument is that when the same untouchable embraces a new faith as Christianity or Muhammadanism, he is allowed into the temple, why should the same individual be denied access, though he is our own kith and kin, and has the same blood of Mother India coursing through his veins? The all-merciful God could not have made one law for the high-caste people, and another cruel law for the low-caste person. If the sincerity of the fundamental positions could be granted by the other party in fairness and justice, some meeting ground could be found half-way. New temples with no '*agama*' sanctity about them could be built for them, and the educated reformers of the high castes should officiate as priests; they must make them real centres of learning, expounding all sorts of religious doctrines in a popular fashion; the untouchables must

be made to fully realise the blessings of a clear and neat life; side by side with this, the mentality of the conservative section should be appealed to see reason by holding up to them examples of great saints like a Nandanar here, a Kanaka there, who were all untouchables by birth, but slowly elevated themselves to the enviable position they now occupy among their high-caste admirers even at present. A man can slowly elevate himself spiritually even in this very life by dedicating himself, body and soul, to the service of God. The making or marring of man depends entirely upon his own devotion or want of devotion to God. Such a middle course will certainly result in placating both sections, and much more than that, in giving an orientation and a new vigour and vitalising force into our religious lives. Most of us have become quite ignorant of the tenets of Hinduism, and such religious propaganda will certainly result in raising the moral tone of our religion and introducing a generally healthy atmosphere all round.

Similarly, the moral leavening of our society will also result in toning up our health. Dishonesty and mal-practices should be slowly weeded out, for they are like some terrible ulcers or carbuncles which must always be made to taste the surgeon's knife alone. High standards of morality always pay in the long run, even in business circles, where a high morale will always result in healthy competitions. A national consciousness and a team-spirit will certainly tone up the morale of our business; and if the Government could also co-operate with trade concerns by linking them all together under some legislative authority into a Commercial Board supervised by some Industries Minister, our prosperity will be completely assured.

Similarly, State interference in a political manner also will tone up our health in every way. The

State should always insist on medical inspection of the health of the school boys at periodical intervals. Elementary physiology should be made a compulsory subject of study at least at the Intermediate standard. Practical health mottos such as early to bed, and early to rise, makes a man healthy, wealthy and wise". "After dinner sit a while, after supper walk a mile" etc., should be popularised through broadcasts in every village. U.T.C. Training should be made compulsory for all B. A. students in Colleges, and physical education should be made compulsory in all schools and colleges. Abundant physical exercise by way of games, more especially the cheap country and national games should be encouraged. Religious education should be made compulsory in all schools and colleges. Students of different faiths should be made to realise the glories of their respective religions in different classes under the teachers belonging to those faiths. For example, the services of the Urdu Lecturer may be requisitioned for expounding the greatness of Muhammadanism; the Professor of Sanskrit should be asked to explain the fundamentals of

Hinduism; some other Christian Philosophy Professor should expatiate on the greatness of Christ and his message to humanity. Sectional colleges for different communities should be not only discouraged, but also prohibited with even legislative authority; and thus a healthy atmosphere should be created by all studying together under the same roof. All should be made to participate in healthy debates off and on, once in two months, thus Hindu-Muslim-Christian unity can easily be achieved by slow degrees. Popular lectures on domestic life should be arranged; women should be made to aspire for being nationally and religiously minded; the ancient ideal of a Kshatriya woman वीरजा, वीरजाया and वीरजननी should be once again emphasised by means of popular lectures. Plain living and high thinking should be encouraged. Ideals of national service should be made to fire the imaginations of our enthusiastic youngsters, and above all, everyone should be taught to dedicate his all at the service of Humanity, that universal door to God, with the prayer,

॥ सर्वे जनाः सुखिनो भवन्तु ॥

Pollution of Sea Water by Discharge of Sewage

It is commonly but erroneously, believed that sea water is antiseptic and inimical to pathogenic organisms. The present investigation demonstrates the necessity of making a thorough study of the local conditions when the proposal to discharge sewage into the sea comes under discussion. The direction and force of any currents and whether they are liable to change their direction, the expansion, route and degree of spread by tests with fluorescein, the ratio of phytoplankton to zooplankton, the prevailing winds and their force must be taken into account. After installation, frequent analyses of the waters near the shore will be called for to determine whether pollution is taking place. (The abstractor when asked to investigate the effect of sea water on faecal bacteria in Hong Kong in 1920 found that *V. cholerae*, *Bact.*, typhosum and other pathogens thrived readily in the water of the harbour and consequently that there was no little danger from the natives defaecating indiscriminately from the sampans moored there.—DIENERT, F. and GUILLARD, A.; *Jour. Public Health Engineering Abstracts.—National Health Review.*

Indian Cosmetics

By Kamala Sadagopal, B.A.

FROM the earliest time, the word *angarag* (*anga*: parts of the body; *rag*: the art of decorating or toileting it), (cosmetics), was commonly known to the Indians. The general impression that cosmetics came to India with the advent of the Western civilisation is not true. Ancient Indians were in no way less luxury-loving than the citizens of Persia, Egypt, Greece or Rome. It is a well-known fact that the Roman emperors considered the Indian perfumes and cosmetics more refined, more costly and more luxurious than those of their own country. Accounts of Indian cosmetics are to be found in historical records of the Romans, Greeks, and Arabians. Very recently, Indian perfumes such as *dhupa* and various other aromatic gums, etc. have been found in the mummies preserved long ago in the Egyptian Pyramids.

