Natural Hygiene

Man's Pristine Way Of Life

By

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RUBIES IN THE SAND
HEALTH FOR THE MILLIONS
FASTING CAN SAVE YOUR LIFE
SUPERIOR NUTRITION
FOOD COMBINING MADE EASY
HUMAN BEAUTY: ITS CULTURE AND HYGIENE

With an Introduction by

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Published 1968 By:

DR. SHELTON'S HEALTH SCHOOL

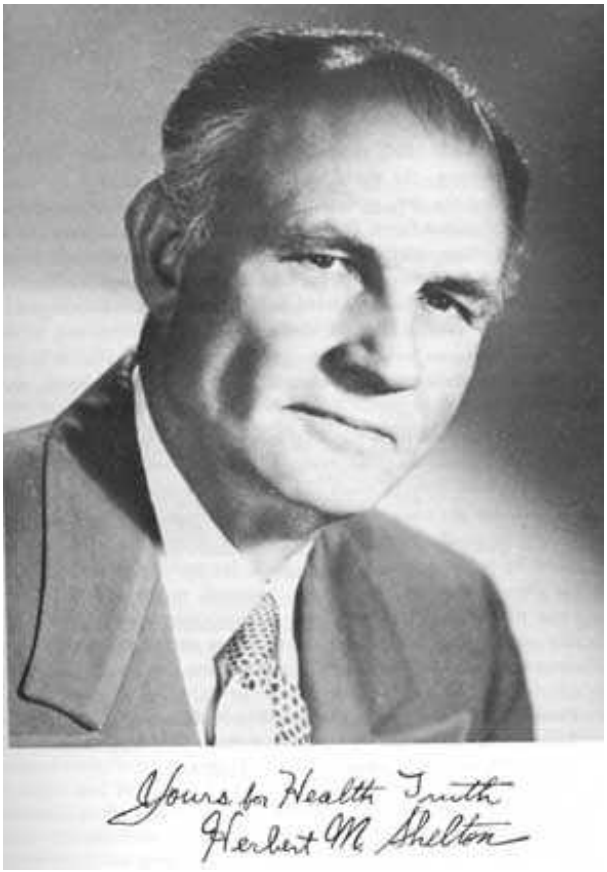
SAN ANTONIO TEXAS

I HAVE long and publicly taught the doctrine that, as a general proposition, man causes his own sickness and suffering-that in almost all cases, he is more or less to blame for being sick, and that he as truly owes society an apology for being sick as he does for being drunk.

--Sylvester Graham, July 13, 1884

DEDICATION

TO THAT brilliant company of men and women who served as *accoucheurs* at the rebirth of *Hygiene,* and to the glorious future that their labors make possible for all mankind, this book is sincerely dedicated by
---The Author



WE ARE NOT reformers; we are revolutionists. Medical reform--the world has had quite enough of that. Reforming the drug system by substituting one set of drugs for another is a ridiculous farce. It may, to be sure, substitute a lesser for a greater evil, in many cases, but is like reforming big lies with little falsehoods. It is like reforming swearing with obscene language; or like reforming robbing with cheating. Reforming allopathy with homeopathy and both with physio-medicalism, and all these with eclecticism, is like promoting temperance by substituting cider and lager for rum, brandy, gin, wine, or flesh eating by substituting milk, butter, cheese, for animal food.

We have no substitute for drug medicines. We let them alone as evil things, and prescribe good things. We cannot reform or change a falsehood. We have only to teach the truth. Our system is independent of all others. Its premises are original. Its doctrines have never before been taught in medical schools, nor written in medical books, nor recognized by medical men. They go back, (or perhaps forward), of all that has even heretofore been taught, assumed, or pretended, to the very Laws of Nature Themselves and we recognize no text book of authority although we have many for reference except that written by God's own hand--the out-spread volume of Nature.

From his introductory lecture on "The Problems o f Medical Science," delivered before the 1863-4 class of the New York Hygeio-Therapeutic College, by R. T. Trall, M.D.

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Introduction

by Virginia Vetrano, B.S., D.C.

"We have been riding piggy-back on the shoulders of colossi," said Dr. Shelton to me only recently. When I asked him to name the giants he had in mind, he quickly repeated the names of: Isaac Jennings, Sylvester Graham, William A. Alcott, Mary Gove, Russel T. Trall, George H. Taylor, Thomas Low Nichols, James Caleb Jackson, Robert Walter, Charles E. Page, Felix Oswald and John H. Tilden. These are the names of the men and women who figured most prominently in the revival and evolution of *Hygiene.*

Speaking of Graham, Trall once wrote that in the *Science of Human Life* Graham suggested that all the forces of the material world--heat, light, electricity, magnetism, attraction, etc.--were but modifications or different manifestations of the same essential principle. Less than a quarter of a century elapsed, said Trall, before this doctrine was universally accepted under the grandiloquent title of the "correlation of forces." This is but one example, among many, that could be given, demonstrating the outstanding intellects of the men who were responsible for the modern revival of man's pristine way of life.

Every discovery belongs to the generation in which it occurs rather than to the individual who is credited with making it. No great truth ever dawned in its fullness upon the mind of man without a longer or shorter preparation. As Newton said of his own work: "It was by standing on the shoulders of giants" that he was able to make his discoveries. Copernicus had conceived the true theory of the universe; Kelper had developed a series of astronomical laws; Galileo had demonstrated remarkable truths; Dr. Hooke had suggested the existence of attraction and Bouillaud had declared that, "If gravity exists, it would decrease as the square of the distance." It remained only for Newton to conceive and then demonstrate that all planetary motions and laws depend upon one grand primal force under the control of one invariable law, which together constitute the true principle of physical science and mechanical evolution.

Dr. Shelton is a giant himself, hence his eager willingness to acknowledge standing on the shoulders of former giants of *Natural Hygiene.* It took a great mind to synthesize a true science of life out of the works done by pioneer *Hygienists.* It required verification and evaluation, plus elimination of faulty inclusions handed down from our predecessors. It required a constructive thinker to weed out the true from the false contained in early theories and practices of *Hygiene,* and to synthesize what we now know as the *Hygienic System* or *Natural Hygiene.*

Genius is often like a Pegasus, admired but mistrusted, while the inertia of mediocrity inspires confidence by suggesting kinship with the common herd. Dr. Shelton is admired, but not mistrusted, by nearly all who hear and read him, because of his adept but unassuming candid and lucid manner of presenting *Hygiene* to the people. In a world that is filled with dishonesty, his honesty, like his zeal for *Natural Hygiene,* stands out like a bright and shining jewel against a dark and dingy backdrop of greed and deceptiveness of commercialized medicine.

Be he reformer or revolutionist, a man is interesting chiefly from the cause to which he is related. If the cause is truthful in principle and commanding in aim, if it is as profound in its law of action as it is sublime in its conception, if it redeems men from error, then the man who asserts its claim to consideration becomes clothed with its own dignity. For, as truth makes men, so they grow in proportion to the light shed by the causes they espouse. The greater a man's attachment to truth, the larger he grows, so that as soon as he becomes converted to certain principles, he begins to grow in stature.

Dr. Shelton has so grown in stature from his espousal of truth, that to all students, patients, disciples and co-workers, he has become somewhat of a hero. His pupils and disciples are constantly "picking his mind" to see what his opinion is on every subject. There are few who understand the principles of *Natural Hygiene* as well as he does.

Early in Dr. Shelton's career, he recognized the great need for education in correct ways of life. "Perhaps the greatest want of our age," he says, "is a correct knowledge of the physiology of our being and the laws that govern life, health and disease." It is pathetic that people die from transgression of the simple laws of life, when a little knowledge of biologic law would not only prevent them from becoming food for worms, but make life more enjoyable and more fulfilling. A great pathos of woes mounts to the heavens each day because millions, lacking knowledge, unknowingly trample upon the laws of life. Many who are not ignorant of the laws of life or of the necessity of observing them, suffer because they lack the courage and self-control to change their ways of life.

Long ago Dr. Shelton realized what thousands in the *Hygienic* movement do not yet realize, that you cannot convert what Graham called the "drugging cult" into *Hygienists.* Consequently, all his efforts and aims have been toward educating the common people into better ways of life, in order to free them from the spell of the drug pusher. He says that education must be done out of the schools, not only because "The physiologic and medical departments of modern universities and colleges are intended to cultivate the art of being methodically ignorant of what everybody knows," but also "because it is not possible for a teacher in one of our educational institutions to write and speak objectively upon a subject, the triumph of which would wreck the special interests that support the institution from which he draws his salary."

Many teachers who have tried introducing a little *Natural Hygiene* into their classroom have been promptly asked to discontinue this "folly" or resign. A few who were firm in their convictions and tired of keeping glorious truths to themselves, left the teaching profession. Exultant in their recovered health, these teachers have sought to shout the news to suffering humanity, especially to young growing children, so that they may prevent the ravages and suffering of improper living, but have been quashed by the powers that be.

Instead of teaching the value of exercise, rest, sunshine and other proper living habits, modern education emphasizes antibodies and immunization programs, and the dangers of malevolent micro-organisms. Instead of teaching a true mode of living that we may prevent disease, they teach a false system of disease prevention that people may continue in their pathogenic ways of living with a false sense of security. There is more money in immunizing programs than in teaching health truth.

As for facts, we have a world filled with them, enough we think to justify us in our assertion that *Hygiene* is superior to all other systems of care ever tried. It has been estimated that man's collective knowledge, the sheer bulk of accumulating facts, doubles every ten years, but facts alone are inadequate to the production of a science. Science, it goes without saying, must have facts, and many of them, but if facts are all that we have, we have no science. Facts may be organized into a science, only if and when the basic law controlling them is found.

The arts of *Hygiene* are based upon such a science. *Hygiene* is founded upon biologic law. These laws govern all living things and we are required to obey them or suffer the inevitable consequence of disobedience--disease and early death.

Dr. Shelton has been expounding *Hygienic* principles since 1919. He did not waste much time trying to educate the practitioners of the various schools of *curing,* who are steeped in their modalities and drugs. "Our concept of the *layman* is inadequate," he says. "We are inclined to assume that he knows far less than, in reality, he does know and that he is capable of much less understanding than he actually possesses. This is the reason that we tend to avoid, perhaps too much so, discussions of problems which may be difficult to explain in an elementary manner, and impossible to explain completely--but which might challenge the layman to think a bit more deeply and seek further information. If we take seriously our task of informing intelligent laymen, we will not shrink from the work of leading these men and women into the more abstruce paths of knowledge."

In this book and in all of Dr. Shelton's other writings, he has ardently attempted to reach the minds of laymen by expressing himself in language that everyone understands, but which nevertheless requires some serious thought and sometimes a peek or two into the dictionary.

A difficulty of teaching *Hygiene* is that newcomers have previously learned myriads of medical fallacies. From kindergarten through college, every year young people are crammed with "health education," which is not much more than advertising of commercial medical schemes. Consequently, people are well brainwashed in medical fallacies and are closed to new truths. In their acquisition of knowledge they have not learned to distinguish between reality and sham--between things that have in them substance and intrinsic value and things that are only fictitious and have at best only a suppositious value. They cannot distinguish between the true and the false, for their childhood acquisition of knowledge was false and they have no basic principles from which to reason. It takes many years to weed their minds of their cultivated fallacies. That which has been learned through misconception and mistutoring must be discarded for a clearer knowledge of the laws of nature. We must learn our relations to the things and conditions about us and how we may use, and not misuse or abuse all things.

If we take into consideration the vast amount of physiological knowledge and systematized thought of *Hygienists* of the past and present, that now exists in the world, waiting to be learned, if men will only learn it, the ignorance of our leaders is nothing short of startling--the ignorance of the man-in-the-street is appalling. Elbert Hubbard advised: "Go as far as you can see, and when you get there, you'll see farther." Hubbard was an optimist. He seems not to have realized that when we get there, we tend to close our eyes to the distant vista or to turn our backs upon it.

Uncounted millions of people in this civilization of ours live and die without ever understanding where they have been, how they got there, where they are at any given time, or where they are headed. It is, perhaps, not possible to awaken these somnambulists and get them to view the world in which they live. But should we not be able to open the eyes to those who would lead mankind? Should it not be that our teachers, politicians, physicians, theologians, first open their eyes and see? More often than not, however, they are the last to comprehend a true science of life themselves, as they are too obscured by their own particular interests. A highly educated man has been brainwashed in the field of health for a whole lifetime, hence his obfuscation is irremediable.

Tilden once stated that "all positive knowledge must take root in nature and on this foundation social ethics rest." We have a world that is teeming with men and women who are highly educated in negative knowledge, that is, with knowledge that is not made to blend and unite with man and nature. They have a lot of information about a lot of things, but no knowledge about themselves. They know too much and yet

have an indifferent education regarding the laws of life. A well educated young woman recently said to me: "I like malted milks. I know they are not good for me, but I don't care." She is a typical product of negative education--an education that is not related to and not blended with human life.

Many fools pass as very wise men solely because they have memorized the contents of numerous textbooks and passed the standard examinations, but they know nothing about the laws of life. One may be an Einstein in mathematics and sick with indigestion. With all his education, he may take an aspirin or an antacid for his discomfort and behave as though it has no cause. He may die at an early age because of such ignorance. This is a waste of 25, 30 or more years of the most valuable, productive and fertile time of an individual's life. His education has not educated him.

Prejudice--that little, snappish, rabid, purblind poodle-dog of old fogyism--is the vilest curse of our physical, intellectual and moral education. Our educational institutions are busy cramming our children's minds with prejudices. In high schools and colleges, where truth should prevail, we find textbooks containing near-truths and candid fallacies, ignorances and superstitions. Hence, prejudices and opposition to truth are rampant, as these always accompany false education and superstition, with all their darkening and debasing influences. Textbooks are written in such a manner that truths are purposely hidden.

There is strong fear of truth in our educational institutions. Were professors to begin teaching certain basic truths, they would immediately lose their job. They fear for their livelihood and stifle their inner urge to speak out. They are intellectual slaves, who can always find masters to tell them how to think and what to say. Those who seek for freedom in earnest will sooner or later make their way out of their dungeons into the light of day. They will develop the courage of the *Hygienists* and dare to speak the truth, "though the heavens may fall."

Why is there such a fear of truth today? Why is there so evident a desire to turn away from what may be regarded as a controversial subject, particularly if it runs counter to preconceptions and popular doctrines? It has been hammered into us from kindergarten through college, that we must not speak of any subject which might offend anyone. An exciting and fruitful academic argument is frowned upon in society. We must confine our conversation to sports, the weather, or our recent operation. There is a complete lack of ability of the average American to carry on an intelligent conversation. We are all taught to be good listeners. That's all that counts, say all our etiquette books. If we all just listen, who are we going to listen to? On the contrary, there is a great need today to bring out the ability of the child to analyze, criticize and discuss the many and varied issues of our day. A little friendly academic discussion is invigorating and inspires thought.

Because of ingrained prejudices of students, teachers, professors, and the man-on-the-street, *Hygienists* must be both courageous and adamant in their convictions. Our ideas, our motives, and our characters are assailed with a violence, which in a dark age, would have consigned us to dungeons or lighted for us inquisitional fires. Our prison is a conservative ostracism--we are pilloried in the public press--and the fires of persecution glow for us in the rage of our enemies.

This age has to learn the great fact, that no living truth can be crushed out of the minds of men. If our science of *Hygiene* is false, let it be so proved. We believe it to be true, and truth of the most vital importance to the purity and progress of the race. How can we progress when we suffer physically and mentally? Obviously, our progress is limited so long as we are ill. Drugged and tranquilized bodies are incapable of functioning normally.

Past and present *Hygienists* have so firmly believed in the truths of *Natural Hygiene* and in its capability of bringing man out of his lethargy and drug-induced miseries, that they have been willing to go to jail for their beliefs and practices. They have been men who have loved truth.

The love of truth impels the lover of truth wherever the truth lies. A genuine love of truth possesses as an inseparable and essential characteristic, a willingness to be governed by it implicitly, and to follow it, both theoretically and practically, wheresoever it may lead, even though this may only be done at the complete sacrifice of our preconceived and most cherished notions, and of our good opinion of ourself.

If one stumbles upon the truth about health and disease, and is a lover of truth impelled to follow every new truth one learns, there is no turning back. One may become peeved when truth blocks indulgence in a cherished vice. In the long run, however, one is happier in knowing the truth and glad to be able to follow it, for therein lies superior health and happiness.

When the devotees of any dogma, whether in religion, politics, medicine, or science, shrink from the light of thorough searching and impartial investigation, they manifest a latent consciousness of the weakness or error of the dogma, and apprehension that the light of clearly unfolded truth will reveal its deformity and untenableness. They are afraid to learn truth, as it will nullify all their beliefs and practices. They will be compelled either to be hypocrites thereafter or to follow the truth wherever it may lead.

"Wisdom," said Trail, "is ever crying in the streets, but how few are there who listen to her voice." They are afraid to listen to the voice of truth, because truth is always radical--it gets to the root of things. Trail said, "There never was a greater fallacy than the adage, that truth is a medium between extremes. Truth is always radical, always ultra: it is invariably an extreme or the other of any given proposition."

A genuine science declares its own truth; it does not have to be declared true by some powerful society or governmental body. *Hygiene* is not apparently true only, it is invariably a true science. Practices based upon its broad principles always follow a set pattern, and the results can be predicted in every instance. This cannot be said of medical practice, where each time a dose of drug is given to an individual, one should always expect the unexpected.

It may be argued that medicine is scientific (it is at least experimental) and *Hygiene* is not. The truth is just the opposite. Medicine is not and never was a science. It is a manner, mode, or method of treating the sick. Physiology, biology, anatomy, etc., are sciences, based on demonstrable principles, but these are not medicine. Although in becoming a physician, the medical student is required to study these sciences, medicine is not based on them. Medicine lacks a single principle that can be demonstrated, either by reason or experiment. Its modes of treatment are ephemeral, a thing that would not be so were they truly scientific.

Dr. Shelton is no disciple of the school that holds that "scientists" can do no wrong. He does not believe in the infallibility of "scientists." He does not believe that "science" is a body of perfect knowledge, that all of its "facts" are facts and all of its theories and hypotheses are true. He does not believe that all of its techniques are the best and that all of its practices are good. There is much that is done, he says, "in the name of 'science' and that has the endorsement of 'scientists' or many 'scientists' that is definitely evil." "The remedy for all of this may be more science, but only if we define science to be truth and recognize that if it is not truth, it is not science."

The "experimental method," with all of its admitted shortcomings, holds the mind of modern man in a vice-like grip. Its hold upon man is not weakened by the obvious fact that it has brought the race to a pitiable plight. By and large, we continue to submit meekly, unquestioningly, in many instances unknowingly, to the harmful practices that have been originated by the experimental method. Let me not be understood as denying any value to the experimental method. I plead only for a reappraisal of its results and of the situation into which its results have gotten us, as the cloud-fog of irrationality that surrounds us today is probably without equal at any other period of human history.

Science is but an infinite handicraftsman using the materials of the world around us out of which to mould his brain-children. A science is a nexus, that is, an integrated body of facts and laws and classifications, with its emphasis not upon a mere summarizing of fact-knowledge, but also on the necessary timeless relationships between the great body of facts that enter into the structure of the science, and the laws that give it structure.

Einstein is quoted as having said: "There is no finality in science." This would seem to indicate that what we know as *science* today is somewhat in the nature of an interim report of the processes of research, a process that had its origin in the dim past and which will proceed for an indefinite time. The search will go on so long as there are scientists searching for objective truth. This same fact is indicated by the frequent protestation of scientists that all of their conclusions are tentative and subject to change, alteration or to

being discarded as further discoveries are made.

As scientists make discoveries and new facts are uncovered, we should welcome them. Unfortunately, new truths are fought with the strength of a Goliath. New truths interfere with the image we have of ourselves. We are too proud to admit we have been wrong in the past, so the new truths are rejected, out of self-conceit, or to prevent some profitable activity from being destroyed by it.

It would be interesting in the history of science to investigate the reasons why certain large classes of facts have been rejected from time to time--why, for instance, was the church of Rome so peculiarly aggrieved that the earth should go round the sun and not the sun around the earth; why certain people, even now, think of the earth as flat; why a large group of present-day people object to living on an earth that required more than seven days for its completion; why the medical profession that once fumed and shivered when Mesmerism was mentioned now uses hypnotism, which is but the name given by James Braid to Mesmerism.

People of this age are rapidly losing confidence in medicine. Every issue of contemporary magazines and newspapers contains news items and articles on the hazards of certain drugs. No doubt the medical profession is possessed of a vast amount of learning, but in an age that is fast learning to think for itself, we find the people seeking elsewhere for health. What good is a vast amount of learning if what you have learned is not true?

The medical profession has from the beginning based its practices upon false principles, hence throw physiology out the window and poison the sick with nostroms. We do not seek warmth of an iceberg, so why seek health from a poison? Let's get our principles straight. Health comes from healthful influences and agencies. Drugs, all of which are poisons, do not belong among the health-building factors of life.

Physicians prescribe drugs according to the prevailing method taught them when in college. By the time they have finished college, new drugs have supplanted the older ones, compelling them to get their information about drugs from the detail man, or from the drug companies themselves. Thus, the physician is led into a very damaging and lethal practice. Until he has used a drug for some time, he does not know its *side effects.* He is forced to rely upon the accuracy and honesty of the drug companies in detailing the side effects of their products. The drug companies, however, are not going to go to any more expense in testing their new drugs than necessary, and they do not inform the physician of all the *side effects* of their drugs unless compelled to do so by an overburdened Food and Drug Administration.

The February 16, 1968 issue of *Time* magazine carried an article describing the lethal effects of Chloromycetin. This article stresses the fact that the company was compelled to give the facts to the physicians, rather than having honestly informed them at the outset. The article says: "While Parke-Davis has aggressively promoted its product, it has had to yield to demands from the Food and Drug Administration to temper its advertising with warnings . . . "

This drug and others have been found to produce aplastic anemia, yet it is prescribed by physicians for minor ailments, which according to all medical authorities, do not yield to antibiotics. Physicians have learned to drug their patients and they know nothing else. There is also the fact that for each treatment, a handsome fee is received.

If you harbor the illusion that the medical profession is composed of altruistic, philanthropic and gentle mannered gentlemen, then you are indeed naive. The whole of their inoculating and drugging practice is one huge commercial frame-up against the people. If you believe that this is and always has been the best of all possible worlds, if you are so thin-skinned that you seek to evade the cruelty and harsh reality of your own and past times, this story is not for you.

Physicians condemn *Hygiene* for the reason that once their patients learn how to live intelligently, there is no more need for them. Their condemnation of *Hygiene* is its greatest praise. Indeed, if they condoned *Hygiene*, we could almost be sure there was something lucrative about it. The condemnation of *Hygiene* by the medical profession does not negate its validity.

It is common for physicians to discredit recoveries under *Hygienic* care and to insist that they are not real. They recognize as genuine only those rare instances of recovery that occur under drug treatment and are likely to describe as imaginary the sufferings of those who turn elsewhere for succor. They have evolved an elaborate technique of self-deception in this area and do not hesitate to attempt to transfer this deception to the public at large.

Is it possible that a man who has suffered for years with asthma or arthritis can be mistaken in thinking that he is now free of suffering? Can he be mistaken in thinking that for years prior to adopting *Hygiene,* despite trying every healing art available, he never got well? In reality, he grew worse despite the many treatments he underwent. Is it an illusion for him to think that as he used the normal elements of life for the restoration of health, he gradually evolved into good health?

An intelligent man does not need much argument to convince him that the normal things of life, with which life is sustained and health preserved, are the things with which to restore health. He readily perceives the absurdity of trying to restore health with the foes of life.

Those who run to the physician for every ache and pain do so at the expense of their health. More often than not the *side effects* of drugs are worse than the disease for which they are given: Drugs produce more troubles than those listed under *side effects* and iatrogenic diseases, and are often the sole cause of failure to recover health.

The drug medical system has all the free publicity it wants, and its practices and pretended advances are blazoned from every news media available. This fact does not make their system true. To have faith in drug medicine is like losing sight of the substance and adopting a shadow. It is mistaking the praise for the principle. It is mistaking the sound for the sense. It mistakes a great noise for a great principle.

Physicians prescribe drugs to squash symptoms so that their clients may continue their daily routine, experiencing as little pain or discomfort as possible. But in doing this, they do not educate their patients out of their disease-producing habits. Consequently, as cause continues to operate, the patient's condition grows progressively worse. The patient is unaware of this progressive pathological deterioration until the morphological change is so great that it is impossible for him to ever regain health.

Dr. Shelton states: "Medical men do not teach people how to live, but on the contrary, dose their customers with substances that are antagonistic to life and to the functions of the vital organism, and if life is not destroyed by their dosing, health is greatly impaired. To destroy and supplant this false and fatal system, we need a multiplication of teachers who will teach the people a true science of life. The spread of truth will overthrow all systems of fallacy."

Hygienists have a great work to do. Before they can teach a genuine science of life, they must first weed from the minds of their students their false medical theories and superstitions. Customs are difficult to break. It is very unpleasant to many people to see long established usages broken and cherished prejudices set at naught, even when a great good is achieved thereby.

Dr. Shelton says that he makes no effort to please third-graders. He thinks that every man who comes in contact with *Natural Hygiene* in some way should inform himself about the simple facts of life. He states: "If they are so brain lazy that they will not make an effort to inform themselves about the simple facts of life, if they are incapable of thinking, if they refuse to think, if they are so besotted that their minds refuse to function, we cannot reach them with the glorious message of `health by healthful living.'" . . . "Even those patients who, once having been freed of their most annoying symptoms, return, like the dog to his vomit, to their former sensuality and excesses, cannot be saved from the fate they weave for themselves."

I have seen a patient cry as she viewed the menu of a banquet which her husband was attending, even though it was many such banquets which placed her in the serious condition that drove her to the Health School in the first place. Oh, how they hate to give up their disease-producing habits! Many would rather remain ignorant of the laws of life, that they may violate them without compunction.

Not so far off as it may seem, there lies a great battle in which the gathering forces of *Hygiene* shall meet

the forces of medicine to determine the victor. There are faint signs in the multitude of disquietude and fear of modern medicine. The medical profession has become ostentatiously boastful of their "achievements," which have all proved such disastrous failures that even a child can discern the colossal emptiness of their boasts, as well as the deadliness of their practices.

Wendell Phillips said, "We are apt to feel ourselves overshadowed in the presence of colossal institutions. We are apt to ask what a few hundred or a few thousand persons can do against the weight of government, the mountainous odds of majorities, the influence of the press, the power of the pulpit, the association of parties, the omnipotence of wealth . . . No matter where you meet a dozen earnest men pledged to a new idea--wherever you have met them, you have met the beginning of a revolution. Revolutions are not made; they come. A revolution is as natural a growth as an oak. It comes out of the past; its foundations are laid far back. The child feels; he grows into a man, and thinks; another, perhaps, speaks, and the world acts out the thought. And this is the history of modern society."

The *Hygienic* revolution will be similar. The pioneer *Hygienists* were the thinkers. Dr. Shelton formulated their thoughts into a consistent science, and soon the world will adopt these thoughts. We must be brave, he says. "Our enemies acquire strength only as we ourselves lose it. Meet them bravely and we are victors; fly before them and we are lost." "If we have struck one good blow against the hoary abominations of treating the sick by the administration of poison, we have not labored in vain."

Dr. Shelton has made his position clear on this greatest of all movements in the history of mankind. He has spent 48 years writing about *Hygiene,* so that *Hygiene's* position be well documented. *Hygiene* must not again be stolen and perverted by the medical profession, as it was in the 1880's. When this was done, the practicing *Hygienists* laid down their swords, thinking they had won, because the medical profession had accepted *Hygiene.*

This was a false assumption. The sword was sheathed too soon. It remained for Dr. Shelton to reopen the battle. He has devoted his life to the study and promulgation of *Natural Hygiene* and has shown that medicine and *Hygiene* are antagonistic forces. They cannot coexist. *Hygiene* annuls medicine.

As true reform always goes forward and revolutions never go backwards, the coming *Hygienic* revolution can do nothing but surge ahead. As it gains momentum, it will rapidly snowball into *Health For The Millions!*

The iridescent light of *Hygiene* is spreading and dissipating the unhealthy fogs of terror, ignorance and prejudice; the forces of regeneration are purifying human society and the universal adoption of *Hygiene* will establish human health.

Hygienists should not lose hope. We believe that truth will ultimately prevail. We think that as sure as the sun rises and sets, so will the principles of *Hygiene* be acknowledged as the true life principle, while the practices of the old schools of so-called medicine will be thrown aside, and finally swallowed up in oblivion.

One may have knowledge of healthful living, but it is only in its proper application to the improvement and happiness of man that knowledge becomes power. The knowledge is here in this book. It is necessary that we acquire self-control in our ways of living and gain control of our polluted environment to guarantee that boundless health prevail. We need, most of all, to tap our sources of information and make use of the great store of laboriously accumulated knowledge in the creation of a better tomorrow.

To accomplish this object, we need but two things--the thought and the means. The thought is in this book, and is being absorbed by the minds of millions. Ages of want, oppression and misery have brought forth the thought of a glorious future, and the means are at our hands. We have them in the great increase in knowledge, in the brilliant discoveries of science, in the vast force of machinery, in the powers and economics of combination and association.

The dawn of a new era of human society is brightening over the earth.

Author's Introduction

We are taking it upon ourselves to write this book in an effort to introduce as many people as possible to the principles and practices of *Natural Hygiene* and to the results of its practices. Many of the thoughts expressed herein may be old and customary thoughts, but the freshness with which they appeal to us, when we are able to see them in new relations, justifies their repetition. It is almost literally true that whatever one may write is but a repetition of what somebody else has written and, perhaps, written better; but it remains equally true that nothing that is worth writing can be written too often.

It is now nearly a century and a half since the *Hygienic System* was reintroduced to the world as a plan of care for both the well and the sick. When new truths are presented, line upon line, precept upon precept and volume upon volume are needed if the new truths are to be made to take their root in consciousness. Today there are multiplied means of instruction; but unfortunately, most of these are monopolized by the forces of exploitation. Our people, angry, frustrated and desperate or dazzled and hopelessly bewildered, are captives of a gigantic system of human exploitation that knows no limits to its exploitation and no depth to which it will not descend in its efforts to make people believe that they are being benefitted by the merciless exploitation to which they are being subjected.

A history of the human race is a history of progress. From aprons of fig leaves to silk and cotton raiment and garlands of gold and silver tissues; from the tent, the wigwam and the canoe, to the palace, the ocean steamer and the jet plane; from travelling by "blazed trees" on horseback and in clumsy vehicles to the railroad and a long series of interior improvements, there has been one long stream of progress. But with it all, man has neglected himself. Writing in the May 1853 issue of *Nichols' Journal,* Mary Gove said: "Man has cultivated what is about him and neglected his own nature. He has been careful for the earth and for animals. He loves a beautiful garden and is proud of a noble horse. He builds hospitals for the sick and prisons for the criminal. But he digs not up the evil root of ignorance that bears a fruitful crop of disease and crime." At present, we can only deplore facts like these and labor to put forth light everywhere upon the earth's darkness.

Since the ending of World War II, one of the most evident trends in American life is that towards conformity. There remains, as a hangover from the past, a widespread unconscious suspicion of the thinker; while, at the same time, our educational authorities do not hesitate to herald. the fact that their aim is that of teaching "adjustment to life," the importance, even the necessity, of "social approval" and the ready acceptance by the individual of mass values. A so-called "new conservatism" has come into being and is struggling for mastery over the minds of the people. We tend to accept that which is taught without stopping to think whether or not it is true. We are so eager to shift responsibility to someone else and so brain lazy that we blindly follow some great name, right or wrong. Or we follow the popular breeze because this is the easy way out. The present-day revolt of youth, however blind and goalless the rebellion, is a hopeful development.

The reactionary demand for conformity that characterizes our era is an authoritarian system that closely parallels the dogmatic religions. It is asserted that the demand for conformity is greater in academic circles than among the "common people." Echoing the statement of the totalitarian leader who shouted: "Death to all who are not of our crowd," they withhold favors and recognition to any man who deviates from their authoritarian standard. They enforce their own conformity and, like the totalitarian, feel that they dare not fail. For this reason, they are merciless towards their opponents and demand extinction, root and branch, of all who dare to oppose them. This attitude grows directly out of their fears.

In an age when nothing qualifies as knowledge unless and until it has obtained a charter of its validity from *duly constituted authority,* vital knowledge may languish in studied neglect for long periods only because *duly constituted authority* refuses to abandon its old and profitable errors in favor of revolutionary and probably unprofitable new truths or because this *authority* refuses to believe that any knowledge can

arise except through the *duly constituted channels.* The *authorities* in *science,* like those in theology, are quick to remind the outsider, when he presents a new find: "We have not educated you; you teach not our doctrines." Our educational system stifles curiosity and independence and discourages, if it does not forbid, those deviations that open up new fields. With its fanatical concentration upon its *authorities* and its *established sciences,* it conveys no sense of the diversity of life and of the history of development, no feeling of the resources of the past and no recognition of the great unknown that might furnish the basis for fresh knowledge. For new departures, one must look to those who have had the courage and good sense to break with the schools and the *authorities.*

The tragedy of American life lies just here: the atmosphere of conformity that has evolved in this country has made psychological and moral slaves of us. We think we are a free people, but we have lost our freedom to question, to live up to our convictions, even to have any convictions that differ from those that are commonly accepted; we have even lost our freedom to criticize ourselves. The psychological juggernauts that cloud, suppress, pervert and distort the minds of the old and young of our age are everywhere.

In the face of the leaden uniformity of the popular mind of our time, we say with Walt Witman, who said when discussing an altogether different matter: "I say discuss all and expose all--I am for every topic openly; I say there can be no salvation for These States without innovation--without free tongues, and ears willing to hear the tongues; and I announce as a glory of These States, that they respectfully listen to propositions, reforms, fresh views and doctrines from successions of men and women. Each age with its own growth." We consider this a graphic expression of a fundamental principle that should guide every generation.

Public opinion is a two-edged sword, cutting both ways. When correct, it encourages the development of the noble and good in man; when corrupt, it tends to debase and to hinder true advancement. In every age, influences have existed which corrupted public opinion, ridiculing every new discovery, sacrificing many noble men and women to its evil and making many martyrs to truth. It requires great moral courage to attempt to stem the current of public opinion and to pursue a course that is right, but we would prefer to go hungry than to remain silent about evils that abound on every hand.

The innocent assumption that truth is important can be dangerous in our capitalistic mad-house, where no truth is of sufficient importance that it may be permitted to stand in the way of profits. But, we are not to despair of the ultimate triumph of truth, for truth is a part of the universe and must prevail. Truth is one and immutable--Error has as many forms as Proteus. Truth and fallacy go their opposite ways. They do not gravitate in the same direction. They do not revolve around a common center. But truth is of value only in a world that lives by it. Bigotry and bluff do not always stand for truth: more often they merely camouflage ignorance and failure.

Through education and through everything that he hears and sees about him, a child acquires so many lies and blind follies mixed with the essential truths of life that the first duty of the young man or woman who desires to grow into a healthy adult is to cast away all truth and untruth that he or she has acquired at second hand, everything which has not been learned by personal observation and experience, and take a fresh start. No idea, however old, no "truth," however grand, should be looked upon as a sacred cow. All should be thrown into the fire together and have all the dross burned out of it. During adolescence, when the mind is still pliable and green, is the ideal time for this unburdening to occur. The adolescent who achieves this elimination of tradition and convention and, who loses his or her cultivated admiration for things old, may then enter adulthood fully prepared to think with courage and without the warping influence of blind credulity.

Because we have an educational system that does not educate, because we have embalmed our superstitions in creed and ritual, because we have preserved many of our superstitions in our *science,* man is at all times only 30 minutes from barbarism. Because our teachers are not permitted to tell the truth, even when they know it, lest they step on the favorite corns of some of our vested interests--commercial, religious, political or *scientific,* etc.--our young people are brought up on lies. A professor of history in a city college, who had spent several summers in historical research among the archives of his state, once told me that there is a great difference between history as it is taught and as it actually occurred. When I

asked: "Professor, do you tell these things to your students?" he replied: "I know which side of my bread has butter on it. If I were to tell them these things, my job would not last a week." Such is our much talked of "academic freedom." Our teachers are as free as our press. Many of them know that they are teaching lies; but their jobs depend upon the lies, so they keep their jobs.

Our people are not trained to investigate primary principles; very few, indeed, ever think of tracing a system or a theory to its basic premise or starting point. In medicine this is peculiarly true. For 2,500 years it has been assiduously and zealously seeking to build a science of medicine on false principles, with the inevitable result that all of the results of this vast amount of work and thought may be summed up as a vast collection of problems in pathology and therapeutics, amounting to nothing more than "incoherent expressions of incoherent ideas." Theirs is a wrong basis at the outset. Starting with the assumption that disease is an entity, and that in the poisons found in the mineral, vegetable and animal kingdoms there exists a specific for each disease, we detect the sources of the errors and fallacies that envelop in mystery the medical system. Medicine today is founded on hazardous experiments instead of being based on principles brought to light by physiological and biological science.

In the past, the medical profession sought to arrogate to itself all knowledge having important relations to disease and recovery therefrom, virtually saying that they and they alone are the conservators of the bodies of men. When life was in its greatest peril in sickness, we were supposed to have such reverence for the physician and such unbounded faith in the saving potency of his bag of poisons as to compel us to think and feel that the issues of life reside with him, and he was supposed to have control, almost supernaturally, over our mortal destiny. No matter how useful a general diffusion of such important knowledge, knowledge which relates to our very existence, and the means of developing and influencing the forces concerned therein, the knowledge was to remain the exclusive possession of a small professional class, too sacred or too occult for the common understanding. The people, of course, were to see the art of restoring health only as a complex system of drugging. Their prescriptions were supposed to be of such a character as to defy the scrutiny of popular inquiry; they demanded a confidence almost unqualified.

Tracing the *progress* of the *healing arts* opens up for the student an arena in which has been enacted some of the most astounding scenes connected with the rise and progress of civilization. Change is indelibly written upon every page of its history; yet this change can hardly be called progress. This constant mutation, this prevailing disposition to exchange old systems for new ones, to cast off old *cures* and adopt newer *remedies,* is due to the uncertainties of the subject entertained and to the evident lack of a valid foundation for medical theories and practices. It reveals that all the systems of medicine were outside the pale of truth.

A study of *medical* history reveals that each succeeding generation of physicians repudiates the theories and practices of its predecessor and spends time and talent without stint in inventing new theories and new practices, only to have these suffer the same fate as those of their predecessors. It also reveals how easy it is to make the same fact apparently sustain opposite theories.

For 2,500 years the highest powers of the human mind have been devoted to the invention or discovery of cures for the diseases of man. Many of the brightest minds of earth have engaged in this search. Untold mountains of wealth have been poured into the effort to find cures. For the past 50 years scientists have devoted so much time, energy, talent and technical knowledge to this search that it makes all preceding efforts in this direction pale into insignificance. The whole field of nature has been ransacked to discover antidotes for the many diseases with which man suffers.

The chemist has analyzed every substance, both inorganic and organic, of nature. He has created combinations as varied and numberless as the leaves of the forest. Not a mineral or a vegetable poison, however malignant, but has been added to the truly frightful load of medicines to be used to cure man's diseases. The poisons of insects, of spiders, of snakes, as well as the excretions of animals have been added to the *materia medica.* In the hope of discovering some *panacea* or some *specific* for the ills of man, ambitious men have added numberless drugs (poisons) to the armamentarium of physicians.

Fortunes of tremendous magnitude have been acquired by the compounders of elixirs and cordials.

Specifics galore have been announced and tried. But the results of all this searching and experimenting have not been satisfactory. Diseases have increased; their malignancy and fatality have been fearful. Chronic diseases, in particular, have enormously increased in modern times.

There are in this country more than 250,000 physicians; there are thousands of hospitals, clinics, sanitoria; there are several giant chemical industries turning out drugs and vaccines; there are thousands of wholesale and retail drug companies, employing an army of pharmacists; there is a great army of nurses, technicians and others who depend on the drug trade for their livelihood. In addition to all these, there are the manufacturers of bottles, pill boxes, cartons and plastics, and there are the newspapers, magazines, radio and television, that derive millions out of the advertising of these products. The drug industry, directly and indirectly, accounts for incomes and profits that run into many billions of dollars a year in this country alone.

It will be forever impossible to get medical men to acknowledge any principle which, if adopted by the people, will utterly overthrow the drug system and ruin the occupations of physicians. They never can and never will acknowledge such principles. Wounded pride, professional prejudice, inordinate vanity and self-interest stand in their way of giving the matter candid and objective consideration. The members of a learned profession are naturally the very persons who are disposed not to favor innovation upon practices which custom and prescription have rendered sacred in their view.

We expect nothing from them but opposition and imposition, slang and misrepresentation. But we care very little for what they think. Our message is for the people who have no stake in medicine. If the doctrines, principles and practices of *Hygiene* are accepted by the people, they will utterly revolutionize the care of the sick and completely wreck this giant industry and its parasitic industry, that of drug research. This immense business will be ruined, utterly and forever. The power, prestige, position, fame, the pride and wealth of the medical profession will be destroyed. For the profession to accept even our fundamental proposition that, *in the relations between lifeless matter and living structure, the latter is active, the former passive, always,* would permit the entering wedge that will upset the superstructure of the so-called healing art. The profession becomes, therefore, an interested witness, a partial judge and a prejudiced jury.

When in this book we speak of physicians in general, of their professional errors and prejudices, of their conceit and arrogance, of their indifference to truth, of their tender sensibility to the interest of their purse, we would not have the reader understand that we do not exclude from this general censure or that we deny in any way the existence of numerous honorable exceptions. In all classes of society and in all trades and professions, the common souls compose the majority; in all these categories are to be found individual noble men to whom truth is dearer than private gain. It is the misfortune of such men in the medical profession, however, that they are so controlled by the medical society that they dare not adhere to the truth that they know.

Medicine is a dead city in which the dead are determined that no one shall live. There are men in the profession who realize that all is not well in the dead city and who would gladly bring in new blood in the hope of reviving the rotting corpse, but they dare not do so. The intelligent practitioner is revolted by the hypocracy and narrowness he finds and the enemies he faces-the inertia, sluggishness and sullenness, the dominance of petrified prejudice and the slavish acquiescence to authoritative fallacy. These men fear the cagey watchfulness of their colleagues, who bear down upon each other for every deviation from their class line. The physician who develops even an intermittent sort of tolerance finds that they get their knives ready for him at once and are ready to spring, like the wolves on the crippled member of the pack, at the first sign of his confusion and dismay.

These men may tremble with some internal explosive disgust, but they take refuge in the stale opinions of their profession when they dare not express even a little of what is going on in their minds lest they betray the hatred of their work. They seem to think that truth can be embraced and laid aside at will without addling the wits of her ravisher. Unfortunately for such men, the enemy--the provincial, conforming suspicious enemy--is not merely passive and mocking; it is aggressive, strident and criminal; it turns to black-mail and violence; it is ready to frame and destroy anyone who raises questions it cannot answer. Are there no depths of ungentlemanly conduct to which it will not descend in its determination

that nothing shall live within the walls of the dead city?

In spite of all repressive efforts, the carefully observant man cannot miss the fact that we are witnessing a catastrophic going-to-pieces of *medical science,* coincident with a going-to-pieces of her practical structures. The best men in the profession have no remedy to offer for the decline that is so obvious. The blaring and racuous Babbitry that surrounds the medical practitioner, the pep-talks, the idiot drooling of advertisers and go-getters, the medical society that has adopted the mechanics of American business with all of its psychological ravages and the mad pursuit of wealth or even a career in the business-dominated society--a fierce scrambling affair that kills its victims and cripples its victors--cannot long substitute for a true science. So-called medical science cannot be saved by any possible parade of miracle drugs. On the contrary, the more of such drugs are *discovered* and used and the more rapidly these *discoveries* are made, the sooner must *medical science* pass to that *limbo* reserved for the systems that are grounded in fallacy and sustained by force. As each miracle drug, announced with the great fanfare of trumpets and the idiot-drooling of medicine's publicity men, who picture medical practice as a glorified and super-competent hack might, fails, it only serves to open the eyes of the people a little wider.

Nothing is so effective in the fight against darkness as increasing light. We have attempted to throw a cheerful sunbeam into the darkened ravine. In this last half of the twentieth century, no man's *ipse dixit* satisfies the investigating mind. A man must show his colors. The time draws near when a man or a profession must come before the world able to give a rationale or the why and wherefore of his profession or calling or meet the disapprobation of this inquiring age. As knowledge of *Hygiene* increases, this demand for a reasonable explanation will increase.

We do not care a peanut for the medical profession. It is the people that we seek to reach and convince. The profession is so securely wrapped up in its "official ignorance" and so determined to preserve itself from reproach that it is blind to simple truths that any intelligent person can understand. The people are glad to read the message of *Hygiene* and learn of the fountain of health of which it treats.

In the words of Trall: "We aim to be radically right, to teach exact truth, to expose and condemn everything that is false and erroneous, hence our exclusiveness." A truth cannot be killed. Her champions may be imprisoned, tortured and put to death; but truth will forever be triumphant. Acceptance of a new truth may be impeded; it may be delayed; but it cannot be prevented. We ask the reader to listen candidly to what we say in the coming pages and to give our statements that measure of reflection which their intrinsic importance and your suffering condition would seem to demand.

We know there are people who have grown up from infancy in the faith in drugs and who have resorted to them regularly for palliation and who have been sedulously taught to look to poisonous and destroying substances as their only recourse when sick, to whom what we say in this book will seem nonsense. All that we ask of the reader is that he enter into his studies of *Hygiene* with integrity, with intelligent zeal, with devotion and consecration to truth, with courage born of an unshakable confidence in the laws of life. Let a man thoroughly understand himself or the laws that govern his being and nothing can stand in his way of becoming a *Natural Hygienist.* If people were honest with themselves, nothing would stand in their way of investigating the principles of nature and their genuine relations to the things in their environment. They would not depend upon their physicians and their mysterious "remedies."

Let us not be misled by the popular sophistry: these things relate to the body only, the others are for the glorious mind and for the immortal spirit. This deprecation of the marvelous body ill becomes intelligent beings. The mind and spirit are dependent upon the body. Altogether too many people assume a fondness for science and talk learnedly of the laws of nature, especially such as are at a distance and do not infringe upon ourselves, but shy away from many a physiological truth.

We never argue for ignorance in any other department of human knowledge. We never argue for the neglect of mathematics, or language, or painting, or poetry or sculpture. But it should be obvious that, important as are these branches of knowledge, a knowledge of the science of life, of the science of man, is of infinitely greater importance. Let us know the laws of grammar and those of mathematics; but, first of all, let us study the *laws of life.*

Our land is filled with sick people. A voice of sorrow, a wail of anguish and despair comes to us from every quarter--from town and country, from rude cabins and nobler tenements--it comes beseeching help and none can supply that help but *Hygienists.* How much longer, then, shall we hesitate to adopt a system that is laid in the principles of nature?

The spectacular changes in the human condition that will result from the full development of the possibilities that man's technological advances have made possible stagger the imagination. If the whole of mankind were organized (socially) to completely harness the technological revolution and to develop, without waste, the earth's natural resources, the radical transformation in the condition of human life would transcend any change that has yet occurred in the history of the race. It is the work of the *Hygienic* movement to bring a full realization of this possibility to the people of the world.

What is the real objective of the *Hygienic* movement? What constitutes its soul or its life? What does it signify to humanity? How much meaning has it? What are the truths that underlie it--what is it that it seeks to bring into being? Is it to play a mere auxiliary part to the terrible system of drug medication (poisoning), which has become, world over, an overshadowing curse? The answer to these questions is that *Hygiene* must destroy, root and branch, the whole drug system and give to the people a system of mind-body care that is based on the laws of nature. In this work there can be no truce between falsehood and truth, between revolutionary intrepidity and sneaking, reformistic compromise. We are forced to attack and demolish a system that is as false as it is old. The work we are called upon to perform will tax our energies and resources to the fullest extent. But we do not for a moment permit ourselves to doubt that we shall prove equal to our task and that we shall pursue single-mindedly and with continued determination and whole-souled dedication the work that lies ahead. Formerly, we were too obscure to be noticed; now the eyes of every disciple of Hippocrates are upon us.

We must succeed. Ours is the continuing task of carrying to the suffering millions the message of health by healthful living, of teaching them how to free themselves and all humanity from disease and transform this poison-soaked world into the glorious paradise it is capable of becoming and that modern physiological knowledge and *Hygienic* means make absolutely possible. For if we fail--if, for any reason at all, the *Hygienic* program fails of acceptance--all else fails.

In the consciousness of our great duty to the people of the world and to posterity, in the knowledge that we are right in all essentials, in everything that matters, and that mankind must ultimately accept Hygienic principles and practices, in the certainty that no other program will or can serve the well and the sick and the cause of humanity at large in this critical hour, and in the full realization that in the rightness of our principles lies our strength and drawing our fortitude and stamina, our resolution and our irresistable determination from this realization, we must not falter in our work.

As *Hygienists* we have much to do. Great responsibilities rest upon us. *Hygiene* comes as a savior of the race. If we are to fulfill our obligations, we must be teachers of the people. We must dispel the darkness of ignorance and superstition with the glorious sunlight of truth; we must spread a true knowledge of the laws which govern our being. As *Hygienists,* we battle against darkness and ignorance, superstition and time-honored errors, venerable follies and false fashions, pernicious customs and depraved appetites. But we do not spend our whole time in the ungracious task of lecturing to people continually upon "the error of their ways." Ours is a positive program that offers the people, as a substitute for the wrong ways of life, ways that are in strict accord with the laws of life. For their present weakness, suffering and premature death, we offer them strength, health and length of life. Beyond the present scene of strife, beyond the clash of opinions and the conflict of systems, we see a glorious prospect: we see humanity redeemed from physical transgressions; a world brought back from thousands of years of wandering, to truth and nature; a people recognizing and obeying the laws of being, conforming in all their ways to these laws, living in the uniform enjoyment of health, that great first-parent of earthly bliss, and dying as the children of men were born to die, of a green old age.

Unlike other systems, *Hygiene* does not seek to veil its simple truths under mysterious and incomprehensible terms. It has nothing to conceal. It is open, clear, honorable, comprehensible. Its doctrines, theories, processes and laws invite criticism and court discussion. Understandability demands the use of language that is known to the people. comprehensibility is shut out by a jargon of foreign

language terms and phrases. The snail's pace of medical progress is nowhere more confirmed than by the tenacity with which it clings to the use of unmeaning technicalities.

It is, indeed, no small task to undertake to eradicate from the human mind the accumulated fallacies of 3,000 years, to convince the people of the utter fallacy of the popular system, to explode all the false theories, to clear the ground of the rubbish of ages and build up a new, a different, a true way of caring for the sick. But this work must be done. How soon it will be achieved will depend wholly upon the efforts of our co-workers. The *Hygienic* movement is doing nobly for humanity in the work of enlightenment and has enlisted a glorious army for the cause of truth and health.

We affirm that the fundamental theories of the medical profession are false and absurd and that its practices are injurious. The basic dogmas of medicine have come down to us both uninvestigated, unexplained and almost unquestioned, from the Dark Ages, when they originated. Even to this hour they burden all the standard works on physiology, pathology, pharmacology, *materia medica* and therapeutics.

The drug system of medical practice is hoary with age and has upon its skirts the blood of myriads of victims. It is lofty in its pretensions and domineering in its demeanor. These lofty pretensions shall be examined and this insolence shall, perhaps, be well treated with the consideration it merits. Its leading advocates are learned men, but so have been the advocates of many false systems and theories that have been fatal to truth and destructive to the welfare of humanity. False theories, those specious and plausible, are the more dangerous in proportion to the difficulty of stripping them of their disguise and exposing them in their naked ugliness to the gaze of the outraged and diseased world. Among medicine's pretended means of *cure* are about all the destructive means and agents known to chemists.

What is called *modern medical science* is a tilting yard for so many contentious theories that its pages have become almost impossible to read through the cloud of dust. Every medical journal we pick up contains a greater or lesser number of original fallacies or new editions of old ones. The fallacies of medicine are like the sands of the seashore--added to by every incoming wave. It would take more than a single generation to enumerate them. The medical science of today is like an ever-revolving chain, each link of which is a fallacy of greater or lesser dimension, which appears today to disappear tomorrow, to reappear the next day, to again disappear and reappear times without number.

Because man has many false evaluations of himself, because he is ignorant of the laws of his own being and, instead of looking to nature for enlightenment, has pursued strange gods and become a worshipper of idols, he is a victim of his own folly. The principles of nature embody all truth; their proper arrangements into systems constitute all science; and art is but the application of these truths, these principles, to new uses in producing desired results.

A New Revolutionary Situation

CHAPTER I

It was in an era of "hog, hominy and home spun." The North had just emerged from the age of white slavery; Negro slavery was in full flower in the South. In the West the process of murdering Indians and stealing their lands was still going on, a process that was to continue until it reached the blue waters of the Pacific, beyond which there were no more Indians to kill and no more lands to steal. Having thrown off the Old World tyrannies, the New World was busily engaged in forging new tyrannies.

Grains, bread, pork and lard pies predominated in the people's diet--vegetables and fruits were neglected, were contraband in fact. Nobody took baths, a strong body odor being regarded as a badge of merit. Fresh air was feared. Especially feared were cold air, damp air, night air, and draughts. Houses were unventilated and foul; no sunlight was permitted to enter them lest it fade the rugs, carpets and upholstering. Sanitation was neglected; tobacco was chewed, smoked and snuffed almost universally; alcohol was the favorite beverage and disease was common.

The people suffered with typhus and typhoid fevers, malaria, cholera, yellow fever, summer complaint (diarrhea) dysentery, cholera infantum, diphtheria, scrofula, meningitis, tuberculosis and pneumonia. The general death rate was high; the death rate among infants and children was appalling; mothers died in childbirth of child-bed fever. It was a day of frequent and heroic dosage and equally frequent and heroic bleeding. In the South during the summer season there was a cry of fever, fever, fever and calomel and quinine were administered lavishly, thus adding to the horror.

It is said that a new impulse pervaded the "healing art." Previously, it had taken form in every country in keeping with ancient customs. But Europe had followed in the path of Asia and her schools had taken their first instructions from the Jewish and Muslim universities. The "medical art" had speedily become overshadowed by scholastic subtleties embroidered with vague and visionary doctrines. Then followed a series of other schools and methods that were often rivals of each other. These schools invaded America so that Thomas Jefferson could declare in his famous letter to Dr. Wistar that he had witnessed the various sects and theories of *medicine,* "disciples of Hoffman, Boerhaave, Stahl, Cullen and Brown succeed each other like the shifting figures of the magic lantern; and their fancies, like the dresses of the annual doll babies from Paris, becoming, from their novelty, the vogue of the day and yielding to the next novelty their ephemeral favors."

The "medical art" in America during the colonial period had been simple and unpretentious. There were no medical schools and few physicians. The facilities afforded the student for learning medicine consisted chiefly in the familiar association with rural practitioners, the observing of their procedures and a diligent prosecution of such opportunities as colonial society afforded. Inquiring individuals, men skilled in woodcraft, and expert housewives learned the use of so-called medicinal plants (and other simple means) which they gathered from the fields and forests. There has been fostered the myth that they also learned many healing secrets from the Indians who are said to have known the *medicinal virtues* of many plants. Actually, the so-called "medicineman" among the Indians was a sorcerer or *shaman* and practiced no "healing art."

By the time the period arrived of which we now write, all of this had been changed. The schools of healing had arrived; folk medicine was almost obsolete. A considerable medical literature with Latin and Greek terminology had accumulated; medical colleges (schools of physic) had been established; medical laws were enacted and the process of setting up a National Medical Church which would dominate the lives of the people was well under way. Homeopathy and chrono-thermalism had come from Europe to compete with the dominant school, which became known as the allopathic school; indigenously, the Thompsonian (physio-medical) and eclectic schools of drugging had sprung up and these four schools (the

chrono-thermal school soon faded out of the picture) competed with each other for supremacy.

The medical historian, Shryock, says that "unfortunately, the standards in medical education tended to fall during the first half of the nineteenth century. This was true in an absolute sense in the United states and at least relatively in Great Britain. In the former the rapid expansion of population over a large area brought with it a mushroom growth of private 'medical colleges.' Their owner's interest in fees, or perhaps the limitations of their staffs, led these schools to shorten courses and otherwise to cheapen their degrees and by 1850 it was easy for a man of no particular training to attend lectures for one winter and emerge a full-fledged doctor." I need only add that not much was done to better medical education until after 1912.

Shryock says that "a somewhat analogous trend in Great Britain was marked by a continued dependence upon partially trained apothecaries . . . surgeons, barbers, apothecaries, and even chemists . . . all pressed their claims upon a bewildered people. According to one good authority, anyone could assume the title of 'doctor' or 'surgeon' in England and practice with impunity." In Germany conditions were little, if any, better. In France, where medicine was better organized and medical education more advanced, there was an increasing "therapeutic skepticism" among the medical leaders and, in many instances, as in England and in the United States, an actual drug nihilism. The profession had actually lost faith in its poisons.

Almost the whole of the nineteenth century was taken up with a fierce struggle between these four schools for survival and supremacy. Each school claimed to have the truth and the true medical art; each claimed to possess the true "law of cure;" each asserted its superiority over all others and each accused the other of killing its patients, an accusation which could be well substantiated against each school. In addition to this struggle, there was a wide-spread drug nihilism among medical men, the leading medical authorities of both Europe and America agreeing with the statement made by Dr. Oliver Wendell Holmes that if all the drugs of the pharmacopeia were cast into the sea it would be better for mankind, although a bit hard on the fishes. Is it to be wondered that the people became distrustful of their physicians and began to believe that they were being killed in the process of being *cured?*

The apothecary shops of the period were filled with measures of ornamental glass and weights of burnished brass or shining silver with which to divide and redivide the doses from ounces down to any fraction of a grain. There were powders, tinctures, dilutions, solutions, infusions, decoctions, lotions, gargles, lubricants, salts, acids, alkalies, gums, resins, gum resins, roots, barks, leaves, flowers, seeds, stems, piths, cerates, soaps, syrups, balsams, oils, essences, bitters, oxymels, patented nostrums and elixirs innumerable, beautifully labeled with gilded capitals, in polished boxes and drawers and in decorated phials, bottles, gallipots and demijohns, constituting a veritable museum of therapeutical curiosities which charmed the eyes while they occasioned nausea of the stomach. The drugging ranged from simples to minerals, from almost non-toxic herbs, like mint, to those of the highest virulence.

Those glorious men of science who have been for centuries the lawful administrators of the big boluses, the powerful powders, the biting blisters and the almighty emetics were ever busy drugging their victims with heroic doses of their poisons. They had made of disease an entity which they regarded as an enemy in the citadel of life and in their blind efforts to destroy this enemy, they have all too often destroyed the citadel. The patient was poisoned and poisoned and poisoned and at his funeral the people were told that "he died in the providence of God and will come to life again in the great resurrection." Instead of improving health, drugs destroy the human constitution; instead of *curing* our diseases, they poison us to death.

How is a man who is already sick to be made less so by swallowing a substance that would sicken, even kill him if he were to take it in a state of health? Whoever has had his bowels moved into convulsions by *cathartics,* his teeth rotted by mercurials, his liver enlarged and impaired by tartar emetic knows that the effects of drugging are many and varied, but always evil. In the days of which we write, patients were bled, blistered, purged, puked, narcotized, mercurialized and alcoholized into chronic invalidism or into the grave. The death rate was high and the sick man who recovered without sequelae was so rare as to be negligible. It is certain that if well persons had been put to bed and subjected to the same treatment to which the sick were subjected, they would have inevitably been made very sick and some of them would have been killed. Writing in the *Journal,* January 1862, Dr. Jackson says that the practices of burning, blistering and cauterizing had fallen off. Blistering had been almost as universally practiced as bleeding

and for as wide a variety of conditions. "But a few years ago," he says, "if a man had a pain in the neck and sought medical advice, the physician was sure to put on a blister. If he had a pain in the side and escaped blood-letting, he was sure to have a blister as a substitute. If he had a violent headache, and the physician could not readily determine what caused it, more likely than not he would apply a blister to some part of the head; or if he desired to appear *very* skillful, he would put it upon some remote part of the body, intending thereby, as common folks would say, 'to draw the pain away.' Blistering was a common method of treating the following diseases: congestion of the brain, inflammation of the brain, sore eyes, sore throat, inflammation of the stomach and lungs, of the liver, of the spleen, spinal irritation, bilious, typhus and typhoid fevers, and a great many other diseases too numerous to mention. Now the day of blistering has nearly gone by."

Dr. Jackson was a bit optimistic. Blistering was still being practiced when the present author was a young lad. Not only did drug stores handle blistering plasters in the early part of this century, but physicians prescribed them and patients were tortured by them. In Jackson's day and prior thereto, physicians would bleed for palpitation, puke for bitter stomach, purge for a torpid state of the bowels, blister for pains in the side, put plasters on the chest for pains in the chest; but they would never think of removing causes. Treatment grounded upon erroneous diagnosis and indefensible in the light of later developments has always been *scientific practice* while in vogue. Prof. N. Chapman, M.D., while professor of medicine in a Philadelphia medical college, said to his class that by giving calomel to their patients, they could in the course of one tolerably successful season lay the foundation of the business of a lifetime, as they would ever after have as much as they could do to patch up the broken constitutions they would make during that one season. Calomel in large and frequent doses was, at that time, the chief anchor of practice among the allopaths. An old couplet has it: "Their souls were sent to heaven or hell by doctor's dose of calomel."

Chapman's was a sweeping statement, but while made in reference to the mercurials, is equally true as regards the drug system as a whole. Physicians who are free with their drugging keep themselves busy treating the effects of the drugs. It is true that often their victims desert them and go to other physicians; but the result is the same--the other physician is kept busy treating the effects of the prior drugging. Brethren of the lancet and pestle school of so-called healing were all engaged in the same sorry practice, that of poisoning the sick.

For at least a century strychnine was the *best remedy* the profession had for palsy, paralysis and paralytic affections. It was used to kill cats and dogs; it was deadly to hogs and cattle and, when given as a poison, slaughtered human beings. But when given as a *medicine,* it was a *tonic,* a *nervine,* a *remedy* for our palsied fellow men. Another favorite tonic of the period, one which was administered in all cases of fever and came to be regarded as a specific in malaria, was the protoplasmic poison, quinine. When McClellan's army was encamped in the Chickahominy Swamps in 1862, his soldiers were fed on quinine, administered by physicians and surgeons as a preventive of malaria at the rate of $16,000 a day with corresponding rations of whiskey. When they became sick with malaria, their doses were increased. Never was a drug so unmercifully exposed as a failure, both as a preventive and as a cure; yet, the profession continued to use it and to swear by it.

There were fads in drugging then as now. Writing in the *Journal,* May 1857, Solomon Fraese, M.D., said: "A druggist said to me, 'There is not one bottle of cod liver oil sold now where there were 20 sold four years ago.' Alas for the evanescent character of medical remedies! Alas for the reputation of medical men! Who does not remember the high praises that were sung to cod liver oil only four years ago?" This is but one example of the way in which drugs were lauded, widely used and then discarded, to be followed in their turn by other drugs equally as useless and often even more harmful. It was not an uncommon thing for an allopathic physician to admit that he often administered drugs that he would not take himself, nor would he permit their administration to his wife and children.

Physicians were not content to pour drugs into the stomachs and to rub them onto and into the skin, but also sent them into the body by way of the lungs. The old practice of fumigating was one of drugging the breathing apparatus with every foul thing that could be smoked, solvented, pulverized and gasified. It had long occupied the profoundest attention of many medical men. Almost everything that is known to render the atmosphere impure and unsatisfactory for healthy lungs has been inhaled by diseased lungs. The

smoke of resinous substances, the miasma of swamps and effluvia of cow stables have been among the regular prescriptions for consumptive patients. Trall tells us that within a few years not less than a dozen influences and improved methods were invented to facilitate the introduction of vegetable, mineral and animal poisons and factitious and mephitic gases into the lungs.

Some of the physicians of the past went the whole drug-shop in the line of inhalative druggery. Among their multitudinous *remedies* which they recommended to be introduced into the delicate structure of the lungs, through the medium of their multiform poisons, were such *wholesome* substances as opium, cubebs, deadly nightshade, iodine, calomel, corrosive sublimate, sugar of lead, belladonna, digitalis, hellebore, aconite, dog-bane, tobacco, arsenic, antimony, niter, lobelia, cinebar, etc.

We need hardly remind our readers that all fumigators and fumigations, whether multiform, monoform, or any other form, were strongly objected to by *Hygienists* because they are false in science and injurious in practice. There is no way of accurately estimating the number of poor, miserable victims of tuberculosis, bronchitis, diseases of the throat, etc., who have died as a direct consequence of the practice of fumigating the lungs with poisons; but we may be positive that the number is large.

The patent medicine business flourished then as now. The land was flooded with bar-rooms and horse sheds were covered, houses, public and private, were filled, the papers and magazines swarmed with advertisements of this or that so-called remedy, which was guaranteed to *cure* this or that so-called disease. All the ills of man found their *cures* in the much-advertised patent nostrums and both the civil authorities and the medical profession knew that they were frauds. Yet the fight against such advertising and such fraudulent nostrums had to be started outside the profession and outside the ranks of the civil authorities. From college (medical) president to country practitioner, no word of protest was heard.

Many of the patent medicines amounted to little more than cheap whiskey. Alcohol was a foundation of the many bitters that were sold to the people as tonics, as it was the chief ingredient in many of the patent nostrums sold to women for female diseases. They even sold remedies for alcoholism that were chiefly alcohol. Among all the patent nostrums advertised to the public only one, sold under the name *Matchless Sanative,* was of value. When this *drug* was analyzed, it proved to be pure water:

It was well known to the physicians of the period that their drugs were damaging. For example, the celebrated Charles D. Meigs, M.D., of Philadelphia said in his work, *Observations on Certain of the Diseases of Children* (edition of 1850, p. 73): "It appears to me to be an outrage to give a child a dose of castor-oil, or rhubarb, or magnesia, when it is not required; for such articles cannot be taken into the stomach without exciting the beginning of trains of actions whose end no man can foretell." The reader will be quick to understand that when these drugs are administered to children when they are supposed to be "required," no man can foretell the results. James Stewart, M.D., wrote in his *Practical Treatise on the Diseases of Children* (second edition, 1846, p. 220): "The use of any medicine must, as a general rule, be regarded as injurious, as the object of medicine is but to create a temporary disease for removal of another; and only applicable when the disease demanding it is itself the greatest source of danger." This expressed the old fallacy contained in the choice of the lesser of two evils, except that in this case one chooses both evils. The theory that a serious disease can be removed by creating a temporary and less serious one must have been invented in a mad house.

In addition to drugging their patients to death, physicians have frequently bled them to death. Butchers bled pigs to kill them; physicians bled patients to *cure* them. So common was the bleeding practice that Trall used to refer to the allopathic physicians of his time as "our bleeding friends of the blistering school." For hundreds of years a profession, "born to bleed," hung like vampires about the bedsides of the sick with their cups and lancets. Indeed, the blood-loving and bloodspilling allopaths shed the vital current of their patients for over 2,000 years before they were compelled, by the opposition of other schools and rising public protest, to discontinue the bleeding of the sick. When the practice was at its height, a physician might be highly praised by many of those whom he had bled and physicked for his "energetic practices." It is probable that physicians spilled more blood from the time of Hippocrates to the middle of the last century than all the wars during the same period.

In the old bleeding practice at the middle of the last century 12 ounces of blood was an "ordinary," 16

ounces a "full" and 20 ounces a "large" bleeding. Often the *bleeder* seems to have had in view chiefly the quantity of blood withdrawn--thus reducing the patient as much as possible. Such large and butchering wastes of blood were routine procedures in the treatment of almost all kinds of abnormal conditions. If fever was high and the pulse full, the patient was bled; if he was collapsed, with hands and skin *cold, corrugated, pale* and of a *purple hue,* he was bled. If a child was of "strumous diathesis"--delicate, frail and of feeble organization--it was bled. In "low typhus fever" and in collapsed cholera, bleeding was resorted to, to unload congestion in the large, deep-seated internal blood vessels. Blood was withdrawn quickly from a large artery to make the requisite *impression* on the body, as indicated by faintness, a "train of morbid actions could be broken up."

If a physician was called to see a nervous, feeble, irritable, sick man, prostrated by over-excitement, enervating habits, depressing fears and loss of blood, he sought to help him by producing further loss of blood and by more poisoning. It was even common to bleed in pregnancy to relieve symptoms. Bleeding was resorted to in cases of apparent death from a fall and in other injuries. Bleeding was employed in wounds and head injuries that resulted in unconsciousness. Not only were pregnant mothers bled, but physicians also drew blood from blue babies. It was even a custom at one time to have oneself bled each spring and fall to preserve health. Not all of this bleeding was done by physicians, as there were professional bleeders and barbers who did the work. In Philadelphia one could see signs reading: "Cupping, bleeding and leeching done here by . . ." In the last century laudanum was given to "sustain the action of the heart." Bleeding reduced the heart action and laudanum was then administered to undo the work of the bleeding. Nitre and tartar emetic were given in alternate doses with laudanum to "keep down the action of the heart." What a beautiful medley! It could logically be inferred that if no laudanum were given, there would be no *need* for the nitre and tartar emetic and if no bleeding had been done, there would have been no need for the laudanum. In other words, if the patient had been let alone, the physicians would not have had to treat one effect of treatment with another measure that called for more treatment. Letting the patient alone would have saved his life even if it had not increased the physician's income.

According to the legend, Robin Hood was bled to death by a man to whom he had resorted for relief from an inflammatory disease. The physician or bleeder is said to have seized the opportunity to rid the country of the noted marauder. Whether the legend is true or not, the bleeding practice accounted for many thousands of deaths. There is an old story in British medical literature of a renowned physician, who, when one of his patients succumbed to exhaustion from repeated bleedings and an autopsy showed the deceased's blood vessels to be quite empty, gloried, nevertheless, in the fact that by withdrawing the blood he had conquered the inflammation. He had too! He had so reduced his patient that he was incapable of producing either fever or inflammation. Writing of "Great Changes in Medical Practice," January 1862, James C. Jackson, M.D., said: "Take for instance the subject of *blood-letting.* Since I have grown to manhood, I can recollect the practice to have been such that there was scarcely a morbid condition to induce relief from which some physician could not be found to advocate the practice of blood-letting. Physicians used to bleed for congestion of the brain, sore eyes, spinal disease, sore throat or swelled tonsils, asthma, inflammation of the lungs, pulmonary consumption, diseases of the heart, dyspepsia, liver complaint, enlargement of the spleen, inflammation of the bowels, piles, genital diseases, rheumatism, neuralgia, in all cases of fever, such as intermittent fever, remittant fever, typhoid fever, typhus fever, yellow fever, ship fever, black tongue, dysentery, dengue and, in fact, for every particular and special morbid condition which could be found. To such an extent did venesection run, that it was not only practiced in the treatment of human disease, but it was almost *universally* practiced in the treatment of diseases of domestic animals. The horse-doctor bled, the cow-doctor bled, the dog-doctor bled, the hog-doctor bled, the sheep-doctor bled. Whoever had any domesticated animals--aving and excepting always the cat--which showed symptoms of sickness, proceeded to bleed it. Horses were bled in the mouth and in the neck, chickens were bled under the tongue, cattle were bled in the neck and in the end of the tail, pigs were bled in the leg, sheep in the ears and in the tail, dogs in the fore-legs; and so on through the whole range of domesticated animals; whoever owned them, whenever they were sick, sought relief for them from such sickness by the aid of the fleam and the knife."

It was suggested by Trall that, perhaps, nature's *Materia Hygienica* should have consisted of bleeding, laudanum, tartar emetic and nitre, instead of air, food and water. But he pointed out that instinct has taught the animals of nature to seek air, food, water, rest and sleep, but has not taught them to seek bleeding and

poisons. The animals do not even seek for leeches and other blood-suckers.

During most of the last century, it was standard medical practice to withhold water from the acutely ill and thousands of patients literally died of dehydration. Here is a poem by Wm. H. Burleigh that was published in August 1857 under the title, *Faith--A Poem:*

"Restless and oft complaining, on his bed
Tossed a fair child, as burned along his veins
The fire of fever with consuming pains,
And ever and anon he raised his head
From the hot pillow, and beseeching said--
'Water! oh, give me water!' By his side
The mother stood, and tenderly replied
'Wait yet awhile, this potion take instead.'
'No,' cried the child--'tis poison and will kill!'
His father took the cup--'My son, be sure
This is a nauseous draught, but it may cure--
Will my boy drink it?' Then said he, 'I will,
I'm not afraid 'tis poison *now*--I know
You would not give father, were it so.'
"Oh, trusting childhood! I would learn of thee
This lesson of pure faith, and to my heart
So bind it that it never may depart--
Therefore shalt thou henceforth my teacher be;
For in thy perfect trust the sin I see
Of my own doubts and fears. The Cup of Life,
Drugged with the bitterness of tears and strife.
Shall I not drink it when 'tis proffered me?
Yes--for 'tis mingled by a Father's hand
And given in love, for rightly understood,
Trials and pains tend even to our good,
Healing the soul that for the better land
Thirsts with a deathless longing! Welcome pain,
Whose end is bliss and everlasting gain."

The author of this poem seems not to have questioned the wisdom of denying water to a fevered child, crying with parched tongue for cooling water. I recite the poem only as evidence of the prevalence of the practice and of its general and unquestioned acceptance--only the *Hygienists* and hydropaths dared to denounce it.

Certainly the boy was right in thinking that the nauseous draught was poisonous and that it tended to kill. His faith in his father alone caused him to overcome his instinctive repugnance to the noxious cup and swallow the poison. The father's trusting faith in the physician and his bag of poisons dethroned his own reason and caused him not to think for himself. Faith is not always an unmixed good. One can have faith in the wrong thing to his own and his child's undoing.

What blind credulity that caused both the mother and father to refuse to grant a request so reasonable and give water to a child suffering with fever! To refuse the child's request must have torn at the mother's heart strings. It must have taken all the strength the father had to thus deny the child's reasonable request. How many thousands of human beings were hastened into the hereafter by being denied water for which they begged while they had a fever! Oh! The wicked ignorance of the drugging craft! They taught the sick to fear the normal things of life and to put their trust in the anti-vital.

During this era patients in the highest fevers were literally killed by dehydration by being denied water. Denial of water, despite an intense and persistent thirst, first drove the patient to madness and despair and then to death. Patients cried out for water, water, which an ignorant and barbarous school of medicine denied them. It was contrary to the teachings of the allopathic school of medicine to give water, inside or

out, to a fever patient. Often the dying, when being granted their "last wish," were given the previously denied water and recovered. The sick body called for water, which was needed, and would have received it with gratitude and benefited from it, but the physicians denied it. No water was permitted to be drunk in typhus and typhoid for weeks at a time--not a drop of water, as such, was permitted. Fever patients were denied cold water that they clamoured for. They were permitted nothing but warm teas, warm balm tea being a favorite. Helpless little sufferers would stretch forth their small hands toward the water pitcher and piteously implore, hour by hour, those near to give a drink of cold water. What fiends parents became under the tutelage of their physicians! The young suffering with fever would cry out for water and the physicians would give them wine and even brandy. Due perhaps as much to the denial of water as to the accursed alcoholic medication, the fever raged and continued and the patients died in great numbers. An Alabama woman, writing in 1853, spoke of people "burning in the hell of fevers of every name and degree of intensity . . . spending weeks yearly in places of torment, asking in vain for water to cool their parched tongues."

Telling of her treatment by an allopathic physician, while she was suffering with typhoid fever, a woman writing in the December 1854 issue of the *Journal* says: "He even denied me the use of cold water." She pleaded to be permitted to put her hands into the water, as they were "dry and hot." Even this was denied her.

Dr. E. A. Kittredge, M.D., of Boston, writing under the pseudonym of Noggs in his "Diary of a New England Physician," describes some of his experiences while a medical apprentice. Suffice it to say that this description was given after he had abandoned the practice of medicine and some of the thoughts expressed may have been afterthoughts. He thus describes the cries of a child for water:

"'Mamma, *do* give me some cold water--will you, mamma? I'll be good, mamma, and take all the powders, if you will give me some cold water.'

"The mother replied: 'No, Johnny musn't ask me to give him cold water, for the doctor says it will make him all sick.'

"Oh! that piteous look," says the reminiscing physician, "as he turned his already glazing eyes upon me. I shall never forget; it seemed as if there was a voice in those deathly orbs--as if Nature herself was imploring me to have mercy; and, oh, the pang it cost me to refuse the darling boy--beautiful even in his deformity--his throat was swollen terribly; but I did though, and I gloated in my heroic courage; for I thought I was doing him a greater good than I could possibly do him in any other way."

He continues his narrative: "The fever lasted him nine days; and such a fever--being in a bed of embers was nothing to it, apparently, though it was dead of winter. He would kick every rag of clothes off as fast as they could put it on, tearing at his throat and mouth, and scratching his skin, like one insane and, as long as he could utter a sound, he kept day and night crying incessantly for 'water, *cold* water, do give me water--I want some cold water.' At last, when it was found the little sufferer must die, the 'Doctor!' said we might give him a little cold water!--and, would that I could describe the look of unutterable joy that lighted up the countenance of that dying child, as his fast failing sight beheld the limpid beverage coming towards him, and the avidity with which he attempted to seize the glass and held it."

Then, after a few remarks about the "poor worms" who, "under the plea of being true to science, trample upon the highest and holiest instincts of nature" he exclaims: "Science forsooth!--a bundle of dogmas--a heterogeneous comminglement of compound contrarieties--a mass of stale recipes and cruel formulas, smothered in bad Latin and Greek words--diametrically opposed to reason, to philosophy and to common sense--dubbed with the high-sounding title of 'science!'--you dare with this unnatural monster to frown down and stifle the voice of God crying aloud in the wilderness of man's living wants and desires, and thus frustrate the very laws of man's inmost being."

Returning to the boy, he says: "For hours the poor boy kept on crying for *cold* water, though entirely insensible, apparently, to everything else, when, as I have said, the doctor gave his consent to let him have some, as it was evident he could not live; but, even then, the friends dared not let him have half as much as he wanted, so thoroughly impressed were they with the belief that water taken cold was 'desperate bad for

sick folks.' " Further reminiscing, Kittredge says: "Here was another thing that puzzled my brain--viz, *why* it was that anything so good for *well* folks, should be so bad for sick folks?"

Seeking a reply to this question he says: "I asked Old Deacon Connant, why nature craved what wasn't good for her?--thinking it might set my mind at rest, as he was supposed to be the most in the confidence of the Giver of all desires, of any man in that region. The Deacon replied that 'the desires of the human heart are sinful--very; and the unregenerate man is constantly craving for evil things.' This satisfied the old doctor, and almost everybody else in those parts; . . . "

"Oh, with what veneration did I worship the sage opinions of Cullen, Boerhaave, Gregory, Good, Eberle &c., &c. In those days I never dreamed of doubting anything that each man said! Such sage men, thought I, never would recommend sage tea, unless sage tea was worthy to be recommended; in fact, all kinds of herb teas were sage teas with me, in those days--so sage, in my eyes, were they who advised them!

"It puzzled me, I say, to find out *why* that which was so good for well folks should be so bad for sick folks; I thought there must be some mistake about it. Nature seemed to be so in earnest for cold water, especially when overcome with sickness; it seemed to be her only reliance. Where anything like fever prevailed, water was the cry from morn till night, from night till morn again, in all the cases I had seen; so forcibly did this strike me as a necessity of nature, that I tried very hard to get the old doctor to let me give one patient some cold water while there was yet hope for him; but no, so strongly welded to the practice of the ancients, and the custom of his fathers, was my venerable tutor, that he couldn't think of any such heresy! He said it was contrary to the laws of allopathy.

" 'Allopathy be blow'd,' said Jeff Hall, who was present when I asked the old man; 'it isn't against the laws of God, anyhow, and, for one, I think God knows full as well, to say the least, as any allopath, or all of 'em put together; and no doctor, while I have my senses, shall choke me, or any of my family, to death--kill or no kill, I'll die in the same kind of shape, and not lie and loll out my tongue like a blown blood-hound, as folks have to do, in these diggins, who have the misfortune to be sick. See if I do.'

"The child above alluded to lived three days after the doctor gave it permission to drink cold water; and so much did it revive, that the friends all thought it was going to get well; but, alas, the day was gone by--it was like watering a tree after the sap had dried up; he died by inches, and the last thing he did was to attempt to swallow 'some more *cold* water!' "

Here is a recognition that this child died of dehydration. It is probable that had water been given days earlier, certainly if it had been given from the outset, he would have recovered. Many must have been the deaths from dehydration under this old practice, which had the sanction of religion, under the stupid notion of universal human depravity. Kittredge says that when a child became ill, every old woman in the neighborhood had the privilege of pouring down the throat of the child whatever she pleased--"poison stuff that sheep and cattle knew too much to eat." Then, two or three physicians would be called and they would come and put down the "pothecary stuff" which was "ten times more poison than the herbs . . . denying them even a little water to drink."

During the time when it was standard medical practice to deny water to the acutely sick patient, it was a common thing, when a council of physicians had concluded that the patient was going to die, that they had exhausted their skill and their means of *cure,* that there was nothing more to do and no longer any hope for them to continue to peremptorily refuse the patient a single drop of water. They were deaf to his cry: "Water! Give me water!"

Some friend or neighbor, left a short time alone with the patient, made desperate by his sufferings and his pleadings, might place water within his reach, often a large pitcher filled with cool, clear water, which he would swallow in one long, delicious draught. Such thirst cared not for the threatened perdition; one such treat of sparkling cool water was worth more to the patient than the whole of life.

Of course, the attendant dreaded the consequences. He would steal softly to the bedside of the sick man, the occupant being quiet and still, to see if he had died, only to find him sleeping peacefully, perhaps with big drops of sweat standing on his brow. He quickly called the friends and relatives of the patient, while

the physician was sent for post-haste. The physician would say that "the crisis has passed," a "change has taken place for the better and the patient will recover;" but he would deny water to the next sick man, woman or child that he cared for.

A vital need of life had been supplied, as it had long been demanded, and the patient responded to the gentle influence of this *Hygienic* need as the flowers respond to spring showers. Large numbers of people recovered in just this way, after their physician or a consultation of physicians had said that recovery was no longer possible. Strange! that it should happen so often without opening the eyes of physicians! Strange! that the practice of denying water to fever patients was not discontinued until *Hygienists* and hydropaths forced its discontinuance!

Harriet Austin thus recounts a case of this kind which was that of a friend of hers. He was in a hotel among strangers. She says: "He knew he was expected to die. He was tormented with thirst day and night, and not a drop of water could he obtain. To aggravate his suffering, he constantly heard running a stream of water at the corner of the house. He watched his opportunity and crawled out of bed, down the stairs, round the house, till he found a large watering trough into which the water was falling. Into this he managed to get, and there he lay and *drank all he wanted.* The panic was terrible when he was discovered. He was placed in bed, clothes heaped upon him and a messenger sent in haste to bring the doctor to see him die. Before he arrived, however, he was sleeping sweetly, and from that moment he recovered."

Strange! isn't it, that had this patient stolen to the medicine cabinet and taken a dose of some forbidden drug and recovered, the physicians of the neighborhood would have gotten together to discuss the possible curative virtues of the drug in such a case, but did not come together, upon hearing of this recovery, to discuss the possible need of the fever patient for water! The world would have heard of the wonderful cure wrought by the drug; the world was not appraised of the office of water in enabling this patient to restore his health. Physicians continued to forbid water to their fever patients.

The recuperative and remedial effects of supplying the living organism with the normal needs of life, in keeping with its current need and power to use, is too simple for the *scientific* mind to comprehend. It is even too simple for the lay mind to grasp. We are so determined to have something mysterious and incomprehensible that we refuse to consider the simple and necessary requirements of life. The healthy body needs and can use water, so, also, can the sick body; but we prefer poisons for the sick.

There arose groups of people who called themselves Grahamites, physiological reformers, *Hygienists,* orthopathists, hydropaths, etc., who boldly affirmed that God or nature or whoever was responsible for man's existence, knew better than the most learned physician what drink was best for man, sick or well, and that all the cold water demanded by thirst will not harm a fever patient. It was due almost entirely to the work of these people that the medical profession ultimately consented to let their fever patients have water to drink.

Life speaks most emphatically through its organizations. Its instincts are more reliable guides than reason. The medical system insisted upon repressing the instincts of their patients--it denied its victims water to drink and air to breathe, fed them on slops and drugged them against the most emphatic protests of nature or instinct.

This was a time when the sick were denied the benefits of fresh air. Physicians would give strict orders to keep the room closed and to keep the air from the room. If it were necessary to enter the room, the door had to be opened as little as possible and closed quickly. The weather may have been hot, the patient may have had a high fever, the room may have reeked with the odors from the patient--it was still necessary to keep the room closed. No breath of fresh air was to be admitted. Patients were made to struggle in the confined air of their sick chambers. It would be impossible to estimate the number of deaths that were caused by this denial of fresh air.

Writing in 1850, a woman who signed herself Marian thus pictures the requests of a dying child for water and air, both of them forbidden by her physician:

" 'Mother,' said the feverish child,

'Give me water to drink, I pray.
Some water from the deep, cool spring,
Round which I used to play.

" 'Mother, I burn with fire within,
I surely will grow wild;
Give me water to cool my tongue,
If still you love your child.'

" 'My child!' the frenzied mother cries.
'O, ask not this of me;
Cold water is forbidden drink--
It would be death to thee.'

" 'Mother, open the window, 'then,
And let me feel the air;
This room's so close I cannot breathe,
O, mother, hear my prayer.'

" 'My child, demand ought else besides
That love or wealth can give.
They say I *must shut out the air,*
As I wish my child to live.' "

It is simple poetry, but it feelingly describes the tragedy of the time. Physicians were good at bleeding, leeching, cupping, blistering, purging, puking, poulticing and rubbing with ointments; but they could not comprehend that a child cannot breathe without air, that the parched tongue of the sick indicated the urgency of the need for water. Children and adults alike were killed by the thousands for want of the simplest elemental needs of life because physicians were prejudiced against what they called the *non-naturals.* They classified their drugs as *naturals.* Food, air, water, sunshine, rest, sleep, exercise, the emotions, bowel movements and the like were *non-naturals.* It was to protest against such practices that Oliver Wendell Holmes, himself a physician, but an avid reader of *Hygienic* literature, wrote the following lines:

"God gave his creatures light and air,
And water flowing from the skies;
Man locks him to a stifling lair,
And wonders why his brother dies."

Especially in those more protracted struggles of the organism, when its powers show signs of failing, when it is languishing and exhausted, certainly every effort should be made to secure to the sick organism a plentiful supply of fresh air. Too often, when the exhausted organs of the body cry out for fresh air, which would supply needed support to their wasted energies, they were given drugs and goads but no oxygen. The hospitals were not only poorly lighted, but they were poorly ventilated. Trall marveled that graduates of the best medical schools were entirely ignorant of the necessity for pure air in the hospitals and apartments of the sick, but said: "When it is understood that health is not taught in medical schools, the wonder will cease."

Writing in 1853, E. M'Dowell of Utica, Michigan, said: "In 1840, under a popular Allopath, I was fast sinking under a fever. On a feather bed, windows and doors closed on a hot summer day, pulse and breath nearly gone, I lay roasting. Friends stood around, 'looking at me to die.'

"At this critical moment a woman called in to see me. She ordered both doors and windows thrown open, and with a pail of cold water and towels she began to wash me. As the cold water towel went over me, I could feel the fever roll off before it, and in less than five minutes I lay comfortable, pulse and breath regular, but weak, and soon got well." This is a typical example of the way in which windows and doors were kept closed and the sick were smothered in blankets, even though it was a hot summer day and the

patient's temperature was very high.

The body cried out for oxygen and was given a poison and tortured with blistering plasters (scorpions) and stuffed with milk, eggs, meat slops and brandy. At such times, when languid and exhausted nature more especially needs a full supply of oxygen to strengthen and quicken her for a more successful struggle, certainly, fresh air should be insisted upon. In the organism's great extremities, when its powers flag in the swoon or ebb and sway of the approach of death, it may be too late to throw open the windows or carry the patient into the fresh air; yet we often instinctively do just this. How much wiser it would be to provide fresh air when there is strength with which to struggle! The value of pure air to the sick, as well as to the healthy will not now be denied, even, if in practice, fresh air itself is denied the sick.

If diseases are to a certain extent evanescent; if there are no specifics in *medicine;* if the causes of disease cannot be driven from the body by drugs and treatments; if we must rely upon the vital powers themselves as exercised in the various organic processes and functions; if by providing for the free, healthy, unobstructed exercise of these functions in all cases, we can best promote the work of restoration; if a constant supply of oxygen is necessary to the conduct of the nutritive processes, both in health and in sickness, then a constant supply of fresh air and full, free draughts will be found most helpful to the sick. It is especially wrong to withhold from the sick organism full supplies of the essentials of existence in the hour of its greatest need.

The medical profession has never fully accepted the fact that fresh air is needed by the sick. There was a time, well over a hundred years ago, when the medics asserted that the atmosphere of the cities was more suitable for asthmatics than the air of the country, and the smokier the air and closer the streets the better. This was a time when tubercular patients were put into caves or required to sleep in cow stables, that they might breathe the effluvia from the decomposing manure.

Medical men have never entirely accepted hygiene and sanitation and have never completely abandoned their opposition to it. An article in the September 1955 issue of *The Practitioner* accuses the average person of regarding the open bedroom window with near fanaticism. It says that certain people can sleep much more healthfully if they keep their bedroom windows closed and their rooms comfortably warm. The article also says that asthma patients may obtain relief from pollens by simply excluding the cold, damp night air from their rooms. Here we have an echo of the old medically fostered fear of cold air, damp air and night air. The article says that sufferers with chronic bronchitis may sleep more comfortably in a warm room with the windows closed. It also suggests that perhaps the body can fight "virus infections" of the respiratory passages if the room is warm and the windows closed.

Cleanliness was utterly disregarded. Physicians not only frowned upon, but actually opposed bathing. Surgeons performed operations without washing their hands and the operating rooms of hospitals were veritable pig sties. Physicians would go from the post-mortum room directly to the delivery room and assist in the birth of a child without washing their hands. Child-bed fever was a very common disease and the death rate in this condition was very high.

Dioclesian (Dio) Lewis, M.D., writing to the *Journal* from Paris under date of November 12, 1856 said: "Dear Journal--I have now been in Paris ten days, and several hours of each day walked the hospitals. I need not tell you that no hospitals have a more exalted and world-wide reputation. Nowhere on earth have the refinements of medical science been so completely elaborated. For instance, gentlemen of the highest attainments spend a long life in the study of one single species of the diseases of the bones. They pursue the study with the zeal of an apostle, and exhaust fortunes in purchasing the most advantageous opportunities for thorough research. Large works, filled with exact illustrations, appear from time to time, and a fine hospital is thrown open for the gratuitous treatment of this particular specialty. There is scarcely a human disease that has not in this city its special professors and hospitals, and every thing is free, not only to the patients, but to students. I believe it is not extravagant to say, that there is more of this special, high-toned, gratuitous intellectual labor performed in this city in one year than in all the rest of the world in ten years.

"But notwithstanding all this, I believe there is no civilized city in which disease is treated so unsuccessfully. This apparent paradox needs no solution to those who visit the hospitals, and observe the

utter disregard of the most common laws of hygiene. With one exception, I have not visited a hospital in which ventilation receives any systematic attention; and as to bathing, I must give you a fact or two. Yesterday I spent two hours in L'Hopital de la Charite, and followed in the train of Broca, who is perhaps the most promising medical man in Europe. The first patient I saw was a young lad whose foot had been seriously cut with an axe. Broca gave the facts in the case, then removed the strips of adhesive plaster, and ordered some new ones. These were immediately put on, and then Broca proceeded to put over the wound a large mass of lint, several thicknesses of linen, and bound over all this a thick, strong roller. But in addition to this miserable hot-bed, the foot and leg were completely covered with a crust of black dirt. Just about the incision the scab had been softened, and evidently scraped off, but the rest of the limb bore the accumulations of months. Of course the wound wore a very unhealthy appearance. I whispered to an intelligent student that I thought that foot only needed thorough soaking and cleansing, and I added, that I thought the incision would at once put on a healthy appearance if the patient, in addition to this local purification, could have his whole skin purified, and the window near him opened. The student replied by asking whether I did not think he might take a cold.

"The next was a case of scrofulous enlargement of the knee. Broca informed us that the patient had been in the hospital two months, and it was clear enough that during the whole time the limb had not been even washed. A new liniment was advised, and the crowd passed on. I delayed a little. and, upon examining the patient, found that his whole skin was dirty, dry, and feverish; and so on to the end of the long list of sufferers. The stumps of amputated limbs were dressed with lint and linen to the thickness of an inch or two, but no water.

"It is to me utterly inexplicable that a people so incomparably vigorous and progressive in all the higher and more abstruse departments of medical science, should so utterly neglect these common necessities of a successful treatment . . ."

Patients were dosed heroically, had their veins and arteries emptied of blood, were denied water to drink and fresh air to breathe and stuffed on slops. Is it any wonder that otherwise simple diseases were regarded as very malignant and the death rate was high? Should we marvel that the people lost confidence in their physicians and began to (correctly) suspect that they were being killed by them? A real revolutionary situation existed. The time was ripe for a change. No mere reform would suffice.

The Hygienic Revolution

CHAPTER II

Reform means a change of externals. Reform is a patchwork program and is justifiable only when the thing that is to be reformed is basically sound and worth saving. Revolution, on the other hand, is a change from within; it corrects evils at their roots instead of making them more bearable by patching them; it is a fundamental reconstruction or the replacement of an old order with a new. Revolution is imperative when the old system, like the medical system, is rotten to the core and contains nothing worth saving.

Revolutions grow out of revolutionary situations and are not the work of agitators. Along with events and their consequences, dictated, not by the intelligence of man, but by what he conceives to be essentially non-rational forces of power and need, man and his institutions take new directions. Although from Hippocrates to Galen and especially from the Renaissance to Jennings and Graham, efforts at medical reform had been legion, no fundamental change in medical systems had ever taken place. What came about at this time appears much like the fulfillment of history by its own natural agents.

Out of the contradictions, confusions, chaotic and heterogeneous collection of delusions that were called the art and science of medicine, out of the conflict of the schools, out of the obvious failure of medicine to fulfill its promises and out of the refusal of the medical men to consider the normal needs of life in their care of the sick grew the need, nay, the urgent necessity, for a revolutionary reconstruction of biological thought and a resurrection of a biological view of man's needs.

The whole medical system of Western society was in a state of chaos and confusion. It is not surprising that the revolution had its first beginning in France, where medicine was most progressed. As early as the beginning of the nineteenth century, there were physicians in France who discarded drugs and relied upon "nature" and "good nursing." By the middle of the century the number of these had swelled and they adopted a special name for themselves. In Germany the water-cure was launched at about the beginning of the second quarter of the century. In Sweden, the Ling system soon rose to popularity. In Britain Andrew Combe, M.D., and William Lamb, M.D., attempted to lead the people into physiological ways of caring for themselves. Combe attempted to found his practice upon physiology; hence, it should not surprise us that it had much in common with the Graham system in this country. So great was the influence of Combe's works that in some places, where people took regular exercise, bathed regularly, secured fresh air and adopted all processes of physical education, the practices were called by the name *Combeing.* Lamb had much correspondence with Graham.

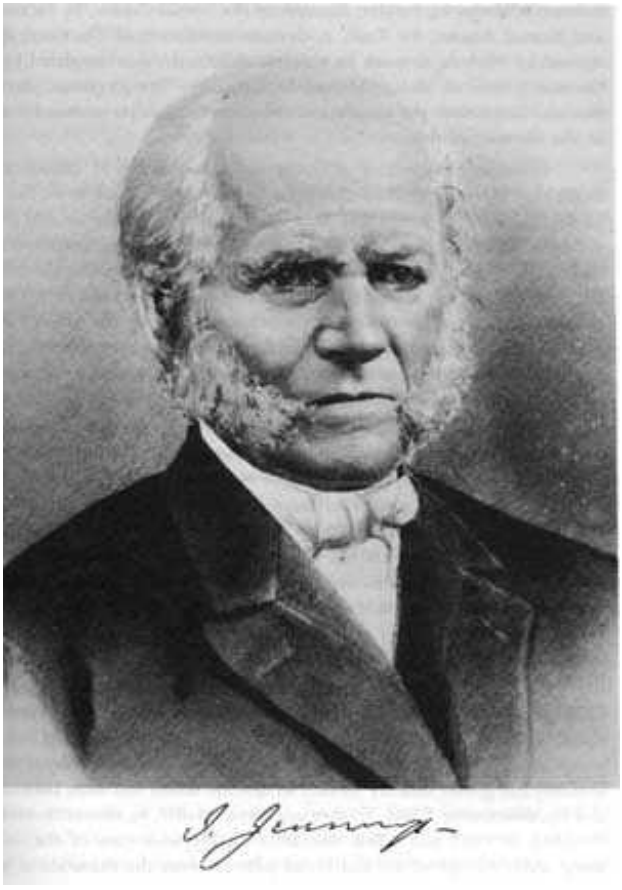
About the reform and revolutionary movements of Europe we have little to say in this book as we are primarily interested in the development of the system of *Natural Hygiene* which took place on American soil. In a general sense it is probably correct to say that the revolution in Europe and that in America were interrelated and interconnected; it is certain that they exercised considerable influence upon each other. Especially did the works of Priessnitz, Schrodt and Rausse of Germany, Ling of Sweden and Lamb and Combe of Britain influence the American scene. The French school seems to have exercised very little influence outside of France. So far as the present author knows, the history of the French revolution has not been written.

As evidence of the influence exerted by the American movement upon European thought and practice, American Hygienic journals and books had a wide distribution in England. Trall, Nichols and Gove lectured in England, while Nichols and Gove published in England a magazine entitled, the *Herald of Health.* An abridged edition of Graham's *Science of Human Life* was also published in that country. Theobald Grieben of Berlin published in the German language the following translations of books by American *Hygienists: Tea and Coffee,* by Alcott; *Chastity, Science of Human Life* and *Fruits and Vegetables,* by Graham; *Science of Love,* by Fowler; *Diseases of the Sexual Organs,* by Jackson; and

Sexual Abuses, by Trall. A German translation of *The Curse Removed* by Nichols (a book on painless childbirth) was translated by a German physician and published in Germany. The physician played fast and loose with the translation and made Nichols recommend drugs in the German edition.

It was into the milieu of doubt and uncertainty, of disease and death that Sylvester Graham threw a stone in 1830. A rock hewn out of physiological truth could not help destroying many fallacies and providing a way of escape for the thinking and observing members of society. A revolution was started that will not cease until the old order has been completely demolished and a new one fully established. Only the existence of a revolutionary situation, created by the failures and contradictions of medical theories and practices, made possible the immediate and widespread acceptance of the truths announced by Graham, his contemporaries and successors.

As Graham's lectures and writings represent the launching of a crusade for health and what he called "physiological reform" of the people and not the actual beginning of *Hygienic* practice, I shall begin this story with his predecessor, Isaac Jennings, M.D. A writer in *The Science of Health,* January 1876, includes Jennings along with Trall and others as worthy of veneration for their revolutionary work. Jennings launched no crusade and his work had not been made public at the time Graham launched his crusade--hence the tendency to start with Graham. I shall consult chronology rather than the beginning of the public work at this time.



Jennings says that he made his debut in medicine under the flag of Cullen, having studied under the celebrated Professor Ives of New Haven, Conn. and Yale. After 20 years spent in the regular drugging and bleeding practices of the time, during which his confidence in drugs and bleeding had grown steadily weaker so that his lancet had been sheathed and his doses were fewer, further apart and smaller, he discontinued all drugging in 1822 and relied thereafter on *Hygienic* care of the sick, using water (drops of it) and bread pills to meet the demands of his patients for "medicines" for another 20 years before he made public the secret of his phenomenal success.

Writing in 1852 on the occasion of the publication of Jenning's second book (*The Philosophy of Human Life*), R. T. Trall, M.D., said of his career: "Dr. Jennings is widely known as the advocate of the 'orthopathic' plan of treating disease--a plan whose details mainly consist in placing the patient under organic law, and there leaving him to the *vis medicatrix naturae.* From the dawn of creation down to the

year of our Lord eighteen hundred and fifty-two, this method of medicating the vital machinery has been 'eminently successful;' and the personal experience of the author of the work before us demonstrates the reasons of its superior efficacy over the drug-shop appliances, so widely and so fatally popular.

"With a mind well constituted for critical observation, and the right opportunity for calling its powers into action, Dr. Jennings, after having received a thorough medical education, commenced the practice of the healing art drugopathically. But his zeal to relieve his fellow-creatures of their maladies, *secundem artem,* was not rewarded by the results he had been instructed to expect. He noted, also, in consultation with his more experienced professional brethren, that old doctors, as a general rule, gave much less medicine than young ones. The former trusted more to nature; the latter trusted all to drugs. This led him to doubt the prevalent ideas of the faculty of medicine; and further observations induced him to discard them altogether.

"While enjoying an extensive practice in Derby, Conn., some thirty years ago, he changed his manner of doctoring the people to an extent little suspected by his patrons of the time. Laying aside the well-filled saddle-bags, he furnished one pocket with an assortment of breadpills; another pocket was stored with a variety of powders made of wheaten flour, variously scented and colored ; and a third pocket with a quantity of vials filled with pure, soft water, of various hues. With these potencies in the healing art, he went forth 'conquering and to conquer.' Diseases vanished before him with a promptness unknown before. His fame spread far and wide. His business extended over a large territory; in fact, no other physician could live at the trade of pill-peddling in that place.

"Such was, and ever has been, and such ever will be the consequences of substituting innocent placebos, of the do-nothing medication, for that which consists in sending a score of physiological devils, in the shape of apothecary stuff, into the stomach, blood, bones, and brain. Dr. Jennings, before removing from Derby to Oberlin, Ohio, disclosed the secret of his remarkable success; and, although his customers were generally still inclined to 'stick to the old doctor,' it is hardly probable that at this day there are many who have not fallen back into the slough of despond, medically speaking, so difficult is it to induce people to think and act rationally for themselves.

"The general plan of the work is sufficiently expressed by its title. We commend it to the general inquirer after truth, more especially the medical man. It seems to us impossible that any candid physician of the old school can peruse its pages without getting some of the dark and foggy delusions, and musty unphilosophical theories of that school, driven out of his head, to run like the swine of an ancient parable, down to the sea of oblivion, and be there drowned out of the recollection of men."

Writing in 1853, N. Bedortha, M.D., records that after 15 to 20 years of the bread pill and pure water practice, Jennings "burst the bubble he had been so long inflating, and came out before his medical brethren, and before the world a sworn enemy of all drug medication." He adds that "surprise and chagrin seized his medical friends, but the effect upon the community in which he practiced was various. Some denounced him as an imposter, unworthy of confidence or patronage, and were ready to stone him for deceiving them; while others, who were the more elevated portion, though confounded by the ruse practiced upon them, took the doctor by the hand and said--'If you can cure our diseases without the use of medicine, then you are the doctor for us.'"

Jennings continued his no-drug practice, which he called the "let alone" practice, for another 20 years before he retired. He worked out a theory of disease, diverse from any that had preceded him, which he called *Orthopathy.* Disease, in this theory, is a unit and, in its various forms of fever, inflammation, coughs, etc., is entirely true to the laws of life, which cannot be aided by any system of medication or any medication whatever; but, relying solely upon the healing powers of the body and placing his patients in the best possible conditions for the operation of the body's own healing processes, by means of rest, fasting, diet, pure air and other *Hygienic* factors, he permitted his patients to get well.

Bedortha records that Jennings was never successful in getting his theories and practices accepted, although many "warm friends" adopted his views. Although so great was the success of Jennings and so far did his fame spread, that Yale University conferred an honorary degree upon him in recognition of his unheard-of success, many of his former patients complained, when he publicly revealed his plan of care,

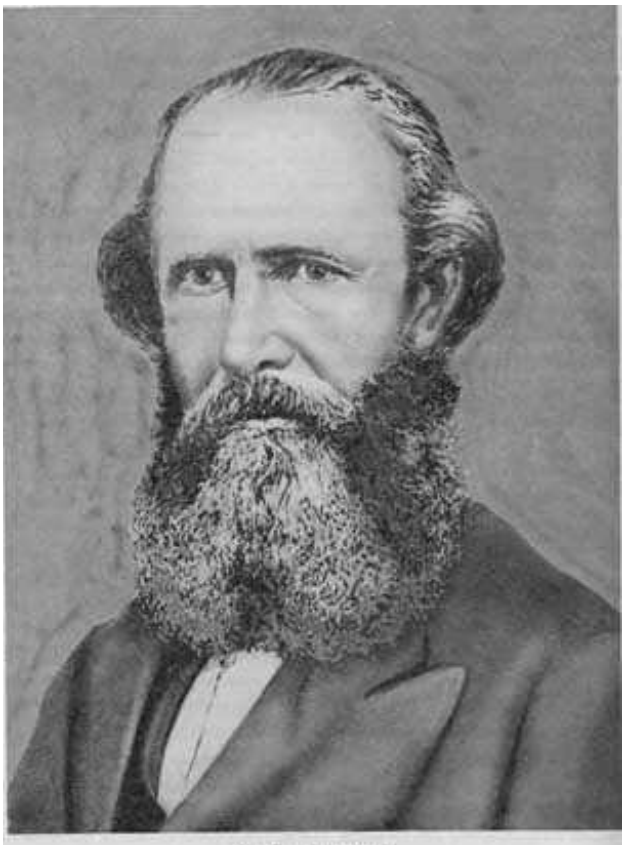
that Jennings had charged them for "medicines" they had not received and deserted him. They would no longer employ him. It was not enough that he had saved their lives (many of them would have died had they been drugged in the regular manner), greatly shortened the period of their illnesses, relieved them of the chief expenses of disease, preserved their constitutions unimpaired and preserved their health. Oh, no! They wanted what they had paid for; they had not paid for services, but for "medicines." Had they employed drug-giving physicians, many of them would not have lived to pay their drug bills; but this did not weigh, in their judgment, in Jennings' favor.

An editorial in the *Herald of Health,* January 1865, says of Sylvester Graham, who was not a physician, that he was "pre-eminently the father of the philosophy of physiology. In his masterly and celebrated work, the 'Science of Life,' he has given the world more philosophy and more truth concerning the primary and fundamental laws which relate man to external objects and to other beings, than any other author ever did--than all other authors ever have. Though his writings are in poor repute with the medical profession, and his vegetarian doctrines are condemned by the great majority of medical men of the present day, no one has ever undertaken to controvert his arguments, and probably never will. To him, as to all other pioneers in the Health Reform, the customary remark applies: he was an assiduous worker and thinker. His book has now been before the people of this country about thirty years, and has been republished and circulated extensively in Europe, and is everywhere regarded as the pioneer work in the great field of Physiology and Hygiene. For a few years preceding his death, which occurred in 1851, he had been engaged in writing a 'Philosophy of History,' to which he had devoted much time and close and careful study, one volume of which has been published since. He died at the age of fifty-seven. No doubt he would have lived many years longer if he had labored more moderately. It should be stated, however, that he inherited a frail constitution, and before he grew to manhood, he was regarded as in a decline, and was saved from fatal consumption only by a resort to those agencies and conditions which are now understood by the phrase, 'Hygienic Medication.'"

Hygienic Medication at the time this editorial was penned included the use of modalities of the "Water Cure;" whereas Graham's recovery took place before Priessnitz had originated his water cure. The importance attached to the work of Graham is further attested by a statement made in this same editorial that the lectures and writings of Graham and Alcott had previously prepared the public mind for the investigation of a new mode of treatment. Here reference was had to hydropathy or the water cure, which was introduced into America from Germany in the early forties of the last century. Also, there is the

statement made by Robert Walter, M.D., in an article in the January 1874 issue of *The Science of Health,* that "Sylvester Graham, with 'The Science of Human Life,' made a great step in advance; and, though some of his theories are not what later developments would approve, he nevertheless made a valuable attempt at systematization."

A writer in the *Herald of Health,* January 1865, said: "R. T. Trall, M.D., is the discoverer of the Philosophy of Medical Science, and the father of the system of Hygienic Medication. While others have done much to agitate the public mind, and develop great truths in the healing art, it was left to him to solve the great primary problems which must underlie all medical systems, and to base a theory of medical science, and a system of the Healing Art, on the laws of nature themselves. No author except him ever traced medical problems back to their starting point, and thereby discovered their harmony or disharmony with universal and unalterable law. In this manner he has been enabled to do what no other author before him ever could do, viz, explain the nature of disease, the effects of remedies, the doctrine of vitality, the vis medicatrix naturae, and the laws or conditions of cure. His philosophy goes back of all medical systems and proves to a positive demonstration the fallacy and falsity of medicating diseases with poisonous drugs. Hygienic medication, therefore, is, with him, a system, full, perfect, complete, and of universal application. Knowing that the system he teaches is grounded in scientific truth, he boldly challenges all the medical men and all the scientific men of the earth to meet and oppose it; but no one accepts the challenge; although they continue to drug and dose their patients into premature graves.



R. T. Trall, M.D.

"Probably no man who has lived in modern times has been more persistent and consistent, more active and uncompromizing, as an author and practitioner. If all of his writings in the form of books, journals and lectures could be collected together, they would make quite a respecttable library. His professional correspondence and practice have also been extensive and arduous, and when we add to these circumstances the fact that he is engaged in writing and has nearly ready for the press, several works of greater magnitude and importance than any he has yet given to the world, on which he has expended already much time and labor, it will be readily understood that he can have few idle moments."

In a discussion with an allopathic physician, a Dr. Wilson, in the *Journal,* February 1854, Trall said: "It was the good fortune of my patients that I had the good sense to discover the falsity of many medical doctrines, and the benevolence to repudiate the practice of many of the most destructive of the drug-shop appliances, even before I was made a 'graduate.' Hence, I never administered such deadly drugs as nitre

and tartar emetic, which you know or ought to know are the common medicaments in candies, lozenges, cough syrups, soothing cordials, &c., that are so generally fed to children, per advice of Allopathic doctors; never used leeches nor scarificators; never bled much, nor blistered much, nor gave much mercury; in short, during my whole career as a 'regular,' my drugifications were continually growing 'small by degrees and beautifully less,' till there was not force enough of poison left to kill a baby or mar a shadow."

Although far from being alone in the creation of the modern system of *Hygiene,* these three men may justly be said to have contributed most to our understanding of this field of knowledge and art. *Hygiene* is not the gift or invention of any man or group of men, nor of any association of men. It is not a creation of the laboratory, nor the result of discoveries that were made only after centuries of painstaking research. Its modern pioneers were brilliant men who were not afraid to depart from the ruts of orthodoxy and search for truth in despised places, but they were not men of the cloistered laboratory.

Writing in 1840, Graham said: "When with an honest and earnest heart, I looked steadily to nature for illumination, and with guileness of a little child, said, 'Give me truth!' she poured her clear and discriminating light into my soul--not with the overwhelming splendor of full day, but with increasing degrees as I was able to receive and endure, and employ profitably withal. In short, I had no sudden revelations of Nature's great truths; I made no sudden changes in my diet and general regimen; but as I received instructions I advanced, laying aside a little here and a little there, till, by virtue of unremitting and untiring perseverance in research and investigation, and careful experiment and observation, I was at last permitted to step upon the broad threshold of that great system of physiological and psychological truth, which as a humble instrument in the hands of Divine Providence, I am now suffered to promulgate to the human world."

Not by divine revelation, as so many have claimed for their "discoveries," but by a close and careful study of nature did all these men come to their knowledge. *Hygiene* represents a return to that pristine mode of living that emerged with man when he first appeared on the earth; it is a revival of something precious that had been all but lost during the course of ages, thanks to the corrupting and perverting influences of shaman, priest, physician and trader. These, with their false systems and false teachings, have led the race astray. When and where ignorance and superstition have prevailed with all their mind-beclouding and debasing influences, there disease and crime abound.

These three men--Jennings, Graham and Trall--together with Alcott, Taylor and others in this country and Combe and Lamb in England set the world to thinking on *Hygiene.* They were great men, greater by far than were Napoleon or Alexander. Any man who gives the world valid ideas and elucidates genuine principles is a man whom the world most wants and will come, ultimately, to admire.

All but two of the pioneer *Hygienists* were medical men who had become disillusioned with medical practices and were honest and courageous enough to seek elsewhere for truth. These two were Sylvester Graham and Mary Gove.

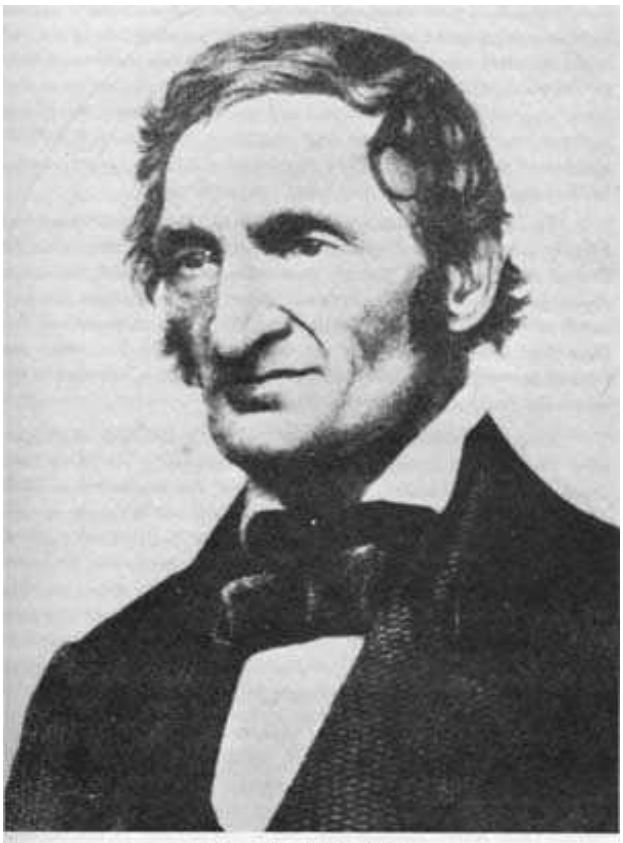
The revolution here described required a complete and radical change in the mode of thinking of the people. They had to be biologically reoriented and had to be weaned away from the supernatural orientation fostered by the priestcraft. They had to learn that life is subject to law and order and is not at the mercy of capricious and whimsical ghosts. They had to learn the truth about the relations between the living organism and the many elements of its environment; especially did they have to learn the true relations of drugs to the organism. They had to learn that health is man's normal state and that disease is abnormal. It was necessary for them to understand that man is the builder of his own diseases and that disease does not come upon them without cause. It became necessary for them to learn that acute disease, instead of being the enemy it had long been regarded, is a remedial process. It was necessary for them to understand that living organisms are self-healing and that all the caretaker can do that is of any constructive value for the sick is to provide wholesome conditions and usable materials, It is especially necessary that they learn that cure and curing represent false ideas and false practices. Most of the world still has these facts to learn.

The Evolution of Hygiene

CHAPTER III

Important as individual effort undoubtedly is, there is always a need for organized effort and cooperative work in the promotion of any truth. This fact was early recognized in the *Hygienic* movement and in 1837 a group of Graham's students founded in Boston the world's first physiological society--*The American Physiological Society.* Physiology, at that time, was in its infancy and American physiology, in particular, hardly existed. William Beaumont had only a year or two before issued his work on the physiology of digestion. Claude Benard, the great French physiologist, was still unknown, while the German school of physiology was without influence in this country. It is hardly likely that. a society of professional physiologists could have been formed anywhere in the world at that time. *The American Physiological Society* was formed nearly 50 years before physiologic science had advanced sufficiently to permit the formation of the *Physiological Society* in England and before a second *American Physiological Society* was formed in this country.

These followers of Graham were not so much interested in physiological research, involving experiments upon animals, as in the promotion of a knowledge of physiology among the laity and the establishment of ways of living based upon physiology. Although it is not known whether Dr. William Alcott attended the first meeting of the Society, he did attend later meetings and became a member. On February 11, 1837, an organization meeting was held at which a constitution was adopted.



Wm. A. Alcott, M.D.

Many ladies of the Society were of the opinion that the subjects discussed were of too delicate a nature for a mixed audience and thought there was a need for a woman to lecture to ladies alone. Mary Gove, who had but a short time before opened a Graham Boarding School at Lynn, Massachusettes, came forward and offered to fill this position. A *Woman's Physiological Society* was formed and lectures were given to women, often separate lectures for married and unmarried women. Mrs. Gove's lectures were a

great success and continued to be carried on for a number of years, even after the *Physiological Society* ceased to exist. In 1846 these lectures were published in book form.

Two health conventions were held by the *American Physiological Society* under the general term of the American Health Convention. The first of these opened in Boston, Wednesday, May 30,1838. The second American Health Convention was held in New York under the joint auspices of the *American Physiological Society* and the *New York Physiological Society* on May 18, 1839. Physiological societies were formed in several cities, including Oberlin College in Oberlin, Ohio, where Dr. Jennings became a member.

Among the other activities promoted or supported by the Society were *The Graham Journal of Health and Longevity,* edited by David Cambell, numerous tracts on health and diet, the establishment of the *Library of the American Physiological Society* and a provision store, which may properly be called the world's first health food store. An effort was made to establish a *Physiological Infirmary* in Boston to provide physiological care for the sick. Although the *American Physiological Society* of Boston did not last much beyond its first three years, in 1850 the Providence, Rhode Island, *Female Physiological Society* was still carrying on under that name, and the ladies of Boston were also still functioning as a physiological society.

The movement initiated by Graham and Alcott and measurably contributed to by Mary Gove, and which was early joined by Dr. Jennings, represents the beginning of the *Hygienic* movement. The *American Physiological Society* numbered among its members in the various cities several medical men, but it would carry us too far afield to list the names of these and it is not known how many of them actually abandoned the drugging practice and confined themselves in the care of the sick to *Hygiene.* This was only the beginning and many subsequent men, especially Trall, Taylor, Nichols and Jackson, added their weight and thought and their experience to the evolution of the new but old way of life.

Writing on the health reform movement in December 1853, Dr. Alcott designates the physiological as distinct from the hydropathic part of the movement. He mentions also that "our periodicals and our books also repudiate as absurd the idea of curing disease," and that "all the elements of hygiene, and these only, are the true *materia medica."* Alcott lectured far and wide on *Hygiene.* It is important that we keep these distinctions in mind. The physiological reform had its origin in this country. Hydropathy had its origin in Europe. The two movements mingled and ran along together for a time, but they were separate and distinct and must be understood in this way if we are to grasp in clear outline the evolution of the *Hygienic System.*

In an editorial in the *Journal,* May 1858, Trall speaks of those "who do not distinguish between water treatment and hygienic treatment," thus setting the two systems apart from each other. When, in 1851, Trall's *Hydropathic Encyclopedia* was published, it was offered to the public as a "complete system of practical hydropathy and hygiene." At least as early as 1853, Trall's institution was listed as a hydropathic and *Hygienic* institute. In August 1855 Trall carried the announcement of the issuance of the *Quarterly Report* of the students of the third term of the Hygienic Institute, 15 Laight St., New York. In an editorial in the *Journal,* July 1858, Trall declared it to be the only journal in the world which "advocated a strictly Hygienic system of the Healing Art, the only journal in existence devoted to the cause of a universal health education . . ." In April 1862 he issued a call for the formation of a *National Hygienic Association,* to be made up of *Hygienic* practitioners, male and female. In 1860 Trall issued a booklet on the *Principles of Hygeio-Therapy.*

In 1862 Trall delivered in the Smithsonian Institute in Washington his famous lecture, *The True Healing Art, or Hygienic Versus Drug Medication.* It should be recorded that after this lecture was delivered, there was a heavy demand that it be delivered elsewhere. Complying with this demand, Trall delivered this lecture in several other cities. Writing in November 1873, Trall said that "allopathic physicians could be named both in this country and in Europe who had immediately abandoned the whole drugging system after reading *The True Healing Art,* and that some of them were then practicing *Hygienically."*

In 1872 *The Health Reformer,* of Battle Creek, Michigan, published a small work by Trall under the title, *The Hygienic System,* in which he defined the *Hygienic System* as "the treatment of disease by Hygienic agencies." Although a small work, it briefly outlines the theory and practice of *Hygiene* and I should

record that it was among the favorite books treasured by Dr. Tilden.

Writing in the January 1858 issue of the journal, A. F. Compton, M.D., distinguished between "the allopathic" and "the Hygienic system." Roland S. Houghton, M.D., who never became a *Hygienist,* both lectured and wrote on *Hygiene* and hydropathy, one of his books being entitled: *Three Lectures on Hygiene and Hydropathy.*

The preamble of the constitution of the *American Hygienic and Hydropathic Association of Physicians and Surgeons,* established in 1850, says that "its objects shall be the diffusion of those physiological principles which are usually comprised under the term Hygiene, and the development of the therapeutic virtues of water to their fullest extent, on a strictly scientific basis, and with special reference to the laws of the human system, both in health and disease . . ." Thus it will be seen that at the very outset, this organization made a sharp distinction between *Hygiene* and hydropathy.

A man travelling in Iowa and selling the *Water-Cure Journal,* stopped at the home of a physician. The physician was out, so the man attempted to sell a subscription to the *Journal* to his wife. "No," she said, "that's Graham's system. I don't believe anything in it. I've heard of Grahamites that died." I recount this story, not to emphasize the fact that for Grahamism to be good the Grahamites had to live forever, but rather to stress the fact that, both professionally and popularly, the *Water-Cure Journal* was associated with Grahamism. It was a common complaint against *Hygienists* that they "dashed Graham into everything." His influence was far greater than the infrequent references to him would indicate.

When, in 1853, Trall wrote that "all persons . . . whose living is physiologically bad, may rightfully consider themselves as the particular 'shining marks' at which Death levels his arrows," he wrote after the theories of Graham, not those of Priessnitz. When people discontinued the use of tea, coffee, tobacco, alcohol and animal foods, they were following Graham and Alcott, not Priessnitz.

Writing on what he called "A Chapter of 'Water-Cure,'" in an article published in the September 1851 issue of the *Journal*, E. Potter, M.D., begins by saying: "Six years ago, this past winter, I commenced the study of Dr. Graham's 'Lectures on the Science of Human Life.'" Then he tells briefly of his previous mode of living, his suffering and his use of drugs. Immediately after reading Graham, he made several radical changes in his way of life and he says: "I never felt so well in my life."

Potter says that sometimes he strayed from the *Graham System* and that when he did so, he never failed to experience a physiological impairment proportioned to his departure. He tells us also that he had ceased to use drugs and that he had no occasion to use them. If this was a chapter on "water-cure" as understood by the practitioners of the time, what justification can be offered for crediting the man's changed way of life and changed practices to the reading of the work of Graham? Certainly, Graham's work was not a water-cure work and was published before the water-cure was introduced into America.

A woman, writing in the *Journal* 1854, of her experiences with both allopathy and hydropathy, frankly acknowledges her debt to Graham, whom she had known personally and who had visited her home, and to his teachings and thought of Grahamism as a part of hydropathy. In discussing the "Theory and Practice of Medicine," in the *Journal*, November 1858, D. A. Gorton, M.D., quotes approvingly from Graham's *Science of Human Life.*

In the January 1861 issue of the *Journal,* Trall replies to a series of questions asked by a sick man, under the title, "Physiological Living," this taking us back to Graham. In the February 1861 issue of the *Journal* is an article under the title: "Rearing Children Physiologically," which also takes us back to Graham.

Writing in 1850, Thomas Low Nichols, M.D., said: "Sixteen years ago, while attending medical lectures at Dartmouth College, when Dr. Muzzy, the eminent surgeon, was a professor in that institution, my attention was directed to the influence of diet and regimen, and I adopted, as an experiment, what has been commonly, but very improperly, called the Graham system of diet; for if the system is to be named after any man, it might with much greater propriety be called the Pythagorean, or even the Adamic. A system practiced by the primeval races of mankind, by many of the sages of antiquity, by the wisest and purest men of every age, and by a majority of the human race in all ages, surely ought not to receive the name of

a modern lecturer, who, whatever his claim to zeal and science, can have none to originality."

Thomas Low Nichols, M.D.

This does not tell the whole story. As a result of listening to the lectures of Graham, young Nichols abandoned the study of medicine and became a newspaper reporter. Several years were to pass before he resumed the study of medicine, this time in New York City, which he was never to practice. After graduation, he established himself in what was called a hydropathic practice; but it was in reality a combination of *Hygiene* and hydropathy. This practice he was to continue for the remainder of his life, until his retirement at an advanced age.

The force of Nichols' argument is patent to all, but it should not be overlooked that it was largely due to the zeal and original thinking of Graham that this plan of eating was revived in America and even in Europe. What is even more to the point is the fact that the *Graham System* was and is vastly more than a system of diet and that he may justly have laid claim to much originality of thought. It is to his credit, also, that he based his dietary plan on physiology and comparative anatomy and not, as did Pythagoras, upon a belief in reincarnation. Graham did not believe that animals housed the souls of men and women who had died and that, for this reason, to kill an animal is murder.

Graham was not unaware of the water-cure movement and of the association of *physiological reform* with the movement, and was a regular reader of the *Water-Cure Journal.* In a letter published in a Northampton, Massachusettes, paper, where Graham lived, Graham endorsed the journal as "one of the most valuable publications in our country." This letter was reproduced in the *Journal* of March 1851. It is not to be accepted as an endorsement of hydropathy. At a previous date Dr. Jennings had endorsed the *Journal,* but Jennings was very outspoken in his opposition to hydropathy. The fact is that the *Journal* carried more information about *Hygiene* than it did about hydropathy.

Writing in the *Science of Health,* July 1873, Mrs. Julia A. Carney tells some of her experiences, as a young girl, with Graham and the *Graham System.* She mentioned that, for many years, those who "would not accept the gospel of *Hygiene* which he preached," called him "maniac," "fanatic," and "fool."

She tells us that: "When as a mere child, scarcely yet in my teens, I often saw Dr. Graham at the house of a friend, the senior publisher of his 'Science of Human Life.' He was then engaged in superintending the passage of this work through the press, and I first read it in the original manuscript. Receiving from the

author a large share of attention and petting because of a real or fancied resemblance to some young friend (his own daughter I think), perhaps also from the eager interest with which his new theories inspired me, my juvenile mind then received its first impressions of Hygienic reform.

"While, therefore, not believing all of his opinions entirely correct, nor strictly complying perhaps with all I do perceive, I am yet indebted to his works, and others which I was induced to pursue by the interest thus awakened, for an incalculable amount of good.