There are many records which indicate the highly developed tastes of Indians in the art of using cosmetics. Women commonly used *lodhra* powder (*Symplocos Recemosa*), pollen of *ketaki* (*kewda*) and sandal paste to perfume their bodies, while *dhup* and *khus* (vetiver), etc., were used for perfuming their clothes.

Ancient Indians had no modern chemicals and appliances for the preparation of cosmetics. They generally prepared their cosmetics from herbs, aromatic plants, mineral and animal products. Roots and woods such as *khus* and sandal also played an important role.

In Vatsyayana's *Kamasutra*, the daily routine of a person's toilet is described as follows: "He should get up early in the morning. Before resuming his business of the day, he should cleanse his teeth, take his

bath, make fragrant body and clothes with perfume, paint his lips with *alktaras*, wear a garland and take some perfumed chewing ma-

terial. He should shave his face, massage his body, use *phenaka* (soap) and apply cream in his thigh-joints and elbows every alternate day and depilate the hair of his armpits every fifth day."

The author of *Kamasutra* has described in detail 64 arts of beauty culture, including a special chapter on *Vasanangaraga*—i.e., the art of perfuming the clothes etc. This art has not yet received due attention even nowadays, but was always considered by ancient Indians an important part of the art of beauty culture.

Twigs as Dentifrices.—*Dashanangarag* means the care and cleansing of teeth with dental preparations. Ancient Indians used some tannin-containing twigs of fresh and preferably aromatic trees for cleansing the teeth.

The two highly prized twigs are obtained from the trees of *tejbai* (*Xanthoxylum*) and *maulsari* (*Mimosa Elenqi*), occurring in the north and eastern Gangetic plains, Simla hills, and Kulu valley.

The method for using these twigs described in the books is to soak the twig in the urine of cow and put it in water perfumed with cardamom, cinnamon, honey, black pepper, and costus, etc. *The ancient Indian cosmeticians and scientists described the urine of cow as the best antiseptic and disinfectant.*

Other useful twigs recommended were: *vata* (*Ficus Bengalensis*), *arka* (*Calotropis Procera*), *madhuka* (*Bassia Latifolia*), *karanja* (*Pongamia Glabra*), *plasha* (*Ficus Infectoria*), *ashvattha* (*Ficus Religiosa*), *brithati* (*Solanum Indicum*), *khadira* (*Acacia Catechu*), *bilva* (*Aegle Marmelos*), *kedamba* (*Anthrocephalus Cadamba*), *n i m b a*

(*Indian Neem*), karvira (*Nerum Odo-
rum*), shami (*Prosopis Spicignei*),
arjuna (*Terminalia Arjuna*), sala (the
Sala), ashvakarna (*Vateria Indica*),
priyanjan (*Aglaia Priyangu*), apa-
marga (*Achyranthus Aspera*), jambu
(*Eugenia Fambolana*), dadima (*Puni-
ca Granatum*) and chaturushaka
(*Agaricus Campestris*).

Besides the use of *dantakashtha*, the
books of Hindu medicine have des-
cribed the preparation of a large
number of dental preparations and
suitable vehicles which have success-
fully stood the test of the present-
day scientific developments.

Bathing an Art. — Ancient Hindu
writers wrote detailed accounts of
Snaniyavasa—i.e., the art of enjoying
perfumed baths. For massage and
cleansing the body during the bath,
an excellent preparation consisting of
a mixture of alkalies and oil-cakes of
enfleuraged bases, etc., used to be
employed. Such a mixture not only
cleanses the dirt from the pores but
also leaves sufficient oil to make the
skin soft and glossy. In the bathing
water, they mixed different kinds of
perfumes such as cinnamon, betel-
leaf, nakhi, musk, vetivert, and
agar-agar.

Deodorants.—Deodorants and re-
cipes for checking the perspiration
are necessary in the hot climate of
India. Musk, camphor, sandalwood,
nagapushpa, and agar-agar were pow-
dered together to apply on the body
as a deodorant. There was another
mixture of vetivert, sandalwood,
leaves of the bilva tree (*Aegle Mar-
melos*) nagapushpa, mimosa, and
padamaka (wild Himalayan cherry)
used for the same purpose.

Perspiration was also checked by
the use of lodhra (*Symplocos Rece-
mosa*) powder, sandalwood, saffron,
vetivert, and the pollen of various
other flowers mixed together. Powder
of Indian blackberry and the mix-
ture of neem-leaves, lotus root, and
pomegranate bark were popular for

checking various diseases thought to
be caused by perspiration.

Perfumes used in India for the
fragrance of body and clothes were
numerous. From ancient times, the
art of preparing Indian attars and
essential oils soon acquired great im-
portance owing to their popular use
in cosmetics, and as general perfumes.
Extract of khus (vetivert), musk,
agar-agar, patchouli, various Indian
flowers, amber, and other compound-
ed perfumes need no introduction to
the student of perfumery.