"For, although my physical constitution, if I ever had any, had been poisoned by as large an amount of allopathic drugs as ever fell to the lot of mortal child to swallow, and survive; yet, thanks to 'all kinds of strange notions,' then imbibed, I soon regained a degree of health quite unexpected to my anxious friends, many of whom were thus induced to examine the 'notions' more impartially. From a complimentary copy of his 'Lectures, etc.,' received at that time and preserved until now, perhaps because to my young mind complimentary copies of new books involved new experience, I quote as follows: . . ."

These references to Graham and Grahamism are but a few of many contained in the *Journal* and in the *Science of Health* which indicate the strong influence that Graham exercised in the movement. Many more such references could be quoted, but these are sufficient. Inspired by the temperance movement, in which he had been an active worker, Graham wanted to know why temperance should be limited to alcohol. With this question in his mind he delved deeply into the subject and came up with answers that have proved very satisfactory for millions of people. Under the vivifying influence of Grahamism, new ideas rapidly emerged.

The medical historian, Richard Harrison Shryock, says in *The Development of Modern Medicine* (University of Pennsylvania Press, 1936), of Graham's crusade for physiological reform: "Personal hygiene was an old story, but carrying it to the people with the fervor of a crusader was something relatively new." He credits Graham with sincerity, but limits the existence of what he calls an "articulate hygienic cult," which grew up around the name of Graham, to the decades from 1830 to 1860. Somewhat contradictorily, he says that the most effective means of reaching the public was the "health papers," of which he says some 80 appeared in the United States from the year 1830 to 1890. He says of these "health papers," most of which were ephemeral, that "their cumulative influence may have been of some significance," for, he adds: "Certain it is that their publication coincided with an improvement in the hygienic habits of the American people."

Perhaps in an effort to cast a slur at Graham, Shryock says that Graham established "Ladies Physiological Reform Societies," but makes no mention of the Physiological Reform Societies that were composed of men. He would seem to be trying to make it appear that Graham was preying upon "gullible women." I do not want to be unfair to Shryock, who is the only medical historian of whom I know who has favorably discussed Graham and his work. If I have misjudged his intent, it is only because it is a general rule of medical writers to attempt to discredit Graham.

Medical deprecations of Graham's work began very early. One Dr. Bell wrote a *Prize Dissertation on Diet,* in which, while presenting the generally prevailing public and professional view of the subject, he took advantage of the occasion to castigate Graham. He reduced Graham and Grahamism to smouldering ruins with such matchless and devastating logic as "eutopian dreamers," "modern empirics and modern innovators," "self-conceited and opinionated dogmatism," "visionary novelties," "new sect of fanatics," "men of erratic and visionary genius," "modern Pythagoreans," "bigoted exclusives," etc., etc.

The first annual meeting of the National Health Association was held in Caneserage Hall in Dansville, New York, in the evenings of the two days of September the 14th and 15th, 1859. Arrangements were under the immediate auspices of Dr. James C. Jackson and his associates. Dr. Trall served as chairman and proceeded immediately, upon taking the chair, to explain the fundamental and radical differences between the *Hygienic System* and the systems of drug medication. The convention unanimously elected Dr. Trall as president of the Association for the ensuing year and elected 29 vice presidents from states as far apart as Maine and Texas, Vermont and Utah, New Hampshire and Mississippi.

At this convention it was made clear that "to restore the race to its primitive condition," of health and

vigor, it is necessary to unfold and demonstrate the principles of *Hygiene* and to wean men and women from the ancient pill box and drug shop. It was noted that the spirit of inquiry on the subjects of health and disease had been awakened and men were beginning to question the *divinity* of disease and to wonder if health is not of God. Should health not be the rule and disease the exception, they asked. The necessity of studying the laws of life and their relation to human health and happiness in the practical application of these laws in our daily life was stressed.

This was not the beginning of organized effort to promote *Hygiene,* but it marked a mile-stone in the progress of the new movement. It is a matter of satisfaction to the author that he can record that there has been an uninterrupted effort to promote the principles and practices of *Hygiene* down to the very time he writes these words.

If you ask: what has the *Hygienic* movement accomplished during the years of its existence--what have we to show for our labors? we answer first by asking a counter question: "what has been accomplished by the false cures and fraudulent treatments?" What have the other schools to show for the compromises they have made, for their betrayal of the real principles of *Hygiene?* How have the sick profited by their desertion of truth? Their one positive achievement has been to obstruct the growth of a genuine revolutionary health movement.

But let us answer the question. Millions of pages of tracts, books and magazines have been broadcast over the land, almost over the world; indeed, thousands of lectures have been delivered; many *Hygienic* practitioners have been created to serve the people and these covered much of the land and all grades, conditions and ranks of society have been reached and people by the thousands have turned to *Hygiene* and flown from drugs. Great armies of invalids have been restored to health and the average life-span has greatly increased. All of this influence countered the poisoning practices of the medical profession and led to the permanent adoption by all of the people of some of the *Hygienic System.*

The people have learned to bathe, to eat more fruits and vegetables, to ventilate their homes, to get daily exercise, to avail themselves of the benefits of sunshine, to cast off their fears of night air, damp air, cold air and draughts, to eat less flesh; they have adopted better modes of food preparation. It is true they have forgotten who it was that promulgated these things; they have lost the record of the tremendous opposition to these things that the medical profession offered. They believe that the medical profession was responsible for the decline of disease and death, for the decline of the infant death-rate, for the inauguration of sanitation, and for the increased average life-span. They believe this because the medical profession, controlling the media of communication, has indoctrinated them with the idea.

Neglect of the *Hygienic* needs (especially of the need for rest, fresh air and water) is not as persistent nor as criminal today, thanks to the work of *Hygienists,* hydropathists and nature curists, as it was a hundred years ago; but the total *Hygienic* program is far from having been accepted. By line upon line, precept upon precept and volume upon volume, the workers for a revolution in the way of life have done a good job.

Jackson declared that the changes in medical practices that occurred during his lifetime had been due "clearly and wholly to the promulgation of the principles" of *Hygiene.* They had come about, he said, during the period that he and Dr. Trall had been "recognized as Hygienic practitioners." "For half of a life time of an entire generation," he said, "has this *Journal* (*the Water-Cure Journal*) been the advocate of the *Hygienic* theory of treating disease."

Let it not be said that medical schools were quick to adopt the principles and practices of *Hygiene.* In *The Science of Health,* March 1873, Trall quotes the following statement from an article on "Medical Schools" which appeared in the New York *Medical Record:* "The principles of Hygiene, too, with sanitary laws, should have appropriate places in our systems of education." Then referring to the importance of *Hygiene* and sanitation and pointing out that medical men in general were ignorant of them, Trall asked: "Where, among the one hundred and fifty medical colleges of the civilized world, is there a chair of Hygiene or a professorship of sanitary laws?"

Answering his own question, Trall replied: "Not one can be found except in the Hygeio-Therapeutic College and this is not regarded as 'regular' by the regular profession." He says that "soon after the establishment of the 'Hydropathic and Physiological School' in New York some twenty years ago, a chair of Hygiene was introduced in the principal medical college of New York, and professorships of hydropathy were introduced into three Eclectic colleges. But the chair of Hygiene soon ran out, and has been vacant ever since; while the professorships of hydropathy all ended at the end of the first college term-in one instance in mid-term. Why these chairs could not work harmoniously with the others, the reader need have no difficulty in imagining. It was soon discovered that the Hygiene was ruining the *materia medica,* while the hydropathy was drowning out all the druggery."

Trall regarded the plan proposed by the *Medical Record* as both "revolutionary and ruinous." He said that its adoption "would in a few years close three-fourths of all the medical colleges on the face of the earth, and destroy nine-tenths of the medical practices of the world." It would, he added, also "be very damaging to the business of the Hygienic physicians everywhere, for as things are now, three-fourths of their business consists in treating invalids for diseases which the medicines of the drug systems have occasioned."

Medical colleges and the medical profession were not only neglecting *Hygiene,* but their practices were producing so much iatrogenic disease that *Hygienic* practitioners were kept busy trying to repair the flood of damages that flowed from the drug-satchels of the physicians. With their lancets, their *pukes* and *purges,* their *blisters* and their *stimulants,* in a word, with their poisons, they were busily engaged not only in disease producing, but in killing their patients.

Without poisons the minds of the medical men would be blank, so far, at least, as their treatment of their

patients is concerned. Poisons are almost their sole stock in trade. Poisons legitimately belong to them and we will let them have them. We have no need for them. We have a broader basis of action and in comparison with which, theirs sinks into insignificance. Let them have their cherished illusions along with their indispensable poisons; but let the people, who have to suffer the consequences of the poisoning practice, emancipate themselves from its control. To them, the poisoning practice is not a messenger of life, but of disease and death. The truth of this is contained in every medical report that is issued.

Quietly, and at different places, the details of the application of the great principle of employing only the normal things of life in the care of the sick is working its way into the consciousness of the people and a complete system of *Natural Hygiene* is about to dawn upon the world.

The doctrines of the *Hygienic System* are new. Its principles and the application of these principles have now been before the world but a century and a quarter; and, although a comparatively few persons have studied its basis and mastered its fundamental premises, and many have obtained some general knowledge of its application, the majority of the people really know little about it.

Beginning with Graham's lectures and the publication of the *Graham Journal of Health and Longevity,* the *Hygienic* movement pushed forward with vigor and enthusiasm. As early as 1850 the *Water-Cure Journal* had a circulation of 18,000. Wherever the journal circulated there was invariably an improvement in the *Hygienic* habits of the people and a corresponding decrease in the fatal cases of disease and an immense saving to the people. So vigorous was *Hygiene* promulgated and so great was the enthusiasm with which the people accepted it, it was estimated in January 1852 that the practitioners of the two and somewhat commingled schools--hydropathy and hygeiotherapy--outnumbered the practitioners of any of the medical schools--allopathic, homeopathic, eclectic and physio-medical--in this country. One does not get a true picture of this situation, however, unless one understands that many of the hydropathists also used drugs and that an occasional *Hygienic* practitioner was not above a "little drugging" now and then.

So vigorous was the drive against the drugging systems that the medical laws were repealed in a number of our states. During this period when the powers of the state could no longer be used to deprive people of their right of private judgment in their choice of modes of care, medical societies were formed by groups who voted themselves the "salt of the earth," the "regulars," etc. These organizations were intended to influence and mold public opinion and let the world know who were the *regulars,* who was *scientific,* and who were the *quacks* and *empirics.* Medical schools conferred the title *Doctor of Medicine* as a part of the move to create a select monopoly; medical journals, medical societies and lecturers endeavored to suppress all empiricism, while they wrote and declaimed against "quackery" until the very word became odious and quack became a synonym for a knave or a fool.

Medical societies mistook their function when they endeavored to put down all plans of care of the sick but their own. When assembled for the purpose of free discussion of medical subjects, for the collection of facts, the establishment of principles and the investigation of new truths, they are useful auxiliaries to the cause of progress; but when they do little more than regulate the rate at which each member shall bleed, blister, purge and tax, or transfuse, inoculate, operate and tax, and the particular courtesy that they shall extend towards each other and how they shall treat the outside "barbarians," they fail in any worthwhile mission.

The establishment of a mode of medication by the state is an infringement upon one of our most precious rights and an injury to the cause of truth and the progress of science. Such an establishment never can suppress empiricism; for when all other systems have been suppressed, empiricism will flourish in the one allowed. The state has no more right to establish one school of medicine above others than it has to establish one church above all others. It is important that the people shall be free in their choice of means of care and any curtailment of this basic freedom is tyranny.

So far as medical colleges teach science, they travel in the right direction; but when they desert science and teach an empiric mode of medication and give to their arts an air of mystery, they serve neither God nor man. So long as medical colleges promulgate the superstition that drugs have *curative* power, they will continue to be curses to the race.

Naming diseases in two or three ancient languages is but a camouflage for ignorance. Writing prescriptions in a language which their patients cannot read serves to confuse the minds of the people. When the medical colleges contribute to and give countenance to these mysteries, they do not serve the cause of science and human advancement. Could the colleges of medicine confine themselves to the teachings of the sciences that are connected with medicine and to seeking to erect a mode of practice upon these as a basis, they could become worthwhile institutions; but so long as they continue to mystify disease and to teach that it can be *cured* by poisons, they not only reject science, but they aid and abet the patent medicine industry.

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Hydropathy

CHAPTER IV

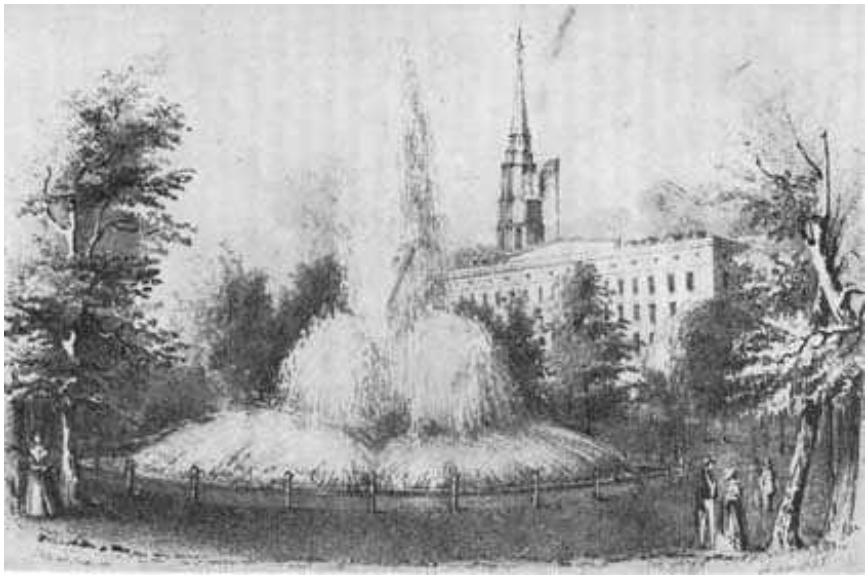
The water-cure was introduced into America in 1844 by Joel Shew, M.D., who had gone to Austria to study the water-cure under Priessnitz. He was one of a number of American physicians who did this, among whom was Edward A. Kittredge, M.D., of Boston.

The introduction of hydropathy into this country occurred 22 years after Jennings had discarded the drugging system and adopted the *Hygienic* practice. Its introduction occurred 14 years after Graham launched his crusade and about an equal time after Alcott began lecturing and writing; it was nearly ten years after the founding of the first Physiological Society in Boston, seven years after the publication of the first issue of *The Graham Journal of Health and Longevity* and five years after the publication of Graham's *Science of Human Life.* The *Hygienic* movement was already well established and had thousands of adherents at the time of the introduction of the water-cure into this country. Its books and magazines already had a wide circulation and others besides Graham, Gove and Alcott lectured to the people on *Hygienic* living.

Great numbers of physicians had lost confidence in drugs and took advantage of the water-cure as a means of escaping from the drugging system. Even though they adopted more or less of *Hygiene* in connection with their water-cure practices, they called their practice hydropathy and called themselves hydropathists. Hydropathy may be justly regarded as a convenient escape-hatch, as many physicians who turned to water-cure thought of water as an agent that could be made to take the place of drugs altogether. In other words, they professed to be able to do with water everything that they had formerly sought to do with drugs. As A. J. Compton, M.D., wrote in the *Journal,* December 1858: "Some hydropathists use water as a drug, imputing all the agency to the water; but such are only following in the beaten paths of drug-venders . . ."

Writing in the *Journal,* October 1857, G. H. Taylor, M.D., said that it is frequently asserted by water-cure practitioners that "all the virtues (?) of drugs are imbodied in this single substance (water); in its power to produce emetic, stimulant, anti-febrile, counter-irritant, and a host of other effects, rivaling the vaunted qualities of remedies set forth in the most approved pharmacopeias. Some argue for a verbal modification of this statement, in the distinction, that one set of curative measures employ poisons, while the other does not. This distinction becomes insignificant when *effects* are regarded, in which we are really to decide which is least inimical to vital welfare, rather than upon abstract chemical quality."

Taylor further said that "it is this reliance upon the use of water to produce these manifestations, not inaptly called crises, that is the cause of much danger to the perpetuity of the system of medicine that we employ; and though the ignorant and empirical use of these means be decidedly better than any other, because based on a higher fundamental idea, yet the practice should be carefully guarded lest it degenerate into a practice no better than the theory."



America's first hydropathic institution, founded by Joel Shew, M.D.

Houghton declared water to be the best, the safest and the most universal of "our remedial agents." Writing in the *Journal,* January 1854, Dr. Kittredge said: "I only wish to tell you--and I*know* what I tell you--that water and its adjuncts are all-sufficient in all cases." In this instance, what Kittredge regarded as adjuncts to water were *Hygienic* means. So great was the importance that some hydropathists attached to the establishment of correct habits, that there were among them those who contended that their success in the care of the sick was attributable to this and that the water-cure processes were of no account. It was quite natural that the dyed-in-the-wool hydropathists should deny the truth of this, even while placing great stress on correct living habits. Greater consideration of the work of Jennings and of the accomplishments of the Grahamites before the water-cure was introduced into America, would have convinced even the most devoted water-cure enthusiast of the soundness of this position.

There were, on the other hand, many hydropathic institutions and hydropathic practitioners who did not rely upon any correction of the ways of life. Mrs. R. B. Gleason, who, with her husband, conducted one of the leading hydropathic establishments in the country, says of the many water-cures she visited that: "In most of them, water is the remedy, and the *only* one employed." She mentions attention to diet at a few of these institutions. Many hydropathists considered flesh foods to be indispensable to man's highest physiological condition and many of them thought that unbolted meal was too coarse for the human digestive tract. A hydropath of the sixth decade of the past century likens some of the splashing and douching of the time to Noah's flood.

In 1850 Catharine E. Beecher contributed an article to the New York *Tribune* containing her second report on hydropathy in America, the first having been published three years previously. Miss Beecher's second report was written after more reading, more investigation and more personal experience with hydropathy. In this report she said: "It is important that the public should understand that there are *two schools* in the hydropathic world, one of them following what is called the *heroic* treatment, of which

Priessnitz is the exemplar; the other adopts the more moderate method and the German author, Franke, is probably the fairest exponent of this school."

Many hydropathists of the period also gave drugs; and when their patients recovered, they were as likely to credit the recovery to the drugs as to the water treatments. Indeed, some of them frankly stated that drugging was their main reliance and that water was subsidiary to the drugs. This attitude was commonly shared by patients also. At the present time we find that one who receives chiropractic adjustments in addition to *Hygienic* care is likely to think that the adjustments restored health and that the *Hygiene* had little to do with the recovery. Little pills or little punches, either is likely to get the credit and the healing power of the body is likely to be ignored. It should be obvious to the reader that when two systems so diametrically opposed as *Hygiene* and drug medication are brought together and recovery follows, *Hygiene* will not receive credit in the common mind.

There was considerable controversy at the time between hydropathists over the matter of which water, soft or hard (mineral laden), was best for use in hydropathic practice. Some insisted upon soft water, while others credited the minerals in hard water with remarkable *curative* efficacy. Dr. Jackson castigated hydropathists who used hard water, saying he did not know one of them who did not also use drugs. He indicated also that they gave very little attention to diet, did not serve plain fare and fed condiments. Also, he said that they fed stall-fed meats to their patients. On the other hand, those devotees of hydropathy who mixed drugs with their hydriatic practices called all who rejected drugs "radicals," "ultra," etc.

Many hydropathists were as little concerned with *Hygiene* as were the medical men of the time. They *cured* their patients with water applications and had no real need for aids. One *Hygienist* complained that the hydropathists were too much inclined to try to effect the necessary changes in the sick organism by "regulating the functions of the body," with hot and cold applications, thus violating the grand requirement of nature that causes be removed. The water-cure practitioners denied that removing the cause of disease and supplying the conditions of health were enough, contending that the causes of disease had produced their legitimate effects, so that there exist pain and suffering, a morbid condition which required active *curative* measures to overcome.

On the whole, however, the water-cure institutions seemed to have been well conducted. Visiting several water-cure institutions in 1853, Dr. Alcott reported of them: "While I am not displeased with the forms and modes, I am particularly pleased with the *spirit* which prevails in many of the institutions for water-cure which, during the last two years, I have visited. I have found their conductors to be men of more general information and of more liberal spirit than I had supposed . . . The institution at Troy, New York, formerly, for a time, under the care of Dr. Bedortha, Dr. Jennings, and others, but now under the direction of P. P. Stewart, Esq., in some of its features, please me exceedingly . . ."

Once raised in the mind, one has no more power to lay down or lay aside an awakening doubt than a frightened girl has to dismiss a ghost. The doubt simply will not *down;* it is ever present with us. When a man begins to doubt the drug system, it is difficult to stop. Strange, is it not, how a new idea, interpenetrating one's brain and getting within the range of one's consciousness, quickens his whole sensibility and forces his intellect to act in spite of his prejudices and desires to the contrary. An example of the transforming power of a new idea is supplied us by Dr. Jackson's conversion to hydropathy.

He explains in an article in the October 1861 issue of the *Journal* that he had just as much faith in the dogmas and postulates of the allopathic school of medicine in which he had been educated as he had in the creed of the church of which he was a member, and that he had no more desire to disbelieve his allopathic education than he had to become an infidel in religion; but he had come face to face with a group of facts that varied in their character and which had been presented to his consideration from different angles and under different forms and that challenged his attention and demanded of him an account of them, upon any acknowledged and well-settled philosophy within the sphere of that school of medicine whose pupil he was, and the averments in which he had always cherished the most implicit reliance and faith. He tells us that he tried to set them aside, an act for which he was ashamed. "For one ought always to be ashamed to be compelled to say that he was ever disposed to set aside his reason and be governed by his prejudices." But, he had the old faith and the old love and the fervor of affection for old things was upon him; he had not learned that no man has the right to set aside truth or to call it common. He struggled to dismiss the

issue and to force himself to ignore the plenitude and power of the facts and remain uninterested and uninquiring.

And what were these facts?He had seen a number of patients recover health from apparently hopeless conditions without drugs; within a few months these so-called incurables were walking about quite vigorously and ultimately returned home in good health. He reasoned to himself: "What power is it that has done this work?" He answers: "One naturally would, under such a glimmer of light as I had, be disposed to ascribe the result to some specific agent. I jumped, as many people have since done when thinking this subject over, to the conclusion that water was entitled to the credit of it. In other words, I reasoned about it just as persons generally do, and as you do about the efficacy of medicinal agents."

Jackson thus repeated an old and common mistake--that of mistaking coincidence for cause. Every so-called *curative* means has been established in just this same way. If it is used and the patient recovers, recovery is attributed to its use and the healing power of the body is always ignored. There is no more reason to think that water used hydropathically restores the sick to health than there is to think that drugs do so.

Frequently we read the assertion in medical literature that the living organism is self-healing and that most of its ailments are self-limited. Hippocrates is credited with asserting the existence of the *vis medicatrix naturae*--healing power of nature--although he certainly did not phrase it in its traditional Latin form. It is not certain what he meant by nature. Sir William Osler declared that: "What nature cannot cure must remain uncured." We could fill a book with statements of this kind from leading thinkers in the various schools of so-called healing, but there is a curious and puzzling paradox associated with these declarations. Although the fact that the organism heals itself is fully established, the great majority of practitioners of all schools of so-called healing and the people in general continue to behave as though they have no understanding of it. They administer their drugs and prescribe their remedies and when normal function has been restored, they are in a hurry to give full credit to their alleged remedies for the recovery and wholly ignore the vital part taken by the body in healing itself. It should be obvious to everyone that if the body is self-healing, no matter what kind of so-called remedy is employed, credit for recovery should go to the biological processes and not to the drug or treatment. As Dr. Tilden so well expressed it: "All cures ride to glory on the backs of self-limiting and self-healing crises."

Unless we understand the biological processes by which living organisms heal themselves and assure their survival, we are sure to deceive ourselves when we attempt to evaluate the various *cures* and treatments offered by the *curing* professions. We tend to believe that the healing process is not exclusively inherent in the living system, but may also exist in extraneous agents, so that we speak of such agents as being possessed of the power to heal. Once having accepted this view of healing, there seems to be no end to the number of arguments which we can bring forward in support of the healing power of our pet remedies.

Trall once complained in an editorial that "sick persons and invalid individuals are continually writing us from all parts of the country concerning their maladies, and asking us to *send them a remedy;* to tell them how to use *water* in a given case; to advise them what particular *bath* is applicable to a certain complaint; to prescribe the manner in which *water* should be used in a liver complaint; or a rheumatism, or an ague, or a palsy; ignorant or heedless of the fact that either one or a dozen remedial agents may be as important as water in the case mentioned."

But this is just what the water-cure advocates wanted people to believe. Their books and magazine articles and their "case reports" were all filled with instructions for the application of water-cure processes to such conditions, with rarely a mention of "other remedial agents." Theirs was a water-cure and the people should not have been blamed for accepting it as such. The mistake was made by Trall at this time of including the non-poisonous water-cure among the means of Hygiene and,

of all things, at that, as a remedial agent. At its best, it is a relatively harmless means of palliation; when applied repressively and heroically, it may be disastrous.

"Now, water is all it claims to be," continued Trall. "A flood of it can be very profitable employed in

washing away the causes of human infirmities; but water alone is poor Hydropathy. This, as a system of the healing art, gives equal prominence to each hygienic agent or influence, whether it be water, air, exercise, food, temperature, &c." Thus, he at that time equated hydropathy with *Hygiene.* They were one system.

He continues: "It is amazing to notice with what 'eternal vigilance' our critics speak of Hydropathy on all occasions as though it were *water* and all *water,* and nothing but *water.* And, in fact, many of those who write themselves up or down as 'Water-doctors,' do just precisely the same thing, whilst not a few of them make a whole system of either or several of our hygienic agencies." This reveals that, as a *Hygienist* who used water-cure and sailed under the banner of hydropathy, he was faced with the constant necessity to defend, not hydropathy, but his own practice from the charge of being a water-cure.

"And again," he continues, "we have among the keepers of Water-Curing establishments and watering places, a variety of systems, made up of one or more of our own Hydropathic or hygienic applicances. Thus one advertises Hydropathy *and* 'Motorpathy;' another, Water-Cure *and* 'Statumination;' another, Hydropathy *and* 'Kinesipathy;' another, Hydropathy *and* 'Electropathy;' another, Hydropathy *and* 'Atmopathy;' and another, a trio of pathies, Hydropathy, Atmopathy *and* Thermopathy."

He says of these "pathies" that, "if we were to translate these titles into plain English, we should, perchance, dissipate the charm of the thing at once. If for *Motorpathy* we read *motion,* or *exercise;* for *Statumination,* ditto; for *Kinesipathy,* ditto; for *Electropathy,* ditto; for *Atmopathy,* air, and for *Thermopathy,* temperature, the mystery, and possibly the merit of the double or triple pathy would 'depart hence,' very much as the darkness is sometimes said to 'fly away' about the time 'Sol rises in the east.'" All of this reveals the fact that great numbers of water-cure practitioners recognized that air and exercise and other *Hygienic* means were separate from hydropathy and that, when used in conjunction with it, were not parts of hydropathy. Trail complained on this occasion that he was constantly having to repel the charge of "oneideaism" and that he had to labor with equal zeal to prevent his own readers from developing the "one-ideaism" of which he and others were accused. What he was doing, however, was that of mistaking the combination of hydropathy and *Hygiene* for hydropathy.

In this same editorial he says: "Above all things, let them never forget that whatever the malady, all hygienic agencies--anything in the universe except poisons--must be adapted to the particular circumstances of the case. Avoid one-ideaism in our own system, as much as you abhor that smallest of all small ideas in the drug system, viz., *that natural poisons are nature's remedial agents.* "This was not hydropathy or water-cure, but it spread *Hygiene* rather thinly over too much territory.

It is significant that on this occasion and on the same page of the *Journal,* Trail carried a brief account of the commencement exercises of the college and the statement that one of the graduates, Edwin Balcome, of East Douglass, Mass., read a paper entitled "Hygiene and Hydropathy." I recount all of this to show that the efforts that were made, futile as they were, to make hydropathy into a comprehensive system led to the recognition of the actual apartness of the two systems and to a realization that in sailing under the banner of hydropathy, they were sailing under the wrong banner. It was finally fully realized that water as a curative means was not more efficacious than drugs. Writing in the August 1857 issue of the *Journal,* Trail said that he had no faith in the virtues of water in the treatment of disease. "All the virtue we have to deal with," he said, "exists in and is a part of the living organism." He said that he had "as much faithin the virtues of calomel, arnica, peltatum, or lobelia, as we have in the virtues of cold water, and we fear that those who talk about the virtues of either have a very erroneous or imperfect idea of the true basis of the healing art. And when persons are mistaken in theory, they are very apt to be defective, and sure to be empirical in practice."

Trail added that some water-cure physicians and water-cure devotees derive their ideas "from allopathic schools and books," rather than "from truth and nature." These, he said, "undertake to substitute water for drugs. They recognize virtue as dwelling in calomel and water--in everything except the human constitution--and they prefer water solely on the ground of its superior safety; they seem to think that there is virtue enough in the drug, but somehow or other it is dangerous to handle . . ."

Writing in an editorial in August 1861, Trail said: "Water *possesses no power whatever to cure any*

disease. Nature is the remedial principle." He had come to realize that hydropathy was a system of palliation, or in other words, of symptomatic suppression. He asserted that when fever is reduced with hot or cold applications, it is "killed or cured" on the principle of inducing vital actions in another direction. If the fever is an evil, this redirection of vital action may somehow be construed as a benefit; but if the fever is part of a remedial process, the redirection amounts to suppression of the remedial effort.

So great became Trall's criticism of hydropathic practice that he was accused of trying to destroy hydropathy. Replying in an editorial in the August 1858 issue of the *Journal* to a charge made by a hydropath that he "will almost be the ruin of hydropathy," Trall said: "We intend to ruin it completely." This indicates that he had come a long way since he first began practicing as a hydropathist.

Precisely at this point we may close our story of hydropathy or the water-cure. Instead of being a revolutionary movement, it turned out to be a mere reform movement; instead of calling for radical changes in the ways of life, it sought merely to substitute water in the form of baths, hot and cold applications, enemas, douches, packs, fomentations, dripping wet sheets, etc., for drugs. Such treatments have no legitimate place in a system of *Hygiene.*

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A Name Chosen

CHAPTER V

We have stressed in preceding pages the fact that the practices of the early *Hygienists* were a composite mixture of *Hygiene* and hydropathy, while most of the practitioners were designated as hydropathists. At the same time, the leading journal, after the demise of the *Graham Journal,* was known as the *Water-Cure Journal.* There was an early recognition of the need for a more correct name, both for the *Journal* and for the system of practice. Such names were not to be chosen lightly, nor were they to be dictated by one man. The changes of names were made only after considerable deliberation and discussion.

In an.editorial in the *Journal,* March 1856, under the title Hygeopathy, Trall pointed out that "Hydropathy or Water-Cure is such a misnomer of our system of hygienic medication that it misleads a great many persons . . ." He said: "We have an objection to misnomers . . . especially in scientific matters . . ." The terms *hydriatics, hydrostatics, hydrology and hydrotherapy,* he pointed out, are liable to the same objection as *hydropathy. Hygeopathy,* a suggested name, he objected to because of the ending pathy. He thought *hygienic medication* was exactly expressive of the system, but said it "is awkward and its meaning would be likely to be misunderstood."

Pointing out that his practice and that of many of his contemporaries "is not a Water-Cure at all, but a hygienic cure," he said: "We want a name. We *must* have it. We *will* have a new christening. Our system will ere long be known by a name which the careless and the envious can neither mistake nor gainsay. But what shall it be?" He called upon others to think upon the problem and make known the results of their thinking.

Again stressing the fact that the term hydropathy was a misnomer, as applied to his practices and that of many others of his contemporaries, he said that the practice could as properly be called *"air*pathy or *heat*pathy or *food*pathy or *exercise*pathy or *nature*pathy, as these are all parts of the hygienic system."

A demand was made that an "expressive classic name," derived from the "same classic father-land of letters" from which the names of the various medical systems were derived, be adopted for the system of philosophy and practice that belonged to the new school of thought. As early as 1856 the phrase *Hygienic System* came into use as the various practitioners came to be less and less satisfied with being designated hydropathists.

The term hygeio-therapeutics, which was of American coinage, was, for this reason, favored by some who insisted on using the term therapy with its original Greek meaning--"to wait upon." Three objections were offered to this term. Some objected who said that "we want to cure" and not merely to wait upon. Some objected because the term would be difficult for the layman to pronounce. Others contended that "a small quantity of the oil of use would soon soften the asperities of our lingual apparatus," and make the public familiar with the new term. Others objected to hygeio-therapeutics because they wanted a name that "would suit the masses." There were those who pointed out, on the contrary, that the literature of a people soon degenerates if subjected to the decision of the uncultivated popular taste.

Writing editorially in the *Journal,* February 1857, of hygeiotherapia, Trall said: "Some of the friends of our system are urging strong reasons in favor of the adoption of this term. There is certainly one argument we find it hard to gainsay--*It is true.* The term does, in fact, express our system precisely. In this it has an advantage over hydropathy now in use, and the hygropathy, which has been suggested as a substitute.

"Hygeio-therapeutic applies literally to curing or medicating with hygienic materials or agents. *Pathy* has some significance when applied to drug-medication, because *allopathy* and *homeopathy* profess to cure one disease by producing another. Their remedies are intrinsically *pathogenetic* and induce another

pathy, nosis or disease, opposite or similar, as the case may be. But, as hygienic appliances are not essentially disease-producing, there is really no propriety in falsifying our system by .the pathological appendage.

"The use of the term, pathy, in connection with hygiene, degrades hygiene to the level of the drug system every time we write or use it. And besides, there is a beauty in truth, and a power in its utterance, even on seemingly trivial occasions, which never fails to make some enduring impression for good."

In the June 1857 issue of the *Journal* Trall reproduced the following letter from Dr. J. G. Peterson of Newton, N.C.: "Dr. Trall: I have been thinking considerably about the christening of our system of medication, and am sorry to say, do not like any of the names proposed as well as Hygeopathy; and I do not like this because of its paradoxical meaning. Sanatology or Sanology might express the *science* of the system, as Hygeology might, yet I do not know that either is properly expressive of its *practice.* Hygeio-Therapia may be expressive exactly, yet calling the practitioner of the system according to this appellation, seems rather uncouth than otherwise. The same objection I have to Hygeio-Medical, only 'more so.' I think that if we must have a compound name, that Hygeio-Curapathy would do very well as expressive of what we mean. *Cura* means care and pathos or pathy, disease; hence Hygeio-Curapathy means, literally speaking, hygienic care, or waiting upon disease."

Commenting upon this letter, Trall said: "We feel quite sure we will get the right name at last; and we have no doubt that discussion about an appropriate one will induce the people to look a little more closely into the merits of our system. Very few of our readers yet have anything like a correct view of the subject."

Writing in the *Journal,* December 1857, George Field, M.D., said: "I claim to make Hygiene the prominent and, in some cases, the allimportant means of curing disease and restoring health. And this, I believe, is the theory, if not the practice, of all hydropathic physicians. We assert, too, that other physicians, as a class, do not make Hygiene the prominent part of their treatment, either in theory or in practice."

Field was wrong in assuming that all hydropathists placed the same reliance in *Hygiene* as he did. But he adds: "We, therefore, need a name that will embrace the idea of Hygiene. We need this for the matter of fact that we *do* make Hygiene the prominent part of our treatment. We require it, also, as a distinction from other physicians, who consider it as a collateral and incidental, rather than the main part of their treatment." He adds: "Hygeopathy, then, is a more appropriate and truthful name for our purpose than Hydropathy."

Field thought that the chief reason in favor of the term hydropathy was that "Hygiene, strictly speaking, embraces only those means and habits which tend to *preserve* health; and that in the treatment of disease we make use of water to an extent and in a variety of ways that would not be beneficial for that purpose alone; that we should never recommend well persons to take sitz-baths and wet-sheet packs for preserving health, while, on the contrary, we do advise such baths for sick people." Field suggested the use of both terms --hygeopathy and hydropathy--in order to cover both practices. He also offered, as a substitute term, that of *hogeopathy.*

Here it will be noted that Field recognized that hydropathy violates a cardinal principle of *Hygiene.* He had tried to hold onto the water-cure processes by saying that "water is a *natural* agent, and not foreign to the human system as our drugs and that, in this way, the water treatment might, with some degree of propriety, come under the head of Hygeopathy." It is true, of course, that water is a normal element of the human body and, as drink, or as a constituent of food, belongs to the realm of *Hygiene;* but as a sitz-bath or a wet-sheet pack, is no more normal than a bread poultice or a fruit juice bath. It is important that we make a normal use of the normal things of life.

The emphasis placed upon *Hygiene* was everywhere noted. When emphasizing the tremendous importance of *Hygiene,* the practitioners of the time were likely to add: "In my estimation, water is the smallest part of the hydropathic system." An indication of this is seen in an article published in the August 1858 issue of the *Journal* by Hygienicus. Dr. G. H. Taylor used the phrase, "Hygeio-Medical" treatment. Taylor also used the phrase, medical hygiene. C. L. Smalley, M.D., writing in the *Journal,* April 1856,

called it the *Hygienic System.* In the May 1860 issue of the *Journal,* J. H. Stillman, M.D., writes of his "experiences in Hygeio-Therapeutics." Writing in the *Journal,* June 1861, George P. Betts, M.D., of Carversville, Pa., classed himself as a *Hygienic* physician. In the June 1861 issue of the *Journal,* Augusta Fairchild, M.D., a graduate of the Hygeio-Therapeutic College, tells of a conversation that she had with another woman graduate of the same school. She says: "My friend and I were talking over our experiences and anticipations in the practice of hygienic medication." In the December 1861 issue of the *Journal* Trall refers to "the Hygienic medical system."

Writing to unbelievers in the October 1861 issue of the *Journal,* Dr. James C. Jackson differentiates between hydropathy and *Hygiene* in the following words: "You do not believe in Water Cure for the treatment of disease, nor do you believe in that more comprehensive system of treating human ailments which is known by the name Hygeo-Therapeutics and which embraces within its scope the use of all agents which are in their nature health-producing or health-preserving, but you do believe in the use of medicines which are poisonous, though I very much doubt that you can give a reason therefor . . ."

Solomon Fease, M.D., on the other hand, was one who objected to any change of name, either of the practice or of the *Journal.* His arguments were largely those of expediency. He acknowledged a certain sentimental attachment to the term hydropathy, then argued that a change of name might lose them patronage, that, as they were already well established under the old name, a new one might not draw patronage as well as the old one and that a change of name might be interpreted as a retreat. He also thought that without water applications *Hygiene* would be less effective than with them. Even if this last argument were true, it remained a poor basis for retention of a name that was distinctly of the "one-idea" variety, a name that was not descriptive of the practice.

One hydro-hygienist, discussing the relative merits of water applications and *Hygiene,* presented a view that was somewhat opposed to that offered by Dr. Fease. He said: "I believe that I can cure more (chronic diseases) without it (water) by strict attention to diet, &c., &c., than with it, without this attention."

In 1861 Dr. Trall issued a small booklet under the title of *Hygeiotherapeutics.* In 1862 his famous lecture on *The True Healing Art or Hygienic vs. Drug Medication* was delivered in the Smithsonian Institute in Washington. In 1872 Trall's famous lecture, *The Hygienic System,* was published by *The Health Reformer.* This lecture was originally delivered before his classes in the College of Hygeio-Therapeutics. An editorial in the first issue of *The Science of Health* says: "But the leaders of the new Health Reform literature soon became dissatisfied with the term 'Hydropathy,' because it represented only one of their remedial agents; and now the more comprehensive and appropriate term of 'Hygienic Medication' is generally employed. The College of the System--the only one in existence--was chartered under the name of 'Hygeio-Therapeutic,' meaning Hygienic care, or the treatment of disease by hygienic agencies."

In 1915 the Health-Culture Company published a monumental work entitled *Hygeiotherapeutics* by Susanna Way Dodds, A.M., M.D., who was a graduate of the College of Hygeio-Therapy. The foregoing should constitute sufficient evidence that the American physicians who abandoned drugs and took up the practice of *Hygiene* recognized a distinction between *Hygienic* and hydropathic practice and chose a name to designate the *Hygienic* practice. The mistake they made was in trying to designate the new mode of practice by old medical terms. It is quite true that the Latin word *cura* was originally synonymous with our word care and the Greek word *therapia* originally meant to wait upon, while the word *medicine* originally meant healing. But words undergo changes of meaning and the word medicine had become indeliby associated in the public mind with the drugging system, while cure was used to designate any means of treating disease that was applied to the patient with the idea of producing health by artificial measures. The word therapeutics, as defined at the time, was "that part of medicine which treats of the application of remedies to the cure of disease." All efforts to return to primitive meanings in the use of words are unavailing. When the word therapeutics is used today, it is invariably understood in its modern meaning and nobody knows anything of its ancient meaning. Benarr Macfadden made the same mistake when he had the college which he established in Chicago confer upon its graduates the degree, *Dr. of Physiological Therapeutics.* People did not understand it to mean physiological care, which would have been a return to Graham, but a system of treating disease by external appliances of one kind or another. To call the system *hygienic medication* or *hygienic medicine* is to associate it in the public mind with the drugging system. It is quite true that drugs do not heal; hence, as Trall pointed out, the use of the term

medicine in connection with drugs is a misnomer; but it is impossible to secure public recognition of this fact.

For these reasons, present-day *Hygienists* prefer to call this system the *Hygienic System* and refrain from attempting to restore the original meaning to the Greek term *therapia.* Inasmuch as a spurious system of hygiene is promoted by the medical profession--one that accepts processed and refined foods, haphazard eating, so-called moderation in tea, coffee, alcohol, tobacco, etc.--and rejects most of the genuine program of *Hygiene,* we prefixed, several years ago, the descriptive adjective, natural, to the name, thus giving us *Natural Hygiene.* Today most *Hygienists* prefer to be known as *Natural Hygienists* in order to distinguish them from the spurious hygienists who accept the make-believe hygiene promoted by the drugging system.

As further evidence of the determination of the early *Hygienists* to be known as such and to escape from the designation hydropathists, I point out that Dr. Trall's *Hydropathic Encyclopedia,* published in 1851, carried as its sub-title these words, *A Complete System of Hydropathy and Hygiene.* The book was published by Fowler and Wells of New York, who also published the *Journal.* In the first advertisement they ran of the book, they carried pictures of Sylvester Graham, Andrew Combe and Vincent Priessnitz. Above the head of Graham was a banner inscribed "Science of Human Life;" above that of Combe was a banner inscribed "Constitution of Man;" above the head of Priessnitz there was no banner, but just the phrase *water-cure.*

HYDROPATHIC ENCYCLOPEDIA!

HEALTH

A COMPLETE SYSTEM OF

Hydropathy and Hygiene:

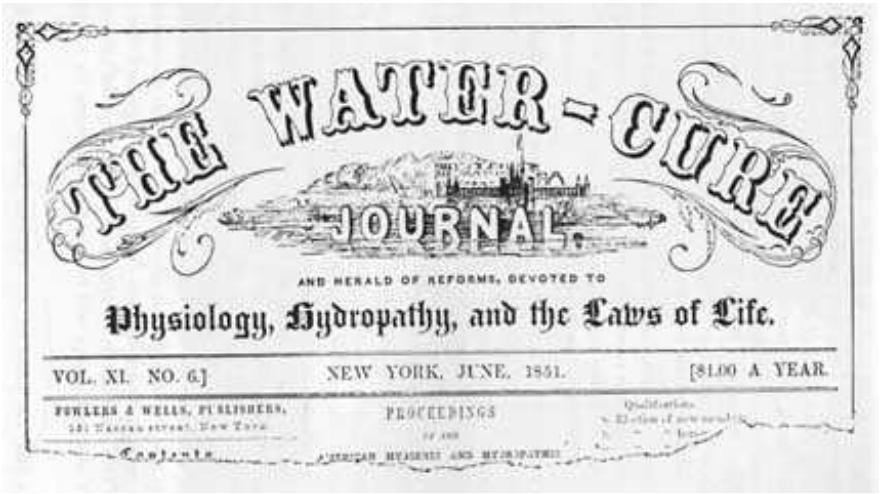
AN ILLUSTRATED WORK,

EMBRACING:

I. Outlines of Anatomy. Illustrated.
II. Physiology of the Human Body. Illustrated.
III. Hygienic Agencies, and the Preservation of Health.
IV. Theories and Hydropathic Curative.
V. Theory and Practice of Water Treatment.
VI. Special Pathology and Hydro-Therapeutics, Including the Nature, Cause, Symptoms, and Treatment of all Known Diseases.
VII. Application to Surgical Diseases.
VIII. Application of Hydropathy to Midwifery and the Nursery.

BY R. T. TRALL, M. D.

The foregoing is a reproduction of the title page of the *Hydropathic Encyclopedia* by Dr. Trall.



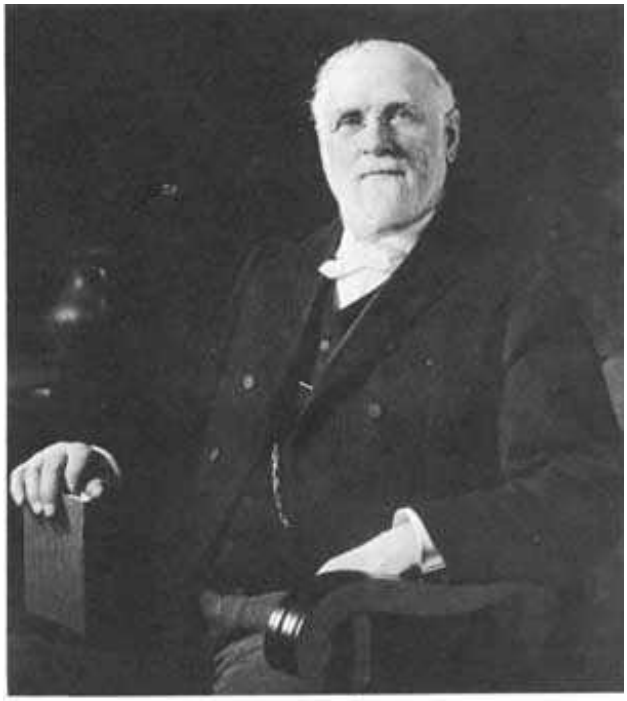
The foregoing is a reproduction of the mast-head of the *Water-Cure Journal* and points up the emphasis upon physiology and the laws of life, which belonged not to hydropathy but to Grahamism.

The Water-Cure Journal and *Herald of Reforms* had been founded by Dr. Joel Shew, but was taken over by Fowler and Wells and Dr. Trall was made editor. On its title page it stated that it was devoted to "Physiology, Hydropathy and the Laws of Life."

At the same time that it was recognized that a new name was needed for the system of practice, it became recognized that a new name was required for the *Journal.* Writing in the March 1861 issue of the *Journal,* Trall said: "We have for some years contemplated a change in the title of the Water-Cure Journal--*The Herald of Health,* the subtitle, *Journal of Hygienic Medication,* provided no more suitable rechristening should be proposed." Such titles as the *Journal of Hygiene* and the *Hygienic Teacher* were proposed. Editorially Trall said, December 1861: "So soon as we can select a title which will be acceptable to our readers, as enduring as time and precisely expressive of the system we advocate, we shall adopt it. Of all the names thus far propounded, that of 'Hygienic Teacher' seems to be the favorite and next in order

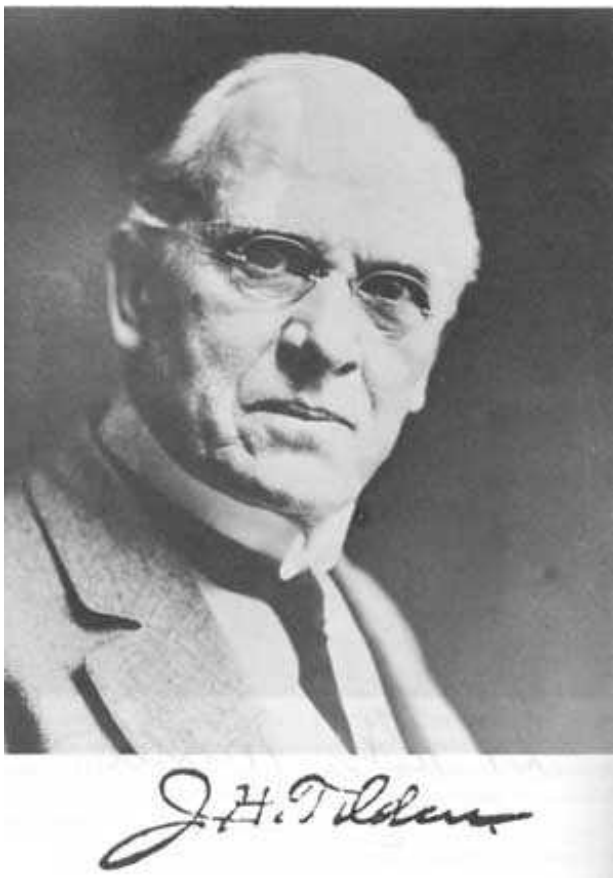
is 'Herald of Health.' " With the July 1862 issue the name of the journal was changed to *Hygienic Teacher.* Writing editorially in this same issue, Trall said: "In unfurling our new banner to the breeze, we do not disclaim, retract, nor recede from any principle we have ever advocated in any book or journal. We have always contended and explained that our system--The True Healing Art--is *Hygienic,* not Hydropathic, although water always was and always will be, prominent among its remedial appliances."

After a year the name of the *Hygienic Teacher* was changed to *The Herald of Health.* The magazine was acquired by Dr. Trall, who after about three years relinquished control to two of his graduates. Trouble arose between Trall and the new owners and Trall issued for a period of about three years a new magazine entitled *The Gospel of Health.* Later, Fowler and Wells started a new magazine under the title of *The Science of Health,* of which Trall was the active editor. The new magazine placed greatest stress upon *Hygiene* and less and less upon water. *Hygienists* did not totally abandon their use of water applications, but reduced them to a subordinate place.



Other evidences of the emphasis upon *Hygiene* and the trek away from hydropathy are found in the titles as well as the subject matter of other *Hygienic* magazines of the time. Dr. Jackson called his magazine *The Laws of Life.* Mrs. White, leader of the Seventh Day Adventists, who embraced *Hygiene* and propogated it among her religious followers, entitled her magazine *Health Reform.* Dr. Walter entitled his magazine *The Laws of Health;* later the title was changed to *Health.* Dr. Dodds published a magazine under the title of *The Sanitarian.* Mr. Albert Turner, who was for years with the Fowler and Wells Publishing Company and associated with Trall on the staff of *The Science of Health,* founded and published *Health Culture Magazine,* which, during the first 30 years of its existence, at least, was a *Hygienic* publication. Tilden's magazine, at first known as *The Stuffed Club,* then changed to *Philosophy of Health* and later to *Dr. Tilden's Health Review and Critique,* was published as a *Hygienic* magazine. Everywhere the trend was away from hydropathy and the emphasis was placed upon *Hygiene* and health.

Albert Turner



The argument has been offered that Dr. Trall was a hydropath and that his *Encyclopedia* proves it. The argument is quite true if we permit Dr. Trall to die in 1851. But as he lived some 26 years longer and his philosophy and practice underwent considerable evolution during that period, it is as inaccurate to judge him by the title of the *Encyclopedia* as it would be to judge him by his degree, Doctor of Medicine. Such an argument would cause one to say that Martin Luther was a catholic priest, for he certainly was before he became the leader of the German reformation movement. Just as Luther became a protestant, so Trall became a *Hygienist.*

Life Subject to Law

CHAPTER VI

Sometime in the period of proto-history somebody invented the idea of the supernatural. He or they peopled the universe with a flock of capricious ghosts--gods, goddesses, spirits (both good and bad) of high and low degree, that controlled all the activities of nature. There was no conception of law and order; everything was the work of supernatural beings.

Western man later adopted Christianity, which reduced the number of gods to three and the number of goddesses to one and substituted a flock of disembodied saints for the spirits that formerly ruled the processes of nature. Christianity retained the great company of evil spirits and enthroned over them a master mind, whom it called the Devil. These supernatural beings were placed in charge of all the activities of nature and were constantly intervening in these activities. Christianity, like its predecessors, had no conception of law and order.

Both the Christian and pre-Christian conception of the cause of disease was based on the belief that disease is due to invasion of the body by evil spirits. Like its predecessor, Christianity also held that the supreme deity frequently inflicted disease upon men, women and children, even bringing about their death. There was no thought that man might bring disease upon himself by violations of the laws of nature, although it was thought that God might punish him for violations of the will of the priest-craft. The will of the priest was the will of God and anyone who defied the priest defied God.

Beginning about 2,500 years ago in Greece, there arose the idea that disease is due to natural causes and the medical profession, which came into existence at that time, largely abandoned the supernatural approach to the problems of health and disease. This supernatural approach was revived during the Middle Ages and was largely retained by the Protestant groups that developed out of the Reformation. Although the post-Renaissance medical profession largely repudiated the supernatural explanation of disease, the people themselves continued to hold to the ancient beliefs.

One of the first fallacies that the *Hygienist* had to overcome was the belief that life was subject to chance and haphazard or to the whims of a capricious Providence and was not governed or controlled like all else in nature, by immutable law. The churches had taught the people that their health and their sickness was subject to the capricious whims of God; the laws of life and health were not taught in the medical schools of the time as, indeed, they are not taught in the medical schools of the present. It was no easy task to bring the conception of law and order to the people and it was not uncommon to denounce *Hygienists* as "infidels" and "athiests" because of their insistence upon the reign of law in the realm of life.

The philosophy prevailed that the good who died young were fortunate; that is, they were blessed to escape from earth, with its trials and sorrows and enter upon another state of existence which, it was trusted, would be happier and better than life on earth. It was thought that God, who is wise and just and never does anything needlessly or without reason, somehow must have made some kind of mistake in sending souls to earth to live here for a "full lifetime," and found it necessary to recall the soul to heaven almost immediately after its birth on earth.

Hygienists rejected the view of some religious people that when little infants or people in the vigor and beauty of youth or in the strength and dignity of maturity die, they make a very desirable change in leaving a world of suffering, sorrow and toil for one of happiness and holiness. When they heard parents talk of having given back their little ones to God and, with every fiber of their being quivering with anguish, trying to gather comfort from the reflection that "what is our loss is their gain," "though we suffer, they are infinitely better off," they thought: how foolish is this philosophy that the best use that one can make of life is to dispose of it as soon as possible.

Hygienists declared that the principles of nature, the laws of science and the truths of the universe, are just as fixed and certain in their relation to the human organization, in relation to life, to health, to happiness, to disease and suffering, as they are in relation to all things else. To ascertain and understand the natural laws, or the regularity or uniformity with which everything occurs, and thus to found on a sure basis a system of mind-body care, was the aim of *Hygienists.* For, they declared that the very fact that a law exists in nature provides the necessity for obeying it. Indeed, they said, the existence of the law and obedience to it should be regarded as synonymous. It was their thought that those laws of being that are so intimately connected with our happiness and welfare should not be merely conjectural or of ambiguous significance. They are written out upon a scroll as broad as the face of nature and are exemplified in all that breathes.

Law (Latin: lex) has the same root as the verb signifying "to read." This arose out of the fact that of old, enactments to control the conduct of the community were read aloud in public. In this sense, law has reference to legislative enactments or imperial decrees; but when we use the term *natural law,* we signify the regularity with which forces and phenomena are produced and with which they behave. The inherence of laws is obvious. They are expressions of the qualities of things. Generally, the regularity of phenomena is so evident that it requires no proof to show it; but there are departments in which this regularity is not so easily discerned. In a general sense, a natural law may be defined as a mode of action and describes the regularity of nature.

We think that natural phenomena can be explained by natural laws, but we cannot separate the laws from the phenomena. What we call the law is the unvarying order of the phenomena. Order and regularity appear to be everywhere in the world of nature and this is all we mean by law. To recognize order and regularity does not explain them. The mere labeling and orderly arrangement of facts is not an explanation of them. The universal reign of a fixed order of things, which we call nature, enables us to reason from observed regularities into unseen causes. Law is a process, not a force, and operates everywhere so that we need to seek for the *invariants* that lie behind the changing surface of things.

When we formulate a law of nature, we simply state as succinctly as possible the orderly sequence of developments. To pass the test of validity, such a formulation of law must cut through superficialities and reveal underlying but hidden causal connectivities. It must explain fundamental relationships that recur so consistently that they cannot be fortuitous.

To repeat: natural laws are inherent in the nature of things and are essentially the same in all places and at all times. Every law of nature harmonizes with every other law of nature. All phenomena appear in conformity with fixed laws. All beings have a determinate nature. If this were not true, there could be no regularity of function. It became necessary for the *Hygienists* to make people realize that man is regulated by lawful processes unconsciously pursued and that his life is not the prey of outside beings.

Hygienists taught that the laws of human organization must be as exact or precise in their power and authority as laws which govern inanimate things. We expect to see the sun rise and set, a seed to sprout and grow, water to run downhill, chemical reactions to take place, all in accord with exact law. We do not expect to gather grapes from rose bushes nor figs from thistles. Is there less reason to expect that man should obey the laws of his being? Shall we not expect him to have health in precise ratio to his obedience? They declared that the idea that man can live in contempt of the laws of life with the greatest impunity is too absurd for the rational mind. The correlative idea that we can live in disregard of the laws of life until disease has developed and then remedy the disease by other, perhaps even more flagrant violations of the laws of organic existence (that is, by filling the body with poisonous drugs) is equally as preposterous. We like to talk of forgiveness, but this amounts to abrogation of the law itself. Violations of the laws of being, biological or physiological laws, are not forgivable, neither in this generation nor in the next. In the plan of the universe, all things operate according to unchanging laws and principles. The consequences of law violations are as rigidly governed as are the consequences of obedience to them. The causes of disease may, therefore, be known and avoided. There is no room in the natural order of things for the intervention of ghosts and demons.

Man is not in charge of his own destiny, despite his proud boasting to the contrary. He is still in the grip of natural processes; he is still subject to natural law. Man is endowed with the power of understanding

and is capable of observing phenomena and the conditions under which they occur; he can even prepare conditions in many spheres that are necessary to elicit determinate effects; but he is in no sense a creator. He must prepare these conditions in conformity with the laws of nature.

The results of the operations of the laws of nature depend upon the nature of the conditions that surround the operations. Under different conditions the same law of gravity that carries a balloon upward brings it to earth again; under changed conditions the same law of gravity that causes a ship to float causes it to sink. There is no change in the law; there is only a change in conditions. Laws are omnipotent. They are integral to the constitution of the universe and cannot be infracted. Trall repeatedly declared that it is simply absurd to say that man can break a law of nature. Although it was generally thought that the words "break a law of nature" express a truth, he pointed out that they express a common misconception of what takes place. He said he assumed that no one employs the words "break," "transgress," "violate" and their equivalents to mean "abrogate," "annul," "repeal," "nullify," in reference to natural law. What is commonly meant is that man disobeys or acts contrary to law. He quoted the old professor who said that when a man falls from a ten story building, he does not violate the law of gravity, he illustrates it.

To say that one breaks a law is merely a convenient word-form, like that of saying that the sun rises and sets. That the laws of nature cannot be violated or broken is an important practical truth, the recognition of which lies at the very foundation of the relations of the living and the lifeless, which affords the only true basis for a true *Hygiene* and a successful art of caring for the sick. As a scientific and a philosophical problem, the solution to this proposition is important.

As soon as we grasp fully the significant fact that the laws of nature are eternal and immutable, that they can neither be broken nor mended, neither damaged nor repaired, that they are to be obeyed and and will be obeyed, and that evil and only evil results from misuse or abuse, or misapplication or misdirection of things, then, instead of sending to the drug store or to the physician for poisons because they are sick, people will employ a teacher of *Hygiene* to guide them into paths of obedience. It is essential that we recognize the grand primary truth that every disobedience of law is inevitably and necessarily attended with consequences that are appropriately described as evil. The law will be fulfilled; it cannot be broken, annulled, repealed, abrogated nor suspended. Consequences, and not remedies, are provided for violations. We cannot, if we would, reverse or subvert the laws of nature. No man ever has a perfectly sound constitution after a period of drugging and he cannot again be made whole. He is doomed to bear his shattered organism for the rest of his life.

Either physicians do not understand or else they undervalue the laws of life. They have no science of life, but spend their time with the science of chemistry. They have much art, but no art of healing. If they understood the laws of life, they would know that every transgression leaves an irreparable injury--the transgression is not forgivable; it is not pardonable. The effects are irremediable. "The worse of all the false theories of disease," said Trall, "is found in the vague notion that as 'sin is the transgression of the law,' the sinner may be saved by applying a remedy to the penalty."

As evil consists in the transgression of natural law and good in its fulfillment and as infringement of these laws is the principal cause of man's unhappiness, the laws of nature should be made the principal study of every individual. These laws should be a part of the mental equipment of all and their precepts never lost sight of in our living and acting. The true rules of conduct must be made known to all and those who have a tendency to depart from these must be frequently admonished as to what is to be done and what is to be left undone.

Hygienists have no secret compound to offer, no panacea to sell at a dollar a bottle and no wonder drugs to produce health in spite of the existence of every reason in the earth why health should not exist. They can only point to the laws of nature, by obedience to which we are able to attain and maintain the most glorious health. Science is knowledge of nature and the scientific method is that which studies the laws of nature and applies them to the production of results. The laws of nature form a unique, harmonious system and no man is exempt from them. Constitutions may, indeed, differ slightly; but no constitution is exempt from the universal laws that govern life. The laws that govern the digestion of food for one man govern the digestion of food for another. The law that governs one man's relations to the air about him is the same that governs the relations of another man to the same air. This leaves no room for the old adage that what

is one man's meat is another man's poison.

The foolish notion, entertained by many, that they are somehow exceptions to the laws of nature must be expelled. No man thinks he is an exception to the law of gravity, but he may think that he is an exception to the rule that poisons tend to kill. Prussic acid will kill as quickly the man who knows not its poisonous quality as the man who is fully acquainted with its toxicity. Natural laws make no allowance for man's ignorance. A poison will kill the man of genius as quickly as it will kill the fool; it will destroy the pious as readily as the impious, the virtuous as readily as the vicious. All suffer alike, as well as all without exception prosper, who obey natural law. The economy of existence requires that ignorance shall suffer as well as wrong doing. The religious should grasp the fact that Divine Providence has something else to do than to work miracles for fools. Fools would not be any better for the constant interpositions of Providence even if they were afforded.

Generally, the priesthood have taught dogmatically and interdicted the use of reason. They have arbitrarily interpreted "revelations" and attempted to enforce belief as though they are infallible beings to whom the rest of mankind must do homage. The interpreters of natural laws cannot avoid free scrutiny by all, cannot forbid the employment of reason in considering their interpretations and cannot avoid the tests that may be made of their interpretations. Others may be guided by observations and may be able to appreciate the phenomena of nature and its regularities and uniformities. But all must know that any principle subversive of universal harmony is to be at once rejected as erroneous.

The idea fostered by many religions that there was a primitive seducer, an evil spirit, commonly represented under the figure of a serpent, that led man astray, overlooks the fact that the power for evil and the ability to choose is in man himself. His is the power to make a choice between several actions, his the plurality of motives, his the understanding and the desire. To teach that man is made in the image of God and at the same time to decry "his wicked human nature," is the height of absurdity. If God is the maker of man and if he made him good and very good, human nature is not wicked.

Pleasure accompanies the normal activity of every fundamental power that man possesses, but pleasure is the end and object of but few of his powers. His musical ability is evidently for pleasure only, but his nutritional activities and his reproductive functions serve other purposes than that of pleasure. That there is pleasure in eating is right and normal, but pleasure is not the end for which we should eat; that there is pleasure in sexual indulgence is equally right and normal, but the pleasure of sexual indulgence as an end in itself is not in accord with the laws of life. "It is among the healthy only that we are to study truly the physiological laws," said Dr. Taylor, "and not among the bedwarfted and the emasculated and the diseased." If we apply this rule to the sphere of sex, and it should be applied here as elsewhere, what results would we get?

Instruments of Action

CHAPTER VII

Life is an essence that tumbles and pours from its source in creative action and brings into being an infinite variety of forms and kinds of existence. It is the source of the sublime and magnificent, the lovely and beautiful, and the well-spring of enjoyment--in brief, all that is pleasing and delightful in animal and vegetable existence. It is known to us only through its functions and its structures.

D. A. Gorton, M.D., thought that all thought spent in investigating the nature of life is more or less futile, but that "we can, however, with profit, study its phenomena, and thereby deduce its laws and modes of development in animate forms, and its relation to the inorganic world." She was certain that life has a dependent relation to the material world, that "the highest forms of existence are developed and supported by the lower." She adds, "if there is one solitary exception to this remark (that "all are but parts of one stupendous whole"), the great chain of mutual dependence is broken, and there is no certainty of anything."

A fact remains a fact, however we "explain" it. Nothing is removed from the wonderful peculiarity of vital phenomena, by whatever hypothesis we seek to explain them. Whatever is true of these phenomena remains true under any hypothesis. We may observe the phenomena, discover the laws which regulate them, gain an understanding of the conditions that should surround them and learn their limitations and their relations, without knowing what life is. It is not essential to our understanding of the needs of life that we understand its essence.

In the forms of vegetables and animals, organic life is universally diffused upon the surface of the earth. Through the processes of nutrition, circulation, secretion, assimilation, as well as excretion, the power of growth and reproduction gives rise to possibilities of action, since it supplies the instruments of action. It produces bones, muscles, glands, nerves and brain. The growth and reproduction of parts supplies the organic substratum that renders possible all the functions and activities of life. The dynamic capabilities of the human system, as these vary with the conditions and circumstances of life, are built into it during its embryonic period in the forms of organs and structures which provide for a wide variety of activities.

The principle that "organization and function are one," that there is not in the body an independent spirit or principle apart from that inherent in organization may and may not be true; but it is one by which many important facts are explainable. The popular exclusions of this principle from *Hygiene* and ethics and the practice of addressing every reformatory effort to an abstract ethereal entity, either in or above our organism, is a chief influence in creating the common confusion. In order that we may study the peculiar phenomena of living structures, it does not become necessary that we first solve the questions of the nature and origin of life. We may study the peculiar properties of the living organism without knowing the origin of these properties. The concept, that form is function, is a very useful one. Life is subject to fixed principles and invariable laws; its variety of products and expressions of energy result from the special structural adaptations of which it is constituted and do not rest upon any changes in the laws and principles that govern its operations.

Although anatomical structures are so connected with physiological functions that a correct mode of observation of these functions presupposes an exact knowledge of structure, the physiologist soon comes to realize that the connection between the structure of an organ and its function is often not such that he can directly determine the one from the other. Although it is true that every variety of physiological action is necessarily connected with the special arrangements of the anatomical elements, yet the connection of the two is usually of such a character that it is far from being understood, even after it has been investigated to the minutest details of its structure. It is not difficult to study the structure of a leg or a wing and determine from this what function it is designed to subserve, but it would not be possible from a

study of the structure of most organs of the body to determine their function.

We note in such studies that where two organs, such as the eyes, the ears, the kidneys, the hands, the lower extremities, etc., perform identical functions, they possess identical structures and where they serve similar functions, they possess similar structures. As an example of this latter, the great similarity between the salivary glands and the pancreas is such as to lead to the thought that they may serve identical functions. The glands of the body are the most marvelous of fabrics; the body, the most stupendous of factories. Often the slight differences between the structure of one gland and that of another do not seem adequate to explain the differences in their secretions. So alike are the salivary glands and the pancreas that the Germans used to call the pancreas the "abdominal salivary gland." But, while they are both glands and they both secrete digestive juices and enzymes, their secretions are somewhat different and their structures are not identical. In the pancreas are structures that secrete insulin and these differ from the general structure of the pancreas.

Occult to the microscope and unknown to anatomy, but assured by our actions and the necessities of function-structure correlations, the different functions of the different nerve structures require differences in structure. Nerves that feel pain and those that feel heat or cold must be differently constituted, else would all feeling be the same. Perhaps the differences are greater in the centers of nerve activity than in the transmitting fibers, but there are probably differences in the fibers also.

Vital powers and vital *properties* are synonymous terms. What is "organic power?" We can only answer that it is the capacity or endowment of each organic structure to appropriate suitable materials and resist and reject everything deleterious to its existence and by which it is enabled to use the means adapted to perpetuate its existence and develop to its fullness. It is the power by which we live, move and have our being.

The living organism may be correctly viewed as a hierarchial structure built upon certain basic elements that stand under and support the the rest. It is impossible to really understand a structure apart from its role in the whole organism. An organ is not an independent isonomy, but attains its full significance only in function and when the performance of this function is integrated in the life of the organism, not only of the moment, but for its future. The organs of the body are inseparable parts of an interrelated, interfunctioning and all-including totality.

Without the concept of function, it is impossible to acquire a complete understanding of an organism. No detailed analysis of lifeless fragments derived from living organisms can give us any conception of life. The true significance and value of the particulars of form and structure become apparent only when this knowledge is merged with the infinitely more important study of the vital activity of the different parts. In an organism, whether quite simple or highly complex, the parts are integers of the whole and are necessary for the welfare of the whole--hence the need to maintain organic integrity.

The organs of the living body function by dint of a wisdom incarnated in their very tissues. The total organism functions by dint of this same incarnate wisdom. The human body is not a mere aggregation of assembled parts such as an automobile, but is an intricate and infinitely integrated organization that functions under a central guiding principle that does not seem to be identical with the intellectual powers of man. With their several powers and numerous adaptations, these parts constitute the essential man. The actions that result from this integration and coordination of structure constitute function. Every functional action is the result of the activity of the organ performing it (result of its cause), which is traceable to some ultimate physiological requirement and is correlated with some external relation or condition.

Man is a very complex being; hence, he is not only capable of a higher standard of health than the animals below him in the scale of being, but he is also capable of a wider variety of forms of ill health. Health and available capacities are derived from the harmony of his various parts. The parts of the more complex organisms, being fitted to their positions and functions in the whole, are not interchangeable, as they are seen to be in some of the lower and quite simple organisms.

The powers and expressions of life are limited by the organic substratum and any undue wear and tear of this substratum weakens the capacity of the organism to function, weakens in man both the capacity of

sensation and of thought, as well as the powers of vegetative functions, reducing, indeed, all of the organic capacities. It would be unjust to require of man or of an organ more than his or its present organization and surrounding circumstances will permit him or it to perform. It is the part of wisdom to learn to live to avoid any unrecompensable wear and tear upon the vital machinery.

"Soundness of mind," said Trall, "bears an exceedingly close relation to the integrity of the bodily functions." If we can but grasp the uniform and constant connection of mind and body, it will not be difficult for us to understand that the noblest mind requires a home of the most majestic and beautiful form.

Living organisms grow, reproduce and multiply their parts and extend themselves by this repetition. To do this, they select from matter in contact such elements as they have the capacity to arrange as parts of their own structure and they *promptly reject and refuse all others,* a necessary condition to the maintenance of their vital integrity. In the plant or animal, from the simplest microbe to the largest and most complex organism, or wherever life reigns, assimilation and growth and refusal and rejection are its constant actions and the energy of these acts must bear a constant relation to each other, for the vital endowment equally seeks its own welfare in either act.

As the constitution of the vital molecule is uniform and invariable, it follows that all external matter must be of three kinds: one is identical with it, or is susceptible of being transformed into the same form and exercising the same relations and may be called *aliment;* the second is indifferent, giving rise to no change in contact, but may serve as a divisor, as *water;* or, a third, such as gives rise to relations that would be antagonistic and destructive to the integrity of the vital molecule in various degrees of intensity. Consequently, this last class must be composed of very many subdivisions--indeed, almost as various as the number of chemical elements and compounds, after subtracting the aliments. This last class must be denominated poisonous. It is necessary to life that the living organism shall resist and expel all substances that it cannot transform into materials identical with its own substance. It is these processes of resistance and expulsion and the processes by which damages are repaired that are mistaken for the actions of drugs.

The animal body is composed of many parts and these parts of lesser elements, each of which is possessed of a certain quasi-independence of action peculiar to itself and so is capable of being affected in a peculiar manner; hence, the application of foreign matter to the general organism through the circulation produces local effects, all of which are alterations of the normal functions and structures and tend to degrade, not to elevate these.

All of this is the result of the *invariableness* that characterizes the constitution of all things. The same elements and the same conditions of heat, etc., are employed in the constitution of each individual and each species, wherever produced; the same law is ruling throughout the realm of life. The attempt to impose other materials or conditions upon organic structure is resisted and can only result in waste of the formative and actuating principles employed in its constitution. A constant development of forms, of which the vital organism is connected and on which it depends, is thus retarded or prevented.

Throughout the chapters of this book we have used the phrases vital organism and vital activities. It is necessary that we explain the meaning with which we use them. The term vital is derived from the Latin word for life and we use it in this book in this sense. By vital organism we simply mean the living organism and by vital activities we have no other meaning than the activities of the living organism. We do not use the term vital with reference to any theory of the nature and source of life.

What is Health?

CHAPTER VIII

It is a sad commentary upon our educational system that, however well informed our people may be upon most matters that affect their lives, they are generally very ignorant upon all subjects that pertain to their mental and physical health. Although of foremost importance with everyone, health is the subject of which he or she knows the least. Our people live very haphazardly; they have no philosophy of life, nor have they any well-thought-out and well-arranged plan of living. Irrationality characterizes their modes of living and they are almost constantly suffering the ill consequences of their unreason.

Health is a much neglected subject. Medical literature does not contain a definition of health. This is not surprising, as health has never been the subject of the medical man's attention. Disease has been his speciality, cures his stock in trade. With all of medicine's preoccupation with disease, medical literature does not contain a definition of disease. Beyond the vague generalization that disease is a departure from the normal, the medical profession possesses no semblance of a definition for that which is the object of its special attention.

If we may accept as true the proposition that disease is a departure from the normal, then it follows, logically, that the normal is health. But what is normal? The normal is the standard and it is possible to accept false standards, even very low ones. The word normal is all too commonly used to mean the usual, the customary, the average. In its very nature the average is a low standard. It is much below the higher standards represented by those specimens that are above the average. It is a radical fallacy to assume that to average the blood pressures presented by the common run-of-the-mill man or woman presents us with a valid physiological norm of blood pressure. It is equally as foolish to think that to average the weights of people of various heights will produce for us a valid physiological norm of weight. All of our norms, not only of weight and blood pressure, but of metabolism, of urinary reaction, of vision, of childbirth, etc., are but averages and these averages have not been made by choosing the best specimens of men and women and working from these, but by deliberately choosing the sick men and women we see around us. Thus it becomes evident that if we define disease as a departure from the accepted norms, we merely accept as sickness a slightly lower state of disease than that which is accepted as normal.

In a nation of cretins, a healthy man would be regarded as abnormal; in a community of color blind people, a man with good color vision would be regarded as abnormal; in a nation in which everybody has defective teeth, a man with a good set of teeth would be regarded as abnormal; in a nation of rachitic people, bow legs would be considered normal, while the man with sound bone structure would be considered a freak. Thus it is evident that we cannot accept the common definition, vague as it is, of disease, as valid.

We cannot afford to accept anything but the highest standard of physiological and biological excellence as normal. Anything short of the highest excellence and integrity of structure and the highest vigor and efficiency of function must be recognized as a state of impaired health. The low standards that have been established by the medical profession and accepted by the public cannot be reasonably regarded as anything other than marked departures from the biologically normal. This is to say that our normals are themselves disease, as the term is vaguely defined. We accept as normal various degrees of defectiveness of our organisms and of lagging functions of our various organs.

Man is a being made up of many correlated and integrated but quasi-independent structures and when we understand the normal functions of these individual structures and their normal structural and functional correlations, we can form a valid ideal of mankind or humanity in the full and harmonious development of all the parts of his nature. Regarding the harmonious development of all his several parts and functions as an attainable ideal of man, we can urge the necessity for those changes in his ways of life

needed to form a proper basis for the attainment of this worthy ideal. While we cannot attempt anything higher for man than his perfect development, we surely cannot settle for less, unless we permit fancy to dethrone intellect and judgment. Nothing but this will enable man to form a harmonious ideal of that state of development to which he may attain.

It may be urged by the devotees of the various schools of so-called healing that they also recognize the imperfections in human development, but they offer no valid program for human improvement. It is true that we are agreed upon the anatomy of the body and, as far as is essential, we are agreed in reference to its organic functions; we also agree generally as to the inutility or, rather, utter worthlessness of drug medication; but although we and they teach all these things, we part company with them when we come to the practical application of our common knowledge to the general improvement of mankind.

Our word health is derived from the Saxon word for whole. Heal is derived from the same word and means to restore to a state of wholeness, soundness or integrity. Holy comes from the same root and signifies wholeness and purity of mind. Taken in its fullness of meaning, health is completeness and perfection of organization, fitness of life, freedom of action, harmony of functions, vigor and freedom from all stain and corruption-in a phrase, it is "a sound mind in a sound body."

Health is a condition of perfect development, a state of wholeness and harmonious development and growth and adaptation of part to part, of organ to organ within the organism, with no part stunted and no part in excess. In this state of organic development lies the perfection and symmetry of beauty. Beauty is but the reflection of wholeness, of health. It is easy to demonstrate that the forms and proportions of man and of every animal and plant, which are in their highest and most perfect state, are also the most beautiful.

When every bone is of the best form and size for its service in the total organism, there is perfect proportion; when every muscle is fully and proportionately developed, with just enough fat in the cellular tissues to round out the muscles, we have the highest beauty of form. When the texture of the skin is finest and the circulation of the blood most vigorous, the body well nourished and freed of all waste, there is the glow and charm of the finest complexion. The highest beauty is the expression of the highest health.

Partial beauty, fading beauty, decaying beauty--these are but expressions of partial, fading or decaying health. They represent unsatisfactory and painful states of existence. Beauty belongs to glowing health and perfection of organization. It is impossible for us to separate these ideals. We cannot picture health in terms of the conventional, for contemporary man is far short of this wholeness of organization and vigor of function that is health.

If we try to picture health, what do we see? A form of perfect symmetry and proportion; a clean, smooth, semi-transparent skin, with the red blood shining through, especially in the cheeks and ends of the fingers and toes; glossy hair that is full of life; clear, bright eyes that are full of expression and that dance with life, rosy lips that smile with the joys of life, pearly white, sound, even teeth; a breath that is as sweet as that of the kine in the springtime; freedom from disagreeable body odor, indeed, where health is perfect, emitting an agreeable aroma; a body that is filled with activity, delighting in work or exercise, and a happy, courageous, mirthful and hopeful disposition and a desire to help others.

Such a picture of health can come only from the orderly, regular and perfect performance of the functions of life--from a sound heredity, a congenial environment and conduct that conforms with the constitutional nature of man. It is the perfect combination of bodily organization, intellectual energy and moral power in harmonious unity. It means perfect organization of brain and nerves that are as finely proportioned as the bones and muscular systems. In such a being we would expect to see the symmetry and proportion of head of the Cro-Magnon, not the asymmetry and disproportion of head of modern man. Unconsciousness of action is a true test of perfection of function. If you are conscious of your stomach, your bowels, your heart or some other part of your body, there is something wrong. But health is far more than a mere absence of symptoms of illness. It is a state of positive well-being that is manifest by a *euphoria* that is but rarely experienced by modern man. Health consists not in bulk, but in quality or excellence--a flea may be healthy; an elephant may be sick. Fleshiness (overweight) has no significance so far as it represents healthiness. Health means physiological and biological normality in everything--in all

the tissues and organs and in all the functions.

Man's life should begin with a painless birth and a perfect organism, marred by no hereditary defects and deformities. A healthy baby is one of smiles, love and joy. The whole period of youth is naturally one of greatest happiness, consisting of continual and developing strength and capacity, of novelty and physical and mental activity and enjoyment. This is followed by the full vigor, firmness and strength of manhood, with all its powers of action and its capacities for happiness. Then comes the calm serenity of age and at last, when the individual has fulfilled his work and passed through all the phases of his varied and glorious existence, he should go down to the grave without disease, without pain--a long and happy life closing with a calm and peaceful death. Such is the natural life and death of man.

This being the natural course, the normal rule and law of human life, this being, in a word, health--let us look at the sad spectacle of human disease around us. View the misery of mankind and see a sight over which angels must weep. Children are brought into the world with sick and defective constitutions, amid the throes of mortal agony--the pangs of a diseased nervous system. They drink in the cause of disease with their mother's milk, poisoned, as it often is, with deadly narcotics and drug *medicine.* Infancy is one long agony of disease and pain. Childhood brings its peculiar diseases--the successive efforts of nature to purify a depraved system. Maturity brings its fevers, rheumatisms, functional failures, asthmas, anemia and the whole train of horrors which men inflict upon themselves and if existence is continued amid these sufferings, old age comes on with accumulated scleroses and agonies and death is the last struggle of nature with the causes of disease.

Look closely at the young men and women about you. Are these the strong men that shall be, these the lovely women of the future? Few of them possess body and mind that will come to mature perfection. Slavery and death--these are the two words that describe the history of most of them. How gladly would we stop here, but we cannot; for before us we see the writhing forms of those whose nights are spent in groans, their days in pain. To such, the bright sunbeams are mockery; the delightful perfumes shed by lovely flowers fail to gladden their hearts, for the hydra-headed monster of disobedience has struck his fangs into their vitals.

We see hundreds of them suffering in the delirium of fevers--fathers, mothers, sisters, brothers, spending weeks yearly in anguish and crying out for relief, every joint racked with arthritic pains or with neuralgias, with bodies covered with sores, with stomachs distressed with ulcers, deformed, distorted, paralyzed and cancerous, great numbers of our children being carried to early graves.

We could well divide the people we meet into the following categories:

1. People who are definitely sick,
2. People who are on the border-line of illness,
3. People who are almost healthy, and
4. People who enjoy high-level health.

The first three groups constitute by far the greater part of our population. The latter group is made up almost entirely of young people, although comparatively few young people belong in this group. Just as the prophesy of the oak is written in the acorn, so the promise of the vigorous man is in the vigorous child. It is lamentable that our culture continues to seek to build vigorous manhood and womanhood out of puny and defective childhood.

Charles E. Page, M.D.

Where is liberty? Where is life? Where is happiness? Where is beauty, in a world that is blighted by suffering and premature dying? If we go out in nature, where real wealth and luxury reside, we see the sparkling jewels of earth and sea. Brightly colored birds from every clime pour forth their sweet notes in grand concert; flowers are there--bright flowers of every hue, indigenous and exotic--while bright sunlight tinges all with its celestial beauty. Life, liberty, happiness, angels of love, dwell in these sylvan bowers, not in the haunts of man. Why is the highest of earth's creatures the sickliest and the most unhappy?

There is no truth in nature more positive than that the normal condition of man is one of health. That all the organs of man's body are adapted to promote and maintain health appears to be so self-evident that to argue it would seem to be a work of supererogation. Health is the result of the normal performance of all the functions of life. From the rising to the setting of the sun, life and labor are pleasant to one in good health--to contemporary man, life is a burden and labor but another name for slavery. Health gives development, beauty, vigor and happiness and is characterized by strength of body, power and serenity of mind and keenness of enjoyment of all the good things of life.

Disease is the result of any impairment of the normal functions. It hinders development, mars beauty, impairs vigor and destroys happiness. It is characterized by indolence, weakness, pain and misery, and brings a wretched life to a premature and painful end.

As every organ of the body is essential to wholeness and integrity of structure and vigor of function, no organ can be spared. Not merely must the nutritive and drainage systems be perfectly adapted to the requirements of the brain and body, but the smallest and apparently least important parts of the body must be fully and harmoniously developed. As Dr. Nichols so well expressed it: "The smallest instrument out of tune brings discord into the harmony of life."

Man can never rise above the excellence that belongs to his body, the infinite dignity that springs from it, and he should be satisfied with nothing short of the highest physical excellence of which the human organism is capable. So long has man lived in violation of the laws of his being--so long has he suffered disease and premature death--that he has come to forget or to lose sight of the fact that, instead of the sickly, deformed creature he is, with body and mind twisted and dwarfted in conformity with false conditions, he might and should be a healthy and well-developed being, in the enjoyment of the resulting consequences of such a condition.

The Ways of Health

CHAPTER IX

The grandest desiderium in the twentieth century, surpassing in value all other discoveries that may be made in this or any succeeding century, is a true and reliable science of health or, more properly, a science of life. It would render life and health as certain as chemistry and physics, electricity and, perhaps, astronomy. When we think of how numerous and how intense the joys of living can be when we are in exuberent health and when we contrast this state of euphoria with the suffering and discomfort of disease, why do we think of the man or woman who cultivates health as a mere faddist?

We are daily surprised at the lack of information possessed by the people pertaining to their health and its maintenance. Although it is obviously to their highest interests to know how to preserve high-level health, they appear to be entirely indifferent to the matter. This can be accounted for only by assuming that they have been conditioned to depend upon others to look after their well-being. Formerly they were led to believe that Providential arrangements have removed the vital issues of life from their control, so that there was no use for them to look after and try to preserve their health. More recently they have been taught to believe that it is of no consequence to care for health--the most ignorant and indifferent to the precise conditions of life being just as likely to escape illness as he who consciously seeks to preserve his health. If these surmises are not correct, it still remains certain that the vast majority of our people are not enjoying good health and that under our present ways of living we have not been able to extend the length of human life.

Our people have no philosophy of life. If they are religious, they assume that God intends that man shall be sick. God does not hold us responsible for our illnesses. If they are *scientific,* they assume that sickness is inevitable, indeed, that health is but a mirage. *Science* assures us that sickness is unavoidable except as it discovers *immunizers.*

If we could fully realize that no foul fungus springs from healthy flesh and no plague develops in pure, living blood, we could grasp the supreme importance of health in all our activities of mind and body. We would understand the importance of health in the conduct of the affairs of the world. We would demand health in our leaders, if we are to continue to play the sorry game of "follow the leader." What can we expect of poetry, if the life of the poet is one long disease; of literature, when the writers are drugged to intoxication; of art, when the artists are degraded to the level of their own indulgent lives; of religion, when its ministers are steeped in sensuality; of the state, so long as its administrators are drunk and diseased; of education, when our teachers are morbid throughout; of students, when coffee, cigarettes, hot dogs, soft drinks and sex occupy so much of their time and attention? When the very foundation of our civilization is rotten, how shall we make it serve the genuine interests of mankind?

The first need of our world is health. Everybody knows this, but so universal is sickness that men do not recognize disease as abnormal, the result of violations of the laws of life established in nature for the control of our complex being. Health is the basis of goodness and happiness, the foundation of all progress and the theme to which our thoughts and energies will at this time be devoted. Show us anything in the universe that is in normal relations to all other things and we will point you to a good thing, a source of pleasure to every living thing, a blessing to all creation.

How may a high state of health be attained? How may we assure wholeness and fullness of development, vigor of function and freedom from disease and suffering? How may man be returned to that soundness and integrity of structure and vigor and force of life that he knew in the morning of his existence? If contemporary man is so lacking in health that he is but a puny specimen of manhood, how can he be restored to his pristine power and majesty? In a word: how may man be healed? The sun of those far away days has grown chary of its beaming countenance, while groping wanderers cast up

longing eyes to its vivifying effulgence; but purblind and weary, they involve themselves in inextricable labyrinths. Although we may, perhaps, be conscious of its diffused radiance, between us and the source of light there seems to be an impenetrable veil.

It should not require argument to convince the intelligent man and woman that man can return to health and strength only upon a basis of law--natural law--specifically, upon a basis of those laws that operate to make human life possible. All laws essential to the welfare of man are written in his own constitution. Every rule of human conduct to be valid in promoting human welfare and happiness must be in harmony with his nature. No law, no social custom (convention), no moral precept, can have any validity for man that does not accord with his highest welfare. If it is not intimately related to man's highest fitness--physical, moral and intellectual--it cannot correspond to his highest ideals of truth, duty and enjoyment.

Those of us who study and understand *Natural Hygiene* look upon this subject from an elevated standpoint. Taking a comprehensive view of it and living within the benefits of *Hygiene,* we are hardly aware of the prejudice to be combated and the ignorance to be removed, before mankind will be brought to understand that it is better, from every point of view, to live in a state of health than in a state of disease--in a state of happiness than in one of suffering and misery. Our people seem content to be useless half of their lives, and they watch with indifference the mounting incidence of degenerative disease.

They reject the idea that it is our right and duty to live in health to a good old age--that sickness, pain and early death are results of our wrong doings. If they could but grasp the significant fact that man is the builder of his own suffering, the architect of his own miseries, they could begin earnestly to look at their habits and ways of life. They would then be more likely to study the ways of life to the end that they may enjoy uninterrupted good health and an abounding vigor. The people need urgently to learn that the normal condition of human beings is one of health, that man is never sick without cause and that sickness is always the result of violation of the laws of life. Never a child cries with colic nor an adult groans with it, there is never a neuralgia or a diarrhea, no child suffers with a cold and no adult has an ulcer of the stomach, unless there has been repeated violations of the laws of organic being.

The habits of the people are subversive of health in almost every important respect. They eat, drink, smoke, play, work, rest, marry, bear children, go wherever their fancy desires, wherever their appetites and passions lead them--they do almost everything, all without reference to the laws of the human constitution. The body resists the influence of these violations and repairs daily the ravages of such, so that their cumulative effects are long in making themselves felt as disease.

It is a very deplorable aspect of our life that where we need to be thoughtful, we are thoughtless; heedful, we are heedless; cautious, we are risky; comprehensive, we are foolish; where there ought to be knowledge, there is ignorance; where surety, distrust; where regularity, there is dissipation; where we should fast, we eat to excess; where we should live simply, our lives are complex and harassed; when we should sleep, we indulge in revelry and riot; we drink when we should avoid *stimulants* and *narcotics;* where we should take only fresh air into our lungs, we smoke tobacco; when we should walk, we ride; where we should be in the open air, we are sitting in a stuffy room; where we should dress lightly, we are smothered in clothing; where our clothes should be loose, they are so tight as to impede circulation; where we should refuse to take drugs, we swallow a miniature drug store; where we should be independent beings, we are under the surveillance of a physician; where we should live for years without an ache or a pain, we go through no day without them and die at a comparatively early age; where health should be the rule and where ill health should be the exception, the converse is true. It should be obvious that whatever may be an individual's capacity for achievement, nothing is so certain to defeat all expectations and render high achievement impossible than ill health. Let ill health render a person incompetent to put his energies and talents to work and nothing but failure can result.

As exact as are the laws of life, they are not difficult to understand and they are not hard to obey; indeed, it is easier to obey them than to violate them. It is easier to live in harmony with the laws of being than to live otherwise; it is easier to do right than to do wrong. This is true because we are constituted to live in this way.

There is a true way of living--a way of living so that human beings may remain in health--a way of

living so that those who are sick may evolve into good health. This way of life seeks to conform in all particulars to the laws of being and disdains all efforts to nullify these laws and steal health by illegitimate means. The conditions of health amount to nothing more nor less than a strict observance of the laws which govern and control the living organism. These laws are not hidden, but are clearly written on every page of history; they are indelibly fixed in every vital tissue; they are stamped on every organic instinct, observed in every manifestation of sense and expressed in every action of every mental power.

Are you human? Are you an animal? Are you of the "earth, earthy?" Are you subject to the laws of life? Are you subject to the conditions of life on the earth? Do you have the same physiological needs as the rest of humanity? If you can answer yes to these questions, the message of this book is for you. If you are human, you are subject to laws and conditions, compliance with which will provide for health, vigor and length of life; failure to comply with them will build weakness, disease, misery and shortened life.

Hygiene is a way of life adapted to the needs and conditions of human beings and not to spiritual beings. It is adapted to supply the physiological needs of a living organism, not one that fills the organism with exotic and adventitious materials of a deleterious character. It recognizes man's sicknesses as of mundane origin and not of supernatural causation. The *Hygienic* life is one of health, with all its pleasures. There is no *natural death,* save the gradual and painless wearing out of the vital energy in old age. Health is the result of *Hygienic* living. Disease is the result of accidental, ignorant or willful violation of the laws of nature.

The *Hygienist* says that, in order to discover the best means of retaining and restoring health, it is necessary to study nature. But, when he says this, he does not mean that we must view the landscape or enjoy the beauties of the evening sunset. Enjoyable as are these activities, they do not lead to an understanding of life and its needs. We must study living nature--life. We must understand the conditions of its existence, the laws of its operations, the requirements of its different modes of activity, the effects of different environments upon the living organism, the effects of its own ways of life upon it, the relation of avocation to health, the relation of occupation to self-expression, the good or evil that it is subjected to and how it meets these, appropriating the one and resisting, expelling or escaping from the other.

We need to know and understand the needs of the body for food, air, water, light, activity, rest and sleep, warmth or coolness, cleanliness, peace and poise, hope and cheer, confidence and faith, friendship and love; we need to know how to adjust these to the varying needs and circumstances of life. We need to know the evils of excess, the damages of fear, anger, worry, anxiety, internal conflicts, of the destructiveness of poisons of all kinds, the impairing influences of deficiencies, the role of sex in life. We need to recognize and know the sequences of cause and effect that we may be in a position to remove the antecedent that its consequence may be ended. This is a study of biology, more properly, of bionomics--*Hygienically,* a study of *orthobionomics.*

The laws of nature, as these are manifested on and through the human organism, constitute the only basis on which we can predicate an understanding of the effects of human habits upon health and longevity. Dr. G. H. Taylor emphasized the fact that health and the best means of promoting it cannot be studied in the sick room, but its needs are best ascertained in the most perfectly healthy. By such a study we gain a fair indication of normal wants, thus are able to know what are the real wants of the sick body. The healthy do not shrink from the air they should breathe, nor from the labor they should perform; they do not destroy the proportional elements of the food they should eat, nor do they seek to obtain a fitful, sickly exaltation of their pleasures beyond the range of their real wants.

Health, as previously defined, is maintained by a simple nourishing diet, pure air, exercise, cleanliness and the regulation of the passions. The individual consists of more than a body. The wholesome, natural and due performance of the functions of the mind is equally as important as that of the body. Modern man is a mechanic and a chemist and he interprets life in mechanical and chemical terms. He has lost all touch with nature and with the sources of supply of his basic needs.

We need to be much in the open air, to have all our rooms well ventilated; our windows should be open at top and bottom with no impediment from shades and curtains. Breathe the pure air night and day. We should have our rooms light and airy, should avoid darkness and get all the sunshine we can. The sun is a

great fountain of vitality. A correct mode of living is the great fundamental basis of good health. Fresh air, proper food, pure water, sunshine, appropriate exercise, rest and sleep, cleanliness and mental poise are the great essentials of health and long life. With these, we may take the advice of Shakespeare and literally "throw physic to the dogs." Without them, we may poison and carve, dose ourselves with nostrums and abuse ourselves with all the popular therapeutic modalities, both of the regular and irregular schools, exhaust the empire of charlatanism and still remain groaning invalids and crawling wrecks of humanity until death closes the scene.

No diet, no oxygen, no sunshine, will produce vital operations in a corpse. Everything we do, whether well or sick, must be subservient to the power of life. Food is valuable only in connection with the power to utilize it. Given a wholesome environment and physical and mental habits that maintain normal nerve energy and the functions of man's body will be normal and this is health. If the environment and habits are enervating and functions are lowered, disease evolves as a necessary consequence of lagging function. Upon the healthy condition, the purity and richness of the blood, depends our physical well-being, our bodily strength, our mental sanity and the happiness of our existence.

Say what you like, healthful habits do not cause death. Pure air, pure water, moderate eating of wholesome foods--these and similar wholesome things are not disease producing. Impure air, impure water, excesses of food, unwholesome food, imprudence in eating, excesses of all kinds, lack of rest and sleep, inadequate exercise, poisoned drinks, smoking, etc., are all disease producing. Here, then, we have set before us two ways of life--opposite ways--the one leading straight to health and strength, the other equally as straight to weakness and disease. The physician who thinks that the prevailing habits of eating and drinking are correct will give no attention to these causes of disease. He will search for germs or viruses--he will ignore coffee, tobacco, alcohol, excesses, late hours, sexual over-indulgence, passional stresses, etc., and lead his patient to believe that his suffering is due to some obscure something called disease that has seized upon him and must be destroyed.

Life and health are composed of a concatenation of circumstances over which individual control is a necessary condition to self-improvement and progression. It remains true, unfortunately, that most health seekers attempt to regain health by the employment of partial or incomplete measures. Instead of wholeness of program, they adopt some one or two elements of what should be a health-building way of life and ride this as a hobby. Full health requires, nay, it demands a full program of healthful living. One does not attain fullness of health by diet alone nor by exercise alone nor by means of a fast alone, etc. None of the needs of healthy life can be neglected; none of them can be over-indulged.

Concerning the necessity for a total *Hygienic* program, Trall said editorially in the *Journal* for October, 1861: "The world moves. Since the establishment of the New York Hygeio-Therapeutic School in 1853, whose professors are Hygienic physicians, Hygienic or Health Education seems to have become a prominent topic with many teachers and patrons of literary institutions. Amherst College, Mass., has led the way in establishing a chair for special instruction in gymnastics and Harvard is urging the appointment of a Professor in Hygiene. But we fear the functions of the professorship are destined to be altogether too limited. The idea of Hygienic education or training, with nearly all teachers and institutions who have dignified it with the position of a chair or department of the general educational course, embraces little more than gymnastic and calisthenic exercises. These are useful and important, so far as they go; but they constitute only a fractional part of Hygiene. A professor of Hygiene should be nothing more nor less than a practical physiologist. Physiology is the doctrine of *functions,* as anatomy is the doctrine of structures. It is for the anatomist to reveal the order and arrangement of the living machinery, so fearfully and wonderfully made; and for the physiologist to explain its actions and uses. It is the business of the hygeist so to exercise each of the vital tissues and organs as to secure the equal and harmonious development of all. This theme, therefore, comprehends something more than mere muscular exercises.

"The material of which the structures are formed is quite as important as are the amount and kind of exercise; hence diet is one of the subject-matters of the Professor of Hygiene. And on this subject we are quite sure that a majority of the Hygeian professors teach altogether the wrong sentiments . . . The Hygienic professor's vocation not only embraces exercise and diet, but it comprehends also air, respiration, ventilation, clothing, temperature, rest, sleep, passional influences, etc. All of these subjects are comprehended in the course of the Professor of Physiology and Hygiene in the Hygeio-Therapeutic

College and should be taught by every Professor of Hygiene.

"We believe that one of the drug-medical schools of this city introduced a chair of Hygiene last year; or at least the subject of Hygiene as a branch of education to be properly taught in a medical college. But we suspect it did not amount to much. Hygienic and drug-medical education can never flourish in the same school. They can never long coexist. The druggery must soon poison out the Hygiene, or the Hygiene will inevitably exterminate the drugs . . ."

Time enters as an essential element in working for the perfection of the individual and development must necessarily go through a consecutive course of gradations. Health is not regained in a bound. There is a day-by-day, often unobservable improvement in health, as conformity to the laws of being is continued.

We have set forth in this work the laws of life so far as these are understood and we think that just in proportion as these laws are observed, so far as all the functions of life are concerned, will more people have health and happiness. It is our thought that most of the ills, diseases, premature mortality and general unhappiness of our race are intimately connected with violations of these laws. We can pardon not the incredulity with which this statement will be received by those most interested in its truth. We tend to cling to our errors and our vices and even to hug our chains. We seem to be in love with sickness and rush upon premature death as if it were not in violation of the laws of nature. We find it difficult to believe in a condition of universal health, plenty and happiness. Some are even mad enough to fight against it--distrusting the goodness of the universal order and blaspheming it by slandering its creatures and its laws.

In the world as at present organized, which is an irreversible antihuman machine, no individual can obey these laws so as to have integral health--it is an impossibility. We tend towards health as far as we and others become aware of the evils that exist. But if my neighbor poisons the air with the fumes of tobacco, if he pollutes the water with the exhaust from his factory, if he radiates evil wherever he goes, he makes me suffer with him. There is a unity in the race that makes the crimes of one man rebound to the hurt of another. We cannot repudiate this unity any more than we can repudiate the unity of our own body. I cannot be healthy alone--I cannot be honest alone. In a society in which dishonesty is the fashion, as it is everywhere, though people do not understand it, dishonesty is forced upon all. The full *Hygienic* life must await that broader social revolution that will liberate man from age-old slaveries that bind him to social evils.

Hygiene

CHAPTER X

Hygiene is properly defined as that branch of biology which designates the conditions upon which health depends and the means by which it may be sustained in all its virtue and purity while we have it, and the means upon which its restoration rests when we have lost it. It is the scientific application of the principles of nature in the preservation and restoration of health. We may also define *Hygiene* as the science of normal vital development. It comprehends all the laws that determine the changes in living organisms and all the conditions which conduce to or interfere with normal growth and sustenance. It traces these conditions to the unerring laws of nature and thereon establishes its science of life. It demonstrates the great primary principle of human action, that all permanent good, all enduring happiness and all true advancement are found only in obedience to these laws.

Hygiene does not neglect the care of the sick. All true care of the sick recognizes and applies these same laws of nature in providing the needs of the sick and the removal of abnormal conditions. Disease results from disobedience to organic laws. *Hygiene,* as applied to the sick, is not the mere employment of diet, or of fasting; but it enters into all the causes of disease, seeking to remove these, and supplies all the needs of life in assisting the efforts of nature in restoring health. It provides a simple and healthful diet, carefully adapted to the assimilating powers of the body; it demands pure air and warmth; it provides rest or invigorating exercise as demanded, with other physical and normal *Hygienic* conditions.

A system of mind-body care that is valid both for a state of health and for one of illness must have as its most prominent feature appeal to the representatives of modern science, a principle capable of unifying all valid means and measures when caring for the organic body when well or sick. Such a principle will set each factor-element of a sound system of care in its proper place and thereby create a grand harmony and an easily understood system. It must be both universal and eternal in application; it can only rest upon one true principle; hence, it will be absolutely identical for each and every human being without regard to race, creed or color, without reference to climate, altitude, age, sex or occupation.

A system of care that must satisfy such enormous demands cannot be of an ephemeral nature nor something susceptible of merely local application. It must not be a fabricated system that some man or group of men have woven together out of disrelated elements, but must be constituted of every elemental factor of life itself. It cannot take aim at one special condition of the human body and mind, one special field of knowledge or organic experience. It cannot be partial to any one form of life or to anything that has to do with the support of life. It must leave open every conceivable opportunity for evolution.

It cannot be a mere fragment of truth; it must be truth itself. Otherwise it will not meet the demands made upon it. It will serve to divide rather than to unify the processes of caring for the well and the sick. It will result in discord between the means of care and the means of restitution, between the powers of life and the means with which to support these powers. If it is not truth itself, it will run counter to its professed principles and create biological antagonisms instead of biological harmonies.. Instead of becoming a basis for the attainment and maintenance of human health and sanity and of an enduring stability of structure and function, it will become a source of weakness and disease.

Hygiene is not the gift or invention of any man nor group of men nor of any succession of men, but the pristine way of life with which man emerged when he first came upon the earth.

The majestic strength of *Hygiene* lies in its naturalness, in its utter fitness to meet all the needs of the human organism. The wonders for which it is responsible are latent in its simplicity, in its harmony with the forces of life and in the absence of destructiveness in its relations to the body. The practices of *Hygiene* grow out of the plainest truths; so far as it is a system, it is founded in the nature of things. When we

interfere with the natural systems, we soon discover that our own systems, which we try to substitute for the natural systems, are inadequate and result in wreckage.

Having thus shown that *Hygiene* legitimately takes cognizance of needs of health, we must seek to know the way which is right and live by it. We must seek to know the way which is wrong and shun it. Exact truth, simple nature, clear sunlight, pure air, fresh soft water, proper food, cleanliness, appropriate exercise, congenial temperature, rest and sleep, correct habits, obedience to the laws of life--are these too radical for the common understanding?

The view that natural living means living the uncultured and precarious life of the rudest tribes is both shortsighted and false. Whether civilized or not, man lives a natural life when he lives in accordance with the laws of his being. There is much in the lives of the rudest tribes that is very unnatural and unphysiological. We need to know not only the factor elements that constitute a system of *Hygiene,* but we must recognize and integrate all of the many and sometimes apparently contradictory facets of life, to the end that we may understand how to live in every particular. Violence is needed to hold asunder elements which are conjoined in nature, but we have much violence in civilization. It was Galen who classified food, water, sunshine, warmth, air, exercise, rest, wakefulness, the passions and affections of the mind, bowel movements, etc., as "non-naturals," and this false classification or unrecognized echoes of it, remains with us to this day. After all its high and beautiful imaginings, life is prosaic and eats bread--and this bread is a necessity.

In this connection, it is necessary that we keep in mind that *Hygiene* is not merely a collection of means of caring for the body, but also a group of correlated and integrated principles by which to apply these means. These principles are eternally antagonistic to the drugging system. When Trall declared that if *Hygiene* were adopted by medical men it would inevitably destroy medicine, he had in mind *Hygiene* as taught and practiced by *Hygienists.* He had no thought that physicians would endanger their system by endorsing washing the hands and scrubbing the teeth. *Hygiene* seeks to establish and understand the natural laws, or the regularity with which health and disease happen and to build on this sure basis of law. Lacking a rational, cohesive framework of valid principles, all the facts in the world fail to gain meaning. In fact, under such limitations, one may drown in facts. The limitations also tend to undue emphasis on subjective factors. Because it is based upon valid principles, *Hygiene* affirms its supremacy and its eventual acceptance by the peoples of the world. This will result in the eventual oblivion of the schools of healing.

Hygienic means health preserving. Practically, it implies the observance of the laws of life. It pertains to the integrity of everything that lives. It applies to the vegetable and animal kingdoms as much as to the human realm. Every form of life has its appropriate *Hygiene.* As there in a basic oneness of life, human *Hygiene,* animal *Hygiene* and plant *Hygiene,* despite their obvious variations, are basically one. This is the reason we said earlier in this chapter that a valid system of *Hygiene* will be universally applicable.

The recuperative agencies and influences of nature with which living organisms are surrounded, both in woods, fields, gardens and public parks, are such as have a normal or physiological relationship to the living organism, such as the virtue hidden in pure air, the wholesome substances contained in foods, the great value of sunshine and warmth, the beneficent effects of pure, cool water, both as drink and as bath, the vital value of the many and varied forms of physical exercise, the open window that transforms the chamber of sickness into the cheerful abode of health, rest and sleep that restore fagging energies, the judicious use of fruits, the natural food of man, and last but not least, as it occupies a most exalted place in the essential factors of healthy and healthful existence, the potent influences of the emotions upon the body--both in health and in disease, are needs common to all forms of life. We propose no "faith cure," but would emphasize that the mind has more to do with the condition of the body and recovery from a state of disease than many have any idea or are willing to allow.

Why not include the giver of drugs among our arrangements for health? Because he has nothing to do with the human organization while under the conditions of health, but only while in a state of disease, and then only to further outrage the laws of life by administering the foes of life and health. In the words of Trall: "We repudiate all the teachings of all the drug schools in the world, so far as principles are concerned." Our system of *Hygiene* "has its principles in the laws of nature themselves."

It is logical to assume that in a primitive and natural state of society, normal intuition (instinct) would control the activities of the organism of man, as it does of other animals, and that good health would predominate. Is it heresy to say that man is fully endowed in the germ to carry on the functions of living without the benefit of "pedagogic warrants," that he is possessed of an inherent, though now well suppressed, knowledge of life? It is through the means of the senses and the instinctive demands of the organism that those means that pertain to organic life and development are distinguished by man.

Man possesses animal appetites which he inherited along with his structure as integral parts of his organism. By this is meant that he possesses desires for food, water, activity, rest, sleep, the urge to reproduce himself, the urge to defend himself from danger or to flee from it, etc. It is not necessary that we assume that these appetites are inherited tendencies from some ape-like ancestor. They are part of man as they are part of all other animals, because man has the same need for them. They are expressions of the inner needs of man himself. We talk of how close to the surface are man's "animal appetites," always with the connotation that there is essentially something base with these appetites. Never was a greater mistake made.

Natural Hygiene (no other hygiene is valid) must comprehend the whole man in all of his relations of body and mind and in all his relations to his environment. *Hygiene* is a plan of living that is adapted to human beings and not to spiritual creatures. It is adapted to supply the physiological needs of a living organism, not one that fills the organism with exotic and adventitious materials of a deleterious character. The *Hygienic System* is based squarely upon the ascertained facts and principles of physiology and biology. What is urgently required today is a revolutionary new orientation of biology. It is an unfortunate fact that biologists and physiologists conceive it to be their duty to supply a basis for the drugging practice and not to supply valid principles for a way of life.

Of all animals man should be the healthiest, for he has it within his power to control the elements of his environment in his own interest and to provide himself with all the elements of a healthy existence. He has the intelligence required to investigate and understand his elemental needs and to apply these under all the varying circumstances and conditions of life. His resources are never as limited as are those of the lower animals.

An analysis of hygiene, as it is understood and practiced by man of today, reveals it to be very inadequate and filled with elements that are far from natural. If we think only of the food factor in the plan of conventional hygiene, we are confronted with a food supply that violates the very cardinal principles of good nutrition. Yet, the conventional authorities in medicine and in the field of accepted hygiene accept and approve this processed and refined diet, together with condiments and additives, and also accept and approve what they call "moderation" in tea and coffee, tobacco, alcohol, poisoned soft drinks, etc. This is the reason it became necessary to supplement the term *Hygiene* with the adjective, *Natural,* in order to distinguish it from the spurious hygiene taught by medicine.

A rational *Hygiene* will study and understand exactly and precisely the nature and influences and the uses of air, water, food, sunlight, rest, sleep, activity or exercise, temperature, clothing, housing, noise, the emotions, the sex life, occupations, habits, environment and other factors of living, and apply the knowledge daily, hourly, constantly, acting ever and always in proper relation to the laws of life, to the end that health may be preserved and restored. *Hygiene* does not pay an exaggerated attention to exercise alone or to diet alone or to sunshine alone or to emotional poise alone or to any other factor alone. A well-rounded, correlated and integrated system which includes all the conditions and materials of healthy life and that excludes all the conditions and materials that are inimical to health is essential, as health must be built and maintained as a unit and must rest upon a total way of life. It is certainly wrong to withhold from the body a full supply of all of its needs in keeping with its capacity to utilize them. Only harm can result from habitual excesses of any kind, such as overeating, overeating on some particular food factor, over activity, sexual excesses, too much water, over sunning and other forms of excess. Health is based on the proper use and not the abuse of the normal factors of life.

The *Hygienic System* embraces all the laws of life. It does not consist, as many suppose, of merely eating certain types of food, or of fasting, but in the observance of all the important principles upon which health depends--in eating pure food, breathing pure air, avoiding improper drink and so forth. Surrounded and

governed by influences of this kind, the animal kingdom, or that portion of it which is not corrupted by man, is living in uninterrupted health and to suppose that mankind suffer without cause or that they could not be equally free from disease, or to attribute their sufferings to Divine Providence, as is often done, is folly.

Hygiene must embrace in its scope all the details included in the foregoing brief outline of its resources. To suggest a too inclusive reliance upon food alone or exercise alone or fasting alone or upon some other single *Hygienic* factor, irrespective of the physiologic needs of the system, is to fail of complete success. As important as may be the gains made from an outdoor life, we should not permit these to blind us to the importance of all other *Hygienic* needs of the well and the sick organism. We cannot expect full results in any case when we partially or completely subjugate all of the *Hygienic* factors to one. If we resort to diet to the neglect of all else in the life of the individual, whether well or sick, we may do considerable good, but we certainly will fall far short of doing all the good that can and should be done.

The *Hygienic System* is simply the intelligent and lawful application of all the life requirements brought to bear upon the living organism in due proportion and according to need. These means maintain the body in health, when properly used; they are adequate to the needs, and nothing else is, of the body in sickness. So simple are the conditions that wild nature lays down for human care that every man may look after himself once the people have been educated out of ages-old fallacies and have returned to the simple truths of nature that man knew in his prime. Every man and woman should understand the demands of nature and should be able to apply his or her knowledge to his or her own body and mind.

A tree that has its roots in soil adapted to its wants and has all other conditions indispensable to its growth and development will grow into a beautiful tree. So also with man. The first condition of his true and healthy development is found in the normal supply of all the conditions of a healthy life. "Who so would build individual or social life without health," said Dr. Nichols, "is like the man who would raise trees without roots, build houses without foundations, or attempt any other stupid and useless enterprise."

The subject of health with the means of its attainment and the promotion thereof worthily constitutes a science by itself and as such we shall regard it, in all our considerations of the subject, as being founded upon thoroughly scientific principles. *Hygienists* have taught from the beginning that an abounding health is man's normal condition--that sickness is abnormal. It is obvious to all who will take a candid view of the matter that man is constituted for beauty and health and that he becomes diseased and ugly as a result or consequence of violating the laws and requisite conditions of his organization. The possibilities of disease, of impairment, of change, are great and manifold; but with all the liabilities, the securities against them are ample and man has but to keep within these proper limits and life to him will be a succession of pleasurable events without a taint of bitterness. Health is his normal condition, sickness an abnormal state.

Hygiene sweeps a large area in its compass. Its claims are based on foundations as broad as the physiological and biological necessities of man. It sweeps within its orbit his pathological as well as his normal state. It establishes for itself a marked distinctiveness and professes, over, above and independent of the systems of *medicine,* to be complete in itself, requiring only the assistance of surgery, to have in itself a sufficiency of means to meet the emergencies of disease. But slightly more than a century and a quarter have elapsed since the *Hygienic* revival was first launched. But a century and 45 years have elapsed since it was demonstrated by an extensive experience, as Trall said in the July 1872, issue of *The Science of Health,* that all so-called diseases are better managed without drugs.

The *Hygienic System* is one by which both the well and the sick are cared for solely by the employment of *Hygienic* materials and influences. A *Hygienic* substance or influence may be defined as one that is conducive to the promotion of health. But, lest this definition be regarded as ambiguous, let us re-state it thusly: a *Hygienic* material or influence is one that is normally employed by living organisms in their development, growth and function. It is that upon which life depends. *Hygiene* thus becomes the employment of materials, agents and influences that have a normal relationship to life, in the preservation and restoration of health according to well-defined laws and demonstrated principles of nature.

There must always be a normal relation between the living organism, whether well or ill, and the material things and conditions that contribute more or less perfectly to sustain physiological phenomena. If

we pause for a minute and consider the fact that these substances and influences supply the very materials out of which life and health are built up, that each of them has a direct, positive and indispensable role to serve in those vital processes by which living activities are maintained at every moment, then we have something tangible, impressive, directly addressed to the reason, carrying full conviction to the mind, that an adequate supply of each of these basic needs of life is essential to supply the positive, urgent and constant demands of the vital organs for materials to sustain them in a state of health and vigor.

It is not correct, however, in speaking of the application of *Hygiene* to the sick, to speak of *Hygienic medicines,* for there are no *Hygienic medicines.* The term *medicine* is from a Latin word meaning healing. A medicine is a healing agent. But healing is a vital process and is not done by any agent. In truth, there are no medicines of any kind. There is no such thing as the practice of medicine, because nobody can practice healing. *Hygiene* preserves health and restores it with the use of those elements on which existence itself depends. If health is man's normal state, the means for its maintenance and restoration must be outside of any arrangements that shall include a profession whose claim to confidence is that it deals audaciously with poisons as *remedies.*

What is sadly lacking among the members of the various schools of curing is a knowledge of the laws and conditions that are favorable to the healthy development and healthy actions of the living organism. The possession of such knowledge would enable them to make a practical application of all influences and materials that are favorable to healthy actions and higher developments. In an article published in the *Journal,* June 1855, D. W. Hall, M.D., said of these influences and materials, that they "are all embraced in what this school (the Hygeo-Therapeutic School) recognizes as Hygienic agencies." On this occasion, Dr. Hall said: "Understanding, as we do, the two systems (the medical and the natural) to be mutual antagonists, there is an important duty devolving upon us. If we and our successors and cooperators live true to our own principles as we now understand them, our reward will be in a revolution of the whole medical science." This is a significant challenge to *Hygienists,* not to work for reform, but for the overthrow of a false system and supplanting it with a true one.

Do not any of you decide positively that there is no truth in our philosophy of life and in our practices because sometimes some of our number get sick. Do not condemn *Hygiene* until it has been lived in all its perfection and then failed. To believe in *Hygiene* is not enough; it is necessary to be totally committed. We must make due allowances for the unfavorable circumstances under which many of our number exist. We do not live in a world that is organized on *Hygienic* principles. We have many who profess that we would all be better off if we drank only water and ate less flesh food, yet keep right on drinking tea, coffee, alcohol and soft drinks and eat liberally of flesh. They permit their appetites, feelings and passions to run away with their judgment. We have stressed the importance of a full *Hygienic* program and the evils that flow from a lack of one thing needful.

Impatient men and meddlesome women are never content to be quiet and permit the processes of nature to operate without interference. They are forever tampering and tinkering with the functions of life--they meddle with their stomachs, bowels, livers, kidneys, skin, etc. Instead of letting their vital organs and their functions alone, they meddle with them so much that they impair and cripple them. They must always be "doing something." They meddle with the processes of life in sickness in the same manner and to a much greater extent.

We can no more live *Hygienically* by one act of *Hygiene* than we can support our bodies by eating once in a lifetime. Constant reception of truth, daily living *Hygienically,* are indispensable to wholeness of life. Those *Hygienists* who are only intermittent in their *Hygienic* living should not expect desirable results.

Nothing can better illustrate the self-reliant vitality, the inherent truthfulness of *Hygiene,* than its everyday triumphs over the many and formidable obstacles that are placed in its way. So intrinsically superior is the *Hygienic* way of caring for the human organism to any other system ever offered to man or practiced by him, that noihing is needed to commend it to the general judgment and acceptance of man but a full understanding of it. *Hygiene,* as a system of care both of the well and the sick, is manifestly based on principles that command the respect and allegiance of the candid, because of its foundation on physiological law.

"No man," said Jesus, "putting his hand to the plough and looking back is fit for the kingdom of God." The principle here expressed is that when you have abandoned the old and inferior ways for new and superior ways and look back and lust after the inferior ways, you are not worthy of a place in the better sphere. It should be impressed upon all who want to live a truly *Hygienic* life that, looking back, longing for the inferior ways, returning at intervals to them and not looking steadfastly ahead, leads to failure.

Writing in *The Science of Health,* May 1875, W. Perkins, M.D., said: "So long as we would live pure and free of pain, we must continue the *Hygienic* prescription." The sick man, having recovered health by a *Hygienic* program, can expect to remain well only so long as he continues to live *Hygienically.* He should know that if he returns to his old disease-building mode of living, he will again develop disease.

It is true and the truth may as well be expressed, that it is much more difficult to live *Hygienically* at home, in a great many instances, than to do so away from home. It is more difficult to live a life true to principle at home among the accustomed indulgences than among strangers. It is much more difficult to deny ourselves and our friends, too, than to deny ourselves only. As for the strangers we meet in our travels, they care not what we eat or drink or how we behave. It is easy enough everywhere to eat right if we have principle and are willing to do so; but, if we are but half-hearted in our efforts and not convinced of our principles, it is amazing how many things get in our way.

It is quite difficult for many people to understand that *Hygienic* materials and influences may become causes of disease, that they may do so by abuse. Everything is ours to use, not to abuse. Bad effects result from the abuse of any normal, wholesome thing of life. We may drink too much water; we may bathe too much or too often; we may take water at wrong times; we may not get sufficient water. Water is not to be condemned because somebody drowned in the lake last week; but neither is it to be abused, because its abuse may result in injury and death. The over consumption of the best of foods will produce trouble. Too much sunshine, too much exercise, too much of anything becomes harmful. The old adage: "The more of a good thing the better," is simply not true.

Materia Hygienica

CHAPTER XI

In the public mind there is not a little confusion on the subject of *Hygiene.* Both its advocates and its opponents often do it nearly the same injustice. In this chapter we hope to make quite clear what the means of *Hygiene* are and their relations to life.

So long as the organism continues to live, it appropriates raw materials from its environment and builds it up and organizes it into patterns which are highly complex, but constant for each species. Within each organism are forces at work, ever creating and sustaining it. All the various functions of the body relate to and subserve one grand operation--that of changing the inanimate elements of nature (in the shape of organized substances, which we regularly gather from the world around us as food) into the elements and tissues of our bodies, reconverting these agents again into various non-organic combinations or elements and eliminating these from the organism.

Life is one continual round of change, wrought in certain elementary principles, first into the elements of our bodies, thence back again into their primary forms; or, rather, we would say, life is an evolution resulting from this change, interchange and rechange of plastic material elements. All the various functions of different bodily organs relate to this grand operation, and to no other. Digestion, absorption, circulation, secretion, assimilation, aeration, resolution and elimination have this one and only end as their object. Distinctly understanding that all the complicated organic and functional machinery of the human body has but one great end in view, that being its perfect performance, health, or the perfect life-condition, and that by its imperfect performance, disease or faulty vital development results, we are prepared for an intelligent start in our inquiry as to the merits of remedial measures and the philosophy of care--so prepared that the subject may be divested of its mystery and made to stand out before us as in the light of noon day.

What are *Hygienic* means? Many of us stand still, uncertain of what way to take, as though we possess no means of ascertaining what are the conditions of health and happiness, as though we possess no pattern with which to compare the materials we find. Yet, we have such a pattern. The genuine *Hygienic* materials and conditions are the actual necessities of life; they are daily necessities without which life cannot continue. None of the genuine *Hygienic* materials can be dispensed with indefinitely without the deprivation resulting in death. Some of them cannot be dispensed with for even brief periods.

The *Materia Hygienica* comprises all the elements of nature which have a physiological relation to the human constitution; they are those elements most intimately concerned with the phenomena of life--with development, growth, maintenance, repair, healing and reproduction. To state this differently, *Hygienic* means are those things which are used by the organism in the normal functioning processes--light, air, food, water, temperature, activity, rest and sleep, cleanliness, emotional poise, etc.

These means are classed as *Hygienic* because they relate to the preservation of health. Their relation to organic life is similar to that sustained by oxygen. Like oxygen, they are essential to the maintenance of life. When these means are supplied normally, that is, according to the natural wants of the living organism, they promote health and harmony. Excesses or deficiencies of any or all of them are chief among the causes of disease.

From a concise view of man's wants, it will be seen that our varied physiological conditions are the only premises from which legitimate conclusions can be furnished as to the true wants of man. We have to consider the *constitutional necessities* and legitimate wants of man, by virtue of his own inherent organization-thus laying the groundwork from which all minor wants shall naturally be perceived.

When the genuine needs of life are understood and the laws governing their use are ours, we are taught how to make use of the needs of life to accomplish the two grand objects of the science of life, the preservation and recovery of health--and it is this philosophy and this science and their principles and practices that constitute *Natural Hygiene* in its broadest sense and widest application.

First or of primary importance, man needs a free and unencumbered physical inheritance as a foundation upon which to rear his superstructure and as a nucleus around which to gather the conditions needful for further progressive development. Where shall we look to find this pure physical inheritance? Echo answers: "Where?" Look about us upon the face of contemporary humanity. Every glance reveals poor, diseased, deformed, defective, deteriorated and deteriorating specimens of humanity, who have lost all claim to be recognized as *"Man, the noblest work of God."* They are but sorry shadows, outlines, abortions of the true man. Within them may lie dormant and undeveloped, undreamed of potentials; what we see are puny wrecks. The greater part of civilized humanity received a biological patrimony with lease upon lease and mortgage upon mortgage of malnutrition, poison habits, and other sources of organic impairment.

The means of affecting and improving the organic life and health are such as may be called culture, as physical culture, mind culture, etc. The particulars involved are those normally related to the life of the organism, such as the right kind and quality of food, the exercise of the body, rest and sleep, the emotions, the means of maintaining the freedom of the organic functions, excretions, etc.

We have every right to bring every genial influence to our aid in lifting man to a high state of perfection and beauty; not to deprive any man of his characters, not to make all men into carbon copies of each other, but to evolve health, strength and happiness. Wholesome and delicious foods, beautiful flowers, fresh pure air, crystal clear, soft water, the warm rays of the sun, gentle zephyrs, vigorous exercise, rest and sleep, congenial society, constructive work, emotional pleasures--these will aid us in bringing every variety of man to highest and fullest development. All that we can ask, but we can ask no less, is that every distinct individual flower in the great rose-bud garden of humanity shall be the expression and embodiment of a beautiful idea.

Hygiene proposes to find and bring into operation means not only for the prevention of disease and vice and all abnormal physical manifestations, but also for the restoration of health. Men who are sick and vicious can get well by the same means, applied according to the needs of each individual, by which they are to keep from becoming sick and vicious. In order to become successful, we must be radical. Lopping off a branch here or an evil there will not answer the demands of outraged law. A man who is sick can get well simply by ceasing to do evil. The human organism contains within itself, as an inherent principle, all the forces necessary for the prevention of disease and the restoration of health. The power which brought man forth a living being and has enabled him to grow through all the stages of his development is amply sufficient to maintain him in a normal state until he has fulfilled the ends of his life on earth.

The means of *Hygiene* are common in their nature and prevalence and are as generally adapted to the uses of life under all conditions and circumstances, as the air we breathe. They are adapted both to the man of robust health and to the invalid; they are just as appropriate for the week-old child as for the adult. They are not *remedies;* they are not *medicines;* they are not *specifics;* they are not *cures;* they are not miracle workers. It would be a violent misuse of language to speak of the elements of *Hygiene* as *Hygienic medicines.* From the origin of the *Hygienic System* it has been understood by *Hygienists* that there are no *Hygienic medicines.* But there are things that are overflowing with good for the healthy and are "mighty to save" the sick. We term them *Hygienic* materials and influences. When grouped, classified and systematized, they constitute our *Materia Hygienica.* It is only within their range that we draw for use in our care of the sick, as it is only within their range that we draw for use in caring for the healthy.

Instead of resorting to drugs to "drive out the disease," the *Hygienist* seeks to adapt the supply of what are known and universally admitted to be essentials of life to the altered requirements and capacities of the sick organism. Not only are the *Hygienic* materials and influences sufficient to the restoration of health; but they are the only materials and influences that the body can make use of in disease, as they alone can be used in health.

Such are the intrinsic natures of *Hygienic* materials that their appropriation by the body affords an actual

remuneration in exchange for the expenditure their use entails. On the other hand, the intensity of the action required to expel drugs may result in death from exhaustion. *Hygienic* materials and conditions compensate the body for the expenditures they occasion; non-*Hygienic* materials and conditions merely *prick, goad* and *irritate* and compensate in no way for the excited action they occasion.