The accidental discovery of otto of
roses by Nur Jahan, wife of Jahangir,
the Mughal Emperor of Delhi, gave
another fillip to this industry. Nur
Jahan used to take her bath in a tub
of highly concentrated water of roses.
One day, while having her bath, she
collected some oily drops floating on
the surface of the water and found
that the odour of those drops resem-
bled the perfume of roses. The manu-
facture of oils of roses, called Ruh-
Gulab, then commenced by the
following method. Fresh rose flowers
were distilled with twice the weight
of water in copper alembics over open
fires and the distillate thus collected
and concentrated a number of times
was kept exposed to the cold atmos-
phere of wintry nights. The pure
essential oil of rose thus used to con-
geal and water skimmed off.

In the olden days, *Phenaka* was
used instead of soap and it served
the latter. *Phenaka* is a very expres-
sive word of Sanskrit, meaning
“lather-producing agent”. It was
perfumed and its function was to
soften the skin, to remove the dirt,
and to perfume the body. It was
therefore an equivalent of the modern
highly perfumed superfatted soaps.

A study of the various books like
Gandhadipika of Sarangdhar, *Gandha-
yukti* of Ishwar, and *Vrikhatasamhita* of
Varahmihira gives detailed accounts
of the art of hair cosmetics, deodo-
rants, preparations for perfuming

houses, facial cosmetics, bath preparations, massage creams, incense sticks, etc. *Churnam* was the name of a powder to be applied to the body in summer like the modern talcum powders.

Long, thick, black hair has always been looked upon in India as one of the first factors in a woman's beauty. Hair oils were used for this purpose. In the oils various kinds of perfumes and powders were mixed and then kept exposed to sun for many days to mature.

Ancient Enfleurance.—The art of enfleurage, as known in Europe, was thoroughly put to commercial use in India thousands of years ago and is still being followed in some places on the same lines. For this purpose, sesame seed is given a number of washings with flowing water till all the extraneous matter and colours are thoroughly removed. These well-washed seeds are then treated by the process of enfleurage with fresh flowers of jasmín, rose, and kewda every day till the desired saturation of perfume is attained. The seeds thus aromatised with natural flowers are cold pressed in oil mills of wood, preferably made of sandal. The vegetable oils pressed in this way are decanted for some time, when a golden coloured, crystal-clear liquid separates out. These hair oils, though costlier than the synthetic preparations, are prized for their cooling and beneficial properties to the scalp and for high-class aromas.

Baldness was removed with powders of gunja fruit (*Abrus Precatorna*), honey, and well-burnt ivory in sesame oil. In Vatsyayana's *Kamasutra*, various prescriptions are to be found for the hair dyes.

Skin Beauty.—*Subhangkaranam* is the process of softening and beautifying the skin. Instead of the modern vanishing snow and cold cream, the paste of seeds of cassiadora, costus, and tulsi-patra (leaves of basil) was

used. A mixture of mustard seed, sesame, haridra (turmeric) and costus applied all over the body softened and perfumed it.

Women especially used the powder of barley without the husk, liquorice, white mustard seed, and lodhra on their faces to soften and beautify the complexion. A paste of unboiled milk with some flour was also rubbed on the face to cleanse the pores of the skin.

Moslems also adopted the custom of rubbing their faces and bodies with perfumed powders. Two of their favourite powders are *Abeer*, made of roses, aloe-wood, sandalwood, turmeric, civet; and *chiksa*, a compound of flour, patchouli, sandalwood, mustard seed, fenugreek, cyprus, kuskus, aniseed, camphor, and benzoin.

Women of the olden days used *anjan* (which is at the same time a medicine and an article of toilet) to blacken their eyelashes, put *kajjal* (a kind of kohl) in their eyes, painted their faces and applied henna on their nails and on the palms of their hands and feet. Henna also imparts a local cooling effect.

Hindu Manicure.—The ancient Hindus were very particular about their nails. Vatsyayana, in his book *Kamasutra*, wrote that nails should be cut on every fourth day. According to him nails should be clean, well and uniformly cut, polished and beautiful. Long and dirty nails were considered to be the cause of various diseases.

For depilatory purposes, the use of powder of conchshell and yellow orpiment (trisulphide of arsenic) or lime and yellow orpiment was recommended. Such a mixture destroys the hair at the root. After application of any depilatory the oil of the seeds of *kusumbla* (safflower) and sweet almonds was used for softening the skin and the roots of the hair.

In India, practically all kinds of *angarag* (cosmetics) from head to foot were in vogue, but they began losing

their ground on the introduction of modern, attractively packed cosmetics and also because the old prescriptions necessitated elaborate and sometimes tiresome processes.

Angarag, the cosmetics of India, based on a tradition combining hygiene and eroticism in a manner subtly different from the beauty culture of

the West, will probably not withstand the commercial competition of the attractively packed, easily used European and American preparations, but the most up-to-date cosmetician can learn something from the technique, often immemorably old, of the Indian cosmetic and toilet goods maker.—*Indian and Eastern Chemist.*

THE SUBJECT OF GERMS

Adopted from "First Aid", London.

BACTERIA or germs as they are popularly called, are minute forms of vegetable life, so small that they can only be seen when magnified by a powerful microscope.