If our theory is true, that disease is *vital action abnormally expressed,* then to our minds it follows, irresistibly, that such means as the organism needs and must have to keep itself in health are the means, and the *only* means, which it needs and must have to restore lost ground. What are these means? To settle this question, we have merely to provide a satisfactory answer to the question: what are *Hygienic materials?* By *Hygienic agents,* said Trall, the *Hygienist* means "things normal." Briefly, they are food, water, air, light, heat, activity, rest and sleep, cleanliness and wholesome emotional influences. Our knowledge of food, water, air, sunshine, warmth, activity, rest and sleep etc., has greatly increased since the days of the early *Hygienists;* but we have found no way in which one of these can be made to substitute for another in the work of keeping the body well or in restoring it to health.

After reflecting upon the truths that have been presented in the foregoing paragraphs, what can we think of the elements of nature's *Hygiene?* Is there a drug in the whole *materia medica* that can compare with a single one of these basic elements of *Hygiene?* Is there a possible combination of drugs that can compare with even one of these elemental needs of life, much less to compare with the proper combination of these elemental constituents of the *Hygienic System?* Will any one dare to place beside this grand combination of life-sustaining elements all the poisonous, nauseous prescriptions of the pharmacopeias of the world? To all organic nature, these few simple elements of *Hygiene* constitute the fountain of life. They are the sources of an abounding health-adequate, not alone to its maintenance, but also to its restoration. We can only wish for a more familiar intimacy with nature and her sources of an abounding energy.

It may be assumed as, indeed, some have assumed, that the use of these materials and influences for *Hygienic* purposes implies that the subject is already in the enjoyment of good health and requires nothing more than the conditions which are essential to its preservation. It is assumed that, either disease is an entity having a life of its own and properties peculiar to itself that requires to be resisted or driven out and that, unaided by non-*Hygienic* materials, the body is incapable of meeting the emergency, else disease is regarded as a wild and disorderly behavior of the body that calls for drastic measures to whip it back into line.

A physician said: "Desperate diseases require desperate remedies, you know." "Yes," replied the other, "but only where there is vigor to bear them." Vigor to bear a remedy! That is good. At first thought one would suppose that a remedy was such simply because it possesses qualities that enable it to impart vigor--not to use up the powers of life. If, then, the sick would get well, they should use such means as were they well, would insure that they remain in health. For, no substance of any kind, whether fluid or solid or gaseous, whether material or spiritual, ever did a sick man good or assisted him back to health or beneficially affected him, which is of such quality as to do injury to the well. What will destroy health will not restore it; what will prostrate the strong will not strengthen the weak; what will produce disease in the well man, will not, cannot and never did cure a sick man. And what will aid in restoring a sick man to health will not and never did make a well man sick, nor tend to make him sick.

Hygienic materials have nothing in common, in the body, with the "remedies" of the physician. Throughout the whole realm of nature we find nothing provided for the repair of injury, except that which is consistent with the health of the body when uninjured. We know that physicians employ such inconsistent means, but nature does not. Their means interfere with the processes of healing, retarding, when they do not wholly suspend the healing process. It is clear that they are wrong.

Look with us at the relations of life to which the sick are subjected. One may be constitutionally feeble and it may be that he has been sick all his life. Yet physicians do to him, steadily and persistently, what no argument could induce them to do for the plants in their garden. Instead of caring for the sick as they would a valuable rose bush, nursing him or her, watching over the patient, waiting upon him and giving the forces of life a chance; instead of keeping things away that exhaust and providing things that nourish, all the "dregs and scum of earth and sea" are employed in a vain effort to restore health without any consideration being given to the causes of the disease.

As the living organism, well or sick, is the same organism and as there is no radical change in its structures or its functions and no radical change in its elemental needs in the two states of existence, we need a system of care that is equally applicable to both the well and the sick. The laws of being are the same in the most vigorous state of health and in the lowest depth of disease; the constitution of being does not change with the varying states of being. Hence, we need a system of care that does not do violence to this constitution merely because the organism is sick. None of these essential requirements are met by any of the systems of so-called healing, whether it existed in the past or is contemporaneous.

The *Hygienic System* embraces every directly beneficial substance and condition known and rejects nothing that nature does not also reject. Let us fly to the rich and bountiful resources of nature, as these are normally related to the living organism, and not ransack the earth for poisonous plants and corrosive minerals--extracting potions from the deadliest substances--let us drink from the crystal-clear waters that flow from the fountain of *Hygiene* with which we are surrounded and which is unsealed and accessible to all. The reign of biology must supplant the reign of chemistry; the reign of metabolism must supplant that of pharmacology.

There must always be a normal connection between the living organism, whether in its normal or abnormal activities, and the material things that contribute more or less perfectly to sustain biological and physiological phenomena. No substance that is not a factor-element in physiology can have any value in the living structure under any circumstance of life. That which is not usable in a state of health is equally non-usable in a state of disease. Any system of *therapeutics* not founded on and consistent with the principles of physiology must be founded in error and the practice of such a system must be attended with harm in direct proportion to the extensiveness of the practice.

So long as the constitution of our universe remains the same, the laws that govern life and the needs of the living organism will remain unchangeable. So long as the principles of physiology continue as now, so long will they be the authority in practice. So long as the modes of vital activities remain unalterable, they will continue to provide us with a pleasing and reliable source of reference--a reference infallible, as it is incapable of being distorted by the tricks of the disease-treaters, or misled by mystical, unmeaning technicalities.

We do not admit into the circle of remedial means any agent or condition that is inimical to the constitution. We cannot admit as remedies, substances that are hurtful to the living body; we want friendly things, not disease-producing things. Desperate *remedies* are foes of life. If the living organism, when in the vigor of full health, is so unable to successfully resist the effects of a given poison as to be killed by it, no possible logic can make it clear that when the functions of the same organism have been impaired and the individual is sick, he will be restored to health by the administration of this same poison, that the poison in and of itself becomes a *remedy.*

All drugs are poisons. Every new drug is a new poison. All drugs cause disease; every new drug produces a new disease. No living creature was ever saved by drugs. All living things are restored to health, when sick, by the use of those substances, and only under those conditions that maintain the body in health. They must supply the needs of the system and not simply overcome a condition. If drugs can supply these needs, fill the vacuum, restore the waste, then they are fit substances with which to sustain the life and growth of a healthy organism; if not, they are unfit substances to introduce into the body under any circumstance.

The conditions of health are ever the same. The same elements that maintain health also restore health. The only true system of caring for the sick is that originally established in nature. This is not only the best and safest, the most economical and most successful, but it is the only system of care founded in nature and adapted to the wants of man. We make this claim boldly, because we make it justly. It is no new system, for it is as old as the universe. It is a system to which natural instinct guides animals and man. It is as old and universal as nature itself, based upon the profoundest science; yet like everything else good and true, it is simple, harmonious and beautiful.

Nature performs no unnatural acts, works no miracles and exerts no extraordinary energy in making a fool of herself. She has an ordinary and regular way, nonetheless scientific because ordinary, for keeping

organic beings alive and in vigorous health and it is folly to think that when her ordinary methods have been discarded or ignored and sickness has resulted, she will make extraordinary or unexpected or unheard of or nearly miraculous efforts to restore health. Never for any consideration will or can nature stoop to the use of means to restore health that differ in kind from those which, had the patient chosen them, would have kept him in health. Her extraordinary efforts are just what the word implies--more than ordinary-efforts common to her, but intensified, an increased exercise of energy as needed in the circumstances. Nature is greater than the disease-treaters and she imposes her own conditions upon the processes of recovery and no disease-treater, however learned, can override these.

In selecting our means for the care of the sick, our choice necessarily lies between two classes of means, which we denominate *usable* and *non-usable* means. Our selection must be based squarely on the principle that only those things that have a constitutional relation to the living organism are of use to it in either health or disease. In selecting the usable we but follow in the footsteps of nature-we choose those substances and conditions which she spontaneously chooses for purposes of growth and repair. These may be said to be nature's *remedies;* they are the elements of *Hygiene;* they supply the conditions and means by and through which life and living structures are maintained and developed.

The needs of the organism in sickness, as in health, are of ordinary stamp and lie all around us in profusion. Physicians would have us believe that the needs of the sick organism are extraordinary, exotic and rare, requiring great skill in their administration and that they are of such unusual efficaciousness that only the highly trained expert can be entrusted with their administration. As *Hygienists,* we contend, on the other hand, that *remedies* in any true sense are those materials or influences which supply physiological needs, either of materials or of conditions, that are favorable to the operations of the powers inherent in the living organism or that remove the causes of disease and which are not chemically or physiologically incompatible with the structures and functions of life.

Wherever any great power lies hidden, out of which great results may be wrought, it will be found, on thorough investigation, that the measure of that power is as the simplicity of the process of application. Nature's mightiest forces are the simplest things. In nothing is this truer than in the process of healing. The means employed and the plan followed in healing the sick organism are as simple as the means for preventing sickness. In fact, they are the same in kind--*always the same in kind*--but qualified in the force of their application.

It is a very mistaken idea, not unfrequently a fatal one, possessed by the people, that something different is needed to restore the sick person to health than is needed to keep him well when he is well. Upon this point the people need education. But education is a slow, painstaking and sometimes perilous business if one pursues it steadily, consistently, pertinaciously. People are always slow to learn that which is for their good. They learn more slowly of that which traverses their indulgences and more slowly still what compels them to change the whole course of their lives. Who sets about, therefore, to inform the public about the evils of drug medication and undertakes to educate them as to the needs of changing their personal habits will run into difficulty.

The *Hygienic System* consists generally and in the broadest sense, in removing injurious and supplying favorable conditions. It rejects the the old fallacy that poison is medicine and adopts the idea that every normal thing under the sun is remedial. In its ample *Materia Hygienica* are embraced every element which nature employs in all her formative organic processes. Instead of a *Materia Medica,* limited solely to mineral, animal and vegetable poisons, it finds its means of care in the air of heaven, the light of the universe, the water from the clouds, fruits and vegetables from the earth, warmth from the sun, in the moderate exercise of all the muscular and passional capacities of life; in short, *Hygiene's Cornucopia* is filled to overflowing with those means which have a normal relation to the living organism. The *Hygienist* calls the elements of health to his assistance.

Hygiene must embrace in its scope all the details indicated in the foregoing sketch. It must not suggest too exclusively the use, or the science of the use of diet or fasting or sunshine or any other elementalfactor that is contained within its overall composition. It must not exclude any of the normal elements of life. It may be thought that some important gain is made by reducing the application of *Hygienic* art to a single physiological element and that, from the extensive and necessary correlations of other factors of

physiological functions, a partial and temporary subjection of *all* of them to *one* simplifies our work; but this can only prove to be an illusion. The system, at all times, has need for all of the physiological factors that constitute *Hygiene.*

There are those, reasoning only from observations from the employment of some of its means, who deny *Hygiene* any adequacy in the exigencies of disease and insist that pathological exigencies require something more rare and mysterious. on the other hand, the overenthusiastic advocate, observing its value in many cases of illness, ascribes to it powers and qualities that quite transcend the bounds of sober reality. The virtues of *Hygiene* in supplying the needs of life in disease and in enabling the body to successfully prosecute its healing operations and its fitness, as related to the living structure or what is the same thing--the science of physiology--can be determined only by its legitimate use. A true science, instead of directing the invalid to some mysterious balsams, will point to ways and means of securing appropriate *Hygienic* materials and conditions, these, under all circumstances, being the only ones that are compatible with life, hence, with the restoration of health.

The broad and distinct issue between the *Hygienic System* and the drug systems is this: *Hygiene* seeks to restore health by healthful means and conditions; the drug systems seek to cure disease with agents that are known to produce disease in the well. Instead of filling our bodies with poisons, why not look to rest, sleep, better food, physiological rest, exercise, sunshine, emotional poise, cleanliness, plain and simple wholesome food, as the means of restoring us to health? *Hygienic* care consists in the use of such means as, when applied to a man in health, will keep him in health and will not tend to make him sick. Medical treatment of the sick consists almost wholly in the use of means which, if given to a man in perfect health, would unfit him for work or business or, perhaps, put him in bed and even kill him. The *Hygienist* rejects all poisons and employs only beneficial substances and conditions to aid the healing processes of the body.

It must be made clear to everyone that the all-efficient laws of nature operate continuously and progressively to reinstate physiological vigor and harmony--health--and that the conditions of health and only these, can and must, sooner or later, ensure health to the organism subject to them, unless irreparable injury has been sustained. If they can be made to understand that through these means and through these alone can they expect to come out victorious in the end, they can be depended upon to abandon the fatal drugging system and turn to nature's own means of restoring health. To this end we must educate rather than medicate them.

We have to learn to view *Hygiene* as constituting a rational and methodical use of every essential of life in a state of disease as well as in health. In his famous lecture in the Smithsonian *Institute* on *The True Healing Art* Trall stressed the fact that *Hygiene* employs as remedial agents for sick persons "the same materials and influences which preserve health in well persons." This simply means that health is to be restored by the elements of health and not by the employment of substances and influences that are known to cause disease. We are fully convinced that these *Hygienic* means are so intrinsically friendly to the human body that a very extraordinary degree of bungling, of ignorance and presumption, is required to produce results that are really dangerous; that a medical man does more frequent and more serious mischief with his drugs, even the simplest of them, than a *Hygienist* of very modest experience does or can do with any misapplication of *Hygienic* means.

Hygiene is a natural system of caring for the sick and is of universal application. It comprehends the maintenance of all the conditions of health, the removal of all the causes of impaired health and a thorough and scientific application of the elements of health as the proper and sufficient means of supplying the needs of the recuperative and reparative powers of the living organism in restoring health. In acute disease it is the most safe and speedy means; in chronic, the only one reliable. The relief it gives is real and permanent. There is no form of disease, there is no condition of the human system in which *Hygiene,* wisely applied, is not adapted to the wants of the living organism. Health is the natural termination of disease, and the conditions of health are provided by *Hygiene. Hygiene* means more than taking a bath. Names are not things, and *Hygiene* has a broad meaning. The agents of *Hygiene* are all the elements of nature which have a vital relationship to the human constitution, and are those most intimately connected with the phenomenon of life. The elements of life are air, water, food, temperature and, perhaps, a few less understood elements. Anatomy, physiology and pathology teach us the structure of the human system, the nature of its healthy processes, and the diseases to which it is liable. Chemistry opens

to us the vast domains of nature and makes us acquainted with the elements in which we live, move and have our being. When all these are understood, a true philosophy teaches us to apply these principles to the grand objects of health-science--the preservation and restoration of health; and it is this philosophy, in its broadest and widest application, which has received the designation *Natural Hygiene.*

At first glance, the superficial observer is likely to think that *Hygienic* means are too few in number, that a thing as complex as life and the seemingly more complex *thing* called disease, will certainly require a greater array of materials and "remedies" than are contained in our *Materia Hygienica.* This is both a superficial and a mistaken view. The elements of the *Materia Hygienica* are the same in kind and number as the means by which nature has provided for the growth, development, maintenance and reproduction of man and for the preservation of health.

Of means whereby health may be restored there are as many and they are as varied as are the means at man's disposal for the preservation of health. It is enough that the *Art Restorative* should be coextensive with the means--both as regards means and extent--with the *Art Preservative;* for, scientifically regarded, they are identical. Several materials, conditions, forces and elements are involved in establishing and maintaining the conditions necessary to health; but each and all are subject to the regular laws of nature. We cannot hope to restore health by violating these laws or by violating the conditions of health.

Can we doubt the fullness and adequacy of nature's provisions? Not unless we are prepared to impeach the whole reign of law and order and to cast suspicions upon the whole natural order. But a glance is required to reveal that ample means are provided by nature for producing and perpetuating human life, not human life in some feeble and inadequate form, but in its fullness and strength. The very fact that man exists and has long existed and increased under all the disadvantages to which he has subjected himself, testifies to the abundance and minuteness of the means of sustaining him in the highest health.

Are these means of life sufficient to the work of restoration when health has been lost? It is commonly assumed that they are not. It is assumed that the sick need foreign and adventitious substances that have no normal relation to life, that are not required in a state of health, and that are, as a rule, inimical to health, if health is to be restored. Instead of trusting to the laws of being and relying upon the adequacies of the normal means of life, that provide for development and restoration, it is customary to resort to expedients--things, means, plans, purposes, that are outside and independent of the means that provide for a normal development and preservation and that violate the laws of man's being. The sick organism is frequently denied many of the very elements by which living organisms sustain themselves and by which they grow and develop, and attempts are made to build and maintain health and strength with means that are too well known to make the human organism sick. Our common means of caring for the sick are at war with nature. Man is at war with nature in both his mode of living and in his way of caring for the sick.

Materials and influences, to be used by the sick organism in the restoration of health, must be such as normally sustain a life-giving instead of a death-dealing relation to the body. The fitness of any substance for use in caring for the sick must be determined by its usefulness to the healthy. Whatever is acceptable to the healthy organism, whatever it can use in the production and maintenance of structure and conduct of function is *Hygienic* and is usable by the sick.

Of means whereby the sick may be adequately cared for, these are as many and as varied as are those at man's command for the preservation of health. It is the *Hygienic* position that these are all-sufficient for the restoration as for the preservation of health. The means of restoring health are co-extensive--both as regards kind and extent--with the means of preserving it. The two groups of means and measures are one and identical. Health is restored by the same means by which it is pre served. As a living organism cannot use in a state of sickness what it cannot use in a state of health, there can be no other means of restoring health.

We see, therefore, that the elements of *Hygiene* answer the demands of health and the requirements of disease, according as they are applied or used. Their use in health is determined by nature alone; in our care of the sick, their use is left to the discriminating skill of man.

Most people's prejudices against the *Hygienic System* arise out of the very simplicity of its means and

methods. So long have we been educated to belittle and deprecate the simple health requirements of nature and to rely upon the mysterious and incomprehensible and to misunderstand the nature of disease and to grossly overrate the danger of certain conditions, that we find ourselves entirely unable to appreciate the adequacy of the means employed in *Hygienic* practice to the accomplishment of the ends sought.

We are frequently asked: where are our experiments? Do we need experiments to prove that man cannot live without air? Are we called upon to prove that fresh air is better than foul? Must we show experimentally that rest and sleep are nature's processes of recuperation? Must we demonstrate the value of cleanliness? Are experiments needed today to convince us that violent emotions are ruinous? Have we so far forgotten the benefits of exercise that we need them demonstrated to us in the laboratory? After all the experiments that have been performed, that confirmed the experiences that processed and refined foods are inadequate to meet man's nutritive needs, do we need more experiments to demonstrate this fact all over again? Can we not accept the very means by which we live without having to have their value demonstrated in the laboratory?

The medical profession, through every means at its command, has long taught people to poison themselves with deadly drugs whenever they were ill. They have long, too long, taught the doctrine of casting out devils through Beelzebub. In the days of our ignorance this may have been permissible. But now light has come into the world. A new dispensation has dawned.

Evil must be overcome with good. Disease must be limited by supplying the conditions of health, not by producing new diseases. The medical profession no longer serves any possible end. The eyes of the people are being opened to the hard consequences of medicine's false philosophy and fatal practices. The profession, its philosophy and its practices should pass and be forgotten.

The value of remedial measures in the philosophy of care by *Hygienic* means can be understood only by a distinct recognition of those conditions of body denominated health and disease and by the means by which these conditions are developed and maintained. So intrinsically superior is the *Hygienic* way of caring for the human organism to any other system ever offered to man or practiced by him that nothing is needed to commend it to the general judgment and acceptance of man but a full understanding of it.

The Primordial Requisites of Life

CHAPTER XII

It is one of the outstanding disgraces of medicine that for centuries it practically neglected the primordial requisites of organic existence and failed to supply these in any adequate manner to either the well or the sick. At least from the time of Galen it classed these as *nonnaturals,* while classing its drugs as *naturals,* and tended to place all its reliance in its alleged naturals. Yet it is the larger, universal, material substances and influences that promote and conserve life. Living is subject to these larger influences and no system of caring for the well or the sick that ignores them can possibly be successful. Reserving for a future chapter the subject of food, in this chapter we shall briefly discuss a few of the primordial requisites of organic existence under separate headings, beginning with

SUNLIGHT

The one universal natural *Hygienic* influence that man has most denied himself is sunshine. Inhabiting a system, as we do, of which the sun is the center and the chief source of heat, light and energy, we are essentially heliacal. It is not possible for us to attain and maintain a full degree of health unless we establish and maintain our normal relations to the solar orb. We are constituted for life in the sunshine and we need the benefits of regular contact with the rays of the sun, needing not only its warmth, but other of its elements.

So important is sunshine to the phenomena of life that there are many who regard the sun as the source of life and the fountain of all organic energy. Its heat, its light and its other rays are so indispensable to all growth, both plant and animal, and to the preservation of health, that we deny ourselves sunshine to our own undoing. Water and air and food, by themselves, are not enough to provide for the most perfect results in nutrition; by these alone the highest development is not attained and the most nearly ideal growth is not achieved.

The sun is probably not the source of life as is taught and as was believed by the sun-worshipping peoples of the past, but it is a vital ingredient in the material formula that makes life possible. The effects of the heat and light of the sun upon plant and animal life is constructive. Life's synthetic processes require the sun's rays in their work. Artificial heat, on the other hand, can be very destructive. Men pine for oxygen--fire destroys it. Vegetation, through the agency of the sun, increases the amount of oxygen in the air. No wonder many people have worshipped the sun as a god; no wonder there have been those who regarded fire as the devil!

Man has tended to deprive himself of the sun's rays and to live in darkness. In both summer and winter, in cold and heat, in dry and wet, man's false draperies hang about him, cling to him, are almost a part of him; while, both by day and by night, he hides himself in noisome enclosures of wood or brick or stone and escapes from the great outdoors of air and sunshine in which birds, beasts and insects move untrammelled above and on the earth in the enjoyment of a health and vigor of which he never even dreams.

The proud owner of a fine home will often expatiate with glowing enthusiasm upon the harmony of colors and outlines and shadings and groupings in frescoes and pictures and carpets and curtains, forgetful that her folly may mean a perfect work of art, inhabited by a poor, weak imitation of some work of God. The successful artist is almost deified while the true fashioner of nature is almost forgotten. Her carpet may be thick and soft, but it is never so delightful to the foot as the softly yielding sod of the great outdoors; it may be exquisitely colored and its patterns may be a delight to the eye, but no human art can make anything so beautiful as the flower-gemed countryside. Its look of cleanliness is but treachery, for it

stores up dust and gasses. However beautiful a house, it shuts out the sunshine. Its darkened interiors may prevent the fading of the colors of the draperies and rugs, but they deprive the human cheek of its color and rob the human eye of its sparkle.

We have no means of measuring the extent to which the human organism has been debilitated by being deprived of sunlight (we expose only our hands and faces), but we may be sure that it is considerable. We are certain, today, that direct exposure of the body to the solar rays is important to the preservation and restoration of health. This was doubted and derided when Graham first suggested it.

Writing in *The Science of Health,* March 1875, Ernest Wellman, M.D., said: "If air is a necessity to human life, how much more so, if the comparison is permissible, is sunlight. Indeed, this is nature's great and primary vitalizing influence--the indispensable necessity to the existence of all forms of life, animal and vegetable . . . nature's richest productions, whether animal or vegetable, are found where the light of the day is unobstructed. The luxuriance of the tropics is due to light and heat, while the sterility of the frigid zone is due to a lack of them . . . in the same climate and under the same influences other than sunlight, the difference between those (men) who have it in abundance and those who are shut out from it, is very marked indeed. Animal organizations any more than vegetable cannot be fully and properly developed without sunlight in abundance. A weed may grow in the shade, but the finer fruits are found only under the direct rays of old Sol . . . rickety children are to be found seeking darkness rather than light; the well-developed, highly wrought, vigorous and normal productions of nature are only produced and flourish in the light of day. A tadpole, if deprived of sunlight, instead of progressing into a respectable frog, will remain a tadpole or, degenerate into some monstrosity . . ."

Trall was summoned to appear as a witness in an accident. He was invited by the head of the hospital where the patient was cared for to examine the hospital. The hospital was clean and well provided. To Trall's question about what proportion of his crippled patients recovered, the hospital head made the significant reply: "Nearly all on the sunny side of the hospital recover, while many on the shady side linger along till gangrene sets in, when death comes to their relief."

Trall expressed surprise that patients should be placed in rooms where the chances were against recovery and asked: "Why not have sunny rooms for all?" The physician and surgeon answered: "The hospital is not large enough for this, and when the good rooms are all full, those who come in later must accept such accommodations as we can furnish, whether they live or die. We do the best we can with the rooms at our disposal. As soon as south-side rooms become vacant, we remove north-side patients into them, and so keep them always full."

"What a picture is this!" exclaimed Trall. "We fall on the ice and break a leg; or from a ladder and break an arm; or we are smashed or burned in a railway train; or run over by a Broadway omnibus, and carried on a stretcher to the New York Hospital. The rooms on the sunny side--in which we are expected to recover--are all full, while the rooms on the north or shady side--in which patients are expected to linger till gangrene sets in, when they are expected to die--await us. We enter alive and come out a corpse," all for lack of sunlight.

"Live," said Trall to the readers of *The Science of Health,* "at least a part of the time in the sunshine. Never mind the fading carpetswhat are they when compared with life and health? Sleep in well aired and ventilated rooms, and thus throw off and throw out all impurities emanating from human bodies." Besides living much in the sunshine and fresh air, he advocated sleeping in well ventilated bedrooms in which the sun has shown during the day.

With sunlight around, above, below, everywhere, how shall we relate ourselves to it, asked the early *Hygienists,* that we may receive the highest degree of benefit from it? What is man's appropriate personal relationship to sunlight? Is it sufficient, for his health, that it shall reach his eyes, face and hands, while it is excluded from the rest of his body? They answered these questions by saying that the sun should come in contact with the whole body. Sun bathing in the nude was advocated and practiced, also sun bathing in thin cotton gowns of white. They considered colored clothing and experimented with it and found that it screens out much of the beneficial rays of the sun.

They said that, as a rule, sun baths are not to be taken by those in a feverish condition, but were to be taken wherever "there is torpidity, inanity, lifelessness or the like." Applying the *Hygienic* precept, *remove the cause and the effects will cease,* they said: "When want of sunlight has been the cause of disease, sun-bathing must be a valuable hygienic" measure.

OXYGEN

Air is the source of oxygen. A constant supply of oxygen is essential to life. Deprived of air, man dies in a few minutes. Yet, at the time that Graham, Jennings, Alcott, Trall, Gove, Nichols, Taylor and their co-workers labored, they had to fight, not only the ignorance and superstitions of the people, but that of the medical profession as well to secure recognition of the need for fresh air. Through the furnace-heated, carpeted and curtained rooms, whose walls were lined with pictures and on whose floors were arranged fine furniture, there seldom stirred a breath of fresh air. People lived in unventilated homes, slept in unventilated bedrooms, while the sick were denied fresh air upon the order of their physician. Fear of night air, cold. air, damp air and draughts was practically universal. Birds, beasts and savages might live in the open air, but civilized man required the staleness of unventilated households and workshops if he was to maintain health.

Bare the shoulder of a man or bare his thigh and behold the palor of death! Behold the limb of a cadaver! Compare the appearance of the exposed part with that of his face that had the advantage of air and sunshine! What a difference! Man needs that great restorative, the fresh breath of heaven, to fan his brow, to play around his mouth, to enter his lungs, to reach and circulate through the citadel of life, carrying with it all of its invigorating and life-sustaining qualities. It was a long hard battle to get this fact recognized and even yet it is not fully appreciated.

WATER

The presence of water is essential to the performance of the processes of assimilation and those of excretion. Indeed, all the chemico-vital processes or changes that take place in the living body require the presence of water and a deficiency of it soon manifests itself in disturbances of these operations. Those tissues which contain least water, such as bone, possess but little vital endowment. Tissues which serve merely as supports and for protection are relatively low in water. Active tissues, such as muscles, glands, nerves and brain, contain a high percentage of water. The greater the percentage of water in a tissue, the more rapid are the nutritive changes that take place during activities. Man concocts no beverage which is so wholesome, so strengthening, so agreeable to the unperverted taste as pure, cool water.

We are fully justified in studying the offices universally performed by water in nature and the general relations it bears to living organisms as a *Hygienic* material, but we are not justified in any attempt to convert it into a therapeutic agent as did the Hydropathists. Still less are we justified in withholding water from the sick, as did the medical profession. As one of the primordial needs of life, it should receive proper consideration in all discussions of *Hygiene.*

In the days of Graham, Jennings and Trall, fever patients begged for water, even to the extent in many instances that they might drink and die. Burning with fever and begging for water to cool his parched tongue, the physician continued to deny a glass of water to the fever patient. Even as late as the death of President Garfield, and this was long after the *Hygienic System* had spread among the people, physicians continued to deny water to their fever patients. When Garfield died (history says from an assassin's bullet), he was denied water by half a dozen idiots who attended him. Begging, coaxing, threatening for a little water to cool his parched tongue, his stomach was burned with brandy until it refused to receive it.

William Lamb, M.D., of England raised the question: Is man a drinking animal? He pointed out that man is ill equipped anatomically for drinking water from a stream or pond and also that there are many animals in nature that never drink. Lamb was contemporaneous with Graham and he and Graham had considerable correspondence with each other. But he was never able to convince Graham of the soundness of his position. In the November 1855 issue of the *Journal*, a reader raised the question: Could not Lamb's question be satisfactorily answered if it were ascertained whether the proportions of fluid and solid in the foods eaten, at least in a physiologically correct diet, was in proportion to the fluid and solid in the body?

Trall said in discussing the reader's question, that this was an interesting suggestion and that it "propounds a principle deserving thorough investigation. It is clear that there should be a close approximation in the relative constituents of the solids and fluids of the body and those of the very best proportions of a truly frugivorous diet."

It is obvious, however, that, inasmuch as the body is constantly losing fluid faster than solids in its excretions, there would be need for a greater proportion of fluid in the diet than in the body. The question contained this clause: "the excretions included." It is also obvious that in hot weather and under heavy physical exertion with rapid sweating, the loss of fluid may call for extra fluid at times other than meal time. Today it is proposed by many that the extra fluid be supplied by drinking fruit and vegetable juices or by eating juicy fruits instead of drinking water when thirsty. It is doubtful if eating foods or drinking juices between meals is a wholesome practice.

BATHING

During the Dark Ages, Western man ceased to bathe. In America, up to the time of Graham, people did not take baths. They had no bath tubs and did not regard bodily cleanliness as a necessity of life. Graham and the other *Hygienists* taught Americans to bathe and in this work they had the active opposition of the medical profession. As late as the middle of the last century a Dr. Winship, who claimed to be the "strongest man alive," although not wholly opposed to bathing, as were so many of his professional brethren, was not overenthusiastic about cleanliness, advising: "Practice general ablution at least once a week in cold weather, and twice a week in warm, but seldom oftener in a New England climate. (In offering this rule, I expect to be censured by quite a large class in the community, who seem to delight in the daily soaking and splashing in water, not having, probably, the slightest consciousness that by so doing, they defeat every intention for which water is externally applied.)"

From Winship's statement, it will be seen that the objection to the daily bath was still quite strong, so that even a physician who indulged in physical exercise, including heavy exercise, could still oppose daily bathing. Today people take their baths regularly and without opposition and few of them have any knowledge of the mighty struggle that went on in the last century to overcome popular and medical opposition to bathing.

EXERCISE

Exercise (physical activity) is a requisite of health, strength and development throughout the animal kingdom. Full development cannot be achieved without it. How suicidal, then, for us to cramp our bodies with tight clothes that do not admit of freedom of movement and confine ourselves indoors in inactivity. Even the caged bird, though limited in its sphere, skips from perch to perch for hours, for exercise, while we sit practically motionless for hours at a time at a desk, never getting any more exercise than is required to walk to the water fountain and back.

The incessant playful activities of young animals constitute a course in physical training that meets nearly all of their needs in this particular. Our own young are cooped up in class rooms and required to remain physically idle.

We have abandoned the old practice of tightly bandaging infants and confining them in swaddling clothes until they become blue from lack of air and from interference with circulation. We are killing fewer infants today than formerly partly because of having abandoned this cruel practice. We let them roll and tumble about and kick and use their limbs and body in freedom. Instinctively, they are as active and playful as the young kitten or puppy, or the fledglings in the nest flapping their wings as if trying to fly. Just as the fledgling thus educates his muscles for the act of flying, so the infant and young child is busy educating its muscles for future activities. Unfortunately, we interrupt this physical education at an early age by confining the children in class rooms and we do not adequately compensate for the enforced idleness.

Writing in the *Herald of Health,* January 1865, A. J. Wood, M.D., said: "Of all the Hygienic agencies as Food, Light, Water, Air, Sleep, etc., that should be used in correcting disordered action, none are more

important than exercise." Obviously, this use of exercise in correcting physiological activity could not apply to acute disease. Exercise or physical activity serves its legitimate function in health and in many states of chronic disease.

Inertia, slothfulness and inactivity permit the body to become soft and flabby, its structures to deteriorate, its functions to weaken and its efficiency to decrease. The neglect of exercise by the medical profession was but one more of its crimes against the integrity of life. Graham pointed out that physical activity or exercise is absolutely essential to a proper flow of the body's fluids, hence to good nutrition. In its effects, exercise involves the whole body and not merely its muscles.

REST AND SLEEP

As essential to life as is exercise is the need for periods of rest and sleep. It is during periods of relaxation and repose that the body repairs itself and reinvigorates itself and prepares itself for renewed activity.

The practice of substituting *stimulation* for rest and sleep is a ruinous one. The practice was fostered by the *medical* profession; and while the profession can hardly be accused today of thinking that *stimulation* can be substituted for rest, it still defends the *stimulating* practice.

In our present culture, our evenings bring no pleasure for the reason that, just at the time when our tired body needs darkness and rest, we are placed in the unhealthful glare of artificial lights and subjected to the noise of radio, television, jukebox, phonograph and revelers and made to breathe the fumes of tobacco. Perhaps we drink alcoholic drinks or poisoned soft drinks and eat hot dogs and hamburgers. When morning comes with its dewey freshness, we are fitfully sleeping in a darkened room from which we finally emerge into the full glare of the day--little realizing that all sudden changes from light to darkness or from darkness to light are hurtful. Nature's changes are gradual. To sleep in darkness is good, but to live in darkness produces disease.

Food

CHAPTER XIII

What is a food? What is nutrition? Nutrition is a vital process that is carried on only in living organisms. It is a process of development, growth, repair and invigoration. In a complex organism various processes are in continuous operation and these processes contribute to and are intended for the one great end and aim of life--nutrition. It is for this reason alone that we eat and digest, that we breathe, that we secrete and excrete. For this reason alone, the heart and arteries, the veins and lymphatics, perform their varied functions. Function is the great end and aim of life and we are men, strong, vigorous and healthy or feeble, debilitated and worn out, just in the extent to which we have good nutrition.

We cannot move a muscle nor think a thought without using up and deriving the power to do so from the organs which are the seat of the action. This is also true of our involuntary motions--digestion, circulation, etc. It follows that life can be maintained only by constant recuperation and replenishment. As every movement, however slight, expends energy and substance, exhaustion would soon result except for the provisions for recuperation. Food, therefore, is any substance which can be utilized in building and replenishing the vital organism. In short, food is building material; it is the substance out of which the physiological elements are evolved and by which the vital machinery is kept in action.

The functional processes and movements which constitute and continue us as living beings can be carried out only by means of an adequate supply of those elements the physiological combinations of which constitute the several phenomena of organic life. To serve as food a substance must be of such a character as the living organism can appropriate and transform into substance like unto or identical with its own substance. To be classed as food a substance must serve the following legitimate purposes:

1. Supply materials that meet the needs of growth and development of the several organic structures from germ to the mature or perfect state.
2. Supply new materials to the ever-wasting organism, not alone to make good its wear and tear, but also to repair damages.
3. Supply materials for the evolution of those functional changes which constitute the vital phenomena and serve for the development and continuation of our physical structure.
4. Supply materials for reproduction, that is, the materials needed in the evolution of a new organism.

A substance is food in proportion to its adaption to these several ends. Food includes all those substances the elements of which are convertible into, and do form, the constituent materials of the tissues. This is to say, food is material that can be converted into cell substance. As an example, bone must be replenished with the materials that enter into the composition of bone, muscles with those of muscle, nerves with those of nerve, and so on with all the tissues. In the growth and development of a new being, the same rule holds good: each organ in its unfoldment from the bud must be supplied with the organic materials which enter into and constitute its structure.

To serve in any proper sense as food a substance must be capable of assimilation by the tissues; this is to say, the cells must be able to take it up from the blood stream and incorporate it into themselves and make it a normal constituent of cell substance and use it in the processes of life. Any substance that cannot be so appropriated by the cells and organized into living structure, this is to say, any substance that cannot be metabolized, is a poison. A substance, such as alcohol, which is circulated through the body as alcohol, deposited in the body and cells as alcohol and expelled through the lungs, the skin, the kidneys and other organs as alcohol *and is not changed in any way* is not used and cannot be classed as a food.

Although we frequently speak of "Mother Earth," it is doubtful if we fully realize how completely and continually everything we are and everything we do comes from and depends upon the earth. "Dust of the

Earth" we are and upon the earth must we depend for replenishment and growth. But we cannot go directly to the soil for the elements of our nutrition. Like all the animals below us, we must depend upon the plant for our food supplies. Animals lack the power of appropriating mineral elements and forming them into food. This can be done only by the plant. All animal foods come either directly or indirectly from the vegetable kingdom, which alone possesses the ability to take the elements of air, water and soil and synthesize these into organic materials that the animal can use.

In her organic processes nature makes use of invariable forms of materials. One animal can be food for another only as it serves as a vehicle to carry the materials previously supplied by the plant. Organizing work reaches its culmination in the plant; what takes place in the animal is largely in the nature of a re-arrangement of the work previously done by the plant.

Rock breaks down into silt; primary vegetation builds this into soil; finally, the soil is rich enough for higher forms of vegetation. The first vegetation is a rather sickly affair. Animal life cannot exist on silt. Drug store minerals are not foods. Drug store iron, for example, is of no value in anemia. If there is any deficiency of any nutrient in our body, this must be supplied in the proper form or it will not be assimilated in tissue building. We cannot build bone by eating rock lime.

It is possible to analyze an apple and ascertain its chemical constituents; but all the chemists in the world cannot make an apple, nor anything that can substitute for it. There must be a vegetable arrangement of these elements, else they are wholly innutritious. Only the plant can take the raw materials of soil, water and air, and with the use of the sun, synthesize suitable substances for animal nutrition.

The incapacity of the animal organism to assimilate inorganic phosphorus compounds and turn them into cell substance stamps them as unfit for nutritive purposes. When the practice first arose of trying to supply the body with phosphorus by giving phosphates, tests were made by Sampson of England and Dujardin-Beaumitz and others of France, and it was found that the only successful way of supplying the body with phosphorus is to employ those which have already been assimilated by the plant (or by the animal from the plant), and that when efforts were made to augment the supply of phosphates by adding soluble or insoluble phosphates to the food, these were only passed through the the body without being retained therein. Similar facts are true of other inorganic elements, such as sodium chloride, the fluorides, etc.

Animal life can be supported and continued only through the appropriation and use of organic materials. Iron, sulphur, calcium, phosphorus, although indispensable to the living organism, cannot be metabolized in their free or inorganic state, but prove to be poisons if taken in these forms. They are usable only in inorganic combinations such as those prepared by the plant.

The real argument lies deeper; it lies in the relation of these minerals (inorganic matters) to the living system. If they are usable, they are useful; if not, they are injurious. Physiology reveals to us that, except for water and oxygen, no inorganic matter of any kind can be used by the animal organism. It must derive its nutritive materials from the vegetable kingdom.

Not all organic materials are usable as food. Such vegetable alkaloids as morphine (from opium), caffeine (from coffee), theine (from tea), nicotine (from tobacco), although they will get into the blood stream, cannot be metabolized by the organism. Organic materials are foods only if they can be reduced, by the process of digestion, to certain simple and assimilable products. Even protein, as essential to life as this is, is a virulent poison if introduced directly into the blood stream without first undergoing digestion. The intravenous introduction of amino acids into the body in an effort to feed the sick organism that cannot take food is followed by symptoms of anaphylaxis, damages to the kidneys and a progressive loss of weight. They do not seem to be metabolizable.

Because of different capacities to utilize organic materials possessed by different animals, organic substances that are poisonous to one animal may prove to be wholesome food to another. An example is belladonna, which contains two toxic substances, neither of which can be broken down by man. The rabbit possesses enzymes that digest the toxins of belladonna; hence, while belladonna is a rank poison to man, it is a wholesome food to the rabbit. Rabbits do not secrete the enzyme that breaks down the toxins of

belladonna before they are six weeks old; hence, belladonna is poisonous to rabbits before this age.

Man's mental and physical efficiency depends very largely upon his ability to select and assimilate food. Without this ability, all those changes within the body involved in the synthesis of structure and the performance of function could not take place. All phases of vital activity depend on material conditions; and so long as man remains man, this will remain true. An example of this is provided us by the failure of the effort to introduce oxygen directly into the blood. In the early part of this century a method was devised of introducing oxygen directly into the blood as a means of curing disease. It proved to be as abortive as have all other efforts designed to flout the normal order. Oxygen by injection was no more useful than salts or sugars or amino acids by injection. The process of extracting oxygen from the air, by the lungs, is unquestionably one that is subject to as well defined laws as the assimilation of solid matter and all efforts to flout these laws must end in failure.

Nature is replete with an abundant variety of wholesome, delicious foods, the constituent elements of which are exactly adapted to the structures and functions of our organism. With this self-evident fact before their eyes, the proof of which is spread out as broad as the pages of nature, men continue to try to improve the human dietary by fragmentizing and refining nature's products. Even our health food stores sell wheat bran, rice polishings, vegetable margarines, vegetable oils, powdered skim milk, gluten bread, vitamin extracts and other food fragments. Our food processors are continually worrying their brains and working their laboratories in an endeavor to get something into the human stomach that nature does not produce. They are trying to improve the healthfulness of our foods by separating them into fragments or by changing them so that they are unrecognizable.

The kind of food eaten by each animal species in its natural state is determined by its structure and it is led by instinct to eat those foods for which its structure fits it. Carnivorous animals have a short and very simple digestive tract, while those of the herbivorous and graminivorous animals are very complex, some of them even having three or four stomachs. Carnivorous animals are also commonly supplied with talons and claws and with teeth designed to catch and rend their prey. These indications must be observed with discrimination, as faulty observations have led to error. For example, a marked development of the canine teeth, standing alone (as among the anthropoid apes), does not indicate a carnivorous nature. Different species employ their canine teeth for different purposes.

Discussing this very subject Trall says: "A reference to the anatomical structure of the digestive system shows a very complex structural arrangement and this implies a correspondingly elaborate process in the manufacture of food into blood, and thence into the various structures of the body.

"Many animals, as the carnivores, have a simpler digestive structure, and are adapted to subsist on food requiring less change and elaboration; but it seems to be a law of the whole animal kingdom, that the finest, most important, most highly-vitalized and most enduring tissues are formed of food which requires a slow and, hence, admits of a more perfect elaboration.

"For this reason alone, vegetable food affords a better, a lighter, a more perfect nutriment than animal food, which is nothing more or less than degenerated vegetable material."

While every animal organism possesses the capacity to make use of several different kinds of organic materials from different sources, each form of life thrives and develops best on those foods to which the peculiarities of its digestive system is specially adapted. The more perfect and complete the adaptation of food to digestive apparatus and enzymes, the more striking and perfect will be the structures and functions of life. The food to which one animal is peculiarly adapted can never be made to subserve the purposes of another and differently organized animal in the same satisfactory manner. Each type of animal life is possessed of organization that is adapted to its appropriate food and such food is best fitted to subserve its physiological needs. Scientists do not dispute about the natural or proper food for any of the lower animals; but when they come to a consideration of man's normal diet, there is the greatest diversity of opinion.

The food-gathering instincts of animals are correlated with the structures and functions of these animals. Can we doubt that, in his prime, before he had acquired a conditioning culture and before necessity had

caused him to deviate from his biological and physiological norms, the same correlation of food habits and structural adaptations guided man in his food gathering? Is man not subject to the "law of specific adaptation?" Is he the only animal in all nature devoid of guiding instincts?

It is pure sophistry to argue that because a practice of eating or of drinking or the eating of any article of food is in general use among men, it is, therefore, right and best for man. This is a common fallacy that most works on dietetics seek to maintain. The same fallacy is frequently employed to support such drug habits as the tobacco, alcohol, coffee, opium, arsenic, betel, etc., habits. Because the use of these poisons is so nearly universal, it is argued that they must meet some real want in the human system.

Man is not constituted for a carnivorous diet and if it were true that flesh foods provided greater nutriment than other foods, flesh-eaters should be relatively small eaters; but such is not the case. On the contrary, flesh-eating nations, instead of being noted for their frugality, are often among the most gluttonous. Were animal foods really superior, we should find the flesh of carnivorous animals and flesh-eating peoples the most highly organized and more perfectly nourished than others. But, on the contrary, they do not, generally, rank the highest in physical perfection or intelligence; among the largely flesh-eating tribes, they tend to be lank and cadaverous. Carnivorous man seems to have no spare materials to utilize in higher or intellectual activities.

The preying of animals upon each other is not the rule in nature and preying by man would certainly seem to be contrary to his highest interests. Even if by almost universal practice man is to some extent carnivorous, his natural dietetic character is unmistakably frugivorous, as is amply demonstrated by comparative anatomy. Is it necessary to the sustenance of the human body that carnage and violence shall fill the earth? Is it essential that our eyes shall be offended by the sight and our noses shall be outraged by the stench of slaughter houses, that our ears shall be pierced by the cries and struggle of dying animals--that, instead of sweet melody, our ears shall be filled with the cries and groans of bleeding victims? Is it essential that our bodies shall continue to be poisoned by putrefying offal and that our stomachs shall serve as sepulchres for the interment of the disorganizing dead?

A race of flesh-eaters must necessarily always have a sparse population and, consequent upon a want of social opportunities as well as from similarity in habits to the carnivores, must remain at a low stage of existence. Oh! much insulted spirit of beauty! Too long have we turned a deaf ear to thy sweet voice! How much of sorrow and suffering has been ours as a consequence? We must now purify our lives by bringing only the beautiful peace-offerings to thy altars. In the wisdom of nature's adaptations, we have been fitted for a diet of beauty and delight, not of gore and carnage.

In practice, as least, the range of man's diet is greater than that of most other animals; but there are, after all, certain classes and forms of foods that are best adapted to his wants as a species; and if there are individuals who cannot eat these, this indicates a fault in the individual and not in the food. Instead of proving the food to be poisonous, it proves the individual to be abnormal. The most such a man should ask is that his whims and idiosyncrasies be tolerated while he is getting himself into a more normal condition. He lacks all right to so confound terms, as to designate as a poison, an article which reason and science have proved is a wholesome food, merely because his digestive operations are imperfect and impaired and he fails to assimilate it.

For ages mankind has been guided in the choice of food by the accidents of locality, of season and by the caprices of a frequently false and deceitful experience. Rarely questioning the infallibility of such guides, men have been led on through events of utmost disaster to their physical welfare, and have foolishly referred the defects to other causes. Truly, as Trall so well said, "unwholesome food and erroneous habits of eating stand at the very head of the list of the causes of disease. Wrong eating expresses more of the origin of disease in the human family than any other two words that can be found in the English language." It should be understood, of course, that by the phrase "wrong eating" is meant far more than the mere eating of food substances to which man is not well adapted.

Man's early traditions point unmistakably to a time when he lived upon the fruit of the trees. It may be significant that in the Sumerian myth the marriage gift received by the goddess Attu was "cucumbers, apples and grapes." In Homer's time the apple was regarded as one of the precious fruits. Many fruits were

in daily use by our ancient ancestors. "Fruits, aromatic and luscious, hold their delights the longest of all, and give them away at the first solicitation. Their nectars claim instant kindred with the tongue and the oral saliva. Nature has cooked them, and they need no mixture, nor artificial fire; the grape and pineapple are a sauce unto themselves, and are baked, and roasted, and boiled in sunlight."

Late spring, summer and early fall witness a carnival of luscious fruits--peaches, plums, apricots, nectarines, tomatoes, grapes, various berries, persimmons, pears, apples, oranges, grapefruit, mangoes and many others fill our orchards, gardens and markets during these seasons. "Apples begin to be solid and rich, while the melons laughingly roll in their handsome rigs of delicious and refreshing drinks to cool the summer heat. What more suggestive of a genuine hospitality than to see the host standing up after the removal of the cloth to dispense slices from a huge, crackling watermelon? The effect, perchance, heightened by the flanking of round-ribbed musk-melons and dishes of rosy-cheeked peaches, purpling grapes and pears swelling with luscious ripeness--these wines of choicest vintage; these drinks of nature's own brewing!"

There are figs and dates and cherimoyas and custard apples and many other fruits of tropical and sub-tropical origin that lend their tastiness to the diet. To these may be added the many tasty and nutritious nuts that abound throughout the world. What wonder, then, that Mrs. Mary A. Torber of Alabama, in an address before the New York Vegetarian Society in 1853, said: "Let us purify the beautiful earth from every stain. The grape, the apple, the pear, the orange, the fig, the peach, the nectarine, the apricot, the cherry, the banana, the mango--all of mother nature's choice gifts--shall take the place of the field of slaughter, and health, beauty and happiness shall supplant sickness, deformity and sorrow--freedom and life shall be ours instead of slavery and death. Earth shall become an Eden glorious in the beauty, wisdom and love that radiate from a life that conforms to the immutable laws of being."

The tomato is an American fruit unknown to the rest of the world before the discovery of the Americas by Colombus. Although the Indians were found eating the tomato, the white man thought of it as poisonous. When it was first introduced into England in 1596, it was classed with tobacco and the deadly nightshade was given the name *lycopersicum*-- "wolf-peach." Graham and other writers in the Graham journal did much to dispel the prejudices against the tomato. Writing editorially in September 1860, Trall said of the tomato, which was still tabu in many quarters and was regarded as a medicine (of all things! a substitute for calomel!) in others: "The simple truth is, the tomato, as a dietetic article, ranks with apples, pears, peaches, apricots, cranberries, currants, gooseberries, strawberries, rasberries, blackberries, whortleberries, cherries, plums, cucumbers, squashes, pumpkins, water-melons, grapes, etc., etc. As with all other edible fruits, it has no medicinal properties of any kind. If it had it would not be fit to eat. It is in no sense a substitute for calomel. It is not a substitute for any poison, but is a very excellent substitute for any one of the fruits above named. Any good fruit is good food for dyspeptic persons, as well as for those who are not dyspeptic; but the statement that the tomato is a specific or a sovereign remedy for any disease, is arrant humbuggery or transparent nonsense."

Today we read and hear much about the "medicinal properties of fruits," as if there are some elements in oranges, apples, pears, grapes, etc., that make them part of the druggist's stock-in-trade. It should be fully realized that fruits are foods and not drugs, that they are nutritive and not *medicinal* substances. They should be eaten as foods and not taken as so-called medicines.

Fruits were often referred to in the past as condiments, which they are not in any sense. They are food and the best of food. Strange, is it not, that there was a time, and that not far distant, when they were placed on the dining table as decorations, not to eat?

Much of the prejudice against fruits was due to medical opposition to their use. Medical men denounced fruits and vegetables so indiscriminately that more illness resulted from abandoning them than from abuses of them. Vegetarians of the period were said to eat "green trash," just as today they are described as eating "rabbit food." The acids of fruits were supposed to be especially bad. Even today, people as a whole do not eat fruit as they should, do not make fresh fruit a part of their daily diet in a rational fashion and, consequently, suffer from many functional and, ultimately, organic impairments.

As a nation we run to animal foods and these are, economically, the most expensive foods we produce.

Humbolt asserted that an acre of bananas will produce as much food for man as twenty-five acres of wheat. We grow the wheat, feed it to the animals, and then eat the animals, receiving back in the form of animal foods a small percentage of the food value of the wheat. Seeds and grain are more nutritious than roots, although leaves are often superior to the seeds. The potato is not a root, but a tuber--a sort of fleshy underground seed that may be properly classed as a fruit.

Many people complain that they cannot digest fruit; yet, these are the easiest of all foods to digest. The trouble arises not from the fruit, but from combining them with other foods. There are those who complain that they cannot digest apples. But they eat them at the end of a meal or after meals. Let them eat their apples as parts of a fruit meal and the trouble vanishes. There is an old Spanish proverb which says: "Fruit is gold in the morning, silver at noon, and lead at night." This proverb must have grown out of the observations of experiences in eating fruit with meals. A fruit breakfast is gold; fruit as part of a light lunch was blamed for the digestive discomforts that resulted; fruit as part of the heavy evening meal was blamed for the troubles that followed such eating. But why blame the troubles upon fruits? Why not blame the flesh or the bread or some other part of the meal? Why are we ever anxious and eager to blame the best parts of a meal for the results of our imprudencies in eating?

Corn in Anglo-Saxon usage is a general term, not a specific name for a particular kind of grain. In England, corn simply means grain--any grain--though most commonly applied to wheat. In Scotland, oats are called corn; in Germany, korn means rye; in this country, corn means maize. The word is synonymous with the term cereal and refers to the fruit of grass. Corn, in this broad sense, is one of the most commonly eaten foods of man and is used in the making of bread. The early *Hygienists* laid special emphasis upon the importance of whole-wheat bread.

Although Graham advocated no special recipe for bread making and did not name a bread or a cracker or a flour or a meal after himself, advocating only the use of coarsely ground and unbolted wheat meal with no animal fat for seasoning, his followers soon began to regard all bread made from any whole grain, if the meal was coarsely ground and unbolted, as Graham bread. Writing in *The Science of Health,* April 1873, Julia Coleman says: "The term 'Graham' should apply to all unbolted flour, or rather, meal of all kinds and to the bread made from it, for that, as I take it, was the peculiarity advanced by Mr. Graham."

Hygienists went all the way in their abstinence from animal foods. At the beginning of his work, Graham thought that cow's milk was an excellent food for human beings, but only a few years of experience and observation were required to convince him that this was a mistake. Referring to the practice of milk drinking by adults, Trall said: "It seems to us that if adult human beings will persist in drinking their victuals, like a great calf, they will be more or less calfish all their days." This condemnation of milk drinking applied also to the use of butter and cheese. Writing in *The Science of Health,* June 1864, Julia Coleman said: "There are not a few diseases, like nasal catarrh, which it is difficult, if not impossible, to cure while continuing the use of milk."

Honey, also, was regarded as poor food for man. Replying in November 1855 to a question about honey, Trall said: "Our opinion is that honey is an excellent article of diet for bees, but not good for humans. As to its medicinal qualities or properties, we believe it does not possess any in the curative sense." While discussing honey, it may not be amiss to add that molasses was not regarded as good food.

Animal fats were particularly objectionable to the early *Hygienists,* these objections beginning with Graham and Alcott. Vegetable fats were considered superior to animal fats, but were not regarded as essential elements of the diet, except as they form natural parts of foods, such as the oil of nuts, the avocado, etc. Trall said: "Olive oil.is not recommended as necessary or useful, but as preferable to lard or butter. We do not teach nor believe in the principle of greasing food in any manner, nor of shortening it in any degree."

It is noteworthy that modern researches have fully confirmed the position of the early Hygienists on the eating of fats. These have shown that the fatty acids of fruits, nuts and other vegetable sources, by virtue of their formulae, belong to a group that are described as *polyunsaturated,* while the fats of butter, milk, lard and other animal fats are heavily *saturated*. The saturated fats are used with difficulty by the human organism and today are accused of being partly responsible for high blood cholesterol, atherosclerosis,

high blood pressure and, ultimately, heart disease. Two striking exceptions to this rule with reference to vegetable fats are found in the oils of chocolate and the coconut. The oils of nuts, the avocado, sunflower seed, peanuts, the soybean, and of grains are much better adapted to human use than the fats of beef, sheep, pigs, dairy products, etc.

Hygienists also early emphasized the fact that prolonged heating, as in baking or frying, destroys some of the essential fatty acids in fatty foods and in oils or butter and produces rancidity of the fats. This is but one of the reasons they objected strongly to the frying of foods.

Hygienists also eschewed the eating of condiments. Their position was a simple one: namely, wholesome foods are agreeable to the normal (undepraved or unperverted) taste. But so habituated are our people to the practice of concealing the taste of proper and pure food with some "more tasty garb," such as spices, salt, sugar and other seasonings, that they do not know the taste of foods. The ethereal and delicate flavors of foods pall upon the tongue and palate that is capable of sensing only the pungent and austere, so that one may have an aversion to those foods best designed to provide him with superior nutriment. The *irritating* qualities of ginger, nutmeg, pepper and various spices, anise seed, caraway seed and similar substances that are often added to food are a perfect outrage to the taste of the unitiated, although demanded by condiment addicts. In condiments as well as in drinkables, chewables and snuffables, what diabolism has not been committed in this country, no less than in other parts of the world, all in the name of the god of titillated sense.

Unfortunately, we find few people with a normal sense of taste. Watch them put salt on tomatoes, water-melons, cantaloups, sugar on oranges and grapefruit, sugar and cream on berries and other substances (vinegar, pepper, cinnamon, cloves, horseradish, catsup, sauces, etc.) on other foods. They eat few foods without the addition of *seasonings,* sweetenings, condiments, etc. They do not like the taste of food, but of condiments, of vinegar or other foodless substance. Perhaps they like sugar and cream with a berry flavor, but few of them like berries. They eat cream on bananas, sugar and cream on peaches, sugar and spice on their apple (baked); but they do not relish the apple. I doubt if we realize the extent to which we have depraved our sense of taste.

Almost everyone spoils a nice dish of vegetable salad by salting it down or by the addition of a salad dressing that has an abominable taste. Few relish the natural savors of their salad. The vinegar in the dressing appeals more to their depraved taste. Few of these people realize that the addition of such substances to their foods retards the process of digestion and is a common cause of indigestion and all the ultimate consequences that flow from chronic indigestion.

Man is provided by nature with instinctive protections against the intake of injurious substances, but under the misguidance of shaman, priest, physician and trader, he deliberately beats down his instinctive protests against the ingestion of hurtful substances and acquires a fictional liking for them. Only some strong psychological influence, such as that provided by the shaman, priest and physician, could have induced man originally to disregard the persistent protest of his instinct and acquire false habits.

In the very nature of things, it is highly essential that man's gustatory sense shall be a strong one, for on it rests the selection of those substances necessary to the preservation of the individual. On it, also, rests the rejection of inimical substances. A strong gustatory sense excludes the possibility of carelessness and forgetfulness in the matter of duly maintaining all the organic wants, so far as the materials of nutrition are concerned. It exercises a becoming foresight and insures provision for future needs. The sense of taste is one of a sisterhood of senses, each of which is a string of the human harp, the vibrations of which are sweet music to the mind. Taste is thus much more than that of a purveyor or a sentinel.

Enjoyment is a consciousness of the normal performance of functional activity. Substances that cause suffering are instinctively rejected and repelled. Non-nutritious sensorial excitants, in the enticing forms of beverages and ganglionic excitants and irritants, in the form of condimentary spices, share largely in the work of overturning gustatory judgment. Sharp, biting, pungent spices and seasonings *irritate* and *goad* the whole digestive tract as they do the mouth and tongue; they may even occasion smarting and burning of the rectum in passing. Such buses of the digestive system lowers its tone and energy and cripples its functions.

There are many substances in common use as articles of diet, such as spices, cayenne pepper, salt, old cheese, etc., which are indigestible, *irritating* and injurious. They serve no physiological purposes and are best omitted from the diet.

Our position is a simple one. It is this: whatever is foreign to a natural healthy organism and cannot be digested and assimilated to its essential structure, whatever undergoes no physiological or vital synthesis and is not capable of being processed by the normal metabolic activities of the body is inimical to it and will or does occasion disease. Conforming to this principle, it is observed that within each of us is the natural or normal disrelish of all substances that are non-usable, when these are brought in contact with the senses of taste and smell and with the natural, undepraved appetite; even such articles that are stronger and sharper than the gastric juice, though they may not be absolutely poisonous, are indigestible and unassimilable. Nothing more reveals the fitness of man for life in the earth than the higher offices of taste and smell, without whose safeguards against the introduction of indigestible and poisonous substances into the stomach, confusion and mischief would reign.

If anything could reveal, in a light clear as noonday, the wide departure of civilized man from the pure and simple tastes and unperverted instincts of nature and the corrupted, unnatural, unhealthy condition of civilized man, it is the fact that the most nauseous, disgusting and horrible substances are daily swallowed in large quantities, substances so disagreeable that no art of preparation can fully prevent the loathing with which poor, abused instinct regards them. What is even more strange and monstrous, they are taken with the idea that they possess the power to restore health.

Such objectionable substances are administered by a privileged class who make much pretense to science, wisdom and skill above their fellow men, but whose practices reveal that they do not understand the very first and fundamental principle of a true mode of care of the sick, which would teach them that they should guide their patients into obedience, instead of insisting upon violation of nature's laws. To our minds, there is no more convincing evidence for the absolutely injurious and poisonous character of drugs, under any and all circumstances, than the utter abhorrence with which even the most perverted taste rejects them. Even those who have so corrupted their appetite and sense of taste as to be able to eat half putrid flesh with hot, pungent sauces and spices, drink alcoholic beverages and chew or smoke tobacco are not so blunted in taste that they find the natural taste of drugs agreeable to them.

To accept drugs, man must be continuously falsely educated, his intelligence must be stultified, his confidence in the normal resources of his constitution must be undermined, there must be a ruinous perversion of his sense of taste and there must be substituted a love of the artificial, the mysterious, the exotic and adventitious, before he can be induced to forsake the normal things of existence and impose his trust in poisons. With all the means now at man's disposal with which to camouflage the many toxic substances that are employed as drugs, it becomes necessary to station around the citadel of life more watchful sentinels than ever before. Man must be intellectually fortified when it has become possible to so easily fool his senses.

From what we have said, it should be evident that of all the classes of substances which cause disease in the human body, the drugs of the physician are by far the largest and most deleterious. That they are absolutely indigestible and must enter the blood and tissues with the same poisonous qualities with which they are swallowed is undeniable. Were they digestible and assimilable, they would be foods, not drugs. They would be beneficial and not poisonous.

Certainly, when the powers of life are low and these are all concentrated in the work of resisting and expelling the cause of disease, to administer poisons in the form of drugs is to endanger life. This may easily prove to be the immediate cause of death.

Salt Eating

CHAPTER XIV

Who was the first man to decry man's habit of eating salt? We cannot answer this question definitely. Sylvester Graham is the earliest writer we have found who condemned the taking of sodium chloride or common table salt. Graham pointed out that salt is not metabolized, that it is an *irritant* and a useless substance. The word metabolism had not been coined at the time Graham wrote and physiologists did not know very much about metabolism at that time. But some knowledge of the subject did exist. Following Graham, *Hygienists* in general condemned the eating of salt, which is an innutritious substance, hence a poison. It occasions irritation throughout the human system, resulting in vital resistance (called *stimulation*) and consequent debility.

It was objected that salt is necessary to life and health. How easy it is to find an excuse for our bad habits! Salt is necessary; salt improves the flavor of food; salt adds to the joys of eating; salt promotes digestion; salt is an essential ingredient of the living organism. Such were the assertions made in defense of a practice that was far from universal among mankind and practiced by no animals in a state of nature.

To say that because salt is found in the blood, we must eat it, is like saying that we must eat iron (perhaps saw filings) because iron is found in the blood. It is like demanding that we eat phosphorus because phosphorus is founc in the nerves, that we drink iodine because iodine is used in the thyroid gland. We have to draw our mineral nutrients exclusively from the plant kingdom and not from the soil.