Germs exist throughout the world. They are present in the air, in dust, on the skin, in the mouth, etc.; indeed, some are of actual value in nature and are used in industrial processes—*e. g.*, in the ripening of cheese. Nevertheless, many germs are extremely injurious, and if introduced into the human body may cause serious diseases.

Germs harmful to the human body usually belong to one of two big families—the cocci and bacilli respectively.

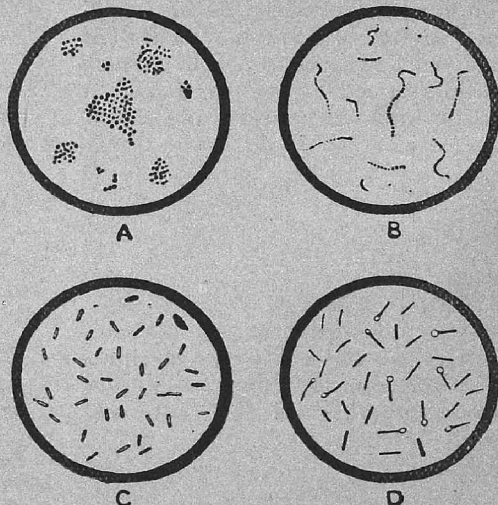
The Cocci.—These are small round germs, and are found in several varieties, of which two are of importance in first aid—namely:

Staphylococci.—These are cocci which are grouped together in clusters, resembling bunches of grapes. They cause many diseases—*e. g.*, boils, abscesses, whitlows, etc.

Streptococci.—In these the cocci are arranged together in chains. There are many different varieties of streptococci, and they are able to cause diseases of a serious character such as

scarlet fever, tonsillitis, and general blood poisoning (septicæmia).

The Bacilli.—Rod-shaped germs are called bacilli, and of these there are many kinds, distinguished from each other by their appearances and other features, such as ability to move.



A. Staphylococci.
C. Bacilli.

B. Streptococci.
D. Tetanus Bacilli.

(Diagrammatic.)

Among the diseases caused by bacilli may be mentioned tetanus (lock-jaw), diphtheria and typhoid fever.

Infection.—When germs enter the human body, an infection is said to

have occurred. The result of an infection depends on the amount of the body which becomes affected by the germs. Thus infections may be classified as (a) general and (b) local, as follows:

(a) *General Infection*.—This occurs when the germs actually enter the blood stream and cause the patient to become ill in himself. The germs usually gain access to the body by the nose or throat, but some of the worst examples of general infections occur when they enter the body through the skin. Septicæmia (general blood poisoning) is caused in this way.

(b) *Local Infection*.—When the action of the germs is confined to an individual part of the body, a local infection is said to have occurred. Boils, abscesses and whitlows are examples of this variety.

In a local infection the germs usually enter the skin through a wound or even a small scratch which may have passed unnoticed by the patient. A wound so infected is said to be septic.

Defences against Germs.—Germs can be destroyed, or at any rate hampered in their activities, by (a) natural methods adopted by the body itself, or (b) through the use of heat, disinfectants, antiseptics and other means.

(a) *Natural Methods*.—The methods used by the human body to deal with a general infection are both interesting and efficient, but are too vast to be described in a textbook on first aid. A local infection is dealt with by what is known as inflammation, and this may be described briefly.

Inflammation.—The blood possesses

a large number of white corpuscles popularly called "the defenders of the body." These corpuscles possess the power of destroying germs, though they themselves often perish in the process.

When germs enter the body, the object of natural defence is to provide at the affected part as many white blood corpuscles as possible. For this purpose the blood vessels in the vicinity dilate (become bigger) and an increased supply of blood flows to the part. At the same time, neighbouring tissues pour out fluid, which has the effect of diluting the poisons (toxins) produced by the germs.

Typical inflammation occurs in a boil, when the affected part becomes hot, red, swollen, tender and painful. Later, if the boil bursts, a yellowish-white discharge makes its appearance. This is called pus (matter), and consists partly of debris resulting from destroyed tissues and partly of dead white corpuscles and germs.

Sepsis may be used as an alternative term to inflammation, and a wound which is inflamed is said to be septic.

(b) *Disinfectant*.—A disinfectant is any substance which is capable of destroying germs when allowed to act for sufficient time.

Disinfectants are often employed to remove germs from dressings, instruments, etc., and any article which has been freed from germs is said to be *sterile*.

It is difficult to sterilise the skin completely, because the prolonged action of an antiseptic exerts a harmful action on the tissues.

Secret Wanted

A man reviving from an anæsthetic was being very sentimental. The wife nearby said to the nurse: "I haven't heard him talk like that since our honeymoon; where do you buy the dope?"

Foundation of Human Dietetics

THE foundation of human dietetics lies in vegetable physiology, for indirectly everything we eat or can eat is derived from the soil and the atmosphere through the vital activity of plants. The plants take from the soil and the air comparatively simple compounds, which they combine to form the more complex materials upon which animals feed. These they store in their tissues, and it is these stores upon which animals feed. What vegetables store depends upon what they can find with their leaves and roots. The composition of vegetables, and therefore their food value to man either directly by eating them, or indirectly through the products of animals which have eaten them, is therefore dependent upon the soil in which they grow; so, the beginning of human nutrition is in agriculture. The bodies of animals differ comparatively little in composition but the products do. One beef is much the same as another but one milk or one egg is not, and this applies still more to vegetables, the value of which varies enormously according to the way they are fed. This is one of the greatest difficulties in dietetics at all time and especially so at present when much of our food must be obtained by intensive cultivation. If we do come to starvation it would in all probability be traceable to the exhaustion of humus in our fields and gardens.—*The Medical Officer*.