How can salt be a food when it passes through the body unchanged, being ejected from all of the ejector organs in the same state in which it is taken into the stomach? If it is taken into the stomach as salt, hurried through the system as salt and cast out as salt, how in the name of bread-and-butter can it nourish the tissues? We have long known that food--all food--is changed, transformed into the very elements of blood, muscle, bone, brain, nerve, sinew, etc. Substances not so transformed, with the sole exception of water, are not foods but poisons. It was then, as now, commonly asserted that all animals are fond of salt and that some tribes of the human family prize it above gold or any other mineral and will even exchange their children for salt. "Salt is very important as an article of food."

Such reasonings, or rather such assertions, are very common with medical men and writers on diet. They repeat, reiterate, echo and re-echo as a well-trained, yet most unthinking and unphilosophical parrot utters "Polly wants a cracker" on every occasion, what they have heard others say or what they have read in some medical book. But, like the jibbering bird, they never think it necessary to assign any reason for their speech. Many animals that are not normally carnivorous have been trained to become fond of beef steak and coffee. Many tribes of the human family prize liquor and tobacco above gold, health and character, and will destroy their wives and sacrifice their children and even exchange their lives for these poisons. Should we, therefore, reason that beef and coffee are very necessary for animals and that drink and tobacco are very important articles of diet for human beings?

Although *Hygienists* abstained from salt and did not suffer in health as a consequence, those who defended salt eating continued to insist that salt eating is absolutely necessary to human life. Replying to an assertion made by a contemporary editor--that no person can live without salt, meaning common table salt--Trall said that the statement is untrue and added: "We know hundreds who do live, and all the better, without it." Then as now, the opposition to salt eating had to contend with those who close their eyes and refuse to consider the great numbers of people who do not eat salt.

We know that the North American Indians did not employ salt until taught to do so by the White man. Over two vast continents and for long periods of time the people whom we call Indians lived in health and vigor without eating salt. Writing in the *Journal,* June 1862, D. H. Maxson, M.D., said of salt eating: "In

1809 William Bryant went with a hundred and twenty men, under the United States Government, beyond the Rocky Mountains, to conduct to their homes the Indian chiefs who were brought to the seat of government by Lewis and Clark. They remained with the Indians two years, subsisting entirely, as the Indians did, upon esculent fruits and roots, such as the forest afforded, and the flesh of wild animals, with water, without salt or the admixture of any foreign substances. They soon learned to relish their food without it. Most of the men belonging to the company were, when they left the United States, more or less disordered in their health and afflicted with chronic ailments. They were all restored to health, and became, like the Indians among whom they dwelt, remarkably robust and active. This does not look like dying a miserable death for want of salt!"

Like the soldiers who went under Bryant to the far West, if you will abstain from salt eating for a period long enough for the rejuvenation of the sense of taste and then take salted foods, you will discover that the salt that you once enjoyed has become disagreeable. You will find it difficult to realize that you once enjoyed the salty taste. Instead of salt adding to the joys of eating, it always and inevitably diminishes gustatory enjoyment in proportion to the freedom with which it is added to food. It destroys the keen perception of the agreeable qualities of foods and thus diminishes the enjoyment of eating.

Salt does not promote digestion, but actually retards the process. Indeed, it retards all the nutritive functions and is unfavorable to all vital changes. It is also unfavorable to excretion, inhibiting the action of the kidneys.

The early *Hygienists* held that salt eating interferes with tissue change. Today we do not emphasize this objection to taking salt, but we may be making a mistake in not doing so. True, the body gets the salt out of the circulation as soon and as far as possible and stores it as brine under the skin and in the cavities of the body, to the end that it shall interfere as little as possible with the processes of life; but this is never adequate to prevent it from damaging the tissues and hindering the "metamorphosis of tissues," as our predecessors expressed it.

A long-suffering invalid, upon being informed of the evils of salt eating, once replied: "What folly! Tell me common salt is poison! I have eaten it all my life and am a living proof that it is harmless, if not necessary to the animal economy." She suffered with an "indolent ulcer," had had typhus fever once and erysipelas twice, besides the common ailments of the people about her. She was practically an invalid at the time she declared herself to be "a living proof that it is harmless." How easy it is to close our eyes and blame our suffering on the "will of God" or upon the invasion of the body by microbes! She thought that because she was dragging out a miserable existence, because she had not ceased to breathe, she was living.

There have not been lacking those who advocated the employment of common table salt as a medicine. It has been used as an emetic. A spoonful of salt in hot water is enough to cause vomiting in a child at once. It was also found to be useful in inducing a bowel movement in constipation and there have been those who advocated its daily employment for this purpose. But, is it not logical to think that, if the body expels a substance by vomiting or by bowel action, this is because it is not wanted? Why the violent action of vomiting if the salt is a beneficial substance? It seems, also, that a substance that is so violently rejected is not good for food.

The Life Natural (India) for November 1963 quotes an item from *The Indian Express,* November 8, 1963, telling of a man who lost his life by drinking salt in water. The man bet that he could drink "ten tolas (approximately 100 grams) of salt in water. He drank the salt water and developed a severe diarrhea and became unconscious. He was treated medically, but died, either from salt-poisoning or from drug-poisoning or from both combined. It will be shocking to my readers to learn that this quarter of a pound of salt was taken to win five pounds of dates.

Friends of salt-eating will, of course, say that he took an "overdose." The fact is that he could have taken much less salt and not died, but this would not constitute proof that a smaller quantity of salt is beneficial. Poisons are such *qualitatively* and not merely *quantitatively.* A smaller dose of salt will occasion diarrhea, but it may not be sufficient to result in unconsciousness and death. Salt is an *antibiotic* and has no place in the human body.

One Man's Meat

CHAPTER XV

Some of Graham's more moderate contemporary critics said that he "wrote sensibly on the Science of Life, and laid down rules very well adapted to some constitutions. His error consisted in making a one standard of diet for the whole human race, when nature was perpetually telling him that every man varied in organization, and, of a consequence, to keep up that organization, various kinds of foods must be used."

It was (and still is) argued that no two men have the same constitutions; hence, each requires something different in his way of diet. Even the farm journals took up this cry against Grahamism, although they never applied the same argument to the feeding of horses, cows, sheep, hogs, etc.

This doctrine of physiological (or shall we call it constitutional?) chaos was popularly expressed in the old adage: "What is one man's meat is another man's poison." Because of the existence of this notion, there was much objection to the attempt "to lay down arbitrary rules regarding what foods are wholesome and what are unwholesome;" for, it was objected, "there is nothing truer than that 'what is food for one man is poison for another.'" The contention was made, and rightly, that the "only infallible guide is the unperverted palate;" but the mistake was made of regarding the conventionally conditioned palate as unperverted.

The foregoing contention was made in defense of the conventional eating practices. Hygienists admitted the validity of the unperverted palate, but objected to the application given. As no one, they replied, can present an unperverted palate as "that guide," they were delighted to consult reason and science. Denying that what is meat for one man is poison for another, they said that "every fact in anatomy and physiology proves that every living organism, man's not excepted, has a determinate relation to the food which furnishes the best materials for his nutrition." They contended that the human species is subject to the same laws of uniformity as other species with regard to food.

The very man who argues that "one man's meat is another man's poison" will, on occasion, argue most unreasonably that certain articles of food must be good because he has known people to eat them apparently without harm and further still, "because all the animals eat them." Commonly, such an individual has been very indifferent in his study of the eating habits of animals and knows very little about the general laws of nutrition.

What is he saying when he declares that "one man's meat is another man's poison?" It may be well for some folks to keep clean, but it is ridiculous to insist that all do so. It may be serviceable for some to get to bed early, but we are not all constituted alike. It may be helpful to many to live regularly and prudently, but some of us require irregular living and imprudencies. Frugal eating may be all right for many, but gluttony is best for many of us. It may be wholesome for many of us to drink nothing but water and not to smoke, but many of us require alcohol, coffee and tobacco. It may be good that some of us are honest and that we deal fairly with our fellow men, but some of us must be liars and cheats. Honesty is not for everybody, as we are not all constituted alike. This is the only legitimate interpretation of this oft-repeated assertion. If we thus view it in detail, we realize how devoid of reason it is.

As commonly employed, this old saw means that: while fruits and vegetables may be excellent foods for some constitutions, some of us are constitutionally carnivorous and could never thrive without liberal quantities of flesh foods. Indeed, we more urgently require flesh than do the carnivores. It is possible for cats and dogs to thrive and thrive well on a fleshless diet, but we cannot do so.

The constitutional differences between the sexes are far greater than any that exist between two individuals of the same sex. If the principle contended for in the common notion that one man's meat is

another man's poison, because they differ in constitutions, were true, men and women would have to eat different foods.

The differentiation between man and woman is not as great as is generally imagined. They are both made of blood, bones, muscles and nerves; the same elements are necessary to sustain them both and the same causes operate to destroy them both. Foods that are good for one sex are good for the other; poisons that are injurious to one sex are injurious to the other. Does man need food, drink, warmth and sleep? Woman can no more live without these than can man. Does arsenic poison man? It is equally poisonous to woman. It produces in her the same and exact symptoms that it produces in him. Cold and heat affect the two sexes alike. Both have their powers and capacities--both mental and physical--drawn out or developed by use. The constitutions of the two sexes are radically alike and are governed by the same laws and subject to the same conditions.

Man's body is constituted upon a certain pattern, which pattern is precise, and its general principles apply to all men and individuals. The great principles upon which the body of man is constituted, by which it grows and develops, by which it expresses power, by which it maintains its functions and actions, by which it maintains the integrity of its structures and its life, are principles that are applicable to every human being. One man, within the organic principles of his constitution and within the range of the leading functional laws by which life is regulated, is the type of the whole race. Special differences, which are really insignificant and largely pathological, are subservient to great uniformity. Diversities do not in any way affect the great constituents which belong to all. Essentially, in all of the elements of physical excellence and mental and moral character, all men are alike.

In relating his life to the sources of life that abound in nature, so that through them he can gain additional strength, man behaves, not in the light of differences, but in the light of the *similarities* and *likenesses* between individuals. Life is sustained in the body with respect to those points wherein the individual man agrees with every other. The laws of nature, so far as they relate to life, are the same in all human beings, and this becomes a not merely general fact upon which, under general circumstances, one may rely--but a uniform, yes, a universal fact, so that what will keep one man alive will keep another man alive and what kills or tends to kill one man will kill or tend to kill another.

If it were true that one man's food were another man's poison, what would become of our social eating? We would continually be looking for poison. It would not help us to know that others had eaten a certain food with impunity or with benefit, for what is food for them might be poison to us. Again, how would we judge for others? In preparing a menu for others, whose needs are not known to us, how would we avoid poisoning them? Would we require of each invited guest that, in accepting our invitation, he (or she) supply us with the list of foods that he cannot eat and another list of foods that he can eat?

How could dietaries be constructed for schools, hospitals, prisons, asylums, etc., if the old adage is true? How would restaurants and hotels prepare their menus? But, as a matter of fact, do we not more or less observe a uniform mode of eating by the general public?

If the old adage were true, how would farmers know what foods to raise; how would market men know what to purchase for public use? Is it not obvious that if the adage expressed a real truth, commerce and industry would be in a state of confusion? Even mothers would not know until after the baby had been nursed at the breast whether their milk would be food or poison for their baby.

Are we giving too much strength to the old saw? If so, where does its force end, if it has any? If we understand it as an expression of a confused state into which mankind has brought itself by its habits, there would be some bitter sarcasm in it; but the fact is that it is never consistently nor intelligently used in this way. It is merely employed as a weapon for the caviler who has no other answer to give when he is urged to consider the importance of wholesome dietary habits.

Eating

CHAPTER XVI

It is important not only to eat those foods that are best adapted to the human constitution and to eat them properly prepared, but also to eat them in ways that assure the best results in digestion. A food that may be easily digested by a person in vigorous health and full digestive power may be indigestible to a weak and sick individual. Foods that are not well chewed, foods taken in too great quantity, foods that are spoiled, even if camouflaged with seasonings, prove harmful.

Perfect obedience to the laws of being is the only means of ensuring perfect health and an adult, with fully developed brain and whose reasoning power is mature, is inexcusable if he (or she) does not render intelligent and implicit obedience to these immutable laws.

Because of the importance he attached to food and correct diet, Trall said editorially in December 1858 that he was accused of being a mono-maniac on the subject of eating. In spite of this he declared that "in all our prescriptions for invalids, let what will ail them, we attend to the dietary as well as the bathing, the breathing, the exercise, etc." One patient complained that in all of Trall's advice to his consultants he "insisted on a correct dietary *in every case."* This consultant was "willing to admit that some folks ought to attend to diet, but that all should seemed to him to be making one remedy apply to all kinds of persons and all manner of diseases." It seems that he overlooked the fact that dietary indiscretions were general.

The prevailing customs of our society provide a very poor guide, not only to the times of eating, but as to the quantity and kinds of things to be eaten. We eat for mere gratification, far too much; for principle, far too little. As a necessary consequence of such eating practices, we curtail our gustatory enjoyment and reduce our physical and mental efficiency. The man who cannot enjoy a plain, simple meal of a few foods, these simply prepared or in their natural state, is not yet converted to the *Hygienic* diet.

The unprocessed, uncontaminated, unadulterated natural article of food which we like best is best for us and the natural, unchanged article for which we have a dislike is not good for us. This is true as a principle applicable to the race as a whole and cannot be confined to the individual likes and dislikes. What we have here said of foods applies equally as certainly to *medication.* Nature never provided man with an appetite for any or several of her compounds that will injure him, nor withheld an appetite for one that will do him real good. When nature takes away the appetite for a wholesome substance, it is because we have eaten enough of it. When she is ready for us to eat again, she provides such a desire for food that we relish food and nothing else will do.

Nature provides us with whole foods and we alter them until they are no longer adapted to the nutritive requirements of our constitution. Our nutritive adaptations, represented by the sense of taste, are no longer sure guides to eating after our foods are so much altered. For this reason man's normal instincts fail him when he attempts to live upon a diet of processed and refined foods that have been sweetened and seasoned in a way to deceive his sense of taste.

It will not do to advise: "Be careful of your diet." Such advice is empty of precise meaning and each person will interpret it to suit his own opinions and whims. One will think that he is "being careful" if he omits the third cup of coffee; a second will think the advice is carried out if he eats only one large slice of roast pork; a third will be content to merely reduce the condiments and trimmings he customarily eats. It is essential that the diet be specified and, if need be, that we see that the patient is careful in abstaining from everything but water. The body casts off nothing but useless matter and excess, but such are the prevailing eating practices that our excretory organs must work overtime to free us of excess food and of the many foodless *harmfuls* that we imagine we enjoy.

Our eating is largely a matter of habit and commonly we cultivate our eating habits without intelligent thought. We are inclined to follow the general practices of those around us until our habits dominate our lives. When habit has become master, so that it is found difficult to turn down food, it should be realized that good habits can also become master and that once old habits have been broken and good ones cultivated in their stead, it will be found that the new habits are even more pleasurable. One of our worst eating habits is that of overeating. In this country, at least, overeating is practically universal.

The bestial rivalry and shameless prodigality of the treasure of life which are the concomitants of feasting and revelry, where food and drink are plentiful and tempting, grow from ignorance and wilful disregard of the true physiological relations of food and drink to the body. When visiting friends and dining with them, we are customarily urged to eat more and still more after we have eaten all we desire, perhaps more than we should. Host and hostess continue their urgings and, if we are not strong, we are likely to be influenced by their importunings. This is a social crime for which there seems to be no remedy short of social enlightenment.

What is the difference between the man who kills himself with habitual gluttony and the man who destroys his life with habitual drinking? The early *Hygienists* strongly recommended the two-meals-a-day plan long before Dr. Dewey crusaded for the no-breakfast plan. It was the view of Trall that "it is of little consequence whether you eat two or three meals (a day), provided you are correct in the whole quantity of the food taken and are correct in your other habits." In discussing the superiority of the two-meal plan, he said: "Whether two meals are eaten or three, one should be moderate in quantity and choice of materials." Moderation in eating may be said to be of paramount importance.

The very existence of teeth implies the need for chewing; the existence of salivary glands and their secretions implies the necessity for insalivation of food; the existence of salivary amylase implies the need for its digestive action. Even the infant masticates, in a physiological sense, the first meal it draws from the maternal fountain. Yet, heretofore physiologists have tended to deprecate the importance of chewing and of salivary digestion.

Just as physiologists have, heretofore, tended to underestimate the importance of mouth digestion, so they tend to underestimate the importance of gastric digestion. It is not unusual to read in *scientific* works that "so far as the digestive process is concerned, the stomach is a helpful, but not a necessary organ." One standard biological text says that "in addition to storing and softening the food, the stomach serves as a disinfector; for very few bacteria can survive the high degree of acidity of the stomach." Thus the importance of the work done in the stomach in initiating protein digestion is regularly discounted, while the continuation of starch digestion in the stomach is considered unimportant.

We have an elaborate organ, evidently adapted to serve very important functions, equipped with millions of microscopic glands that pour their secretions into the stomach and these adapted to secure certain definite and apparently useful results, and an elaborate nerve control of both the muscular and glandular activities of the stomach, and all of this for very trivial and dispensable activities! It doesn't make good sense except to a biologist or a physiologist, bent on justifying the surgical removal of the stomach.

Such is the complex apparatus by means of which is performed that marvelous function of transforming the proximate elements of vegetable substances into the feeling, thinking and acting structures of the animal--blood, organs, brain, nerve and muscle--and such is the importance of their functions that we should not overlook the care of the digestive organs in our *Hygiene.*

Stressing the importance of simple meals and advising that the meals be not complicated, either with too much variety or with condiments, Trall said: "It does not follow that because the digestive apparatus appears to be a complication and intermixture, as it were, of various tissues, of arteries, nerves, muscles, veins, absorbents and cells, that the articles of food must also be promiscuously mixed up and jumbled together in all possible ways."

He adds: "The grand essential in eating is simplicity of material. For this reason, a plain, mixed diet is often much better than a highly-seasoned, or greatly mixed and mingled vegetarian diet. Plain bread and beef may be better than puddings and sauces, where fruits and vegetables of various kinds are rendered

fermentable and indigestible by profuse additions of salt, sugar, milk, butter, spices, etc.

"Food must not only be plain, and plainly cooked, and materials unchanged in their natural proximate qualities, but must be eaten *slowly.* And if all bread were made of unbolted grain, as it should be, and if none of it were either raised or fermented, as it never should be, we would have no difficulty in securing proper mastication and, hence, pure appetites with good digestion.

"Such food would soon give us natural appetites. We would soon find ample enjoyment and perfect satisfaction in eating without the pernicious additions of stimulants and condiments to provoke the appetite."

Physiological science had not advanced far enough to enable the early *Hygienists* to work out valid rules for food combining, but they did give considerable attention to this subject. It was a common practice among them, when called to care for patients with delicate digestion, to feed but one food at a meal in order not to complicate the digestive process. Graham himself, at an early period in his labors, advocated one food at a meal where difficulty arose in digesting simple meals.

Although not much was known of the physiology of gastric digestion, *Hygienists* understood vaguely that any valid rules for food combining would have to be based upon the physiology of digestion. Writing in *The Science of Health,* June 1874, Julia Coleman said: "The character of the gastric juice in individuals is influenced by the character of the food which they habitually take. This capacity for adjustment man seems to possess in a greater degree than most other animals. But it does not follow that these adjustments do not sometimes tax the system severely, and reduce its capacity for exertion in other directions, no doubt very often shortening life when greatly contrary to nature."

Nature is abundantly capable of making all the compounds that it is well for man to have without his blind assistance. The cook disputes this and mixes foods indiscriminately. Although no other creature eats such food mixtures as man eats and although they lack the means of mixing and processing foods, we take no lesson from this. All the lower animals, except a few for whom man supplies mixed foods, do very well without the mixing. They are all uniformly more healthy and vigorous than man. They do not lose their young from sickness, while man presents a high infant death rate.

All of this does not matter. Our cooks can disobey the natural order and they do it when they mix foods to induce man to eat foods that he never relishes alone. By thus forcing upon the body substances that it does not want in order to get what it does want, man's diet is rendered unwholesome. When we eat mixed foods, we are forced to eat them just as they are mixed; but if our foods are not mixed, we can eat each food separately and take as much or as little of it as we desire. If we take other foods at the same meal, we can see that no incompatible mixtures are taken.

Physicians and pharmacologists go far beyond the cook in this destructive art of mixing (compounding) various substances, not one of which man would relish to eat separately and, against the most violent remonstrances of the body, force their vile compounds into the one place they should never be introduced-the human body.

It was said that nature plainly says: "Eat of my compounds what you like best, and I will signify when you have eaten enough . . . The instant hunger is satisfied is the time to cease eating. If you persist in eating beyond this time, then I will send you another real friend--pain--who will compel you to cease eating before you do yourself irreparable harm. I shall make you suffer so much that you will lack all excuse for eating too much at a later time." How common is the practice of smothering the disciplining voice of pain and discomfort with a drug after meals!

If we cannot enjoy eating in the highest degree, this should be interpreted as a command to wait until we can enjoy food. There need be no fear of injuring ourselves by thus fasting until food can be eaten with a keen relish. Nature is a good conservator. Before she will permit a man to injure himself by fasting, she gives him such an imperious demand for food that he can no longer resist eating. Then if he chooses from among wholesome whole foods one that he likes, it will prove best for him.

Sometimes we are asked: "But God or nature has combined starch and protein in the same food; are not grain and legumes such combinations? How do you explain such natural combinations if starches and proteins should not be taken together?" We are asked this question very often and, although we have answered it repeatedly, the question will not down. The answer is as suggested in the foregoing quotation from Julia Coleman, that the digestive tube can adapt its digestive juices to the requirements of natural combinations, as these are found in an article of food; but such adaptations are not possible when a meal of several foods is eaten. There is a vast difference between a food, whatever its combination, and a meal in which foods are indiscriminately and haphazardly commingled. We are not indebted to the earlier *Hygienists* for any of our rules of food combining, but we are indebted to them for the initial studies of the subject.

The same law should govern man's eating as governs the eating of all other creatures: that is, eat what is most desired of nature's organic compounds and eat no others. Man violates this law when he eats compounds of his own compounding. Herein lies a great source of mischief. All the advantages that come from having a perfect guide were thrown away when man attempted to improve nature and re-compound or uncompound her compounds. In other words, when he began to mix foods and to process them and to substitute *medicines* for obedience to law, he paved the way for much suffering. His object in thus mixing and processing foods was to see if he could not obtain something that would taste better than nature's compounds. His object in mixing medicines was to see if he could not obtain a substance that would cure him while he continued disobedient to the laws of nature. He has not succeeded in either of these objectives.

One of the most common complaints in our society is that of indigestion. Millions of dollars are spent yearly for drugs with which to palliate the discomforts occasioned by indigestion. Every effect has a cause and we may be certain that every case of indigestion has at least one cause and in most cases we will find, on close investigation, several contributing factors. One man will complain that he cannot eat the simplest meal without suffering. Another will declare that he has tried all manners of diets and ways of living and that it makes no difference: "My food sours on my stomach, no matter what or how little I eat." He must have his after-dinner pill or his sodium bicarbonate after each meal.

Why should a dinner cause trouble? Or why should the same dinner, eaten by several people at a banquet, trouble one or two and not all the diners? Why should any wholesome food, eaten in moderation, cause troubles? Much indigestion is due to overeating; much of it is due to wrong combinations of food; some of it is due to impairment of the digestive system; some of it is due to emotional causes; some of it is due to eating at a time when no food should be taken.

The stomach can digest food only as it is supplied with blood and nerve impulses with which to carry on its function. If these are withdrawn by either physical or mental effort, digestion must suffer. If, while fatigued from the day's activity, one sits down to the dining table and eats a hearty meal, one will not digest food well. When fatigued and drowsy from overeating, it is not well to try to make a speech. We blame an inebriate who makes himself unreliable and unfits himself for useful work by drinking, but we excuse the man who does the same by overindulgence in food and by eating heartily when fatigued.

Some men and women are so mentally active that their mental activities run away, so to speak, with their nervous energy and, when, following an afternoon spent in mental work or excitement, they come home in the evening with a ravenous desire to eat, they lack power to digest the "heterogeneous comminglement" of food stuffs with which they fill their stomachs. Energy that should have been on hand for digestion, having been squandered, does not permit the digestion of any but the simplest meal.

It is surprising how reckless people can be with their energy. In one debauch, one may waste sufficient energy to supply his functional needs for a whole year. If a man is addicted to any vice--alcohol, coffee, tobacco, etc.--that impairs his digestive function, it is the worst kind of folly to think that his digestion can be normalized while the habit is indulged. The best of diets, the simplest of meals are often difficult of digestion, not because there is anything wrong with the food eaten, but because there is a lack of digestive capacity.

In impaired health the normal composition of the nutrients and secretions is impaired and the processes

of renewal take place with an energy proportionately deficient. For this reason, recovery of health may be slow and great care in feeding becomes necessary for a prolonged period of time before full digestive capacity is restored. It is an unfortunate fact that these sufferers are usually impatient and expect immediate results to flow from any change of eating which they may make. They are not strictly illogical in expecting immediate results and they do receive immediate benefits, but these are so small as to be hardly noticeable and their progress is often so slow as to be discouraging.

One important requirement in the restoration of normal function is rest--rest not only of the impaired organ (in this case, the stomach), but rest of the whole body. Trall disagreed with those who advised sleeping after a hearty meal. He especially thought that sleeping after the midday meal is not for man, as he should be alert through the day and sleep at night. He thought that when sleepiness follows a meal, either too much was eaten or something else was wrong with the meal. If we are to attach any importance to this thought, we can apply it only to the healthy, vigorous individual--it is certain that the sick, the weak, the devitalized, the profoundly enervated should have rest and sleep after each meal. Any intellectual, emotional or physical stress will so reduce the already impaired digestive capacity that such individuals will be almost certain to suffer.

Our predecessors declared that cooking is more seductive and deceitful than poisonous plants. The latter we usually know and shun; the former are made attractive and we crave them. Yes, cooked foods are made attractive, alike to sight, taste and smell, and this is a great point. It is necessary, in the very constitution of our being, that our foods should be made attractive. Attractive food is more gratefully received and more easily digested; nature recognizes this demand. Nearly all of our best foods, those which in their natural state are ready for our use, are attractive. Fruit is superlatively so. It is true that some people do not care for fruit; usually their taste is so perverted by sharp condiments, or bitter tobacco, or burned up by fiery alcohol that they are unable to appreciate the delicate and delicious flavors of fruits.

It is a fact that nature knows nothing about cooking. It is also a fact that cooking in all its forms deteriorates the nutritional value of all foods, rendering them less adequate as sources of nutriment. It has been a *Hygienic* principle from the first that anything that is genuinely valuable for human food may be eaten as nature produces it. It does not require cooking, mixing and seasoning in order to make it palatable, digestible and useful.

"Follow nature," we are admonished. Yet, indeed! But let us be sure that we are following nature and not some partial view of her. Nature has her harmonies, contrasts and discords in foods as in colors. There is no more necessity for preparing unwholesome foods than there is to raise poisonous plants.

Self-Healing

CHAPTER XVII

Man has been on the earth along time--how long we do not know. The period of prehistory may be much longer than the historic period. A medical profession has existed for only a small part of the historic period. Prior to the origin of the medical profession, the sick were cared for by the shaman and priest. But it is not possible that at man's origin he had the services of these two ministers. No doubt much time elapsed after his emergence on the stage of life before the shaman and priest came into being. During all of this time--this is to say, before there was a surgeon, before there was a physician, before there was a priest, before there was a shaman--wounds healed, broken bones knit and man recovered from his illnesses. That he did a good job of this is evidenced by the fact that he is still here today. Healing is a biological process, not an art. We know today that it is accomplished by forces and processes intrinsic to the living organism and not by substances and things outside of the body.

Let us also point out that after the medical profession came into existence, centuries passed before more than a small segment of the race had the doubtful advantages of its *services.* Indeed, there are still vast sections of the globe in which there are no physicians. In addition, in its earlier stages, medical men were grossly ignorant, darkly superstitious and lacking in all the technical skills that the profession has today. They possessed none of the complicated machines with which they now seek to discover the patient's trouble and were lacking in almost everything that is now regarded as essential to the "successful practice of medicine."

In-spite of all this (looking at the matter from the commonly accepted viewpoint), people persisted in getting well and the human population continued to increase and spread over the earth. Not even the intermittent wars that have characterized the historic period have been sufficient to decimate the ranks of mankind.

An even greater evidence of the self-healing power of the body is seen in the fact that all through human history, patients have recovered from all kinds of disease states, not only without treatment and under modes of treatment that were without the slightest helpful effect, but they have also recovered under treatments that were crucifying. When it is said that without antihistamine a patient will get well of a cold in a week and that with antihistamine he will get well in seven days, expression is given to a fact of great significance.

If, through great stretches of time, man did not have physicians; if, after these came into existence, they were accessible to but a few people; if at their origin they lacked almost all of the technical and scientific equipment of the modern physician and if, even now, great numbers of men and women do not have their services, then we must think that some power other than the medical has been responsible for the survival and multiplication of the race, for the recovery of the sick, for the healing of wounds and the knitting of bones.

What, may we ask, is responsible for recovery of the sick today? Have the means of healing and restoration been radically changed? Whereas the sick formerly recovered by virtue of their own intrinsic power of self-healing, do they recover today only by virtue of the therapeutic measures of their physicians and other disease treaters? Does recovery today depend upon the same powers and processes upon which it rested in the long ago?

We do not think that the correct answer to these questions can be in doubt. Most medical practice is frankly merely palliative; it is not even thought to be *curative.* Neither the physician nor the layman thinks that a laxative *cures* constipation or that an aspirin *cures* headache. Physicians are engaged in nothing more significant than palliating symptoms while the inherent restorative powers of the patient restore

health. We might accept the palliative practice as useful were it not for the fact that palliatives occasion troubles of their own and always interfere with the body's restorative processes.

If a bone is broken, it may be set by human art; but no human art can heal it. All that the surgeon can do, after setting the bone, is to stand quietly by and wait for the processes of healing to do their work. A wound is not a disease; but the vital activities--pain, inflammation, feverishness and other evidences of vital action--do constitute disease or remedial action. These represent processes by which healing is accomplished. There can be no disease where there is nothing to be remedied and there can be no appreciable remedying of abnormal conditions without remedial effort--disease. A broken bone, like a flesh wound, is healed by inflammatory action.

Wounds heal and it is generally known today that there are no healing agents that will do this work. But this was not always known and they were *medicated* with salves, plasters and drugs to which the healing was attributed. Even for a long time after it became known that the body heals its own wounds, salves were regarded as necessary auxilaries of the healing process.

The idea that it is *nature* that heals may have been first expressed in some of the books attributed to the legendary Hippocrates. The idea slumbered from the time of Hippocrates until it was revived in the seventeenth century by Stahl, who contended (with considerable ability) for the existence of remedial powers within the organism-a power which has since been termed the *vix medicatrix naturae.* Since the time of Stahl, the *healing power of nature* has often been affirmed and as often denied by medical theoreticians. Even today they are very cautious about admitting a remedial tendency within the living organism--*cures* are still being wrought by their drugs. Too many admissions of the intrinsic power of self-healing would prove incompatible with current *orthodoxy,* both in thought and practice. If the body heals itself, what need is there for *cures?*

Medical libraries around the world are filled with collections of books on the *Theory and Practice of Physic* and the *Theory and Practice of Medicine,* but they contain none on the principles and practices of nature. Although they often render lip service to the statement that "nature is the great healer" and say that they only "aid nature," the medical world has ever been busily engaged in devising some means of cure or trying to discover some specific for disease in drugs and have ignored "nature."

We find nothing in the human constitution that precludes the restoration of health, even after serious disease; but on the contrary, there is a powerful, recuperative principle always on the alert to resist harm and to repair injury. The living organism is energetic and persistent in its efforts to retain and restore its normal state and never gives up the effort to restore health until the last vital spark is extinguished and death results.

We are asked to believe that, though there are no drugs that will heal a wound, there are some that will cure pneumonia or typhoid fever. It it known and admitted that patients recovered in great numbers from both of these diseases when they had no drugs that would *cure* them. Such recoveries demonstrated beyond cavil or doubt that the healing power of the body is capable of restoring health in both pneumonia and typhoid. The same facts are true of other so-called diseases with which man suffers and for which no alleged *cures* exist or have existed for but a short time. We are entitled to ask: are there two natural modes of healing operating upon different principles, one of them carried on by the living organism, the other carried out by drugs?

The Essential Nature of Disease

CHAPTER XVIII

What is disease? The whole philosophy of drug medication or of *Hygienic* care turns on this single question. It is quite clear that until medical men can solve this problem--what is disease--medical science cannot advance. It must remain a science without a system, a superstructure *standing on nothing.* Although the minds of medical men have given origin to diverse theories of the nature and cause of disease, they have all revolved around a common center. Disease has been regarded as a positive and organized entity which attacks the body from without.

Our forefathers would conjure up for themselves some hideous monster and imagine him dancing around, peeping in windows, slipping in at doors and ready to pounce upon them at any minute. They were entirely unarmed; there was no protection. Although this ancient conception of disease has faded somewhat, it is not entirely dead. From the time of the incantations and charms of the era of the magician down to the present time, that mysterious imaginary monster, *disease,* has been the thing aimed at; and *remedies* supposed to possess *curative* virtues have been employed with which to combat, expel and kill it. Whatsoever was done, whether by ceremonies or by drugging, the sick have had faith in the "power to *cure"* possessed by the act performed or by the drug taken. If they failed to recover under the treatment, this did not lessen their faith in "nature's remedies." They thought only that they had failed to find one suitable to their case. Hence it is and has been that invalids have always been and are perpetually and continually resorting to one thing after another to cure them of their maladies.

Whether the people and their physicians really imagine that disease is a thing--an entity--destroying the patient in like manner as a worm gnawing at its root destroys a plant and that, consequently, the disease must be destroyed as we would destroy the worm, it is certain that their treatment, when ill, is directed to this end. From the dawn of human history to the present, all magic and all *medication* has been employed, no matter what the theory, upon the assumption that disease is a positive organized force that has attacked the body. Accordingly, a power outside the living organism has been sought after and used for the purpose of *curing* disease.

We regard an understanding of the essential nature of disease as not only important to the establishment of a successful mode of caring for the sick, but as essential to the establishment of a true science of life. The natural termination and course of a so-called disease can be known and understood only by the man who observes its progress from beginning to end without interfering in any way with its processes. From Hippocrates down to the present no physician who gives drugs has ever studied the natural history of disease. How can a man tell the natural history of anything who has never seen it in its natural relations? How are physicians to understand the nature of disease so long as they continue to meddle with it at every stage of its progress?

One difficulty in defining disease is that it is a generic term that covers a rather wide variety of phenomena, some of them directly opposite to others. For example, there may be violent action or there may be a complete loss of power of action. So long as the word disease is employed as a blanket term covering so many and opposite phenomena, a satisfactory definition is not possible. The medical dictionary defines disease as "a departure from the normal." It is obvious that such a definition also covers a wide variety of phenomena, often of opposite character. Other than this, it is unsatisfactory for the reason that it fails to define the normal. How can we define a departure from the normal until we know what is normal? Under this definition a child born with six fingers on one hand would be diseased; yet it is quite obvious that as much as a departure from the normal as the six fingers would be, this is something entirely different from pneumonia or typhoid fever. We are much in need of a terminology that will clearly distinguish between the various kinds of departures from the normal.

A large part, if not all, of the physical world is composed of continua, by which is meant that a continuum is a heterogeneous unity, each point of which differs from all the other adjacent points, but differs from them by such subtle gradations in any particular quality that there exists no boundaries within the unity, but which can be divided into parts only by imaginary and arbitrary boundaries. If we think of temperature and the wide range between the lowest and highest possible temperatures and consider for a minute the fact that there is no point on the thermometer where we can place our finger and say with certainty that precisely at this point cold ends and heat begins, or vice versa, and that all the little markings, crude and gross though they be, on the thermometer by which we measure degrees of temperature, do not represent actual divisions of temperature, but arbitrary and imaginary divisions, we get an idea of one continuum.

We can think of health and disease also as a continuum. Comparing these two phases of life (the state of being alive) to temperature, let health represent heat and disease represent cold. At what precise point on our vitometer can we place the thin edge of a knife and say with certainty that here health ends and disease beings? The two states shade imperceptibly into each other as do the colors of the rainbow. This is not to say that health and disease are the same thing, any more than heat and cold are the same thing, but that, just as heat and cold are two phases of the same thing (temperature), so health and disease are two phases of the same thing (life) and that, just as heat and cold merge imperceptibly into each other, so health and disease also merge imperceptibly into one another.

In truth, many aspects (stages) of disease are continua, existing in such subtle gradations and in such varied degrees of abstractness that the differentiations made by pathologists in the course of their analyses and the terms they employ as symbols of their analytical divisions reflect only very roughly the pathological situation that exists in reality. All the phenomena of health and disease proceed from the living system. Disease is no more an extra-body entity than is health. Both health and disease readily change under changed conditions, according as the body is related to the changed circumstances. Disease is a vital struggle (*biogony*) to remove offending substances (toxins) and repair damages. It is a modification, for the most part, of the regular, orderly processes of life designed to accomplish some unusual end--the removal of toxins engendered or taken in from without. Pathology, in this view, is the dramatic exaggeration or diminution of normal processes--it is not healthy action, but is health-restoring in effect.

Only by obliterating all distinctions between health and disease can such actions be called "healthy actions." This would be something like obliterating the distinctions between heat and cold and declaring them both to be heat. They are both temperature, but cold is not heat. Of course, both normal and abnormal actions are vital actions; but they are not both physiological. Physiological circulation is free and easy and occasions no redness, swelling, pain or interference with function. Inflammation is a circulatory adjustment that, while vital, is pathological rather than physiological. Inflammation is the process by which broken bones are knit, wounds are healed and parts are protected from damage. Death or mortification of the inflamed part represents the unsuccessful termination of the remedial effort--the disease.

Disturbances and inflammation within the organism are as much vital actions as deglutition and digestion; the difference being that in the first instance the organism is resisting and expelling inimical substances; in the second it is performing its normal or healthy functions. Healthy action is the action of a healthy or normal organ under normal conditions. Remedial action is action which tends to restore the healthy condition. Inflammation is remedial action because, though not normal action, it is designed to resist and remove causes and repair damages, thus restoring the healthy condition. To say that inflammation is healthy action is tantamount to saying that disease is health.

Inflammation is simply a great increase in the amount of blood in a circumscribed area of the body. The pain, the redness, the swelling, the heat and the impairment of function are all due to the local excess of blood. The blood contains the repair materials--the ordinary elements of nutrition and the special repair elements that are produced for the occasion. Inflammation, whether in a wound or in a so-called disease, is a remedial, a reparative and, also, a defensive process. Instead of something that needs to be *cured* or that can be *cured,* it is the process by which healing is accomplished.

What we have said of inflammation applies with equal force to such actions as coughing, sneezing, spitting, vomiting, diarrhea, diuresis, night sweats, dizziness, fever, pain, vertigo and other types of remedial action. What are these but symptoms of disease? And yet, each and everyone of them represents a modification or exaggeration of some function of life. It may be said that acute disease represents a series of exaggerations and diminutions of the regular activities of life designed to remove offending substances and to repair damages. When we examine the functional and structural changes that occur in the body in the early stages of disease, there seems to be alterations of a compensatory character or of such a nature that they reduce the general disturbances of the organism from the threat associated with the altered condition of life to a minimum. They are of a remedial character--expulsive, resistive and compensatory.

This definition of disease--remedial effort--first expressed by Dr. Trall, must be applied in its fullness to acute disease only. Paralysis, for instance, under this definition of disease, should not be classed as a disease, nor should apoplexy, blindness, deafness and a number of other structural and functional defects. Certainly blindness is not a remedial effort. Certainly the bleeding into the brain in apoplexy is not a remedial effort. These facts again emphasize the need for a more precise terminology.

Acute disease is vital action in some one or all of the living tissues or organs in resisting and expelling injurious substances and influences and in repairing damages. In this sense, disease is an effort to preserve the organism from destructive influences and to maintain or restore functional harmony.

The living organism is endowed with an inherent power and instinct of self-preservation. A familiar example will illustrate the workings of this power and instinct. A poison is taken into the stomach; the organism senses the presence of a non-usable and harmful substance and prepares to act accordingly. It is sent out by vomiting, or it is sent along the digestive tract into the colon and is expelled by means of a violent diarrhea. It does not take a profound understanding of the science of biology for the reader to grasp the fact that the vomiting or the diarrhea are the means of defense and expulsion. We call them disease or symptoms of disease, but we should also recognize them as parts of the process of healing. Disease is not the enemy of life that we have been taught it is, but the means employed by life to defend and repair itself. In this instance, the vomiting and diarrhea, instead of being foes of life, are actions of life in self-defense. The *enemy* in this instance is the drug (poison), not the processes of life that expel the poison.

It has been said that fever is not disease. Is it health? Is it something between health and disease? What, then, shall we call it? Fever is but a dramatic exaggeration of the normal temperature of the body. Its production is strictly a vital process, but it is not a healthy state. It is remedial effort, whether successful or not.

We do not think it correct to say that fever, meaning by this, the increased temperature, "is no more than a concomitant of a process of reaction against injury or a foreign disturbance." We think the rise in temperature is an essential element of the so-called *reaction* (we would call it a primary action--one of defense) and that it is necessary to other elements of the defensive action, without which they would not occur. But when it is said that we can follow nature's example by endeavouring to create a feverish condition for the purpose of healing, we object that this is a return to the old principle of *curing* disease by producing disease.

A fever is the consequence of accumulated impurities in the system, the disease consisting essentially in the effort to expel the accumulated toxin. How can the introduction of a poison or of any number of poisons either prevent the accumulation of impurities or cast them out once they have accumulated? We do not think that fever has any "dangerous features" and think that these are but figments of the medical man's imagination. All forms of acute disease are remedial efforts and the disease is mild or severe as the quantity or kind of poisons or impurities in the system necessitate a lesser or greater degree of violence of the remedial effort.

People are said to be attacked by fever. They are also said to *catch* typhoid or to catch scarlet fever, etc. Editorially, Trall said (September 1859) that "no person ever was or ever will be exposed to the *contact* of the fever which they manifest. The thing is impossible. We say, further, that there never was an individual on earth *attacked* by a fever." We need only add that if there is any attack, fever is part of the body's attack

upon impurities.

Writing in 1850, Houghton, discussing the action of the body in disease, said, in the words of Dr. Jennings, "that action is right action." The convulsive and often painful movements of the bowels in a violent diarrhea, such as may be occasioned by a *cathartic,* is disease. The early *Hygienists* regarded vomiting, diarrhea in its various forms, biliousness and "morbid discharges from the bowels" as processes of drainage. Nature, they said, has "set up a 'drain' to save the system from dangerous effects that would otherwise ensue . . . In other words, morbid discharges from the intestines mean something, and it behooves everyone to ponder the 'writing on the wall,' and find out its true significance, even at the risk of finding themselves 'wanting.'" It should be obvious to the reader that diarrhea is but a dramatic exaggeration of the normal function of the bowels and that it is designed to remove offending materials from the alimentary canal. It is certainly not something to be *cured* or suppressed, but should be permitted to complete its work.

Coughing and sneezing each represent an exaggeration of the ordinary or normal process of exhalation. Air is forcibly expelled from the lungs in an effort to dislodge and expel obstructing and irritation-occasioning substances from the air passages. Sneezing is a peculiar action which follows immediately the introduction of snuff or a bread crumb into the nostrils of those unaccustomed to it. It is an effort to relieve the membranes of the nostrils of whatever occasions irritation. Sneezing is an action of the body itself and its ends are constructive. The healthy action of the respiratory apparatus is respiration. In health it does not sneeze or cough; it does not exude great quantities of mucus and, perhaps, some blood; it is not painful. In pneumonia there is coughing and exudate in the lungs; there is some blood in the exudate; there is pain and marked impairment of the healthy function of the respiratory organs. Health is never painful; disease is often exceedingly painful.

Physical suffering is evidence that remedial operations are in progress. If we view the painless indolent ulcer that fails to heal until it becomes acute or evolves a painful stage, we see that remedial operations are, in most cases at least, accompanied by painful symptoms. A slight injury will evolve only slight symptoms; severe injury calls for the development of severe symptoms. While drugs cannot contribute to the healing of torn ligaments and muscles in cases of dislocation, the pain, restlessness, fever, inflammation, suspension of digestion, etc., all symptoms of disease, constitute parts of the healing process by which damaged tissues are repaired. The force of the remedial effort will ever be found to be in exact ratio to the needs of the case.

How stupid to regard pain as a malignant demon that comes unbidden and requires exorcism by the infliction of expurgatorial penalties! Pain is an instructor pointing the way to improvement; it should not be thought of as an enemy. Rather should we recognize as evil the occasion for the pain. The pain itself is but an exaggeration of the ordinary sense of feeling.

The hypertrophy (enlargement) of the tonsils or of the remaining kidney after the removal of the other does not destroy the structural design nor the innate aptitude of the organ to perform its function. Instead, it makes possible an increase or intensification of function, amounting, in effect, to an increase of functioning capacity and an intensification of its protective activities. The enlargements that muscles undergo when subjected to repeated strain are primarily defensive developments. Just as these muscular developments increase the powers of the muscles, so the enlargement of the remaining kidney enables it to do the work of two kidneys and the enlargement of the tonsils enables them to increase their work.

Extra effort is not necessarily disease. One may run rapidly and breathe deeply as a consequence and he may pant, but we do not mistake all of this extra effort for disease. We know that there is also extra effort by the heart and that the blood is coursing through the arteries, capillaries and veins at an extra rate, but the individual so running is not sick. Indeed, we are aware that running is one of the ordinary and normal activities of life. To class exaggerated activity as disease, it must be extraordinary and abnormal.

The question may not be amiss: if the vital structures are actively engaged in building up, maintaining and restoring physiological harmony and integrity and in counteracting and expelling the causes of disease, in what does disease itself consist? Certainly, the depressing causes are not the disease, else would everything that is incompatible with health be a disease. Neither can disease be the effect of

remedial action--which is either health or death. The inevitable conclusion is forced upon us that disease is the effort of the living organism to throw off a morbific cause and restore normal physiological equilibrium. Instead, then, of the disease and the *vis medicatrix naturae* being antagonistic forces battling for supremacy, they are one and the same thing.

After saying that the cause is not disease and the symptoms are not disease, Dr. Walter enumerates a list of symptoms common to various acute diseases--chills, fever, prostration, furred tongue, quickened pulse, restlessness, delirium, coma, stupor, etc.--and says: "There must be something behind to produce all these varied manifestations; and that something is disease." If disease cannot be identified either with its causes or its symptoms, he says, "it must of necessity exist between the two, following the causes and preceding the symptoms. Between the two, then, what do we find? An entity? A real existence? A living thing with bad character and evil disposition? A something having form and shape that can be weighed, measured or observed? Not at all! No such thing has ever been found or ever will be. There is nothing to bridge the chasm but the vital properties of the living organism. The living force acting in self-defense is the only connecting link between the causes of disease and its symptoms.

"Disease, therefore, in its essential nature, is the *vis medicatrix naturae*-- powers of nature acting self-preservatively. The existence of this *vis medicatrix naturae* has long been recognized by the most eminent medical men; but they have failed hitherto to perceive its identity with the disease. Their mistake has been in attempting to crowd into the slight chasm between the causes of disease and its symptoms two powerful opposing agencies--the disease on the one hand and the *vis medicatrix naturae* on the other, acknowledging all the while that both these forces were too indefinite and mysterious to be understood. Which is very true. They cannot be understood, except by viewing them as one and the same thing."

Graham's view of the essential nature of disease is well summed up in his statement that "all parts (of the body) sympathise with the suffering organ, and by a general consentaneousness of action, strive together to remove the offending cause-and when the emergency is great, and the danger imminent, the agonizing energy of organic life is poured upon those muscles of animal life concerned in respiration, and violent vomitings, &c., ensue. In all these operations the organic instinct acts determinately, and as it were, rationally, with reference to a final cause of good, viz, the removal of the offending cause."

Graham was hardly prepared to go as far as did Jennings in accepting convulsions or spasms as orthopathic in character, but he did view them as being of the same essential character, although resulting from a *misdirection* of the remedial efforts. They represented to him excessive activity, consequent upon too prolonged or too frequently repeated "disturbing cause." Essentially, however, they represented actions initiated by the "perceiving organic sensibilities" as "immediate measures" to "shield the special domain (he is discussing the stomach) from the pernicious action of the (offending) substance." First, there is "increased secretion;" then, "if the quantity and quality of the substance be such as to endanger seriously, the vital interests of the whole system, the special center gives alarm to the great common center of organic life."

"Few things," he said, "will more speedily and completely prostrate the muscular powers of even the strongest man, than light irritation of the alimentary canal." "Epilepsy and other convulsive fits and spasmodic affections almost universally result from irritations in the domain of organic life, and the alimentary canal is most generally the seat of these irritations."

A genuine science of life (biology) will demonstrate that those abnormal actions and processes of the living organism that are designated disease are not extraneous *somethings* bent on the destruction of life, but that they are operations of the same forces that are operative in the actions and processes that we designate health. A genuine biology will demonstrate that those actions and processes that are designated disease are under control of immutable laws and are designed for the preservation of individual life, the repair of injuries or the removal of harmful or destructive substances.

The vomiting and diarrhea, for example, that often follow the accidental taking of a poison, are precisely the same as the vomiting and purging that accompany what is called disease and serve the same ends. Poisoning may occur in the healthiest individual. This means that the healthy man employs as a means of preserving his life precisely the same processes and actions that the sick man employs. If we look at these

processes closely, we cannot fail to discover that the process that is designed to save life in accidental poisoning is precisely the same as the process that we call disease. In other words, disease is the remedial process.

Since any organismic disturbance, whatever its origin or locus, constitutes a menace to the organism's continued existence, it automatically occasions the mobilizations of the body's "mechanism" of defense. Do healing or reconstructive operations ever take place when there is nothing requiring healing or restoration? The answer to this question would seem to be self-evident. There can be no healing process when there is nothing to heal; and if this is correct, the healing process will always be concentrated where there is injury to repair. Coughing never occurs when the lungs and bronchial tubes are clear; sneezing never occurs when the nasal passages are free of irritation and obstruction; diarrhea does not occur if there is nothing in the digestive tract that should be hurridly removed; vomiting occurs only when there is something requiring forceful ejection from the stomach, and so on with the other processes of defense, ejection and repair.

Self-preservative processes are necessary and fundamental conditions of life. It is a fact of universal observation that principles never fail when the conditions requisite to their operation are present. The self-preservative principles of organisms which operate to restore health must, therefore, become operative when a living organism is injured, impaired or poisoned. Should it ever fail, this would be proof that it is not a principle of life.

Can we prove, by reference to facts, that there is an invariable connection between healing operations and the existence of a need for them? Perhaps not, for it is absolutely impossible for us to search into the depths of human life and observe all that occurs. But all the facts that can be seen tend to prove that the connection is invariable. Certainly, no fact has ever been established against it.

If this position is not true, we have no basis for our practice. If it is true, it is the only correct basis; hence, all who deny it are necessarily practicing on a wrong theory and, hence, more liable to error. As we understand this subject, the whole popular system of drug-medication is based on an erroneous apprehension of the nature of disease and it is this error which causes so many *Hygienic* practitioners to introduce greater or lesser portions of such practices into their work. The theory we adopt leads us to the rejection of all drug-medicines and it is certainly an important question--who is right.

If disease is vital action, if it is a self-preservative process, the greater the strength and vigor of the patient, the greater the vital action should be under the same injury. If disease is remedial force, the greater the vital activity, the more vigorous the symptoms, the more certain the recovery. If disease is a purely destructive process, as is popularly and *scientifically* supposed, the exact opposite should be the case.

A man who, in health, is vigorous and active will, in disease, manifest a corresponding symptomatic vigor; the vigorous and active man or woman will act in relation to drug poisons with double the force that a sluggish or greatly impaired person will act. A man whose energies are low will act feebly in relation to the same dose. If our position is correct, why is it that the strongest person, when he becomes ill, is likely to have the most violent sickness? Why, also, is it true that the patient who has the most violent symptoms is most likely to get well and to get well most rapidly?

Related to this very subject is a statement made by Dr. Jackson that "among the rules--organic, fundamental or vital, as you may please to call them--which nature has for the preservation of health to her subjects, is this: the removal of disease from parts or portions of the body which can ill afford to bear derangement to parts or portions which can much better afford to be diseased." His examples are not convincing, but suggestive. He said: "General disturbance of the system is not near as likely to follow inflammation of the mucous lining of the eyelids as it is to follow inflammation of the mucous lining of the stomach. If, from any cause, there is likelihood of the appearance of inflammation of the latter, nature, unmeddled with, is sure to do one of two things: either set up direct curative action, or remove the difficulty by some organ whose derangement is comparatively of little consequence. The latter action is what physicians call *metastasis,* or change in the seat of the disease and is common, but salutary, where the vital or protective forces of the system produce it, and is also common, but quite otherwise than

salutary, where the changes are produced by drugs."

If disease is a remedial effort, why do not the sick recover? The answer to this perfectly logical question is: *sick people do get well.* They get well in all cases, except three. These are:

1. In cases where the causes of disease are overwhelming.
2. In cases where the causes of disease are maintained beyond the power of recovery.
3. In cases in which the remedial effort is suppressed or thwarted by drugs and treatments that frustrate the powers of life and render ineffectual the efforts toward restoration.

It will readily be perceived that these three exceptions, where one or more of them exists, provide ample grounds for occasional failures and if the facts reveal that the sick do recover, except where these conditions exist, our answer rather conclusively establishes the soundness of the *Hygienic* theory. It is, of course, necessary to distinguish between remedial action itself and the ultimate results of such action. The action is no less remedial when it fails than when it succeeds.

The forces of life are not infallible. Their efforts are not always successful. They may prove abortive, but they are always in the right direction. There may be accidents in these efforts, as when vomiting is vigorous enough to result in a hemorrhage or in a hernia. But these accidents do not invalidate the important fact of vital agency in the case, nor destroy the principle of remedial action. Even should the hemorrhage prove fatal, the vomiting was still a remedial effort. Such *incidental effects* of the vital struggle (and they are very rare) must be regarded as accidents. We may say, indeed, from a theoretical point of view, that such destructive accidents result because the fibers of which the tissues are composed, not being sufficiently strong and elastic to endure the increased effort or energy of vital action, break. Even death itself may be regarded as a mere incidental effect of the body's great and sublime effort to reach the grand and glorious ultimate in human perfection. "Victory or death" would seem ever to be the battle cry of the living organism when useless and highly toxic substances are introduced into it.

Medical objectors to what they call the "expulsion theory" of disease declare that it does not distinguish between the two opposite conditions of health and disease, but confounds them together and makes them essentially one. For, it was contended, expulsion and rejection are natural and normal processes and as necessary to life and health as they are to disease. In every living organism the two processes of rejection of what is not needful and expelling what is poisonous, etc., goes on ceaselessly and simultaneously and cannot be arrested without danger. Expulsion of poisons is, therefore, coincidental with and an essential condition of health and their retention the reverse--disease.

"Are we, then, to believe that health is disease?" they asked, "and that life is one long-continued 'remedial effort to expel' poisons generated by itself?" The oneness of vital processes in health and disease seems to be a strange idea to the foes of the new conception of the essential nature of disease. They wanted some new, extra-vital and super-physiological force or process to constitute the disease. They seem not to be able to recognize health and disease as constituting a continuum--that is, that the actions of the body in expelling the poisons of disease are more or less dramatic exaggerations of the ordinary normal actions of life.

Our hypothesis of the essential nature of disease, its rationale, is deduced from the principles of physiology. The pathology of the schools of medicine, although growing more and more in accord with physiology, has in the past stood in contradiction of physiology. To date, although their pathology is being brought more and more into line with the fundamental principles of physiology, their therapies have not moved in this direction. They are still teaching in their colleges and practicing at the bedside "therapies" that are based on the old conception of disease as an "attacking entity."

Diseases are studied, classified and arranged into a branch of biological science called pathology, without knowledge of which none are considered competent to care for the sick. *Medicines* are studied, classified and arranged into another, but false science, called *materia medica* and *therapeutics,* without a thorough knowledge of which none are considered equipped to prescribe for the sick. With a knowledge of these two *sciences,* the physician sets out to conquer disease (really to make war upon life itself) and without knowing what he is doing, counters the very principles he is called upon to preserve.

Physicians are well versed in pathology, but alas! ignorant of the body in a state of health and of the basic needs of the living organism. They are conversant with the chemical constitutions of their drugs and know much of the effects that follow their administration; but they ignore the fact that when these drugs are introduced into the body in a state of health, they speedily reduce it to a state of disease. Their efforts to cure disease, therefore, result in the production of disease. There are several acute diseases that the medical profession classes as self-limited. These are said to run more or less variable or definite courses to recovery. If we can accept the principle that disease is remedial effort, we can understand that a "self-limited" disease is exactly analogous to "self-limiting" digestion. The process of digestion ends when the meal is digested and there is no longer any work for the digestive organs to carry on. In like manner, the remedial effort comes to a spontaneous end when the cause of disease has been removed and there is no longer any need for remedial effort.

An acute disease may properly be regarded as the evidence of a crisis in the affairs of the body. The so-called "exciting causes" of disease constitute the last feather that "breaks the camel's back." The vital organism has been hitherto moving along, accommodating itself as far as possible to its impaired state, until some additional and, perhaps, slight demand made upon it, necessitates, in order for self-preservation, a rearrangement of its activities. Suddenly, as it were, the internal foulness becomes so great that a vigorous cleansing becomes urgently needed and a great eliminating effort results. In this view, there are not many diseases, but many symptom-complexes, each of which represent the remedial effort more or less marshalled in a different part of the body. The unimaginative recognize inflammation in each part of the body as a distinct disease--hence, we have "many diseases." The crisis, which exhibits itself through a multiplicity of symptoms, is a very complex thing. To say that it stems from one cause is too great a simplification for the average mind.

So long as disease continues to be regarded, even if only subconsciously, as an entity, a terrible something that must be resisted, cast out and destroyed, and *medicines* are thought of as equally positive entities, either prepared by nature or devised by man for the destruction of disease and, so long as the great problem of the devotees of the various systems of medicine is to find a medicine which, when administered to the sick, will destroy or cast out the disease and save the sick alive, just so long will a rational and scientific approach to the problems of human suffering remain impossible.

The absurd notion that organismic convulsions (disease) and weakness are of exotic origin is so crucial to the prosperity of the medical profession that the physician is compelled, in sheer self-defense, to contest with every weapon he can command, the verities that the "diseases" listed in medical nosologies constitute climacteric symptomatologies of sub-clinical impairments of autogeneous origin and that these "diseases" cannot be mitigated or recovered from so long as the mode of life that engenders them continues to be carried out. The physician must, at all times, remain committed to the crotchet that "diseases" constitute physiological miscarriages localized in particular organs--and that the restitution of these organs to their original state is equivalent to the eradication of human pathologies.

When *Hygienists* defined disease as *remedial effort,* they had reference primarily to acute disease. Their view of chronic disease is well stated by Dr. George H. Taylor, who said of it: "Nor does it 'still educe good from seeming evil,' by doing a disagreeable, though perchance kind labor; but comes, with bare bones and jagged scythe, to hew by ineffectual inches." It is, however, not nearly as devoid of remedial processes as our *Hygienic* predecessors thought. Its cause is not, as some of the early *Hygienists* thought, "inwrought and compounded with the constitution itself," but is an integral part of the daily life of the individual. Chronic disease is commonly characterized by recurring crises, which are only symptoms of struggle, always imminent or present because those who suffer are constantly despoiling themselves. Chronic disease results from chronic provocation.

Hygienists early recognized that the suppression of acute disease is one of the chief causes of chronic disease. When poisonous matter has accumulated in the system to the point where it becomes a menace to life, the body makes a violent effort to cast it out and we have pain, inflammations, fevers, and the whole train of acute diseases. The poisons of the system and the poisons of the physician weaken the powers of the body and we have the less violent, but more protracted agonies of chronic disease. The struggle of the system to cast out its accumulated toxins continues so long as the organism remains alive. Every effort of nature is for health and the symptoms of disease are but the actions or powers of the body in expelling

toxins and remedying damages. It is the work of the *Hygienist* to facilitate these efforts, not by treatments, but by supplying appropriate physiological conditions.

The Occasions for Disease

CHAPTER XIX

Our ancestors said that sickness was of God, but there were also among them those who asserted that it was of the Devil. This is a delusional etiology; it has no relation to reality. The men of *science* say that it is due to the invasion of the body by foreign entities (germs and viruses), a concept identical with the demon etiology of the past. *Hygiene* teaches dependence on laws that govern the organic world, that health will be sustained so long as these are obeyed and that disease results from violations of the same laws. It is folly to argue that God is too good to disease anyone by miracle; disease is not the outworking of miracles. It is the consequence of violated law. Neither the Devil nor his imps can produce disease by miracles.

Disease is a biological process and, like all biological processes, develops and is carried out according to unchanging laws and principles, to violations of which are attached appropriate consequences. Disease, suffering and premature death are but the consequences of the infractions of the laws that regularly govern the processes of life. Thus the causes of disease are knowable and avoidable; hence, we must bear responsibility for our illnesses. The idea of the immateriality and unavoidability of disease, first promulgated by the ancient priest-craft, is still incarnate in the medical doctrine of the inevitability of sickness.

We hold that, when traced to ultimate causes, all disease is the inevitable consequence of living contrary to the laws of organic being and that diligence in conforming to the laws of life will assure good health. We contend that the great variety of pathological conditions which are evolved by man and the vast variety of causative factors leading to such evolutions are wholly due to deviations from the strict regimen which *Hygiene* arbitrarily enforces, violations of which are certain to result in pain, sickness and premature death.

Health and disease are not something extraneously given. They are inherent results. They result from opposite modes of living. We cannot do as we please, for some ways are superior to other ways. Only the superior ways produce superior health. Inferior ways destroy those who practice them.

The laws of nature are not only stamped into our very being, they are also stamped into our relationships with the whole of life and of nature. It is by our violation of the laws of relationship that we destroy ourselves. We are related to food, water, air, sunshine, other people, other forms of life, etc. We have one type of relationship to food and another type of relationship to poisons. We should know and understand these relationships and be guided accordingly.

As an entity, a living self-acting organism, man has a certain choice in the way he lives. He exercises autonomy. He can choose to use alcohol or to abstain, to be a vegetarian or to eat flesh, to take exercise or to remain idle, to live in the shade or out in the sun, to dissipate his sex energies or to conserve them, etc. He is free to choose his own way of life, but he is not free to choose the results. The consequences of his choice are "even the fruit of his own thoughts" and actions. Man either builds himself or destroys himself by the manner in which he lives.

Life is not a matter of "do this," and "don't do that." It is a matter of relationships. If a man gets into the right relationship, everything follows from that. Everything flows from the central loyalty. Health flows from loyalty to the legitimate, disease from loyalty to the illegitimate things of life.

All living is a curious mixture of right and wrong conduct--of good food and bad, of fresh air and foul, of conservation and dissipation, of cleanliness and uncleanness, of emotional irritation and emotional calm, etc. What we may denominate *physiological wrong doing* affects the whole organism. Whatever is inimical to our physiological welfare, even if only slightly so, should be recognized as contributing to the

cause of disease.

In obedience to what is apparently an irresistible law, we are compelled to infer a causal nexus or connection between antecedent and consequents that are essentially related. The causes of disease must be sought in the conditions and habits that men make for themselves. Health requires that all the vital functions be maintained in vigor and harmony of development; any failure in these functions marks the initial stage in the evolution of disease. The immediate cause of disease is that actual condition of the individual organism which necessitates the remedial effort. We call it immediate because it is within the organism and actually makes the remedial action necessary. This is a toxic state, growing out of enervation and depressed function.

Nature has made ample provision for the maintenance of pure blood, provided her laws are obeyed. Four of the principal organs of the body--lungs, liver, bowel and kidneys--are constantly engaged in the work of purification, so that if we would be careful to use only appropriate material and only as much of this as the vital organs can convert and utilize and if, at the same time we refuse to overwork, while cleanliness, proper rest and healthful exercise secure to us an abundant vigor, impurity of blood in a noteworthy degree would be impossible.

Waste and repair belong to health as well as to disease and processes are carried on easily and comfortably or slowly and laboriously, as the case may be, representing health on the one hand and disease on the other. The process of life is one of continual waste and repair. The organism is made up of the food eaten, water drunk and air breathed, which things become by use changed into substances which are poisonous if retained. The excretions from the bowels, lungs, liver and kidneys are the same substances in another form that we have eaten, drunk and breathed. As we took them in they were capable of sustaining life; but now that they have been used, they have been changed into unusable and poisonous impurities which must be promptly removed.

We can perform no action and perform no thought without using muscle or brain. In acting and thinking we use substance. Indeed, the ordinary vital action necessary to sustain life uses substance. This use gives rise to waste which must be carried out of the body, else it accumulates and, being toxic, may give rise to disease, or, if accumulated in sufficient amount, will result in death. The efficiency with which bodily waste is excreted is determined by the functioning power possessed by each individual and by any individual at a given time.

Living and non-living machines have one thing in common: namely, their work uses energy. Everything that tends to exhaust the vital resources of the body lowers its functioning powers and disposes it to the development of disease. When nerve energy is lowered, the weaker parts of the body are likely to falter most in their functions; but all parts are impaired more or less. When the vital forces are maintained at a low ebb, they are frittered away without accomplishing the best results. It would seem that we have a choice between a rapid expression of function (an acceleration of expenditure) with a consequent early exhaustion and the continuance of function (the ultimate aggregation of functioning power that is possible), which conserves the body's functioning span. What is often mistaken for a *superabundance of nervous energy* or a *surcharged condition* of the nerves is probably nothing other than nerve irritation, either of a toxic or of an emotional nature.

Lowered functioning power, a state which we call enervation, inhibits secretion and excretion, resulting in a slow accumulation of body waste in the fluids and tissues of the organism. Medical science does not include enervation in its etiology; it knows nothing of the inhibition of excretion that enervation produces and of the toxemia that results from inhibited excretion. It is busy searching the sun, moon and stars for causes of man's suffering. We say that toxemia, which grows out of inhibition of excretion, is the universal basic cause of disease; but we also say that toxemia has many causes. Toxemia is but a link in the chain of causes and effects. "It takes more than one blue-bird to make a spring," runs the old adage. It takes more than one bad habit to build a fatal disease.

Inflammation in any part of the body arises out of the same cause--toxemia. The enervation that checks elimination and evolves toxemia may be the result of any enervating cause or any number of such causes. Call the disease tonsillitis, endocarditis, gastritis, colitis, cystitis, metritis, cholangitis or inflammation of

the gall duct, pyorrhea, or by some other name--they all rest on a basis of toxemia.

There is at all times a normal amount of waste matter in the blood stream. This becomes a menace to health only when it is allowed to accumulate above a certain physiological maximum. When it accumulates above this point, the body establishes a channel of supplementary excretion to remove the waste matter from the fluids of the body. In childhood and early life, *intolerance* is the leading characteristic of the tissues. As a consequence, violent actions, occasioned by slight causes, are seen in children--sudden and fierce fevers, severe inflammations, etc., of short duration are characteristic of this time of life. With the passage of time, the tissues harden and lose their original sensitivity. They do not bear *irritation* better; they have merely lost enough of their native sensitivity that they act less promptly and less violently. Tolerance characterizes this period of life. Inflammations, fevers, etc., are less fierce, last longer and are less effective in resisting the sources of irritation.

Once established, toxemia is always established, unless enervating habits are discontinued. The longer toxemia has lasted and the more tissue deterioration has resulted, the greater is the time required for a return to health. Established as a chronic state as a result of the practice of enervating habits, toxemia itself lowers and impairs the functioning of all the organs of the body. Rest and a correction of the mode of living permits the restoration of normal secretion and excretion.

The immediate (proximate) causes of disease are so intimately connected with the disease itself that the two are frequently confounded and used indiscriminately, but they are really different. The needle in the finger, for example, and the inflammation which heals the prick are different. We need always to clearly distinguish between the condition that makes remedial action necessary and the remedial action itself. While remedial action never evolves without cause, cause may exist (due to toleration) for some time in advance of the evolution of the remedial activity.

We have now to consider the many ways in which man depletes his functioning energies. It may be said in general that any action, habit or indulgence that uses up energy in excess will lower his standard of functioning power and inhibit secretion and excretion, thus resulting not only in a toxic state of the body, but in impaired nutrition. In this view disease is largely the outgrowth of overindulgence. But it may also result from deficiency, so that we may say that its universal excesses and deficiencies (of which the whole human race is guilty) constitute the ultimate cause of man's suffering.

The three grand dominating functions of life are mind, nutrition and reproduction. Man tends to permit these three functions to run wild--destroying himself with his emotionalism, eating to excess and going to equal excesses in his sexual activities. When this brings discomfort, he seeks for palliation in poison. We could say that emotionalism, gluttony, debauchery and poison addiction constitute his four greatest offenses against his organism. By ignoring the higher faculties of his mind and leaving them without education, man is made into an eating, drinking and gain-getting animal who lives in his lower senses and is more mischievous and unhappy than the animals because he does not exist to be merely a brute.

Two reasons combine to cause men and women to indulge in health-destroying habits and practices in spite of their knowledge of the harmfulness of such habits. First, it is erroneously supposed that the most enjoyment is to be gained by catering to the common vices and that, second, however much the body may be impaired by such gratifications, there is a panacea for it in drugs. It is not generally understood and appreciated that every violation of the laws of life, however slight, inevitably lessens prematurely the capacity for normal action and long life, and so of physical enjoyment and consequent mental growth and happiness. If this were fully realized, the delusive belief in the *curative* power of drugs would soon be numbered among the superstitions that were.

It is well to keep in mind, in all considerations of this subject, that a large measure of the violations of the laws of life of which so many are more or less habitually guilty, are attributable to wrong direction and social expressions, more than to any overpowering individual tendency to depravity. A country's institutions are capable of exerting a far greater influence upon the physiological habits of the people than may at first be supposed. With its ignorance of relations and conventionalisms, society is forced to entertain a multitude of inefficient and diseased individuals as a penalty for the wrong to which it subjects them.

Dr. Taylor said: "Having become so perverted in natural instincts and perceptions, people mistake abnormal for normal desires and instead of granting a natural supply of the real needs of the body, artificial wants, to their detriment, are sedulously attended to. Strange to say, when they see that the ultimate results of such a course are evil only, they persistently pursue it--evidently because they care more for the present gratification of a false state than for an ultimate real good, more for animal enjoyment than mental."

In reality, a great loss of enjoyment is incurred, even in the present, by yielding to the promptings of perverted senses. The idea is erroneous that any sacrifice of enjoyment is required to live simply and healthfully. To the contrary, the plainest fare with a normal sense of taste affords more gustatory enjoyment and this of a higher order than an epicurian diet with a perverted taste. Strict adherence to *Hygienic* living soon renders the sense of taste normal and its exercise far more pleasurable, so that the sacrifice and loss is only on the side of those who fail to live in harmony with the laws of life.

Imprudencies in diet are perhaps, often more than anything else, responsible for indigestion, so-called "biliousness," diarrhea, gas, gastric discomfort, "heart burn," and a host of other symptoms of which so many millions constantly complain. We cook and season our foods so that we are tempted to gluttony; we eat the flesh and fat of animals that have been made sick by our methods of caring for them; we glut ourselves on foods that have been processed, refined and adulterated to such an extent that they are unfit for human consumption. Danger resides in certain of the residues of such foods. Surfeit leads to boredom and nausea. An overflow of nutrition would seem to lead to an overflow of development into pathological channels. Can gluttony or intemperance claim a single virtue and is there among us a single phase of character to be admired that has these as its source? We remember the virtues that endear the good, but we cannot forget the vices that deform the bad.

When a man dies of habitual gluttony, his friends are likely to attribute his death to the "inscrutable ways of God." The "mysterious Providence" upon which they are prone to lay the blame for so much of their suffering is none other than their own folly. Their suffering and premature death is the natural result of their own false ways of life.

We suggest that the large quantities of lard, butter, sugar, candies, common salt, spices, condiments, which are habitually and almost universally taken, most of which cannot be transformed into structure, are evident and alarming causes of disease. These occasion irritation of the digestive tract, inhibit the digestion of food and cause other troubles that could be avoided by simply leaving them out of our diet.

The inordinate seeking after cultivated enjoyments, especially those that afford the senses unnatural or abnormal excitations, must, with great certainty, induce a state of organic weakness and cripple the functions of life. We have devised an almost infinite variety of means of affecting the manifestations of life, of increasing pleasure and pain, and thus have multiplied the causes of disease. Disease evolves because we overstep our limitations, because we enjoy beyond our power to recuperate. Our arrangements for civilized living are incongruous and are not subjected to reason.

Our sensational life, particularly that part of it that affords us pleasure, is permitted to dominate our activities so that life is turned into a frantic search for excitements and thrills that waste our energies. We suffer many unnecessary pains and great weakness because of excessive indulgence in pleasures, many of them artificial. Youth is often thoughtless. The present is everything. To enjoy the present, they will borrow from the future at a most fearful rate. Then, when the inevitable pay-day arrives, they are often unwilling to believe that they have overdrawn upon the bank of life. It is folly to think that because you seem always to have plenty of energy, your supply is inexhaustible.

In modern society, as Taylor said, men, in their hot pursuit of passion, are impelled headlong into all manner of improper actions (perhaps we should stress the excesses of action as well) and, of course, must pay for their follies by suffering their legitimate results. Ignorant and heedless of these causes of suffering and being taught that their suffering is due to foreign invasions (evil spirits, malevolent germs, malignant viruses), they accept any proffered *therapeutic* recourse, when ill, and continue the very course of action that is responsible for their functional impairment and toxemic saturation.

Truly did Taylor say that "it is highly derogatory to man that he permits the preponderance of the lower

functions to subject the whole being to their partial (or excessive) and perverted action. He forgets and forsakes the nobleness of nature he possesses in higher capacities. And still further does he mistake in attempting recovery by any system of treatment that omits the important necessity of 'learning to be wise.' Health to all such is but an accident, and its possessor cannot claim any merit in its possession."

It is probably true, as Dr. Taylor thought, that the benefits and ills of life are more nearly balanced than the cursory observer thinks since, as he said, the capacity for either is co-extensive. But, also, as he pointed out, by knowledge and forethought, we can so order our pleasures that we avoid the ills of excess. Daily we dose ourselves with *stimulants* (tea, coffee, poisoned soft drinks) and *narcotics* (tobacco, alcohol and other drugs); we exhaust ourselves by debauchery; we turn our nights into days and carry our activities far into the night and when we have made ourselves sick by such abnormal practices, we permit physicians to convince us that our sufferings are due to germs and viruses and are to be remedied by further and added violations of the laws of life--by poisoning. We support a large army of respectable charlatans who batten off the sick and add to their mischief and misery by dosing them with virulent poisons.

We destroy ourselves by our work. The "high pressure" principle upon which so many men and women work their brains and abuse their bodies induces an irritable state of the nervous system. The tight, deadly gripping struggle of competition, the whirl of business, the rivalries of trade, the controversies of theology, the strifes of politics, the interminable din of cities, the roar of buses and trucks, the honking of horns, the long hours of toil, the infelicities and discords of domestic life, the exigencies of the weather, the drag of habits that are destructive, all add up to an excessive tax upon the energies of life.

To work is good, but self-destruction by labor is as wicked as any other mode of suicide. Care, trouble, anxiety, sorrow and irritation of mind exhaust the nervous power. We should resolutely set them aside, get out of them or escape from them. Avoid gloomy conversation and thoughts. Shun repulsive occupation and unpleasant society. Labor, or otherwise exercise, but always in some pleasant way, so as to produce moderate fatigue, but not exhaustion.

Whether a habit is healthful or unhealthful must be decided in the light of true knowledge, rather than on isolated experience. "It doesn't hurt me," is the rejoinder most frequently made when someone is cautioned against the use of tobacco, alcohol or coffee. The alcoholic habitue says: "Whiskey (or beer) does not hurt me." The smoker says: "Tobacco does me no harm." The young lady who fills up day after day on mince pie and pickles, mustard and pepper sauce, rich pastry and confectionery, and indulges in the fashionable dinners, says, when remonstrated with about her reckless squandering of her health: "Oh, it's so charming and it doesn't hurt me."

Is it not strange that these same people can often see that these same indulgences are harmful, even fatally injurious to others, but that they will not admit that there is any harm in their own case? The drinker sees every day of his life the wrecked bodies and shortened lives of drinkers--he may even call the other man a fool for getting drunk; the young lady observes many of her girl friends dropping one after another into premature graves or lingering on for years in hopeless invalidism, health, beauty and happiness sacrificed on the altar of perverted appetites--yet she still persists in claiming that commission of the very same follies does her no harm.

One of the best lessons any of us can learn is that in all essential particulars we are but counterparts of every other member of the human family. We have the same organs and functions, the same basic needs and are subject to the same laws and injured by the same indulgences. If a certain harmful practice is injurious to others, by what rule of reason do we claim to be an exception? None of us ever claim to be exempt from the law of gravity--why shall we claim exemption from the operation of any other law of nature?

The *medical* world, having created a host of specific diseases, searches for a specific cause for each of these and fails to recognize the many impairing influences in the life of the individual that collectively constitute cause. Results are never the issue of one cause. They are the issue of combined causes. This is to say, cause is made up of a number of correlated antecedents or factor-elements. One of these is pivotal; none of the others are negligible. Hence, full recovery of health depends upon correcting and removing all

of the elements of cause.

Instead of recognizing the impairment of structure and function as the basic pathologic state which should be corrected as a whole to the end that health may be restored, the various more or less distinct symptom-complexes that rest upon this pathologic substratum are regarded as themselves the primal deviation from the healthy standard and each one is to be cured separately by "specific" treatment. As a result of this loose thinking, the line between cause and effect is blurred or distorted for most people. Developments and events that are only symptomatic effects of the real, basic cause of the present widespread or systemic impairment and degeneration are viewed as major causes in themselves.

The complexity of results depends to a great extent upon the relative unfitness of the mode of life of the individual. Montaigne speaks of the simplicity of the diseases which affected the peasantry of his neighborhood, of the few complaints from which they suffered compared with the greater variety of diseases, with learned names, with which the aristocracy were accustomed to suffer. This could only mean that the simple vices of the peasantry resulted in simple diseases while the grosser and more complicated vices of the aristocracy produced more complex diseases.

There was considerable confusion among early *Hygienists* about how disease is caused. In his masterly work on *Human Physiology, the Basis of Sanitary and Social Science,* Dr. T. L. Nichols well defines the confusion and differences of views as to the cause of disease that existed among the Hygienists. He points out that there were those who regarded disease as the result of a diminution of the nervous power or vital force (Jennings and Gove), while another group held that the blood is life and the impurity in the blood is the cause of all disease action (Trall). Nichols himself, anticipating Tilden by several years, adds: "But good blood cannot be formed without sufficient vital or nervous power; and good blood is necessary to the healthy action of the brain and nervous system. Here is reciprocal action, each depending upon the other . . . Waste matter, retained in the human system is a *materies morbis,* and there are many kinds of blood poisoning."

The results or effects of repeated violations of the laws of life are accumulative--the body's functioning energy is wasted, the organs of excretion overtaxed, the blood becomes saturated with accumulated waste (our predecessors called them "ingenerated poisons"), nutrition or metabolism is impaired--and a condition of the body is reached which necessitates the development of remedial action (a crisis) to throw off the accumulated toxic material. Violations of the laws of being are the last or ultimate analysis of all the causes and are, therefore, fundamental.

Strangely enough, while men fear all kinds of fictional causes of disease, they appear to have no fear of the real causes. While the real causes of organic and functional impairment are operating to prepare the organism for or to necessitate disease action, they fancy themselves secure; but a little cool air frightens them out of their wits. They dread the crisis, which may be precipitated by an unusual meal, a slight exposure, etc., but fear not the causes that make the crisis inevitable.

The sources from which great evils arise, like the sources of great rivers, are hardly noticeable. The sproutings of wrong living in human society, when compared with the accumulated wretchedness which results from it, seem as insignificant as the acorn in comparison to the great oak. The causes which operate to produce human suffering and human degeneracy are not often, in their inception and first stages, self-evidently injurious, but, on the contrary, are often insinuating and treacherous. The first effect may seem to be satisfactory and even agreeable. Especially is this true in the case of excesses in the normal things of life and in the case of *narcotics* and *stimulants.* When once these latter are indulged, there follows a soothing influence--a sensuous delight--which casts glamour over the judgment and makes the victim happy and contented. As one dope addict expressed it: "Dope makes everything wonderful at first. You are not afraid of anything; you think you can jump over a mountain or be like a Toscanini. But you can't."

In elevating non-human standards and worshipping non-human images, we have violated the laws of our being and disregarded the oracle of our inner selves. We have compelled the being that is man to bow to standards that belong not to his high status, to submit to regulations and cultivate gross habits that not even the beasts of the field respect. We have spilled rivers of blood in support of the "divine right of kings," for "God and our country;" we have spilled oceans of animal blood that we might eat of their flesh; we have

enslaved men and women and exploited them unmercifully; we have marred and scarred the face of the earth in the name of progress; we have departed from the simple, peaceful ways of nature and built a hell on earth.

Let us not talk of iron chains, nor yet of physical starvation and thirst! What are these but faint types of starvation, the bitterness and the slavery that man creates for himself by his disobedience to the laws of nature? Words are all too weak to describe the suffering man inflicts upon himself. How often is a smile on the face employed to camouflage the canker that is gnawing at the heart!

Why should a high degree of civilization uniformly produce an exaltation and exacerbation of every form of disease known to the primitive condition of man, while at the same time new ills whose name is legion come into being before us? Why is civilized life fruitful in ill health and the army of the diseased always in proportion to the army of physicians?

What we are pleased to call the "progress of modern science" has been, in many ways, a health-destroying influence. Scientists have hitched their chariot to the will-o-the-wisp of industrialism instead of the pole-star of human well-being. Thus the control man has gained over nature has been perverted into means of destruction. Our engineers have turned out myriads of labor-saving devices and these have been made to supercede the use and development of the powers of the body and mind. Man is fast degenerating into a puny, undeveloped tender of machines. No longer does the performance of the common duties of life contribute to his development. The consequence is that his powers must languish; they also are exercised in unprofitable and illegitimate ways.

While *scientists* maintain a steady stream of propaganda designed to convince the people that scientists are useful individuals and are performing useful functions, they continue to turn out in the form of nuclear bombs, virulent drugs and other agents of destruction, things that will ultimately spell the doom of mankind. Most of their productions are of a destructive character and one is not far wrong in saying that if mankind does not destroy its *scientists*, the *scientists* will destroy mankind.

"It is impossible," wrote Dr. Taylor, "for people to know, with their present habits and prejudices, how much of their diseases are attributable directly to the use of drugs, sometimes as medicines, and often under the guise of aliment; and it cannot be too often or strongly impressed, that everything that is not strictly alimentary, and necessary to form and replace tissues, must tax, obstruct, excite, and wear unduly the delicate organs that are forced to transmit or otherwise dispose of it. How much of the physical lassitude and inefficiency, so much complained of, is owing to the immense and undue labor the body functions are compelled to do to sustain themselves under the burdens forced upon them! These causes are so insiduous that they elude often our ken--while the sufferer has no idea but that he is doing the bidding of the Highest. In diet, no test is brought to bear but that of *perverted* instincts--in medicine, that of present transient sensations-both equally illusory. Occasionally an aggravated case comes under our notice of disease *manifestly caused* by medicine, which serves as a marked illustration of our principles."

However favorable the transient impulse apparently given the system by the introduction of *irritating* and noxious substances into the blood and other tissues, the body soon loses its "susceptibility" and ceases to *respond* to their presence. The tissues are literally worn out by the process and are too weak to act at all or can act but feebly. The result may be every nameable disease. Where the people are accustomed to taking much "medicine," there does chronic disease abound. Here, as elsewhere, there exists a relation of equality between cause and effects.

It is to be feared that the buoyant, springing life of health which cheers one up with an ever sustaining zest in the midst of arduous effort is unknown to the tobacco user. He may have delicious dreams at times amid the intoxication of the weed, but he pays dearly for them in the evils we are numerating. The steady, even flow of joyful health cannot depend upon a hat full of cigars.

Nature often withholds unheeded warnings, as when she ceases her violent protests against tobacco or alcohol and we are forced to seek for causes through several indirect sources. The ways in which people accustom themselves to the use of tobacco is one of the strongest proofs of its poisonous character. It is only by stealing upon, by a little by little process, and gradually debauching the powers of life that anyone

can take it.

The Unity of Disease

CHAPTER XX

We are confronted with a woman who has been sick for years and has "suffered many things of many physicians." She has asthma, colitis, a gastric ulcer, neuritis, inflammation of the neck of the womb (endocervicitis), headaches, backaches, and does not sleep well. Has she many diseases or is she merely a sick woman? Are we confronted with a number of separate and distinct entities or with varied local states of one systemic impairment? Is there one cause for metritis, another for colitis, another for ulcer, another for asthma and still another for insomnia? If we are going to treat her for several diseases, where do we begin? Do we treat the neuritis first or the asthma? Do we treat the uterus first or the stomach? Do we treat her for a variety of different diseases, each having its own cause and requiring a different treatment; do we farm her out among a variety of specialists, or can we think of all the so-called diseases as having a common cause, as being in other words, successive and concomitant evolutions out of the same persistent and increasing toxemia?

Do these several so-called diseases arise out of a cause that has existed from the beginning and still exists, the removal of which will permit the body to heal all of its local impairments? The reader, coming for the first time in contact with such a question, may perhaps be puzzled. Instead of treatment, the *Hygienist* would put the woman to bed and stop all food until she is comfortable and her secretions are normal, after which light eating would be adhered to for some time. The results of this plan of care are such as to justify the conclusion that no form of care that does not have as its most important objective the elimination of toxemia, of intrinsic origin and effect, can give dependable and lasting results.

A child frequently develops colds. It develops sore throat, tonsillitis, bronchitis, pneumonia, all of which are *cured,* and soon followed by another cold, another tonsillitis, another bronchitis, and this process continues until chronic disease of the lungs evolves. Or he may develop disease of the stomach, bowels, kidneys, etc. The fact is that, from the outset (that is, from the first cold), the child has not been well. Why? For the reason that the causes of organic impairment have not been corrected.

All diseases are one. Enervation develops out of wrong habits of living, secretion and excretion are checked and acute disease evolves. These crises are evanescent--the patients get well. They are said to be cured. They pass from under the care of their physicians, but continue to practice the same physical and mental habits that led to the evolution of the acute disease. Another so-called acute disease develops; it soon ends and the patient is again said to have been *cured* and the same wrong habits are returned to. This continues until chronic disease evolves.

Physicians are kept busy treating acute diseases and converting these into chronic diseases. They speak of *curing* these evanescent crises, but they should know that no health is ever returned to until the causes that are impairing it are corrected or removed. Chronic toxemia begins in infancy or childhood with never a complete respite from one or all symptoms. Pathology is a direct evolution out of the impairment of organic or physiological function--a result of the lowering of functioning power by enervating ways of living.

All so-called diseases are related. They vary symptomatically in keeping with the histological structure and function of the organ involved. Inflammation of the brain gives rise to certain symptoms, while inflammation of the stomach gives rise to other symptoms. The symptoms vary, not because the inflammation varies, but because the organs and functions are different. Even the standard symptom-complexes vary with the individual cases. No two are replicas of each other. They are modified by individual factors, by personal habits, by environment, by treatment and other factors. Treatment is a common cause of complications and intensifications.

In the common practice of medicine, a "local disease" does not seem to be recognized as a symptom of a general disease. This inevitably leads to a very partial, not to a panoramic view of things. Illness is general, yet there are many localized symptoms and pathologies to which specific names are attached. Each varying symptom-complex is named and treated as a separate and distinct (a specific) disease, but the intelligent student of pathology should know that all pathologies are fundamentally the same. Until the clinicians comprehend the unity of disease, they will continue to go in circles in a symptomatologic jungle.

Studying all the symptoms that have been so carefully and painstakingly sorted out and compiled into complexes and catalogued as so many distinct or specific diseases; watching the confusion created by physicians of high and low degrees, in their efforts to diagnose and cure, we cannot help but think that a recognition of the essential unity of all pathology would bring order out of all this chaos. Every part of the body is alive and has its own individual life and pathology--hence it is that each tissue or each organ lends its own individuality to pathological developments.

The folly of creating many diseases out of one is nowhere better illustrated than in the case of the man who has a very severe "cold." He may have inflammation of the eyes (conjunctivitis), inflammation of the nose (rhinitis), inflammation of the pharynx (pharyngitis), inflammation of one or more nasal sinuses (sinusitis), inflammation of the larynx (laryngitis), inflammation of the bronchial tubes (bronchitis), and inflammation of the tonsils (tonsillitis). The layman would say that the man is suffering with a severe cold; the physician, with his penchant for dividing pathology and naming a separate disease after each quarter of an inch of anatomy, would name the separate diseases just enumerated. Instead of a common cold, the man with a headache, running eyes and nose, stuffiness in the nose and difficulty in breathing, huskiness of the voice, soreness of the throat, drainage of the sinuses and coughing and sneezing, would have quite a variety of diseases. Yet, in point of fact, in spite of all the names that would be attached to the symptoms, he would simply be sick. Every so-called disease named above and many more unnamed in this list are but different "local" phases of chronic toxemia.

A similar picture of the confusion that results from naming the same condition in different locations as different diseases may be seen in colitis. The colon is a lengthy organ with several parts, and inflammation may occur in any of its parts, giving occasion for several names. We will take but two: inflammation of the sigmoid is called sigmoiditis; inflammation of the rectum is called proctitis. There is no line of demarcation between the sigmoid and the rectum. If in sigmoiditis the inflammation extends but a quarter of an inch over an imaginary line into the rectum, the patient would have two diseases--sigmoiditis and proctitis. It may work the other way around. In proctitis, if the inflammation extends a quarter of an inch over the same imaginary line into the sigmoid, the patient has sigmoiditis in addition to proctitis. This same merging of one disease into another may be seen in the heart, in the stomach, intestine and gall bladder, in the genito-urinary tract, giving rise to many so-called diseases. This is mere logomachy. Basically, there is but one disease. What particular organ is affected or what special form the pathology may assume and what special name may be attached to it is of little consequence. The so-called disease is always an expression of one fundamental cause, to which may be super-added a number of complicating supplementary causes.

It should be obvious that there is no such thing as a specific disease. Every so-called disease is symptomatic of functional and structural impairment and alterations of the body, depending entirely upon the mental and physical activity of the sick individual.

What we have said of the relationships of so-called diseases is equally true of septic infection--they vary symptomatically with the histological structure and its function. Infection of the brain is characterized by sleeping sickness; infection of the heart is characterized by symptoms of heart disease. Septic infection is an omnific influence and it does not matter from what source it is derived. It may come from a cadaver, from a calf (vaccine), from a focal point--a bubo, a chancre, a ruptured appendix--from putrefaction in the digestive tract, from spoiled food, a cancerous degeneration; its malignancy depends upon the amount absorbed and the speed with which it is absorbed. If its entrance is into the peritoneum, speedy death may result; if it is upon the arm, as in vaccination, it may spend itself locally; if it enters the circulation, sleeping-sickness may result. Its absorption may speed up any incipient pathology. The lymphatic glands of great numbers of children are on the defensive all through infancy and childhood because of gastro-intestinal fermentation and putrefaction. Many of these children evolve tuberculosis.

The human organism is an indivisible whole and anything that tends to interfere with the unity of its structure or the unity of its function becomes a factor in the causation of disease. What if the symptoms resemble chronic appendicitis or colitis or gastritis or ovaritis or neuritis or arthritis or indigestion or nervousness or sleeplessness or headache or jaundice or heart disease or Bright's disease or a lump in the breast or cancer? What if they resemble any of the acute inflammations, either obscure or out in the open? What if it is thought that it is a surgical case or one that needs psychoanalytic care? Whether the diagnosis is positive or open to question as to differentiation or degree of intensity, the doubts, the fears, the panics can be dispensed with in almost all cases by the simple process of eliminating the accumulated toxins. Recognizing the unity of disease and the unity of cause greatly simplifies the work of caring for the sick.

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Evolution of Disease

CHAPTER XXI

Dr. Jennings was not the first to suggest the unity of disease, but he was undoubtedly the first to apply the principle of evolution to pathology. Since his day it has been the *Hygienic* position that there is a progressive evolution of pathology, beginning with its initial stages in infancy or early childhood and proceeding in unbroken continuity as a chain of united and interdependent sequences throughout the life of the individual, until its ending in apoplexy or cancer in middle life or thereafter.

A cold, said Tilden, "is the proximal symptom of a complex whose distal symptom is cancer, when not tuberculosis or some other fatal degenerating malady. The intermediate symptoms are the so-called acute diseases. Few people can withstand the ravages of the severe types of the interpolated so-called diseases, which are nothing more than crises of toxemia . . ." He pointed out that these crises in toxemia, which *medical science* has metamorphosed into special entitative and distinct individual diseases, are but the self-cleansing efforts of the body.

The persistance of pathological evolution results necessarily from persistent causation. It has been said that "God cannot make a two-year-old colt in a minute." Every growth requires time for its completion. It requires time to develop habits that influence life. Cancer, Bright's disease, apoplexy or other fatal malady, is in evolution for years. They are not of sudden development. Such factors as time, tolerance, resistance, habit and metabolic change determine the character of the symptomatic developments, although these grow, as previously stressed, out of a common basic cause. Pathologists have been so busy studying special pathology and describing the pathological fragments thus created, that they have not had time to watch the step by step and stage by stage evolution of the total pathological process.

Literally, the term *pathology* means a treatise on disease. It is defined as a science of disease. We are not here interested in the evolution of science, but in the evolution of disease. *Evolution* is a continuous development distinguished by each stage growing out of the one before and merging into the succeeding one. Commonly there is progression from simple beginnings to complex endings. The process is marked by continuity and variation.

In *pathological evolution* we witness a continuous growth of pathological development from simple to complex forms. Pathological evolution may be properly described as a cumulative evolution, accompanied by divergences that lead to several progressive modifications of the initial pathology. Only in a slight degree is pathological evolution orthogenic (in a straight line), but it may be in another sense, often parallel, even polytypical.

There is invariable order in the evolution of pathology. When their sequence and relationship are adequately understood, it will be seen that an unbroken line of pathological evolution reaches from its initial beginnings in infancy to the final ending in later life. Before we can understand this orderly development of abnormal changes in the structures and functions of the body, it is essential that we understand that there must first be a cause for all of these developments. Pathology is not an uncaused series of phenomena. Both the symptoms and the pathological developments must be considered as causally linked to preceding and succeeding steps in terms of chains of causes and effects. The continuity of pathological developments, once it has been adequately realized, will bring order out of the present chaos.

In each pathological development, one part is before and another part is after. When we lack a clear conception of causal relations, we fail to understand regular or invariable sequence--we are prone to attempt to explain these sequences by a superficial concomitance or accidental resemblance. So long as our attention is fixed upon merely adventitious elements in this chain of causation and we fail to recognize

enervation and toxemia as basic cause, we will fail in all our efforts to remove cause.

We are asked: why must enervation precede toxemia? The answer is that, so long as nerve energy (functioning power) is adequate, excretion will keep the fluids and tissues sweet and clean and no toxemia can develop. Adequate functioning power is a sure guarantee of purity of blood. If elimination is not checked, toxemia will not evolve. This is in line with our previous statement that in every pathological development, one part is before and another part is after. The sequence is invariable. This is not to say that extraneous poisoning, such as drug poisoning, cannot occur in the absence of enervation; but this is not what is meant by toxemia, nor is such poisoning the cause of the diseases with which mankind suffers.

The popular notion that a man may be healthy one minute and sick the next, that we may dine with a healthy man at noon one day and attend his funeral the next--"sudden death" from heart disease,

cerebral hemorrhage, etc.--is based on the mistaken assumption that disease may suddenly evolve, that a serious pathological state may exist without previous preparation. In the special pathologies that have been created by the medical profession and that have received individuality and names and are regarded as *entities,* there is no background, no causal connection of the fully-evolved pathology with previous pathologies. One incident does not connect with another; one development does not lay the groundwork for the next. Of chronology there is but faint trace. Nowhere do we find a starting point. There is no effort to trace out what happened (developed) from time to time, from point to point, from stage to stage, in any pathological evolution.

Pathology must have a beginning somewhere and wherever this is, here is the place for us to start our studies. Studies of pathology that are carried on at necropsy are too late to have any significance for us.

In all cases of serious organic disease, such as Bright's disease, diabetes, heart disease, apoplexy, paralysis agitans, etc., etc., there have been premonitions without number, dating far back in the life of the patient, which would have enabled the patient to have prevented the evolution of the disease, had the premonitions been understood and heeded. I am convinced that detailed studies of the life and pathological history of a sufficient number of cases will enable us to predetermine the direction in which the pathological evolution is headed.

When toxemia and gastro-intestinal infection become established, the *diseases of predisposition* (diathesis) evolve. How do we discover that an individual has a tendency to the development of a particular disease? We discover it only when he has evolved the said disease. If a child frequently develops a sore throat, we say that he has a tendency to develop sore throat. How else would we know this? But these early crises and early stages of chronic disease would point in particular directions if we had a sufficient number of life histories of pathological evolutions to enable us to understand their meaning.

Between the first cold of infancy and death from cancer in middle life, there are intermediate complexes and symptoms galore--colds, coughs, sore throats, constipation, diarrhea, headache, tired feeling, grouchiness, apprehension, restlessness, sleeplessness, bad breath, coated tongue, languor, a sense of weariness over the eyes, depression of the whole body towards noon, commonly met with a *stimulant,* intolerable *ennui,* other aches and pains, and many so-called acute diseases, all of which are but crises in toxemia.

Catarrhal inflammation--a cold, gastritis, inflammation of the tonsils, etc.--are but crises in toxemia. Organic change is an ending resulting from repeated toxemic crises, causing functional irritation, inflammation, enlargement, enduration and degeneration, which may be tumor, cancer, tuberculosis and death from septicemia. Repeated for months and years, catarrhal inflammations end in chronic catarrh of the nasal passages, ulceration, hay fever and other so-called nasal diseases. Tonsillitis ends in chronic thickening and enlargement. Repeated crises in the stomach end in ulceration and cancer. Frequent diarrhea with intermittent constipation ends in chronic colitis, ulcerative colitis, polyps and cancer.

The first deviation from health is a gradually developing enervation resulting from enervating mental and physical habits. So long as enervation and checked secretion and excretion persist, there is a general

inability of the organs of the body to function normally. The toxemic state slowly devitalizes the tissues over a period of years, resulting in delayed healing and degeneration of injured or devitalized parts. The varying symptom-complexes, starting with enervation and progressing to toxemia and impaired nutrition, with a gradual deterioration of the entire system, and ending finally in ulceration, enduration and fungation (cancer) is a long, drawn-out pathological evolution with a continuous degeneration of tissue. "The sum of the symptoms," wrote Tilden, "of all so-called diseases make up the symptomatology of toxemia.." Instead of these crises being the cause of the succeeding pathological states, they are constituents of the total pathology. One pathology is no more the cause of another pathology than speaking and answering cause conversation. They are parts of the course of pathology, not its cause.

The principle of *unity* and *continuity* has not been applied to pathological evolutions sufficiently long and too few men have devoted themselves to it for us to have traced out all the gradations of development, from its first indistinct and imperceptible rudiments, through all the multiplicity of developments to its final endings in pathology of such magnitude that life is no longer possible. Arising, as it were, out of enervation and toxemia as the pathological substratum, by infinitely minute degrees, stage after stage of pathology evolves and thus, onward and downward, are the lowest stages of pathology--the end points that result in death--arrived at. The organism gradually deteriorates under this continued and mounting toxic saturation and various organs show change.

It is not difficult to trace almost imperceptible gradations of pathology in the bodies of the sick until we arrive at the most advanced stages of pathological evolution. If, in our present state of knowledge, we are compelled to leap over many intermediate stages in pathological evolution and progress from one stage to another by observing largely the more distinct steps, the future will fill in the gaps and provide our successors with fuller knowledge than we now possess.

Evolutionary pathology, which belongs to the *Hygienic System,* rests squarely on the fact of a breach of the laws of being that govern the behavior of organisms in their relations to each other and to their environment. It involves the mal-observance of the fundamental laws that underlie the world of life and it can be shown in a thousand ways that disobedience to the laws of organic existence produces evil results. Violated law leads, in the first place, to an abnormal metabolism and thence by self-poisoning, to weakness, decline and premature death. Along the way there is the evolution of monstrosities and cancer.

Pathological developments in each individual case are in line with tendencies or *diatheses.* It is probable that the pathological tendencies of the individual always arise out of actual defects or disharmonies within the individual. Every deviation from normal relations in living structure is defect and deformity; in the vital functions it is disease. However much a so-called disease in one person may have in common with the "same" disease in another individual, because of a common source of disease and a common organ-functional complex, it is different by as much as the organisms differ. This is not to say, however, that there are no other factors that add to the differences between the two "diseases." Unfortunately, those hereditary weaknesses that constitute pre-dispositions are not to be dreaded merely as contributing factors in the production of disease, but also because of the obstacles which they throw in the way of permanent recovery.

We need only to know the conditions under which organic integration flourishes in order to understand the conditions under which integration languishes and is transformed into one or another form of disintegration. For want of nothing but knowledge of the right ways and the proper opportunity for development, present generations are not half developed, either in body or in mind; the young are marred and scarred saplings, whose later years will evince distortions of body and mind resulting from the injurious care and treatment of the earlier years.

Many things in the daily life of man will precipitate a crisis in the profoundly enervated and toxemic. If they are also infected with intestinal putrescence, the crisis may be a very severe one. Variegated as the symptom-complexes called diseases appear, variegated as the symptomatology of even one of these complexes may be, they all rest on the solid foundation of toxemia which has resulted from checked excretion growing out of enervation.

When any portion of the mucous membrane of the body is requisitioned to do vicarious duty for the

normal organs of elimination, which have had their functions lowered by enervation, we have a so-called catarrhal disease. When, by practicing enervating habits of body and mind, the individual has established chronic catarrh of the intestinal, respiratory and genito-urinary tracts, he is in line for the development of a wide variety of symptom complexes, ranging from a cold through tonsillitis, pharyngitis, laryngitis and bronchitis to hay fever, asthma, polyps, pneumonia, bronchiectasis and tuberculosis, from gastritis through constipation and diarrhea, to simple colitis, ulcerative colitis, gastric ulcer, intestinal polyps and cancer; from metritis and leukorrhea or cystitis, through ovaritis, cervicitis, to uterine polyps and cancer; from simple urethritis through cystitis, nephritis, ulcers of the womb and bladder, to stones in the kidneys and cancer; from cholecystitis to simple hepatitis; through gall stones and jaundice to cancer of the gall bladder or liver. All chronic diseases evolve out of frequently repeated crises in toxemia--this is to say, out of acute diseases. Enervating habits, to which are added habitual overeating, wrong eating, drug habits and drug treatments, lead on and on, step by step, from simple toxemic crises to the most formidable diseases of the nosology. Unless the enervating habits are corrected the enervation increases, toxemia grows greater and a slow but progressive degeneration of the mucous membranes, blood vessels, heart, lymph and other organs of the body takes place.

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Not a Cure

CHAPTER XXII

In the *Transactions of the State Medical Society of Michigan* for 1872 (pp. 85-6) are the following significant words: "Every intelligent physician feels the want of a science of therapeutics. All the other branches of medicine have attained a respectable scientific basis, but the science of cure, if there be one, has eluded all search. Medical practice is largely empirical . . . With intelligent people, the Homeopath, the Hydropath, and the Eclectic receive their full share of patronage . . . In the older communities, where general education is more extensive, these same pathies do not fade away, but the contrary. Add to this the claim that the results of their practices are at least as favorable as ours, taken as a whole, which we cannot disprove, and we cannot fail to see that we are held at a disadvantage."

This confession that they had no science of *cure* could be made today with equal truth. A few years previous to the publication of the *Transactions* a resolution was adopted at the annual meeting of the American Medical Association in St. Louis in which the living teachers and leading minds of the profession charged that medicine was "erroneous in theory and fatal in practice." Thus they agreed with the *Hygienists* of the era who opposed the medical system because they believed it to be false and, as they declared, had no scientific basis. They declared the whole drug medical system to be in opposition to nature, at war with the living organism and disastrous in practice.

Trall answered the lament of the Michigan physicians over their lack of a *science of cure* in these words: "But the underlying question is: should disease be cured? We say no. And we challenge all the medical men of all the earth to prove the affirmative. When they will show that diseases ought to be cured, we will thenceforth be as zealous advocates for drug medication as we now are for hygienic medication.

"What is disease that it should be cured? If it is a fiend, demon, ghost or goblin, anything supernatural, cure it or kill it by all means. If it is any foreign substance, entity or force--anything preternatural, ditto. In either case, arrest it, suppress it, subdue it, cast it out, cure it, kill it--anything to get rid of it. Bleed, blister, dose, poison the blood, saturate the vital organs with drugs of every name and nature and with potencies of high and low degree; some of them may hit it and kill it and that is curing it.

"But what about the patient? Every dose is a war on his vitality. And all the dosing and drugging is one stupendous blunder. *Diseases* should not be cured. It is the patient that should be cured. Disease is an effort of the vital organism to recover the normal condition."

Here was the real challenge to the men of medicine, of all schools, and they failed to meet it. They have persisted in their refusal to even consider the question: *should disease be cured?* That it should be *cured* follows logically from their vague conception of its essential nature as an adventitious and exotic foe that had attacked the organism. To this date, disease is an attack upon the body, so far as medical theory and practice is concerned.

To *cure* disease, the sick have been poisoned, blistered, puked, purged, electrocuted, bled, transfused, cupped, leeched, irradiated, cut on, buried up to their necks in mud, burned, pricked, tortured, whipped, baked, broiled, frozen, steamed, mauled, pulled, twisted, punched, had pus put into their bodies, have been stung by bees, had the venom of snakes injected into them and subjected to so many and such evil abuses, all in the name of *cure,* that to catalogue all of these means of abusing the sick would be the work of a lifetime.

The means that have been adopted with which to treat the diseases of man are as varied as the imaginations of physicians are credulous. Some forms of treatment are so strenuous as to be worse offenders against the integrity of the organism than are the original causes of the patient's troubles. The

popular mode of expressing this fact is to say that the cure is worse than the disease. The sands of time are strewn with the wrecks of such cures. The same sands are strewn with the skeletons of those who died prematurely because of these *cures.*

Funk and Wagnall's *New Standard Dictionary of the English Language* defines *cure* to mean "the return to a healthy or sound condition . . . to get rid of by treatment . . . as, to cure a patient of pneumonia or a sore hand." Dorland's *Medical Dictionary* defines *cure* to mean "the successful treatment of a disease or wound . . . a system of treating disease . . . a medicine effective in treating disease." In these definitions by the two dictionaries there are two definitions of *cure.* The first definition given by Funk and Wagnalls implies a reinstatement of health in an organism that is suffering with disease. The remaining definitions of both dictionaries imply that a *cure* is a process or an agent that works upon the body from without. They have reference to external means whereby, it is assumed, health is restored--it is supposed to be some defect supplied or means wrought or foreign or external aid. The sick man is treated and physicked in the confident assurance that he is fitted and burnished for new service. It is assumed that those symptoms which we call disease are necessarily and "invariably evidences of a destructive process and that certain substances known to be inimical to health are yet, also, antagonistic to disease and that on special occasions they may be special vivifying means, differing from those usually necessary and working upon local parts a *curative action* that differs from the ordinary nutritive and reproductive process. A *cure,* in other words, is something wrought upon the body from without.

In popular and professional thought, the sick would scarcely be said to be *cured,* however perfect the recovery, without the employment of some medical means; hence, *cure* has reference to an external rather than an internal resource; it is the *operation* or effect of something foreign to the body.

A few years ago a *cure* for arthritis was announced. Cortisone, a glandular preparation, was said to be a sure *cure* in this disease. It was not claimed that the cause of arthritis was known. It was not claimed that cortisone removed the cause of arthritis. The cortisone was administered and the symptoms cleared up as if by magic. The first clearing up of symptoms was heralded with enthusiasm as a successful *cure.* Only a short time was to pass before it was realized that this *cure* was as illusory as all past *cures.* A similar experience followed the discovery of insulin. Although it was admitted that the cause of diabetes was unknown and it was not claimed that insulin removed the cause of diabetes, it was heralded as a *cure* for diabetes. Nobody today, least of all the physicians, will claim that insulin *cures* diabetes.

Another example that graphically illustrates the current use of the term *cure* is that of the search for a *cure* for cancer. At this writing it is being freely and frequently predicted, both in this country and in Europe, that a *cure* for cancer will be found within two years. Similar predictions have been made at various times during the last 45 years, but have always failed of realization. The researchers who are seeking a *cure* for cancer are not studying cancer from the standpoint of cause and effect and it is not predicted that the cause of cancer will be found within the next two years. A *cure* is sought that will restore health without the necessity of removing or correcting cause.

Among those who are seeking for a *cure* for cancer is a large body of researchers who expect to find the *cure* in chemotherapy (drugs). It is hoped to discover a cytotoxic drug that will destroy the cancerous growth without destroying normal tissue. All drugs are cytotoxic, which means that they are toxic to cells; but certain drugs have been set aside especially for this classification. It should be noted in this respect that surgery, x-ray and radium have all three been employed to destroy cancerous cells and that the destruction of such cells has failed to remedy cancer. Cytotoxic drugs suffer the same limiting factor as does radiation therapy in their inherent capacity for causing serious injury to normal as well as to malignant cells. Also, like radiation, cytotoxic chemicals do not remove the cause of cancer.

With all the boasting about the progress they are making in their cancer research, physicians and their allies in the research laboratories have disappointed the world. They have spent much money; they have devoted a great amount of time; they have sacrificed numerous animals and humans; but cancer is steadily increasing in incidence, while the cancer death rate continues to rise. That something more than the poisoning of cancer cells is needed to solve the cancer problem becomes evident when it is noted that cancer of the lungs is increasing, both among dogs and among the animals in the zoological gardens of our larger cities. This strongly indicates that there is something radically wrong in the modern civilized

environment of both man and domestic animals which tends to the development of malignancies and which must be corrected or removed before human health can be markedly improved. To seek to *cure* the effects of such a widespread environmental evil by poisoning cancer cells is an absurd practice.

World-wide and for a long time intensive research has been carried on in the effort to find cures for everything from colds to cancer. What good has all of this research done? It should have convinced the discerning that *scientists* and *physicians* cannot find the *cure* for disease. The consistent failure of all the much-vaunted *cures,* from Hippocrates to the present, should convince the intelligent person that there are no *cures*--that *curing* disease is a delusion. Healing techniques are biologic; healing arts are mythologic. Let us leave the efforts to *cure* disease to the practitioners of the voodoo arts and get down to a serious study of causes and effects.

The foregoing three examples will suffice to illustrate the meaning of the term *cure* as it is used today. The attempt to restore health in the sick without removing the causes of disease is what is meant by *cure.* To cure is to give a drug or to perform a rite-mechanical, chemical, surgical or psychological-that will, it is hoped, restore health in spite of the continued operation of the cause of the sickness. The search for cures, which is continuous, is a search for means of restoring the sick to health by the application or administration of something without the necessity of removing the causes that have produced and are maintaining the impairment of health. It is like trying to sober up a drunk man while he continues to drink.

Strange, indeed, almost shocking when first heard, was the *Hygienic* postulate that "nature has not provided remedies for disease." All the schools of *healing* had taught the absurd doctrine that God or nature had provided a remedy or a *cure* for every disease, if only it could be found. So long had this doctrine been taught that the *Hygienic* postulate became an obstacle to many when they first began a study of *Hygiene. Hygienists,* holding that disease is the consequence of violated law, asserted that nature has made no provision for misconduct, except in the consequent pain and misery to force the cessation of the misconduct. Nature, they said, has not provided remedies to *cure* you of the poisons or impurities that you may take into your body. You simply have to take the consequences and battle it out yourself.

Lecturing before his classes in the Hygeo-Therapeutic College, Trall said: "We can conceive of nothing more absurd," than the "doctrine that nature or Providence has provided some remedy for every disease," which "has been believed for ages." Holding that diseases are consequences of violations of the laws of being, it was logically thought absurd to think that nature has provided consequences and then provided remedies to do away with the consequences. This, said Trall, "would be such a self-stultification, as no human legislation has ever been guilty of." Can any person or any *remedy* "interpose between cause and effect? . . . Can he or it prevent consequences when cause is applied?" Does nature bribe us to violate her laws by promises of absolution?

The absurdity of the old and prevailing idea may be seen if we observe the action of sticking our finger into a fire. We are burned by this very act, not because of it, but by it. The consequence is inherent in the act. We are burned, not later, but the very instant we stick our finger in the fire. There is no time lapse between the act and the consequence. The consequence is concurrent with the act. To put this into a sentence, the consequence is inherent in and concurrent with the action. There is neither time nor space to interpose between cause and effect.

Applying this same principle to the use of the materials of *Hygiene,* Trall wrote: "Normal or Hygienic agencies may be used constructively--to sustain the vital structures, or remedially to remove the causes of disease. But their remedial employment belongs to the suggestion of instinct or reason.

"If nature had provided calomel, antimony, strychnine, alcohol, ipecac, jalap, cod-liver oil, and two thousand other drugs, or even air, water, exercise, etc., as remedies to obviate the consequences of our intemperance, gluttony and other disease-producing habits, she should, to be consistent, have also provided remedies for broken bones, dislocated joints, spinal curvatures, warts, cancers, contusions, lacerations, burns, scalds and, indeed, 'all the ills that flesh is heir to.' But no one pretends that surgical remedies are provided by nature, or are to be found anywhere except in human ingenuity."

One of the most essential things that we need to accomplish today to further the dissemination of the

principles of *Hygiene* and the consequent promotion of human health is to dispel the still prevalent superstition that somewhere in nature there are remedies for all maladies, of whatever form, which possess the power to *cure* disease. This lingering *faith* of the people in the *curative* power of nostrums, or acts to be performed, or some extraneous element somewhere in the universe, is the primary cause of man's slavery to drug medication and the consequent evils which must necessarily follow.

Drugs and treatments are administered and patients get well. The assumption has always been that the drugs and treatment restored health--*cured* the disease. So long as all patients were drugged, it may have seemed logical to assume that drugs accounted for recovery; but once other means of caring for the sick were employed, it soon became evident that there must be some other way to account for recovery. If the sick pray and get well, if they carry a horse chestnut in the pocket and get well, if they are massaged and get well, if they bathe and get well, if they do nothing and get well, if almost anything, from incantations and prayers to the most violent processes of *cure,* seems to restore health, what is really responsible for recovery? If we take the broader view of the matter the fact becomes obvious that either there is curative power in everything or the real healing power resides in something other than the means of *cure.* The *Hygienic* answer to our question is this: all healing processes that occur in the living body are biological in character and belong to the organism; they are not the work of drugs nor of treatments. The healing power resides in the body and is one of the cardinal functions of the living organism.

Millions of *cures* have been discovered during the past nearly 3,000 years and a number of them have enjoyed a lengthy vogue, but none of them have proved truly successful. All of the *cures* meet their waterloo. None of them remain *cures* indefinitely, so that they have passed in a long and melancholy succession to that *Limbo* reserved for the *cures* that pass in the night. In modern times, with greater facilities for discovering *cures* and better means of testing them and checking their hoped-for effectiveness, the *cures* come and go like fashions in women's hats. Great numbers of them last no longer than is required to get the initial announcement of their discovery into the public press. Others enjoy a few months of hope and expectation, then, like the skyrocket that thought it was a shooting star as it ascended and came down only to find that it was a burnt stick, they cease to be objects of awe. All of them, those that last the longest being the worst offenders in this respect, leave an aftermath of injury and death behind as they pass. Think, for example, of the injury and death that resulted from the transient lighting up of the horizon that the sulfonamides occasioned, only to be followed by a more brilliant light, with a greater number of deaths and injuries from penicillin.

The antibiotics are no more popular today, they are credited with no greater achievements and are not supposed to be effective in a greater number of diseases, than were such drugs as mercury, quinine, alcohol and opium in the past. Blood transfusion is no more popular today than blood letting 100 years ago. Hormone injections have simply supplanted the use of the excreta of man and animals. There was a time when powdered mice *cured* whooping cough; today a vaccine (allergin) made from the sweepings from city streets prevents hay fever. The first was a superstitious practice; the second is *scientific.* The intelligent layman will have great difficulty in distinguishing between superstition and science in this instance.

One studies the mortuary tables with the vague feeling that physicians are far from saving all of their patients. In spite of their boasted science and their loud trumpetings about their progress, the health of our people continues to deteriorate and the army of *incurables* grows by leaps and bounds. If we think for a while upon the multitudinous ways and means that have been conjured up to cure disease, we are bound to conclude that there must be something wrong somewhere. Certainly all of these means cannot be right; all the conflicting principles that have been advanced cannot be right. The persistent failure of all the *cures* would seem to demonstrate the correctness of this conclusion. Seldom in all history has a doubtful end ever been pursued with a more obsessed devotion and less appropriate techniques.

The continuous search for new and more effective *cures* signifies the lack of valid underlying principles to guide the physician in his care of his patient. Under the guise of research, the search for *cures* is carried on unceasingly and has evolved into a giant international industry which must pay dividends even if it does not produce bonified *cures.*

The conviction is growing in the minds of pharmaceutical researchers that they have about reached the

limits of possibilities in finding new drugs. A writer in the *Evening Standard* (London), February 10, 1967, in an article headed, "The World of Science looks at the Drug Industry," says: "The hunt for new drugs goes on. But the discovery rate is slackening--primarily because all the obvious substances have been looked at at least once." This writer then informs us that Britain's pharmaceutical industry "is adjusting its research effort to place more emphasis on learning how existing drugs work in the body. In particular, it is looking at what is happening inside the cell . . ." Having nearly exhausted the possible sources of *cures,* they are returning once again to the effort to discover the so-called *modus operandi* of their poisons. It is probable that few drugs ever get inside the cell; it is certain that if they do havoc is the result.

Herbert Spencer once made the remark that mankind never tries the right remedy until it has exhausted every possible wrong one. If the forces of medicine seem to have tried about every possible wrong remedy, may we hope that they will now turn their attention to the right one?

How often do we hear people declare that: "I know that if I had not taken this medicine, I would not have lived." Yet we know well that they do not know anything of the kind. They but give expression to their ignorance and credulity. The poet was more right when he said:

> "Nature rights the injuries done her;
> Drugs and doctors get the honor."

So-called medicine or the so-called art of healing has grown out of the almost universal state of disease, suffering and premature death. If man lived in a state of health, he would have no cause to develop an art of healing. But ever since he departed from the simple requirements of nature, he has been suffering and searching for means of relief and supporting an army of disease treaters who have endeavored to *cure* disease while completely ignoring its cause. The schools of so-called healing have carried men farther and still farther from the truth, until now it is a serious question, whether the so-called art of healing as practiced in so-called civilized countries is not a greater cause of disease and premature death than all the other violations of natural law combined.

Every thinking man should be able to see how absurd and unnatural are the modes of medication. Yet they are not more absurd and unnatural than the means which we employ to get sick in the first place. The greatest absurdity would seem to be that of trying to remedy one absurdity by another. Our modes of treatment are of a piece with our general habits and if it be asked how learned and scientific men have pursued and taught such a course of practice, it may also be asked with equal justice how the learned and scientific have partaken so largely of all the other errors and absurdities of human life.

The simple instincts and sound sense of mankind have long revolted at the most glaring absurdities of medical practice. In the days of universal bleeding, there was natural and well-founded horror of shedding blood in disease, just as there was a repugnance to mercury, quinine and other drugs which were so commonly used. In spite of this natural abhorrence of such practices, medical men have continued to administer not only mineral drugs, but the scarcely less irremediable poisons of the vegetable kingdom. At all times the prevailing system of medical practice has been one of weakening by blood letting, torturing by *blisters,* noxious *cauteries,* and poisoning by a whole *materia medica* of *paralyzers, convulsives, emetics, delirifacients, cathartics, anodynes, alteratives, sedatives* and *stimulants,* not one of which can be taken into the human system at any time in any quantity without injury to its organization.

The results of the prevailing modes of medical practice always have been and are what we might reasonably expect from such destructive and anti-natural processes. We see them in saturnined forms and shallow faces, in the common lack of development and beauty, in falling hair and rotting teeth, in failing sight and hearing, in the prevalent digestive disorders, hysteria and hypochondria, in racking arthritis and tuberculosis, in painful and perilous childbirths, in uterine diseases, in diseases of the glands and bones and in the whole catalogue of chronic diseases which are mainly the diseases of medication and, finally, we see them in the death rate that cuts short human life and fills our whole world with mourning. We appeal to the common sense of intelligent people, whether chronic disease and premature death and the medication by the virulent poisons contained in the mineral and vegetable kingdoms, combined with reckless waste of vitality in bleeding and purgation, did not stand to each other in the relation of cause and effect.

It seems probable that had there been no physicians to whom the people could have looked for *cures,* they would have done their own thinking and would have long ago worked out their problems. *Curing* and *cures* stand in the way of health and the healthful way of life and the rule--"that which will make you *sick* if you are *well* will make you *well* if you are *sick"*--would be recognized as the stupendous fallacy that it is, did the belief in *cures* not stand in the way.

But physicians cannot afford to admit that their drugs are without constructive value. Were medical men to admit that there is no such thing as a *cure,* pandemonium would break loose; medical superstitions would be seen for the fallacies that they are and medical investments would lose their value. Wall Street would go fishing; the drug shops would close their doors; the patent medicine vendors would cease barking their wares; vivisection would come to a sudden end and medical research would be cast into the bottomless pit.

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Hygiene Not a Cure

CHAPTER XXIII

"Is it really true that you can cure disease without the use of medicines?" asked a doting old lady of a *Hygienic* practitioner. The *Hygienic* answer to this question is that diseases should not be *cured.* Being remedial processes, they are to be left alone; only their causes should receive attention. When cause is removed, the disease ceases of itself.

It is a popular error that what is called the cure of disease is equivalent to or includes the recovery of health--an error which is fraught with disastrous consequences to millions. There is a vast, a radical difference between treating or *curing* disease and intelligently caring for a sick person. Thousands of persons are daily engaged in the treatment of disease and uncounted ponderous tomes have been written on the subject, while the sick multiply in a corresponding ratio. Many are the ways and varying the means, requiring but little skill and less experience, to *cure* disease; but the obvious fact is that these ways and means fail and have to be discarded for new ones. Treating disease is empirical, experimental and haphazard.

It would seem that the time has arrived when the care of sick people should engage intelligent attention. And there is a distinction with a difference--a vast difference between treating and curing disease and caring for a sick person and restoring him to health. To guide a sick person back to good health requires wisdom, attention and skill, if not learning, all exercised within a straight and narrow way. Such a plan is established upon a basis of demonstrated principle, having definite, settled and tried principles to guide us in the use of all its measures. These measures are not empirical; they are not experimental; they are not haphazard; nor do haphazard results follow their application. Every particular process must conform to the principles of the system and all results are results of unvarying accuracy.

Our science is but common sense. We *cure* nobody and make no claim to *cures.* We leave the work of healing in the capable hands of the living organism. We let people get well where this is possible, not interfering with nor letting anything else interfere with the processes of healing. It should be easy to understand that if recovery ever takes place at all under drug treatment, it should do so in much less time if no drugs are employed.

Writing editorially, July 1862, Trall said: "There is no curative virtue, no healing power in drugs or poisons, nor even in Hygienic agencies, whether applied externally or taken internally. All healing power is inherent in the living organism." Dr. Walter well expressed the *Hygienic* position when he said that, "unless science is humbug and logic sophistry," water or Graham bread or exercise or rest or other means or conditions applied to the sick do not restore them to health. *Hygienic* means are not *cures.* We refute *curing* power either as belonging to ourselves or to anyone else. We insist that the power to heal belongs exclusively to and to nothing outside the living organism.

By supplying such means and conditions as have normal relations to the living organism in such amounts and degrees as can be used by the vital powers under the circumstances, we can hasten the remedial process. But we should understand that nature has not provided these things as remedies--she has provided them for health. Air, water, food, rest, exercise, etc., may be said to be remedial, although they are not remedies, because the living system uses them in disease as it uses them in health--to build and replenish its structures and maintain the condition of health. Their use in disease is identical with their use in health--they do not serve any other or special function in disease. We do not think that when we open the window and let the sick man have fresh air to breathe, we are thereby *curing* disease. We are merely supplying one of the regular and ordinary needs of life--water, food, warmth, rest and sleep, exercise, cleanliness and emotional poise. These are not *cures;* they are not *therapies;* they are not treatments.

The importance of special applications of *Hygienic* means to meet special conditions requires further consideration. The man who relies upon *Hygienic* means in his care of the sick is not restricted to either diet or exercise or rest or fasting, but is permitted to range the whole field of *Hygiene* and to employ any or all of these as the requirements of the individual case call for. There are very weighty reasons why exercise in particular should be specifically adapted, not only to the needs of the sick, but to those who have a measured degree of health. The same necessity exists for adapting the length of the fast or length of rest or the amount and character of food, etc., to individual requirements.

Whatever may be the reasons that impel one to adopt *Hygiene,* it is all too likely to be regarded as merely a substitute for the usual forms of medication, or at least, like drugging, to be a plan of reconciling physiological inconsistencies with the desire for health and enjoyment and there may be much talk of their search for food specifics or light specifics, etc., when the failure of the popular methods has driven them to adopt *Hygiene.* Overlooking the grand fundamental principles that underlie the system of *Natural Hygiene,* they continue to seek health through some formidable operation performed by some exotic or adventitious something.

In medicine the *disease* is the primal object of solicitude, an incomprehensible something that must either be neutralized, cast out or outwitted by some professional legerdemain. In *Hygiene* the plan consists in attending to the *health,* to all those matters concerned in the production and preservation of the structures and powers of life and to all impairing influences; *Hygiene* attempts to fulfill nature's needs as seen in the well, graduating them to the altered condition and wants of the sick. The chief agencies or circumstances concerned in the production of living structure and the performance of vital function are oxygen, food, water, warmth, activity, rest and sleep, and sunlight. A modification of these factors of living readily alters the state of the body, whether it is well or sick, abating or intensifying activities as need dictates.