Sun Bathing

SUN-TAN is not necessarily a sign of good health. It's a matter of melanin. This is a pigment which forms in the deeper layer of the skin under the action of ultra-violet light. If you have a good supply of melanin in your tissues you tan. If the supply is deficient, you may only burn and freckle; if it is absent you cannot tan at all. But you get the benefits of sunshine under any of these conditions.

If you burn easily, get your sky-shine in the shade. The ultra-violet quality is just the same. Even if you don't burn easily, start getting your tan by gradual exposure. It isn't the sun's heat that burns you. Sunshine comes from the other side of the rainbow—the invisible side next to the violet colour you see at the rainbow's edge. Ultra-violet rays cannot be felt, and a sensation of heat is no safe guide in regulating your sun exposure. Mountain climbers have been badly sunburned while climbing in below zero temperatures.

Don't let a hazy day deceive you. Haze is no barrier to ultra-violet. A veil of some thin fabric red or yellow in colour is, however usually effective in delaying sunburn. Water and sand reflect ultra-violet, so if you snuggle up under a shade tree right next to the shore you can be as badly burned as if you reclined in direct sun.—*National Health Review*.

Law Prohibits Common Drinking Utensils

CALIFORNIA has passed a law to clean up restaurants, soda fountains, saloons, and at her places where cups and glasses are used in quantities. The law provides sufficient authority for action, and health officers are requested to undertake its enforcement. The term "common use" when applied to a drinking receptacle is defined as its "use for drinking purposes by or for more than one person without its being thoroughly cleansed and sterilized in boiling water or steam between consecutive uses". Provision has been made for the use of any alternative methods of sterilization that might be bacteriologically effective.—*Weekly Bulletin, California State Department of Public Health*.—G. H. F.—*National Health Review*.

Bedsore

BEDSORES are formed in bed-ridden people through long continued pressure on prominent bony parts together with weakness and a feeble circulation. The first sign is usually a red patch or blister which turns black and ulcerates. Bedsore not only cause great discomfort but increase the danger to life.

Before the skin is broken, bathing with eau-de-cologne, pure brandy or whisky or with saturated solution of alum will often prevent the formation of bedsore. The bed-sheets must be kept free from folds or unevenness and all soiling prevented. In prolonged illness hot bed is valuable.

If in spite of all the precautions, a sore is formed, send for the doctor at once.—*First Aid*.

Dwarfism and Giantism

THE normal height or stature of individuals of a given race may be considered as minimum normal, average, and maximum normal. A deviation from this standard is regarded as abnormal or pathological; shorter individuals than the minimum normal limit may be considered as dwarfs and those taller than the maximum limit as giants. Retardation in the growth of an otherwise normal child is an indication of sluggish activity of the acidophilic cells of the anterior pituitary. Dwarfs and giants constitute, therefore opposite conditions resulting from a function and the perfunction respectively of the acidophilic cells of the anterior pituitary as the main factor. Other endocrine glands may contribute to the conditions. Notably among them are the adrenal cortex etc. General malnutrition and deficiency diseases may also be considered as contributory to poor development.

An early administration of the extract of anterior pituitary gland therefore, constitutes the main treatment.—*The U. S. T. Journal, Jan. 1941*.

Care of Children in Winter

CHILDREN should go out daily in any weather, except fog, between 11 A.M. and 1 P.M. to make the most of the sun. Children of four and under should go to bed at 6 P.M.: half an hour's grace for each year of age being allowed to older children, with 8 P.M. as the limit for all children under thirteen. The rest period, unless it can be taken in the open air, should not clash with the outing period.

Fresh air is essential by day and night and rooms must not be overheated, dry, or dusty. By night, small restless children should wear a jersey or pull-over; for the day-time woolen knickers for girls and trousers for boys are recommended. Bare knees are desirable indoors, but woolen pull-overs to cover the whole of the legs should be worn out of doors by young children. Those who feel cold in their hands should use gloves, and the most important point about foot-gear is that the soles should be waterproof. Wet clothes, especially wet shoes, should be changed at once and dry slippers should be kept for use at school. There is much to be said for wind-resisting garments; but hats, unless the child has grown accustomed to wearing them, are unnecessary.

A little extra food to compensate for heat-loss is needed in winter. Extra fat, in the form of butter—preferably butter produced in those parts of the world where the sun shines in winter—is excellent and its effect in producing acidosis has been exaggerated. A bowl of porridge, or other cereal, enriched by cream, butter, or vitaminised margarine, makes a sound breakfast for children in winter. Green vegetables, salads, fruit, liver, fish, and fish-roses are all good, and extra milk, provided that it is "safe," should only be withheld from children with poor appetite. With a diet generously planned on these lines vitamins are unnecessary.

Ten per cent of colds are "home-grown," and are amenable to treatment of ear, nose, and throat, surgical or otherwise. The remaining ninety per cent are caught from another sufferer. Vaccines and ultra-violet radiation are useless against colds and attempts must be made to increase the child's resistance by sound feeding and avoidance of fatigue or chilling. Cold baths or cold sponging all the year round may have a hardening effect.

Diphtheria, measles, scarlet-fever, and whooping cough are all more prevalent in winter. All children should be protected against diphtheria by injection in the second or third year of life. Mild attacks of measles can be assured by the use of convalescent serum and scarlet fever responds well to serum treatment. Whooping-cough is now probably the greatest problem, though vaccine prophylaxis may yet prove a success. Rickets persists as a characteristically winter ailment because cod-liver oil is given in too small doses. Emulsions are dilute, containing at best only fifty per cent of cod-liver oil, while "cod-liver oil and malt" may contain only ten per cent. A child of one month requires a few drops daily of pure cod-liver oil; at six months, a tea-spoonful daily is necessary,

and at a year one and a half or two tea-spoonfuls. The maximum dose is required in winter and only slightly less should be given in summer if rickets is to be prevented or cured.—Moncrief, A., *J. State Med.*, 45: 50, 1937.
—*Indian Journal of Pediatrics.*

Cholera in Cities

CHOLERA epidemic is more prevalent in places where proportionately more land is cultivated and so it has got a direct relation with the increase of the nitrogen content of the soil due to cultivation. In the Punjab and adjoining places cholera mortality is much less in proportion to the proportionate cultivated land. This is due to the texture of the soil being more sandy, the consequent soil temperature being high and the moisture content low, whereas in the Assam districts, the soil is more clay containing, temperature is suitable and the moisture content is higher, hence more suitable for bacterial growth and increased cholera mortality.

Some people raise the question: industrial and business towns are away from cultivated lands and still how can there be victims of cholera epidemic like those of cultivating villages? The answer is that such cities get their water supply, drinking or otherwise, from a river which flows by myriads of cultivated fields. Further more, the city people derive their vegetable and fruit supply from surrounding cultivating lands far and near. Unknowingly the people carry home these cholera vibrio along with the moist vegetables and fruits. These vegetables and fruits are contaminated with cholera vibrio either from the soil direct or during washing in water reservoirs which have been contaminated from the adjacent cultivating fields.—*Cal. Med. J.*

Leprosy

1. Leprosy is a disease *sui generis*; it is not a form of syphilis or tuberculosis, but has striking etiological analogies with the latter.

2. Leprosy is not diffused by hereditary transmission, and for this reason, as well as because of the large extent of sterility among lepers, the disease has a natural tendency to die out.

3. Though in a scientific classification of diseases leprosy must be regarded as contagious and also inoculable, yet the extent to which it is propagated by these means is exceedingly small.

4. Leprosy is not directly originated by the use of any particular articles of food, nor by any telluric or climatic conditions, nor by insanitary surroundings; neither does it peculiarly affect any race or caste.

5. Leprosy is indirectly influenced by insanitary surroundings, such as poverty, bad food, or deficient drainage or ventilation, for these by causing a predisposition increase the susceptibility of the individual to the disease.

6. Leprosy in the great majority of cases originates *de novo*, that is, from a sequence or concurrence of causes and conditions which are related to each other in ways at present imperfectly known.—*The Calcutta Medical Review.*

The Ego and the Id.

Said the Ego to Id ;
"Pray tell me all you did
In the days when your subconscious
fast was locked ;
It would interest me vastly,
Be it ne'er so grim and ghastly,
And, let me add, I'm very rarely shocked.

"For myself," continued Ego,
"I early learned to leggo
And see my fancy take me where it would,
But years of self-expression,
Have left me the impression
That I've always really hankered to be
good".

Quoth Id : "When I was five,
I used to catch alive
And torture little insects by the hour,
At six I shot my sister,
I can't pretend I've missed her,
This complex Adler calls the lust for power.

I spent the next few years,
Despite my parents'tears,
Defying every code or book of rules,
My elders and my betters
Received indignant letters
Demanding my removal from five schools.

Throughout my teens I joyed
In libidos dear to Freud,
The twenties saw me rush from crank to
I tried out thirty diets, [crank,
I headed fifteen riots,
I broke my father's heart and broke his
bank.

I've dabbled since that time
In every sort of crime,
And sowed a goodly harvest of wild oats,
I've tried my hand at arson,
But since meeting with a parson,
I feel the time has come to burn my boats.

By dint of free confession,
I have banished all repression,
The cupboard's bare, the skeleton is out ;
No more can I pretend
When I cut my oldest friend
That I really do not know what I'm about.

For I've been analysed,
And motives once disguised,
Have now, alas, become an open book ;
Gone crime with all its glory,
Life's quite a different story,
The analyst has got me on a hook.

So if there's anyone
Who thinks it would be fun
To talk for hours to one who's paid to listen,
Consider first the price,
And take the *free* advice
Of a wistful, erstwhile out—and—out
Narcissan.

Henceforth you must eschew
All excuses old or new,
And say farewell to irresponsibility,
Essay not to recapture
Crime's first fine careless rapture,
But concentrate on middle-aged utility.

Maintain a state of grace
By reflecting on the Race,
The future is to them and not to you,

Let their synthetic good
In mating or in food,
Become the theme of all you think or do.

And now the least, but last :
Forget about the past,
No longing, lingering looks at childhood's
So cut the Gordian Knot, [horrors.
And remember Mrs. Lot,
Have done with all your Sodoms and
Gomorrah.

I hope I've said enough
To deter all but the tough,
This business is no joke, please rest assured,
But if with groans and tears,
You can stick it for three years,
You can count on being killed or being
cured!"—*The Lancet*.

The Marvellous Wisdom of Nature

A man seldom remains idle, but sometimes
during peaceful moments, when he has time
for reflection, he feels a profound admiration
for the wisdom of Nature.

Here are a few examples taken from the
animal and vegetable kingdom.

Flowers that are fertilised by insects, have
vivid and pleasant colours ; those that are fer-
tilised by wind, sway on flexible stalks. When
the former are in flower there are actually in-
sects that ensue fertilisation, for instance, bees
and butterfly. The latter flower more particu-
larly in the spring and during the autumn.

In this way a permanent balance is establish-
ed and Mother Nature takes care that this
balance is not disturbed.

Billions of mosquitoes swarm over the earth,
in the tropical, sub-tropical and temperate
regions. Unfortunately, all mosquitoes are not
harmless, and the man in the street cannot
easily distinguish the dangerous species.

Now science has established that the awful
malarial fevers are transmitted to man by the
anopheles. Happily, all anopheles do not in-
flict a dangerous sting. The male anophele is
a confirmed vegetarian, who doesn't sting and
lives on the juice of fruits, but it is the female
that is to be feared. When she stings, she in-
noculates man's blood with malaria parasites.

Although there are only a certain number of
mosquitoes that play the part of transmitting
agents, this does not prevent millions of men
dying of malaria every year. But here, also,
Mother Nature has not left humanity in the
lurch ; in the form of quinine, a product ex-
tracted from cinchona bark, she furnishes
a preventive and curative remedy.

According to the Malarial Commission of the
League of Nations, you only need to take a
daily dose of 6 grains of quinine throughout
the fever season, to be protected from attacks
whilst the dose prescribed for a cure is from 15
to 20 grains of quinine per day during 5 to 7
days. Each fresh bout is treated in the same
way. There is no necessity to have recourse
to additional treatment.

In this way, if Nature sends us maladies, she
supplies us with the remedy at the same time ;
nevertheless, she does not easily yield her
secrets, and it has required centuries to find
the remedy for malaria.—*Practical Medicine*.—
Health and Happiness.

Walk More

HIPPOCRATES, the great physician of ancient Greece, once said. 'Eat enough food to satisfy the requirements of your body and take enough exercise to work off the waste products which accrue as a result of the day's work.'

The modern trouble is that most people eat too much and omit the necessary exercise. The conditions of modern life in our great towns and suburbs have taken away the incentive for exercise. Trains, buses and cars easily take away from place to place. Other forms of mechanisation now do the work formerly done by our muscles. Another drawback to walking is the sight of uninviting shops and houses. The result is that we do not 'work off' the waste products our muscles become toneless and our nerves enfeebled.

It is generally agreed that walking is by far the best and most natural of all the exercises open to man, but what is to be done when work routine is fixed and the train or bus services, so arranged as to meet its call upon our time?

Walking is simple, easy and safe, providing the main roads filled with fast moving cars are avoided. This of course is where the 'hiker' comes in, for he knows the footpaths and lanes where mechanised traffic cannot penetrate.

By walking, say, ten miles a day a fat man would lose weight, while a thin man would gain it. The fat man would burn up his excess of fat, the thin man would acquire a stimulus to assimilation.

A Man is as old as his Spine. A regular exercise especially walking and deliberate physical movements are most important in keeping the spine supple. A man is as old as his spine, irrespective of his arteries if strong supple spine is conducive to strength of character, and makes for energy and ambition, while a weak or stiffened spine tends towards indulgence and inaction. The first thing that a person with a faulty spine should do is to adopt and practise exercises designed to give the back bone more suppleness.

The physical drill used by army and gymnasium instructors is useful in helping to unstiffen the spine but regular walking exercise is necessary to maintain a fit condition. Set exercises performed before breakfast to a time table are not of much value because they become irksome after a few days have elapsed. They are then discontinued with a sigh of relief. Skipping, however, is about the best of the supplementary exercises because of its varied nature. Many elderly people benefit from it.

WALKING HINTS:—It is important to know how to walk as well as to find paths and lanes where the country is attractive and a joy to see. Well-fitting and rightly shaped shoes or boots and thick-knitted socks are necessary especially if long walks are contemplated.

Sand shoes are inappropriate. A steady sustained pace is necessary—not sauntering or on the other hand forcing the pace. Light clothing should be worn so that free movement is possible and a minimum of weight is carried. The under clothing should be porous.

Training is necessary if long walks are contemplated. This was exactly how George H. Allen, the ace 'Simple Life' walker began his career. His training at first was very gradual. At the age of sixteen, he was an epileptic and badly developed physically, yet he cured himself by a simple natural diet and systematic walking. Among his many performances, he broke the record of walking for Land's End to John O' Groats by several days. —**DR. H. VALENTINE KNAGGS**—*The Indian Naturopath.*

Why Stomach Trouble?

ACID is the principal weapon the stomach has with which to defend itself against the error of our civilised eating habits.

If we eat too much, as most people do, the body sends to the stomach an extra supply of hydrochloric acid to aid in disposing off the surplus. In the beginning the excess of acid is about equally balanced by the excess of food; but when one continues to overeat, the proportion of acid increases until a condition of chronic hyper-acidity is set up which is expressed in a great many ways.

The length of the food which remains in the stomach is measured largely by the amount of acid present which causes the food to leave quickly. This produces several very serious disorders. First, it hurries the food from the stomach before it is changed into, or reduced to, that pulpy mass called chyme. This interferes with and sometimes prevents, the food being made into chyle, in which form it is ready for absorption. This is the next chemical change necessary to good digestion. This also is the reason why chronic acidity nearly always causes a decline in vitality, strength and endurance and produces, sometimes extreme emaciation because the victim of this disorder is as truly starved as if all carbohydrates were withheld from the diet.

Second the food having passed too quickly from the stomach, the excess of residue of acid left behind preys with great severity upon the walls of the stomach or actually begins a form of digestion upon these delicate walls. The first symptom of this condition is hunger, or a sort of craving for food. Many people mistake this for evidence of good health. The next stage is a burning or feverish condition plus appetite. Victims of this condition soon find, that to eat something gives immediate relief but this does not remove the cause but rather augments it.

The solution is found in the adopting of a plan of simple, careful and moderate eating of natural foods.—*The Indian Naturopath.*

In Lighter Vein

Wrong Number

TELEPHONE: "Doctor come at once! My husband has a temperature of 150°!"

Doctor: "Then you don't need me, What you want is the fire department."

* * *

Misunderstood

NURSE to a patient who is moaning while getting an enema: "Is the enema too hot?"

Patient: "What else! Do you think it is too sweet?"

* * *

Sleeplessness

THE resolute wife of the ill husband: "Doc, prescribe some pills so that he can sleep."

Doc: "Of this prescription you take 3 pills before retiring."—*Practical Medicine.*

Reviews

A Guide to Physical Activities.—By P. Krishnamoorthi, Physical Education Teacher, Board High School, Amalapuram, Price As. 8 only.

This is intended to be a hand-book for students who want to take part in sports and competitions as well as to teachers of such activities. As a guide, as it is rightly called, this booklet gives valuable practical instructions regarding various sports in particular and physical development in general. The author himself is an experienced teacher, and has consulted many books in this connexion.

We recommend the book to every student, teacher and parent.

17th Annual Report, 1940—41 of Sree Maharani Chinnabai Maternity and Child Welfare League, Baroda.

Sri Maharani Chinnabai Maternity & Child Welfare League, Baroda had its origin in the Maternity Relief Committee, the Sanitary Association and Influenza Committee, all of which were amalgamated in 1924 into a central league with a view to co-ordinate the different activities of sanitory, maternity and other kinds of welfare work. And so this league has completed 17 years of existence.

As we have gone through the report under review we have found that the League, inspite of the small staff consisting of only one lady doctor, one school medical inspector, one clerk, four health visitors and a few servants, has been doing splendid work for the welfare of

mothers and children, and has even succeeded in reducing their mortality rate. Much of the credit goes to the Lady Doctor, Mrs. N. Kamala Menon, L.M.P. She visits all wards, advises, examines and treats hundreds of expectant mothers and babies. During the year, the lady doctor examined 2617 expectant mothers i.e., 43% of the total number of cases of deliveries that take place in Baroda every year.

The special feature of the many activities of the League is the special care they take for babies and and these too, babies of poor parents. The health visitors look after the babies in specially selected localities of the city. Four areas are selected. In each "the visitor is to look after babies in about 200 poor families, etc." The attention the League is paying to the medical needs of the poor mothers and babies itself recommends the League to the best wishes of all individuals institutions.

The works of the League is also a good reflection on the administration of the Baroda State which is noted for its progressive ideas of and humanitarian activities.

Correspondence

Electro-Culture for Scorpion Stings—Mr. R. V. Lakshmi Ratan, Senior, Mylapore, writes:

During the last three years, I have treated about 200 patients in the East Mylapore area stung by scorpions. The treatment consisted of sparking the affected place, about half-a-dozen times, with a discarded motor car magneto, and of applying the juice of tulsi leaves (*Ocimum Sanctum*) externally on the affected place and administering the tulsi leaves internally. In all cases without exception, the cure was quick and sure. Certain precautions have to be taken according to the condition of a patient's heart and pulse before sparking.

It is easy to learn the technique. Medical Practitioners and such others as could examine the heart and pulse of a person, can learn the technique. Doctors in charge of rural dispensaries and village workers in charge of construction works will find it an advantage to learn the technique and treat the patients in rural areas. The equipment will cost about Rs. 15/-. The main item of the equipment is a discarded motor car magneto which should be in good order and which can be had of a shop dealing in second-hand spare parts of motor cars. With this equipment and changes in diet, I am treating several other diseases with certain amount of success.

Three days' training would generally be sufficient for learning the technique. Persons desirous of learning the technique may write to me by reply post cards to fix up an engagement. Instruction will be given free. My address: No. 40, Karneswarar Koil Street, San Thome, Mylapore.