Drugs which, from their chemical relations to living structure, annul, excite or alter the functions of life, are employed by physicians to effect a *curative* rather than a *recuperative* work. If the patient recovers; the physician receives the heart-felt benison of grateful patient and family. If the patient dies, it is usual to assume that the Lord took him.

Yes, some people will die under the *Hygienic* plan of care; but we have known of one or two deaths under drug treatment. Nobody ever claimed that the processes of restoration. are always successful, even under the best of conditions.

Tilden tells us that he practiced medicine and surgery for 25 years, "experimenting, after the first ten years, more or less, with all the systems and cults, and being more and more surprised with the results following little or no medication (drugging)." Then followed a longer period of practice, one that continued to within a few months of his death, when he retired from active practice, which, to quote his own words, consisted of the "simple conservative prescriptions of physical, physiological and mental rest, diet, nursing and psychology." He says of this practice, which was one largely of educating patients out of disease-producing modes of life, that it was "not only satisfying to myself," but to all his patients who could be taught to practice self-control.

He tells us that when his patients recovered under his drugging practices, they and their families and friends would say that he *cured* them, but that he was aware that he had done nothing of the kind. He did not even know how or why they had recovered. When a patient would die under his care, he says that his conscience would not permit him to tell the family that "all was done for the patient that science could do." He says: "For I knew that I did not cure those who got well and I did not like to acknowledge, even to myself, that I had killed those who died. To be consistent, I soothed my troubled mind by acknowledging to myself and my father, who was a doctor, that those who got well did so in spite of my best endeavors, and those who died might have been helped to die by my strenuous endeavors to save them."

An attitude of mind such as this either drives a man out of practice, as it has thousands of young physicians and a few older ones, or causes him to try to find out what is true and what is not true in the practice of medicine. Tilden says that "to learn, if possible, just how much I had to do with the getting well and dying of my patients, I discarded drugs and other methods of cure, and gave sugar tablets and

careful nursing. I felt like a criminal in *withholding cures*--it was a strenuous ordeal. My *success* was marvelous. Even my father, an old-time practitioner, marveled at the results, and cautioned me not to go too far."

It is everywhere freely admitted that "there is no cure for the common cold." It is also admitted that "there is no cure for influenza." Indeed, there are so many common diseases for which it is admitted that there is no *cure* that one begins to wonder how long it will take the world to recognize that the whole concept of *cure* and *curing* is false.

Every year millions of people in this country develop colds and practically all of them recover health. The same may be said for the hundreds of thousands of people who yearly develop influenza. Thus, we have two common diseases for which there are no *cures;* yet those who develop these diseases recover. If the sick recover and are not *cured,* what happens? If a *cure* for colds were found, how would it be possible to prove that it is a *cure,* since cold sufferers get well anyway?

At this point we may ask: are there two processes of recovery? Is there a process of healing carried on by the living organism--is there another process carried out by therapeutic measures? Let us apply this question to pneumonia. It is claimed today that both the sulfonamides and penicillin *cure* pneumonia; but prior to the introduction of the sulfonamides, it was freely admitted on all sides that there was no *cure* for pneumonia. In spite of this lack of a *cure,* most pneumonia patients succeeded in recovering health. Many of the processes of treatment to which pneumonia patients were subjected were manslaughterous, the physician standing by the bedside of his patient and wielding a battle axe. In spite of such manslaughterous therapeutics, most pneumonia patients recovered.

With the abandonment of the old battle axe treatment and its substitution, first by the sulfonamides and, subsequently, by penicillin, a higher percentage of pneumonia cases recovered. This led physicians and the people to believe that the sulfonamides and penicillin *cure* pneumonia. But if these drugs *cure* pneumonia, what *cured* pneumonia cases before they were introduced into medical practice? To repeat our former question: are there two processes of *cure?* When pneumonia cases recovered health under the old battle axe plan of treatment, were they *cured* by one process? Now that they recover health under a less lethal plan of care, are they *cured* by another and different process? Are there two principles, one operating in poisonous substances, the other in the body, both of which result in the same ultimate effect--health?

If pneumonia patients in the majority of instances recovered health when there was no *cure* for pneumonia, is it not possible that this same process that resulted in recovery in spite of a manslaughterous mode of treatment is also responsible for the recoveries that occur under a less lethal plan of care? Is it not more correct to say that penicillin does not *cure* more, it only kills fewer? It hardly seems a tenable assumption that there has been a radical change in the process by which health is restored when one is ill. Whether it is a cold, an influenza or a pneumonia, the process of recovery that enables one to regain health when there is no *cure* would seem to be still in operation after an alleged *cure* is discovered.

Physicians who have followed their patients to the post-mortem table have long observed that pulmonary tuberculosis of long standing tends to spontaneous recovery. They find the lung lesions had completely healed and the patient died of something else or they find that, although the patient died of tuberculosis, there were many healed lesions in the lungs. It is the common theory that almost everybody has tuberculosis of the lungs at some time in life. This is based on the almost universal finding of healed lesions in the lungs at autopsy. It is stated that thousands of these people had tuberculosis, recovered and never knew that they had the disease. Perhaps they thought they had a persistent cold or something else of a minor nature.

Here is evidence that the *infection,* when it does occur, is something that the living organism can cope with without outside help. Both the people and their physicians are so accustomed to thinking that no healing can take place without the assistance of a professional man and his bag of tricks that we are surprised to learn that healing can actually occur without the tricks. It may be to the advantage of the disease treaters of all colors and stripes to have the people believe that they recover only as a consequence of the treatments they administer, but the fact is that the public will be better off to understand that all

healing is self-healing.

These post-mortem findings demonstrate that tuberculosis evolves into a serious condition in but a relatively small percentage of cases and that even in these formidable cases, man's biological restoratives are capable of effecting a restoration of health. If sometime in the future a *cure* for tuberculosis were to be discovered, is it possible that the biological process that now restores health in cases of tuberculosis would come to an abrupt end and the tubercular would, thereafter, be forced to depend entirely upon the alleged *cure?* If the biological restoratives that are resident in the living organism do not cease with the discovery of an alleged *cure,* how is it ever possible to demonstrate the genuineness of the *cures?*

Wounds healed, broken bones knit and the sick recovered health for ages before there was a shaman, priest or leech, and mankind survived without the doubtful assistance of these professionals. This proved that man's biological restoratives are fully capable of restoring structural soundness and physiological efficiency to his organism, if they are not frustrated or thwarted by treatments and conditions that obstruct and suppress the healing efforts. Healing is a biological process, not an art. The physician can neither duplicate nor imitate this process. Nor does the *Hygienist* attempt to duplicate or imitate it.

Hygiene stands up for the wisdom and goodness of the constitution of nature, as displayed in our own organism and its normal relations to its environment. It points out the initial errors of the sick and seeks to influence them in healthful directions. *Hygienists* alone reveal the great, simple and most sublime of truths--that incorporated in every living organism itself is a great vital recuperative capacity as part and parcel of its very life, identical with and inseparable from its very existence, by which and through which the organism is evolved, its waste recuperated, its injuries repaired, its infirmities removed and its impairments healed. Members of the schools of *healing* seem not to know anything about this; nobody else seems to believe in it, but dwell in the common darkness of all around them.

In the natural order of things there is no such thing as escaping the consequences of our actions. Hence, *Hygiene* teaches and insists upon the principle that, before health can be regained, there must be entire conformity with the laws of life. Unlike the *curing* systems, *Hygiene* holds out to no person an immunity from the consequences of actions and modes of living that violate or are in conflict with the laws of being. It does not tell the sick that they may continue to live in violation of these laws and still, by some magic potency, recover from the consequences. But it does point to the fact that living organisms are so constructed and endowed as to be able to repair their damages and restore their functions when the violations of biologic law are discontinued.

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Conditions of Recovery

CHAPTER XXIV

Hygiene is based squarely upon the principle that health is intended to be, and therefore should be, the ruling condition of human life; biological laws are designed to operate as certainly within their sphere as physical laws are in theirs and, therefore, abstractly considered, sickness is not more necessary than drunkenness; whenever and wherever sickness does exist, it is in consequence of a violation of these laws and to cease to violate them and, in addition, earnestly to obey them, is to begin to cease to be sick and to begin to get well. For this reason, all that is required in order to get well, when one is ill, is to find out just in what direction the laws of life have been violated and in that direction to cease their violation and, in the management of the physical organism to conform to these laws and the sick one, if recoverable at all, will be restored to health.

This being true, all agencies, instrumentalities, or things that are in their nature calculated to disturb and derange a living organism are unfriendly to its health and can by no means whatever be made subservient to health-preserving or health-restoring purposes; but that, on the other hand, their direct and legitimate effect, whenever they are used, is to kill or to tend to kill the organism. That, on the other hand, all agencies, instrumentalities, or things which, in their nature and in their ordinary or extraordinary application, tend to preserve the health of a living organism, are the means and remedies, and the only ones, which may be relied upon to overcome its morbid conditions and restore it to health.

It will at once be seen that this view is exactly the opposite of the common one and that when the sick place themselves in the hands of a *Hygienist,* he will proceed to employ as a means of recovery only healthful things and influences, avoiding the use of all substances whose legitimate effect and end must be to impair and damage the human organism and thus produce and add to ill health.

We do not mean to infer that all patients can recover health by means of a *Hygienic* way of life, for there are people of such frail constitutions or such extensive organic impairment or of such profound enervation that they will fail of recovery. Nor do we mean to infer that all patients can make a speedy recovery by turning to *Hygiene.* It is idle to suppose that when a man, who has been months or years evolving chronic pathology, turns to *Hygiene,* he can by any process be suddenly transformed into a well man. What we do mean to infer is that all recoverable cases will attain full health by adopting a *Hygienic* program and sticking to it long enough to undo the damages of years of wrong life.

Writing editorially in January 1872, Trall said: "The underlying question is: 'Should disease be cured?' We say no. And we challenge all the medical men of all the earth to prove the affirmative." The idea of *cure* is an illogical and dangerous delusion and the time will come when it will be common knowledge that *curing* has killed more people than would have died had there never been a *cure*-monger on the earth. Treating builds disease and the *curing* systems, which are but systems of meddlesome trifling with human life, are all destructive rackets.

When we have learned to see in such symptoms as irritation, inflammation, fever, agitation and accelerated function such as diarrhea, diuresis, etc., the protest of outraged tissues against illegitimate infringements of primary principles of vital existence, their desperate struggle to free themselves from the paralyzing presence of toxic debris, we will cease to combat with every objective weapon at our disposal the symptoms of disease. We will cease launching grotesque campaigns against fictional entities, echoes and phantoms of the evil spirits of our ancestors, while neglecting the authentic villian and permitting him free reign of the vital precincts. Entitative diseases are dramaturgic fictions that are as unreal as pink elephants and snakes in the boots, and seeking to *cure* the symptoms as though they are the literal stuff of our ailments is as ridiculous as seeking to remove shadows while ignoring the objects that cast them.

If healing is a biological process, which we can neither imitate, duplicate nor substitute, as *Hygienists* contend, the proper plan of caring for the sick will be one of supplying the most favorable conditions for the successful operation of the vital healing processes. The primary requisite of the success of the healing process is the removal of all causes of organic and systemic impairment.

Let us always keep in mind that the forces of organization are ever busy, by silent operations, in their work of removing the causes of disease and restoring good health. Those ideologies that picture health and disease as antagonistic forces at war with each other represent dualistic delusions. This concept of opposites (that health and disease are ideological opposites) is a biological schism that has no reality in living phenomena.

Because of this false dualism in our thinking upon health and disease the practitioners of the many and various *healing arts* labor to subject their patients to cunningly devised expedients, rather than to the laws that govern living processes. Instead of permitting nature to do her own work in her own way, they have conjured up myriads of forcing measures designed to compel the living organism to do its work in the way they think it should be done. They do not work with the normal things of life, but seek to impose upon the processes of the organism exotic and adventitious substances and conditions that necessitate activities of the body other than those in which it is engaged and this must certainly divert its attention and its energies from the regular processes of elimination, repair, restoration and healing. In the very nature of things, all of this interference with the processes of life must retard and even prevent the healing processes. Such meddling must be the cause of many deaths which, except for the meddling, would not occur. Imposing chemical substances upon an organism that is incapable of assimilating them, as is done by the medical profession, cannot do otherwise than damage the body. A sane method of caring for the sick will not attempt to force the body to utilize substances that are not subject to its metabolic processes.

All care, to be genuinely beneficial, no matter what the condition of the sick person, must bear a precise relation to the constitutional habits of man. This must be duly fitted, for best results, to the greater or lesser diseased state of the body. From this premise, which no one will dare deny, the conclusion is quite logical that anything which tends to genuinely renovate the whole physiological condition conduces to recovery.

It is necessary to emphasize that it is indispensibly essential to the normal performance of the processes of healing that between the forces of the organism and the substances of the organism there shall intervene no artificial agency. Only those natural elements that are normal to the life of the organism can be allowed to enter into the process. The physiological processes cannot have an artificial basis. The processes of healing, being as integral to the living organism as the regular processes of physiology and biology, cannot rest upon any artificial foundation. No drug is capable of entering into direct physiological relations with the living organism as food.

In order that a substance may be truly metabolized by the body it must be susceptible of being transformed into cell substance. Any substance, the relation of which to the living organism is a poison, is directly antagonistic to the processes of healing and occasions added impairment of function and damage of structure instead of promoting a restoration of health. Every artificial preparation, every non-normal element, every substance that is incapable of being metabolized, weakens the natural functions, impairs the process of nutrition and reduces the efficiency of the healing process.

The prevailing uncertainty with regard to human life and health is due to a blind precedent and ignorant, even wicked, disregard for the requirements of life. In the case of disease, the leaders of thought on the subject add to the causes instead of removing them. They correspondingly fail to supply the conditions of health and worst of all, their methods impair and finally exhaust the powers of life. Medicines (drugs) are causes of disease. This is admitted by all and denied by none, in the face of which fact it is impossible to explain their alleged *curative* virtues. Indeed, medical men believe in no such absurdity, although they are not very earnestly engaged in correcting the false impression the people have on the subject.

The popular mind has become so imbued with the curative virtues of drugs, all of which are poisonous, that the attempt is being made daily to recover health without reference to the habits of life, if not in open and acknowledged violation of all the laws of life. The medical profession is truly, as Graham so aptly described it, a "mere drugging cult."

The needed materials and conditions, which alone can be used, are air, water, food, temperature, rest, sleep, light, warmth, agreeable social surroundings and abstinence from all harmful indulgences such as tobacco, alcohol, drug poisons, etc., etc., their appropriation being directed by instinct. The mere enumeration of these requirements commends them to our intelligence and their necessity would not be questioned were it not for the claims, tacit or expressed, that there exists a mode of *cure* and that *specifics* and panaceas are possible.

When the sick man hears of *Hygiene,* which is radically different and opposed to all that he has been taught and conditioned to believe, he cannot comprehend how the sick can get well without the administration of poisons. Thus he makes up his mind that, although some patients may recover from some diseases by means of *Hygiene,* it cannot possibly be good in all diseases and that it is impossible to entirely discard the use of drugs (poisons) and all who think so are poor deluded fanatics--men who can harbor but one idea at a time and, who, blindfolded, ride by one hobby.

Upon what, then, do we depend for the recovery from disease? The simple answer to this question may not satisfy those who have been brought up to believe that some mysterious and powerful *therapeutic* means is necessary to the recovery of health. Both the people and their physicians are so accustomed to thinking that no healing can take place without the assistance of a professional man and his bag of tricks, that people are commonly surprised to learn that healing can and actually does occur without the bag of tricks. Nevertheless, it is important that we understand that the living organism possesses remarkable powers of self-healing and self-restoration. It is upon this self-healing power of the organism that we must always rely for the recovery of functional and structural integrity, whether we are sick or wounded, no matter what the form of treatment employed.

It is a fortunate circumstance for the sick and wounded individual that this healing process is in continuous operation. It is as ceaseless as time, at least so long as the organism continues to live. It begins spontaneously and automatically as soon as there is the slightest injury to the organism or as soon as there is the least deviation from the normal and it never ceases until a normal condition has been re-established or until the body is dead from causes that overwhelm the healing process. This means that failure of recovery, not recovery, is the thing we need to understand. The processes of healing are as much a part of life as the digestion of food or the beating of the heart. We need not marvel, then, that the sick recover; we need only to supply a valid explanation of those cases where recovery fails.

Whatever its cause, a lesion is essentially a cleavage of normally integrated tissue. When we speak of the healing of a lesion, we mean nothing more mysterious than the re-integrating of the separated tissue, so that unity is restored. A progressive aggravation of a lesion grows out of the persistence of the causes that have produced it, thus annuling the efficacy of all healing potentials and widening the lesion. Thus it will be seen that failure of recovery rests primarily upon the persistence of the cause or causes that have produced and that maintain the trouble, and secondarily, upon the superaddition (usually in the form of treatment) of other aggravating factors.

A man whose health is impaired has impaired health because he has violated the laws of being and he can regain health only by a return to obedience and this nobody else can do for him. Whenever any individual has habitually disregarded the laws of life and health until he has evolved disease, he needs as the first requirement of recovery of health a return to obedience to the laws of life. "Warring on disease" amounts to battling down reserve life forces and fighting delusional causes and entities. It is really a war upon the human constitution rather than a war against fictional disease. The idea of *cure* prevents man from discovering cause; so long as the search is centered on the discovery of *cures,* causes and effects will not be studied. The absurdity of the view that the problems of disease can be solved by microscopes and test-tubes should be apparent to every sane man.

Every living organism is compelled, upon pain of disease and extinction, to adjust itself in conformity with the laws of its being. All processes of recovery or healing are but extensions and modifications of the processes that preserve health and the materials and processes employed in caring for the sick must be in consonance with physiology and compatible with all other useful measures. Restorations of health that are made by nature are conditional.

The ways and processes by which the sick recover health, when they do recover, no matter what the name given the disease, nor what the treatment employed, are strictly biological processes and are not susceptible of duplication or imitation by the practitioners of any school of so-called healing. The forces and processes of the living organism alone restore health and these processes and operations are always in obedience to the same general principles of life; the power and the processes by which the organism is developed and maintained are the same as that by which wounds are healed and health restored in disease.

There is a vast difference between a plan of care based on removal of cause and one that is based on palliation of effects. As there can be no effect without a cause, it is essential that the cause be removed before the production of effects can be ended. Treatments do not remove causes and are not intended to do so. There are but four legitimate objectives of remedial care of the sick:

1. The removal of the cause or causes of sickness.
2. The conservation and hoarding of the powers of life.
3. Promotion of elimination of toxic accumulations within the organism, and
4. The proper supply of the physiological needs of the organism.

We cannot reasonably expect a sick man to regain health so long as the causes that are impairing health are still present. The forces of the organism, though powerfully and distinctly self-preservative, cannot be expected to be successful against overwhelming or continuous cause. The symptoms and pathologies of the disease may change and often do indeed change; the disease may ebb and flow with changing circumstances; it may even appear to get well; it may change from acute to chronic, as often happens; but full recovery cannot be expected so long as cause remains.

Any effort to understand the problems of disease that refuses to see the phenomena of disease in the light of cause and effect is doomed to disappointment. What horrid superstition, what blinding prejudice, what unpalliated stupidity is that which cannot understand the simple doctrine that diseases are remmediable by (and only by) removing their causes! What is there so difficult to understand about the simple principle that in order to be saved from the effects of a practice, it is necessary to discontinue the practice? How absurd to think that the practice can be continued and poisons administered to erase or prevent its effects! The production of effects can be ended only by removing the causes that are producing them. The medical man acts as though he believes that effects can be erased and their production ended without the necessity of removing their causes.

We know of no so-called disease that is not the result of a departure from the laws of being. If this is the truth about the cause of disease, what is the first need of recovery? Certainly the taking of drugs, which is another and gross violation of the laws of life, is not among the requisites of recovery. The answer to our question is: return to obedience to the laws of life. Cease the disobedience and conform to the laws. To attempt to remove the causes of disease at the expense of the life of the sick man or by deteriorating the conditions of life, so as to render future existence more uncertain and full of suffering and guarantee a premature death, requires less skill than may be supposed.

Who can fail to understand that by teaching mankind how to live, we can be more serviceable to the race than we can by bending all our energies to the invention of new modes of subverting nature's laws to the end that the sick may be relieved of sufferings which are the legitimate consequences of their unlawful behavior? Such an undertaking as this last is about as practicable as would be the search for a means that would enable us to put our hands into a fire without being burned. Intelligence revolts at the preposterous proposition that remedies are to be found in the apothecary shop for ills that grow out of errors of living, that pills can cure the effects of worry, that draughts will remedy the results of overeating, that pink lotions will erase the evils of intemperance, that a drug can be given that will remove the effects of excessive venery while sexual overindulgence is continued. As well try to sober up a drunk man while he continues to drink.

What is called *medical science* does not teach man to remove the causes that are responsible for physiological impairment and replace these with conditions that favor normal physiological function. Its plan of curing consists of nothing more than the administration of drugs, while doing nothing to remove the causative factors. So long as their conception of curing does not go beyond this, they cannot hope to

achieve a genuine solution to the problems with which widespread disease and degeneracy confront us.

When a misuse of the body and the means of life have resulted in disease, intelligence suggests that before health can be restored, the first and most important thing to be done is to correct the cause of illness, not by resort to means that are out of harmony with the human constitution, but by regulation of the means which sustain normal life and by cessation of the bodily abuses. To continue to abuse the body and misuse its means of existence and seek for *cures* or to seek to be *immunized* against the consequences of abuse and misuse through the use of extraneous, exotic and adventitious means, is absurd. In the proper regulation of the total life of the individual and his means of existence consists all true care of the body, whether in health or in disease.

When the impairing and threatening causes are removed, the body, by means of intrinsic powers and processes, remedies its own injuries and re-establishes normal function. When the conditions of normal vital activity are preserved, which are, obviously, sound and healthy tissues, the self-protective effort is continuous, varying in vigor and efficiency according to the amplitude of the nervous energy and the conditions upon which it is dependent for its manifestations. Hence it will appear that the skill required in caring for the sick will consist in removing the causes of disease without lessening the self-protective powers of the body. Health must ever be restored by the removal of the causes of disease, not by adding to the cause.

We who regard disease as the result of violated law cannot fail to view our duty in a different light from that which has hitherto been regarded as the legitimate way of caring for the sick. Generally regarded as an enemy, disease has been thought to attack the living organism and it was the duty of the practitioner of the healing art to array himself and his arsenal against it. Physicians often say that they administer their poisons to aid the *vis medicatrix naturae* in expelling the disease. What a fatal error! The disease is itself the *vis medicatrix naturae.* Although the physician imagines that he is "aiding and assisting nature," he is, in fact, simply wasting and destroying her reconstructive and recuperative powers. Dr. Oswald rightly said that diseases plead for desistance, rather than for assistance and the discovery of the cause is the discovery of the remedy.

The *Hygienist* recognizes the principle that the remedy for all impairments of health is to ascertain and remove its cause or causes. Believing these conclusions are true, we cannot reconcile ourselves to any mode of care that is directed exclusively at the symptoms. It is our firm conviction that cause is the most important factor in our equation. To find causes he is justified in trying to find out all about the habits of life and the conditions of living of all those who consult him for advice. All is wrong. All is a muddle from beginning to end. With individuals as with society, we are all victims of false and vicious habits, customs, practices and doctrines and lack both the knowledge and the independence to live in ways that are right and good for us. We are slaves to fashions, folly and pride.

Medical men do not inquire into the ways of life of their patients and do not rebuke them for their violations of the laws of life; they do not teach their patients how to live--instead, they seek to cure them with poisons. The profession has carried on a very profitable trade in promises which it could never fulfill, but it found their non-fulfillment easily referred to Divine intervention. If the patient recovered, the physician cured him; if he died, "the Lord took him."

So long as it has existed, the medical profession has failed to learn or at least to apply a few plain and apparent principles pertaining to the laws of matter and of life; it has chosen, rather, to affect to be in possession of mysterious *curative* substances which form the basis of its practices. As there is no intelligible relation between the drug-remedy and the disease-condition, the practice has always been purely experimental and empirical. They drug and dose and cut and inject, but they never propose to correct a single cause of disease.

However misdirected the efforts of the sick man may have been, he is always ready to try again and with the desperation of a drowning man, clutches at the straws within his reach. Ignorant of those elements within and around him that work to perpetuate existence as well as of the causes that are tearing him apart, he is ever ready to try anything and to bless the *accidental* means to which he ignorantly attributes his recovery. It is amazing how anxious the sick are to find any possible excuse not to abandon

disease-building habits. This is the only reason that they can be so easily persuaded that to cut out a diseased organ is a much shorter route to health than to cease building the excuse for the operation. Millions upon millions of dollars have been spent during the past 90 years for surgical operations that could have been avoided by the simple plan of ceasing to build disease.

It is true that the causes of disease are often obscure and that mistakes in their discovery and association are liable to occur, but this difficulty is obviated by removing from their influences upon the patient *all causes* of disease. If we may not always particularize as to the causes, we can generalize and no matter how inefficiently our work may be performed, it will prove more successful than the attempt to *cure* ailments by adding to their causes.

Failure to recover is often due to small indiscretions, which the incorrigible refuse to discontinue. Those little indulgences that "do not amount to anything" are often enough to prevent the evolution of good health. Sitting up and reading until 11 or 12 o'clock because "I can't sleep if I go to bed before;" a little candy, "not enough to hurt me;" a dish of ice cream, "just a small amount, not enough to amount to anything," a smoke with a friend, "just one cigarette, that can't hurt me;" a small drink, "just to be sociable, not enough to amount to anything;" staying in bed too late in the morning to get regular exercise; a little food between meals, "just enough to expel the longing, that all-gone feeling;" "surely such small trifles cannot possibly have anything to do with my continued bad feeling." If told not to eat between meals, they will chew gum and ask: "Why can't I chew gum? It cannot do any harm. Besides, it relaxes me and is advertised to be good for the digestion." If told to abstain from starch, the patient will take "just a little bread" or "only a few crackers or cookies, not enough to amount to anything." If coffee is enjoined, he will have "only a little weak coffee, it was mostly water." He will have a small lunch after the theatre, "not enough to count, just a sandwich and a bottle of Coca Cola."

These chronic sufferers are likely to ask: "Doctor, can you do anything for me?" Such sufferers want somebody to do something for them; they do not want to do for themselves. The correct answer to their question is: "No. But I can instruct you how to do something for yourself." How to do something for themselves is not the kind of prescription they are seeking. They want palliation--relief--and they will have it if they have to die to get it.

Certainly the sick person, desirous of recovering health, should not be unwilling to discontinue any and all habits and indulgences that are producing and perpetuating, even intensifying his weakness and suffering. Recovery of health should not be expected so long as the mode of life is such as to constantly impair it. How does the drunkard expect to sober up so long as he continues to drink? How does the sensualist expect to recover potency so long as excessive venery is permitted to drain the powers of life? So long as the causes of organic and functional impairment are operative, they will continue to produce their effects and no form of treatment will ever be devised that will cause it to be otherwise.

A correction of the habits of life, even if for only a time, results in a disappearance of symptoms; but to build vigorous health and restore a normal body and mind, to retrieve lost vigor and add years to life, the correction must take place before serious organic change has occurred in some or several of the vital organs of the body.

As before stressed, our care should be conservative of the whole organism. The undisputed object of all remedial care of the individual whose constitutional equilibrium has been disturbed or impaired is to conserve the interests of all the parts of the organism.

Depletion of nerve energy with the consequent toxemia is the grand fact of invalidism and restoration of nerve energy with purification of the blood stream is the grand fact of recovery. Rest, relaxation and sleep are the great representative restorative processes; work, activity and excitement are the great representative exhausting processes. Rest is the great need of the invalid. Rest is the restorer. Rather, rest is the normal condition under which the restorative process, which is intrinsic to life, is conducted at its highest efficiency.

Abstinence from every artificial strain is commanded by nature and all animals except man implicitly obey this command. Taking for our guide the necessities of the constitution, it will be obvious that the

modes of treatment commonly resorted to ought to be reversed and that, instead of straining to the utmost the already weakened powers of the sick organism, our effort should be directed to securing for overworked and overtaxed organs that repose that is tired nature's sweet restorer. Functioning power is a fluctuating quantity, now abundant and again deficient. The vigor of morning differs materially from the exhaustion of the evening, the depression of invalidism from the strength of an athlete, the freshness of abounding health from the wasted energy of the feeble and emaciated. The fact that functioning vigor fluctuates from hour to hour and day to day proves that functioning power is *manufactured* on the one hand and expended on the other.

The accumulation of functioning power is a fact to be accomplished with the same certainty that pertains to the storage of electricity in a storage battery. Functioning power can be accumulated--stored up--in the organism until it is brim full and running over, making for the individual an abounding holiday of joyous possibility.

The great error of the drugging systems is that their practitioners mistake *stimulation* for strength, when they are in reality the opposite of each other. We can *stimulate* a sick person and make him feel better and stronger temporarily, but he is inevitably being weakened daily. As a consequence of such methods, it is the almost universal fact of invalidism that *patients are always getting well,* but never get well. Why will not somebody tell us how *stimulation* sustains the flagging powers? It seems to us that the advocates of *stimulation* ought to do it. We affirm that all *stimulation* of an organ results in a waste, not in an addition of strength. Why cannot somebody tell the world how, by a substance that does not add to any tissues, strength can be added to the body?

No abnormal process can produce normal results; one may not derive good from evil. The apparent improvement resulting from the employment of forcing measures cannot be permanent. A temporary increase of action may be occasioned in any organ by exciting or *stimulating* it, but the action cannot be sustained for want of ability in the *stimulated* organ. It is the law of nature that only as much functioning power can be put forth by an organ or organism as it possesses. If under *stimulation* we obtain extra action today, a correspondingly reduced action must follow tomorrow as the organ or organism becomes exhausted, function fails and an organ falls as much below its usual activity when a *stimulant* has been withdrawn as it was raised above by the *stimulant.*

There is no means in nature by which the sum-total of action of an organ or set of organs can be increased, except by the development of power in the organ through the process of nutrition. This is the means by which functioning power is developed and it is by this power that work is performed. If, instead of seeking to improve nutrition and restore health and vigor by feeding and *stimulating,* we would commence where life begins and restore the first functions of life by processes which are obviously correct, we would obtain better results.

Intensity of effort or action, as occasioned by *tonics* or *stimulants,* can never take the place of real functioning power. Indeed, the greatest sufferings of the invalid are due to intensity of action, to that nervous, strained effort to perform life's functions which *tonics* and *stimulants* greatly aggravate, if they did not at first produce. Intensity is always in inverse ratio to volume, as observed in increased frequency of pulse, increased activity of nerves and general restlessness when the functioning power of the organism has been reduced from any cause--intensity thus seeking to compensate for loss of capacity. But restoration, therefore, must come through a recuperation of real functioning power and not through fictitious or apparent strength, for it is *real* and not *apparent* power that restores health. We can *stimulate* and deceive ourselves, our physician, our friends, as to our strength; but we cannot deceive the vital instincts. The work done in any case will be in exact ratio to the power used, not in ratio to waste through *stimulation.*

It is from sickness--debility--and depression of power, due to overwork, bad habits, improper eating and drinking that there has been failure in the performance of the vital functions, which failure can be obviated only by a restoration of functioning power. It will not appear strange to anyone acquainted with the recuperative and reconstructive powers of the living body that, when one ceases to do that which occasions abnormal actions and damages structures, one will automatically and spontaneously grow better, always providing that no irreversible condition has evolved.

What is wrong with our people? They rarely secure adequate rest and sleep and when they have brought themselves to the verge of vital bankruptcy by their enervating ways of life, it is as difficult to get them to take enough rest for full recuperation as it is to wean them from their tobacco and coffee. Put them to bed for a rest and they want to get up and become active by the time they have had half enough rest. Give them a physiological rest and they want to break the fast and return to overeating before the fast is half accomplished. Teach them to eat in moderation and they will not follow this plan of eating for very long, but hasten back to gluttonous indulgence. Teach them to take a few minutes of daily exercise and they will keep it up for a few days or a few weeks and settle back into the plush bottom of a rocking chair and vegetate. They will discontinue tobacco long enough to get relief from their worst symptoms and are then in a hurry to return to smoking.

To arise from a sleep as sound as that of childhood, to rush joyously into the fresh air and sunshine of early morning, to enjoy again the songs of the birds and the sights of nature with a sense of unwonted strength in every limb, to experience the cheerfulness, exhiliration and consciousness of returning health and strength, the invalid must be willing to abandon all disease-inducing habits and cultivate a way of life that is in harmony with the needs of life. Often this cultivation of a new way of life is best achieved away from old haunts and old associates and it is here that the *Hygienic* institution serves us best.

For the sick man at a *Hygienic* retreat, the whole life is one remedy--the hours, the rest, the new habits, the discipline, while not incompatible with gaiety, cheerfulness and high spirits, tend to train the body in the highest state of health of which it remains possible. The mental calm, physical relaxation and repose of the passions during early stages of the new life and the rest of the intellect are transmuted into a soothing rest that permits recuperation. Let us re-emphasize that in adopting the *Hygienic* System, one's whole way of life is the remedy.

One thing that strikes the visitor at a *Hygienic* institution is the extraordinary ease with which, under *Hygienic* management, wholesome habits are acquired and unwholesome habits relinquished. For example, we do not witness the difficulties with which stimulants are abandoned under medical care. People accustomed to half a century of coffee, tea, tobacco, alcohol, salt, pepper, etc., after two to four days, cease to feel the "want" of them. Others who have grown so accustomed to taking drugs that they think they cannot live without them, leave them off with the greatest of ease. Even the mis-called "withdrawal symptoms" are much milder under *Hygienic* management than under conventional care. The safety of the *Hygienic System* is the most striking thing about it. Its power of replacing by wholesome substances, the disease-inducing ones, which it withdraws, is especially great.

It is as much to the regular life which the guests of *Hygienic* institutions lead, as to the fast, that they owe their remarkable improvements in health. Almost everybody, and invalids in particular, knows, perhaps, how difficult it is under ordinary circumstances to change their established habits from unwholesome to wholesome. The early rising, the walks before breakfast, so delicious in the feelings of freshness and vigor which accompany them, the regular periods of rest, the quiet and repose, the wholesome food and congenial surroundings, all contribute and share in making the change of life easy.

Most important in the series of needs of the sick organism, which we have stressed, is the preservation of organic structure. The second is to economize the expenditure of functional power. The third is that of supplying the body with adequacies of all the primordial requisites of organic existence.

We have traced all disease primarily to violations of the laws of life and, secondarily, to the self-poisoning that grows out of these violations. What is needed is a plan or mode of elimination much more compatible with physiology than those proposed by the so-called schools of healing. Fasting meets this requirement and will be discussed more fully in a subsequent chapter.

If health, as *Hygienists* insist, consists in man conforming to certain conditions of organic existence and disease rests upon his failure to conform with these conditions (if disease is but the struggle of an impaired organism to relieve itself of the effects of certain acts and unfavorable conditions), what remedy for sickness can be so potent as a faithful return to those conditions and patterns of behavior, remaining in which would have preserved him in health? Does it not appeal to the intelligence of the reader that in proportion as the sick organism is arranged normally to those conditions the normal effects of which

promote health, will the patient recover health?

Let the sick man keep in mind, then, that to recover health, he is not called upon to suffer the performance of some mysterious operation of some exotic and adventitious, possibly rare, substance, nor, to sacrifice some essential part of his organic constitution, but only to understand well the elemental conditions of his being so that he may reorder his life to accord with its obvious requirements. The administration of *specifics* while the causes of organic and systemic impairment are neglected is stupid. Whoever hopes to secure the natural vigor of his organism or to realize the rich joys and blessings of uninterrupted health by means of the employment of poisons and disorganizing elements is destined to be disappointed.

All of the needs of normal physiology are present in states of disease and require to be supplied to the end that organic and functional integrity may be preserved or restored. *Hygienic* care comprehends, not only a regulation of the diet, but a synthesis and coordination of all the factor-elements of normal living--drinking, breathing, sunning, clothing, exercising, resting, sleeping, emoting, temperature, etc.

In a broad sense it may be said that supplying the conditions of health involves also the removal of all causes of disease on the one hand and the recuperation of energy and the elimination of toxin on the other, thus making the four elements of successful care of the sick, as already outlined, to be included in one comprehensive thought of supplying the conditions for health, which thus becomes the equivalent of the means of restoring health.

If we supply the conditions for either mechanical or chemical action, we get it with unvarying certainty; what reason is there to doubt corresponding certainty in vital operations? Surely human life can be no more the subject of chance than the explosion of gun powder, the manufacture of alcohol or the operation of a steam engine. The one supreme duty of the *Hygienist,* therefore, is to supply, comprehensively, the conditions for health and permit the living organism to work out its own salvation.

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Hygienic Care of the Sick

CHAPTER XXV

The *Hygienic System* grew directly out of the effort of men trained in physiological science to create a system of mind-body care, both in health and in sickness, that was founded on the principles of physiology. Contrast this effort, initiated by Graham, to use the principles of physiology as the basis upon which to predicate a way of life, with the effort of medical men to so twist physiology as to make it appear to support their drugging practices--practices which had evolved in advance of physiological science and which are obviously anti-physiological.

In the care of the sick *Hygiene* peddles no *cures,* offers no grab-bag full of *therapeutic* modalities and has no treatments for sale. It holds that only the elemental requirements of the living organism, the primordial requisites of organic existence, can be serviceable in either a state of health or disease and that, other than these, all else is illusion. The time must surely come, and this in the immediate future, when it will be generally recognized that only such substances as help to constitute, in health, the fluids and tissues of the living organism can be of use to the body in a state of sickness.

A *Hygienist,* Ellen M. Snow, M. D., writing in the *Journal,* 1856, said: "We do not profess to cure disease in the common acceptation of the term. We can only supply favorable conditions. Nature, and Nature *alone,* can effect a restoration to health." Coming, then, to a consideration of the means of providing "favorable conditions," she said, first, that "we cannot do this by introducing into the system agents which are incompatible in themselves with the healthy exercise of its functions." Then she adds: "We have surrounding us, in the air we breathe, the food we eat, and the water which serves a variety of purposes, agents which are necessary to the maintenance of life, and therefore perfectly compatible with the structures of the system." These she called "hygienic agencies," and said that by modifying conditions, these could be made to subserve important purposes in the restoration of health.

In the place of the systems of *healing* that now command the blind patronage of the sick, we offer a simple, plain, easy-to-understand system of mind-body care, with nature as its guarantee, the cardinal principle of which is that nature works for the restoration of health by the same means and processes in kind by which she works for the preservation of health. *Hygiene* holds that, as science and art are the children of nature, made wise by her teachings, that is not real science or true art, however illustrious the names that propogate them, that uses or proposes means and processes which nature indignantly rejects.

How, then, account for the reliance of the masses with the blind confidence of religious devotees on modes of treating disease which, so far as they produce effects, kill or tend to kill? So strongly is this absurdity held, even by men of education, it is unscientific to get well without resort to killative means. Indeed, it is scientific to die of poisoning. And so *Hygiene* is considered unscientific and empirical, void of all claim to the confidence of the invalid, because it begins and concludes its whole effort by a deliberate recognition of the supremacy of constructive and normal things and processes.

The simple principle that drugs never cure disease, but that healing is always a biological process, is the fundamental premise of what the early *Hygienists* called the Hygeio-Therapeutic System. Trall said of the *Hygienic System* that "it claims to have better success in restoring chronic invalids to health and in the treating of all kinds of acute diseases than is claimed or ever was claimed for any drug system ever known on the earth." A few days' care suffices in acute disease, but a chronic one may require weeks and months of persevering care, according to the condition of the sick and the nature of his impairment.

The normal condition of every organized being--plant, animal or man, is health. Disease is the result of some violation of the laws of nature. *Hygienic* care of the sick requires the removal of the consequents of such violation of law and a return to normal conditions. It consists in adapting the supply of the normal or

physiological needs of the body to the capacity of the impaired organism to make constructive use of them. It is not essentially a program of denial, but of adjustment.

Whatever the body can constructively use and the amount that it can thus use, it should have; for the purpose of *Hygienic* care is to meet life's needs in a manner that enables it to restore a normal physiological state as quickly as possible.

Hygienic means are not employed as cures, nor are they employed with which to *control* symptoms. The *Hygienic* theory has vital action occurring where it is needed and, therefore, where it is safe to have it. This action should not be interfered with, either by drugs or by treatment of any kind, nor should it be diverted to points where it is not needed.

So intrinsically superior is *Hygiene* to all other methods of caring for both the well and the sick that nothing is needed to commend it to the general judgment and to give it general public approval, than a full understanding of it.

There is no such thing in the natural order of things as escaping from the consequences of our acts. Hence, *Hygiene* teaches and insists upon the principle that before health can be regained, there must be entire conformity to *Hygienic* law. Unlike the *curing* systems, *Hygiene* holds out to no person immunity from the consequences of actions and modes of living that violate or are in conflict with the laws of being. It does not tell the sick that they may continue to live in violation of these laws and still, by some magic potency, recover from the consequences. But it does point to the fact that living organisms are so constructed and endowed as to be able to repair their damages and restore their functions when the violations of biologic law are discontinued.

Today everybody is against you--everybody and everything is in your way. All attempt to lead you down the wrong path and influence you to do wrong. Nobody points out to you your initial errors; nobody shows you how and in what way you have violated the laws of being. Nobody stands up for the wisdom and goodness of the constitution of nature, as displayed in our own organism and its normal relations to its environment; nobody reveals to you the great, simple and most sublime of truths--that incorporated in every living organism itself is a great vital recuperative capacity as part and parcel of its very life, identical with and inseparable from our existence, by which and through which the organism is evolved, its waste recuperated, its injuries repaired, its infirmities removed and its diseases healed. Nobody seems to know anything about this; nobody seems to believe in it and you dwell in the common darkness of those around you. But it is no consolation to the sufferer to know that he is but one among many who are ignorant. Such knowledge does not repair his injuries and it does not help the others.

Were a man sick with typhoid fever, during the last century, his physician would dose him with several kinds of drugs, all in 24 hours. What, *after* that, was the physician likely to know of the ordinary course or natural developments the disease would take? Nothing. For drugs so mask the symptoms and the condition of the patient that no physician can tell after the first 24 hours of drugging what his patient's condition really is.

There was almost always an aggravation of erratic symptoms, such as gripping and tympanitis immediately following any arrest of the diarrhea in the early stages of typhoid. In this disease, too, cerebral complications are easily induced by *stimulants* given to the patients. Only when diseases are permitted to run their course absolutely without drug treatments and other suppressive measures, is one able to gain insight into the natural history of disease.

What medical men speak of as progress, often represents nothing more significant than change, although the change is sometimes for the worse. It frequently happens that the change is from a bigger evil to a lesser one. Let us take the case of pneumonia. Under the old battle-ax treatment of the last century, the death rate was very high. With the introduction of penicillin, there was a great reduction in the death rate and this has enabled physicians to do considerable crowing over the progress they have made. Actually, all that occurred was a substitution of a less lethal mode of treatment for the older and more lethal mode of abuse--this is to say, penicillin does not *cure* more cases of pneumonia, it only kills fewer. Penicillin has proven very effective in suppressing the symptoms of pneumonia and, in spite of the fact that it is a very

dangerous drug, often occasioning serious side effects and even death, it is less lethal than the drugs employed 25 years ago.

"Hygiene may be good in some trivial ailments, but I would not trust it in severe cases," say many who lack a full understanding of the principles involved. There is no possibility of overrating the principles on which the *Hygienic* plan of caring for the sick is based. They are as grand as nature, of which they are eternal parts and are, therefore, worthy of our implicit confidence. If "success" is to be estimated by the comparative number of recoveries under the various modes of care, certainly those modes which abjure drugs in all forms possess all the advantages, besides their recoveries do not have to be made all over again ever so often.

The argument of our opponents runs about like this: *Hygienic* means are adapted to health. Disease is the opposite of health. How can *Hygienic* means be restorative in this opposite state? But this question misses the essential work of caring for the sick. What is to be restored? *Hygiene* does not *cure* disease; it does not aim to *cure* disease. It aims at the restoration of health of the sick organism and it proposes to restore health with the elements of healthy existence.

What is disease? It is not a thing to be removed, expelled, subdued, broken up, *cured* or killed. It is not a thing, but an action; not an entity, but a process; not an enemy at war with the organism, but remedial action, a remedial effort; not a substance to be opposed, but an action to be left alone. The drug system endeavors to remove disease; the *Hygienic System* endeavors to remove the causes of disease. In order that the forces of restoration shall succeed in restoring health, the sick should have normal conditions--this means the proper use of *Hygienic* means and conditions.

If we can accept the self-healing power of the living structure and can bring ourselves to trust the recuperative powers of the human organism, we will find no need for the myriads of "aids to nature" that are peddled by the many schools of so-called healing. The poisons we shall leave to physicians. The *curative* effects of poisons is their idea and they are stuck with it. The *curative* effects of poisons is the one idea, the central idea around which all their practices revolve. By it they live and move and have their being. Those things only which are normally related to the living organism are truly useful in the care of the sick; all things not normally related to the living organism, all poisons, all things that are pathologically related to the organism, are employed on the basis of premises that are false and absurd.

It will be found, upon honest investigation, that *Hygiene* does not consist in the use of food only or of the fast only, but of due attention to all the facets of life. Diseases are results of violations of the laws and conditions of being and health can be restored only by the sick individual being taught to live in harmony with these laws. He who expects to be "made whole" and still continues to live in a way to impair his organism may as well expect to sober up while he continues to drink.

In *Hygiene* we insist upon a free supply of fresh air; we regulate the amount of exercise which should be taken; we pay rigid attention to the quantity and quality of food, its preparation, combinations, and the time of its eating; we regulate the amount and kind of clothing, the habits of rest and sleep, temperature of the room, the amount of water drunk, the exercise of the emotions, etc. We permit no unnecessary waste of the power of life, but conserve it, hoard it, and permit its use in the work of repair and reconstruction.

In its widest sense, *Hygiene* is the application of the principles of nature and the use of the normal means of life for the preservation and restoration of health. In disease it consists in finding and removing the causes of bodily impairment and restoring the conditions of health. At present, drugs are esteemed as important and essentially useful; but this esteem of the people for such substances is exactly proportionate to their departure from the use of the normal things of life and health which are provided by nature and which are competent, not only to sustain them in growth and reproduction, but also to keep them from being sick. When the people shall come to see-they are coming to see now-that it is quite easy and simple to maintain health, because it is normal to be healthy and health is the normal product of the legitimate use of the normal means of life, that it is easier to maintain a normal state of health than it is to recover from an abnormal state of disease, then will they learn to rely upon *Hygienic* means, not alone to maintain health, but also to restore it. Then will the almost infinite brood of shams and charlatanisms, in the efficacy of which the popular faith has so long largely reposed, go to the bottom of perdition and never rise

again.

Editorially, Trall wrote in July, 1860: "Our system is hygienic, not drugopathic. It is precisely what it pretends to be--nothing more, nothing less. It professes to cure diseases--all diseases--by the employment, exclusively, of such agents as are in normal relations to the living organism. These, as we have repeatedly stated, are *air, light, temperature, water, food, electricity, exercise, rest, sleep, clothing, passional influences,* etc. Whenever a physician prescribes aconite, capsicum, calomel, quinine, opium, wine, brandy, larger beer, bleeding or blistering, he is practicing *drugopathically.*"It is only necessary to add that we use these *Hygienic* materials as they are normally related to the body and adjust them to the capacities of the sick organism.

We demand the employment of the normal means of preserving life and of unfolding the physiological capacities of man. The great question with the reader is simply this: will these means of *Hygiene* recuperate our wasted energies, restore their normal actions to our wasted organs, enable our body to heal itself and make of us men and women again? You cannot understand how such simple means as air and light, water and food, activity and rest and sleep can be so effective in restoring you to health. You think that you require something more potent, something more complex, something more mysterious, something that exercises a more particular influence upon your disease, if you are to again become well.

But, if you will reflect a minute, you will realize that these "simple" means are the regular and, so far as is known, the only sources of organic substance and functional energy. They are the very stuff of life itself. If they cannot provide you with the means of recuperation and reconstruction, what is there that can? Besides, what is so simple about them? You call them simple only because you are so familiar, in a superficial sort of way, with them. But is air more simple than aspirin; is sunshine more simple than penicillin; is food more simple than cortisone?

If, as we contend, disease is remedial effort, the legitimate work of those who care for the sick is that of supplying the conditions that assure the success of the remedial work. A knowledge of the vital laws will teach people that the first need in the care of the sick is the removal of the causes of disease and not the suppression of vital processes that are designed to restore health. These two processes, that of removing cause and that of supplying the conditions of health, constitute *Hygienic* care. It is *Hygienic* because it uses in its management of the sick only those things which have a normal relation to the living structures. Except for surgical purposes, it has no use for any other agents in the care of the sick. Listing *Hygienic* agencies in January 1874, Trall included mechanical and surgical appliances, although it must be admitted that these are not truly *Hygienic.*

There is a great rage today for specialty, as if there were great virtue in them--in themselves considered. This we regard as a serious mistake. The special, to be good for anything, must be born of correlations and dependent on the general. Special means, in the treatment of the sick, must, in the very nature of things, grow out of their conformity to general means. As, for example, the general principle on which the health of the human organism is to be preserved is that "agents," "instruments," "means," "influences" or "forces"--if you prefer these to other terms which are used--whose ordinary operations are to build up each organism (and only such means are to be used) shall be used so that they shall form a combination, thus greatly increasing their usefulness. These forces, if we may use this term, are air, water, food, light, warmth, rest, activity, cleanliness and wholesome mental influences. Each of these is good, but each is better in combination with the rest. The larger the combination the stronger the influence for good.

Suppose we have a patient in whom a specialty is needed. What shall it be? Most manifestly, something or some appliance which in ordinary conditions of the body can be used for its benefit. A specialty, therefore, consists in using under particular conditions of the organism, in a particular or special manner, something or some substance which in ordinary conditions the body will or may use in an ordinary way and this is the limit of the use of specialties. Beyond it no doctor can go, without entering the boundaries of empiricism. No matter how learned he may be or profound his intelligence, no matter how philosophical or skillful--the instant he passes this line he becomes a charlatan. Diplomas may grace the walls of his office; professorships may seek him--he is all the more censurable the more he traverses the territory of the uncertain. All that sphere is uncertain wherein, passing out of and from under the authority of those great general laws which govern the operations of life, the doctor undertakes to find his

specialties in "things," "means," "substances," and "remedies," which bear no general healthful relation, but, on the other hand, do bear a general unhealthful relation to the organism.

Hygiene is not a desperate remedy to be resorted to only in emergencies, but a very agreeable and effective plan of care that should be resorted to at the outset of trouble. Now, what does *Hygiene* propose to do? It is not a system of *curing.* It is not a substitute for the biological processes of healing. It proposes to remove man from the false conditions in which he lives and teach him to live in obedience to the laws of his being. In other words, the cause of disease must be removed and, having done this, there is power within the organism to do the rest. The weak patient may be encouraged as well as guided; he may even be scolded. But, he requires no treatment. A gentle lift with *Hygienic* means, no violent kicks with drugs, constitute all the assistance nature can make use of.

Hygiene embraces and seeks to embrace truths in nature and their application, so as to embody a correct science, applicable to the preservation and restoration of human health. It relies upon no favorable accident to result from manuvering the body with foreign matters. It turns physiology to account in the care of the sick and is exultant at the range of means open to it from this source, competent to secure the highest physiological good. If the teachings of *Hygiene* seem somewhat incredible at first, despite the apparent soundness of its principles, this is only because we have been so strongly conditioned from early infancy to think in terms of *cure* and *curing.* Necessarily, then, *Hygiene* must be superior to all the other modes of care, inasmuch as all its force, when intelligently applied, works harmoniously with the forces of the organism, while drugs work destructively. There is no magic nor miraculousness in *Hygiene.* Its mightiness lies in its naturalness; the wonders it accomplishes lie in its simplicity. It is not enough to demonstrate by reason the superiority and all-sufficiency of *Hygiene* in all remediable conditions. Disease is always more or less uncertain and so it is impossible to be certain when the disease has been obscured by the deleterious effects and influences of drugs. *Hygiene* has scarcely a fair play after drugs have been used. *Hygiene* gives rise to none of those maladies that are denominated iatrogenic diseases. Disease, when no drugs are used, seldom leaves behind any sequelae. May we not infer from this that a plan of care which is consonant with and founded in a knowledge of physiology should be innocent?

It is a significant fact that the hazard from the ignorant employment of *Hygiene* is small when contrasted with that which accompanies the most *scientific* employment of the most popular drugs. One may use *Hygiene* amiss without endangering life; it will even prove beneficial. This is weighty evidence of the instrinsic goodness of *Hygienic* materials.

Admitting that drugs may, in some instances, apparently improve function and structure and restore normal and healthy action to the various organs of the body, we call attention to the undeniable fact that this improved condition and action is apparent only and never lasting. A laxative may occasion increased bowel action in constipation, but it does not remedy constipation and its supposed benefits are not susceptible of indefmite extension. On the contrary, its continued use results in worse constipation. Tea and coffee appear to remedy nervous irritability in a wonderful way, relieving headache, gloomy forebodings, etc.--but they appear to help only to make matters worse. A drug may be given (veratrum, for example) that will seem to control and regulate the excited pulse; but it depresses the heart's action. As soon as the drug is eliminated, the pulse is as excited as before. Can any definite relation be shown to exist between the abnormal condition to be remedied and the means commonly used to remove it?

We do not offer *Hygienic* care as a substitute for drug treatment. We do not think that drug treatment has any value; we deny that it can ever restore health. A great error in regard to the *Hygienic System* is that of considering *Hygienic* means as substitutes for drugs--that food, air, water, sunshine, warmth, exercise, rest, sleep, bathing, etc., are substitutes for penicillin, aspirin, cortisone, etc. Never was there a greater delusion. We may as well call truth and honesty substitutes for lying and stealing. They are totally dissimilar-in no sense interchangeable; under no possible circumstance of health or disease can the means of *Hygiene* be regarded as substitutes for drug poisons. The first are good; the second are bad--this is the whole of the matter. We affirm the omnipotence of *Hygiene* and decry the destructive tendencies of drugs when used in the care of the sick.

On what principle are the great and marked changes in the physical and mental conditions of the sick, when cared for *Hygienically,* to be accounted for? Certainly, not to the superior skill of the *Hygienist* over

other men of other schools of thought and practice. We explain it as being due, in large measure, to two things:

1. While under *Hygienic* supervision they are permitted to take nothing, the natural and legitimate tendency of which, in its effects upon the human body, is to injure or weaken, disturb, impair or ruin it.
2. They are appropriately supplied with those normal means and conditions the legitimate effect of which, upon the human body, is to build and repair it.

Instead of the most poisonous and most deadly substances in all the kingdoms of nature being the proper means of restoring health, we want the most friendly and congenial elements in all nature, both for the preservation and the restoration of health. We must not permit ourselves to be fooled and misled by the plausible sophistries and shortsighted delusions of those who say that what is poison in one circumstance or condition of being is the very supporter of life in another; that what would destroy our health when we are well can be made to build up and re-establish health when we are sick.

We have been taught to ask and expect statistics. Where are your statistics? Where are your experiments? Statistics represent quantitative measurements, but are without value in the absence of adequate qualitative study. For example, a new drug is placed on the market with a mass of statistics derived from animal experimentation and clinical tests. The statistics appear to support the advertised value of the drug, but a few years of experience with it and evaluation of its assumed benefits results in it being discarded as ineffective and harmful. The statistics were misleading. The results of the experiments were misleading. Any man who will take the trouble to watch the passing *medical* fads for ten years will discover that this is the usual fate of drugs. Neither experimental observations nor the compilation of statistics, however great the compilation, proves of real value as a guide in the care of the sick.

Opponents of hygeio-therapy frequently pointed to the discrepancies in the practices of the hygeio-therapists as evidence that the system was not well established on a scientific basis. "And well they may," said Trall, for many of the early *Hygienic* practitioners did not entirely abandon their former drugging practices. It seems that it was primarily because Trall was adamant against all drugging that he was declared to be "too radical."

A number of "sudden converts" to *Hygiene*--who run into it as they would into some kind of religion or land speculation, or something of the sort, just for the sake of excitement or, perhaps, because they think it will pay or, being new, will provide something to talk about--begin soon to say: "Oh, *Hygiene* is well enough for some people or in some diseases, but it can't *cure* everything." How do they know? No *Hygienist* pretends that it will *cure* anything, but this does not bother them. They are simply oblivious of the fact that there are many things in heaven and earth that are not dreamed of in their philosophy. It is just possible that they may not have become familiar with all of the capabilities of *Hygiene.* They would repudiate the *Hygienic System* because it cannot perform miracles and raise the dead.

The strength of *Hygiene* lies not only in its naturalness and simplicity, but also in the great ideals that have and do actuate its proponents. Among these ideals is one that demands the universal enlightenment of mankind. Other systems write books, but they are for the professionals only. Ours are for the people. What medical journal is issued for the people? Upon the enlightenment of the people must rest the future health of mankind.

There are some things connected with the progress of *Hygiene* that are peculiar and gratifying. Other systems may have made as great progress, but none of them have made a progress of the same character. Other systems, and some very notably, have appealed to a blind faith in their dogmas and to a belief in the marvelous. Progress in *Hygiene,* on the other hand, has been progress in real knowledge. The most thorough converts to *Hygiene* are the best informed and most intelligent. Indeed, up to this time, there are few others. A man accepts *Hygiene* just as far as he understands its principles; his belief in the common practices of medicine, and especially the use of drugs, is just in proportion to his lack of such understanding.

The *Hygienist* wants to know the why and wherefore of each thing that he does; the devotee of drugging

shuts his eyes and swallows his medicine or bares his back and submits to a thrust. Whereas, in medicine, the patient must have confidence, in *Hygiene,* the first step towards health is that of enlightening the mind. The best foundation for a belief in *Hygiene* is a thorough knowledge of physiology and a knowledge of the causes of disease. Our only mystery is the great mystery of life. All else is an open book.

When we have explained the human constitution and its relations to external nature, our work is done; when this explanation is understood, we have made another *Hygienist.* The attention of people may be attracted by recoveries under *Hygiene,* but it is by an understanding of its principles that they are converted. Hence the need for more books, more teachers, more missionaries.

The most important part of our educational activities is that of bringing the popular mind to a comprehension and appreciation of the principles of nature. Until we have done this, earth's human inhabitants must continue to grope their way through the mists of superstition and false theories.

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Application of Hygiene

CHAPTER XXVI

The patient has pneumonia and we seek to care for him *Hygienically.* We give him enough food to meet the normal demands of nutrition, provide as much water as thirst demands, give him plenty of air to breathe, a daily sun bath and give him a daily bath. We require that daily he take a brisk walk; we provide him with a television program to watch and permit him to have plenty of congenial company. All of this is strictly *Hygienic;* but in defiance of it all, the patient would probably die--not for want of *Hygiene,* but for lack of proper adjustment of *Hygiene* to his needs.

Writing in the *Journal,* June 1859, D. A. Gorton, M.D., said: "When we lay down the principle that nothing in this wide and expansive universe can restore the primitive harmony of the disordered organism but the *conservative* power resident in all living tissues, we have a grand physiological idea or basis upon which to work understandingly. Taking this principle as our guide, we necessarily discard the use of those agents whose effects are to disturb the equilibrium of the vital forces. When we select our remedial agents, therefore, our choice necessarily lies between two classes of substances, which we might denominate *usable* and *non-usable* agents. Hence we are to select the former; and in so doing, we do but imitate unerring nature."

She pointed out on this occasion that when the body is violently active in remedial effort, to supply her plentifully with pure *Hygiene* in the same way that we would a healthy individual, would facilitate its destruction. Then she adds: "It is obvious, therefore, that the mere supply of the elements of hygiene are not adequate, in all cases, to cure disease. And when we assume this obviously erroneous position, we expose ourselves to the unrelenting attacks of our enemies, our fancied arguments are liable to be blown into 'thin air,' and the fabric of (our) boasted system shattered into a thousand fragments. When art, therefore, affects the cure of disease by the use of hygienic remedies, it is cured *hygieopathically,* not *hygienically.* In an argumentative sense, the distinction is broad and important; in a practical point of view it is superfluous . . ."

Hygiene is the preservation and restoration of health by the use of means that are absolutely essential to life and that are abundantly supplied to man to preserve him in a normal state. But in an abnormal state these means have to be adjusted to the body's capacity to use them. Dr. Gorton wrote that the distinction between preserving health and restoring health should be borne in mind. She wrote that many prominent advocates of the *Hygienic System* had failed to fully define the difference between the two processes; that they have argued so indefinitely on this point that the opponents of *Hygiene* have maintained, with a fair degree of logic, that *Hygienic* care fails to meet the demands of an age of suffering and disease. She added: "It would not, certainly, were the elements of hygiene applied in a diseased state hygienically." She differenciated between the normal application of the means of *Hygiene,* that is, for use in health, and their application in disease, calling the latter *pathologically.* She said: "Applied *pathologically*--according to pathological indications--their potency in restoring harmonious activity is not equalled by any drug in the *materia medica."*

Applied to the sick, the amount of food the patient should receive, the amount of bathing he should do, the length of time he should stay in the sunshine, the amount and vigor of exercise he should have is dependent upon the ability of his organism to appropriate and make constructive use of these substances and influences. The more vigorous patient may bathe regularly, exercise freely, eat more food; the feeble patient must rest more, bathe less, take less sun, eat little or not at all and treat himself with the utmost gentleness. Any heroic measure will prove harmful.

Returning to our hypothetical case of pneumonia, we provided the patient with all the means of *Hygiene,* but without adapting these to his needs in the state of disease, hence, probably killed the patient. The

lesson derivable from instances of this nature could have been learned ages ago had intelligence reigned, rather than a pretended and imperfect *science.* The superior efficacy of physiological care is soon evident to the candid observer.

At the time when Graham and Jennings began their work, the first thing a physician did when called to the bedside of a sick man was to have him sit up in bed and then bleed him until he sunk down, fainting. The lancet was regarded as a most powerful remedy to counteract inflammation. *Hygienists* advised, instead of opening the veins and letting out the vital fluid, that the capital of health should be left untouched. They had learned not to interfere with the living process, except to supply suitable materials for its use and to supply conditions favorable to their appropriation. The true principle of caring for the sick is that of providing the sick organism with favorable conditions for the efficient operation of its own remedial processes. This principle rejects *in toto* every means and process which, in its nature and tendency, in authorized medical quantities, degrees or modes of application, is known to directly destroy life or to injure the living tissues, or to interfere with the performance of the normal physiological activities of the organism.

Having recognized the profoundly important fact that the vital system may be consciously directed in its physiological actions by due attention to its basic requirements and that these requisites may be adapted to every pathological requirement, the *Hygienist* may extend his investigations in many new directions and an almost endless variety of detail may be entered upon in adjusting the special use of the several means of life to the varying requirements of life under many circumstances and conditions. He should recognize that in proportion as this is effected shall we acquire a more effective system of *Hygiene.* Such a perfected *Hygiene* must displace the vague and contradictory plan of treating the sick that is in vogue.

Hygiene in sickness is the use of all the means by which the living organism is originated, preserved and perpetuated in nature. It is the complete bringing of the sick under normal physical and emotional conditions. Under the benign influence of the normal things of life, health soon returns.

The *Hygienic System,* in its application to the sick, comprehends in the broad scope of its means, the adaptation of all normal materials and conditions to the needs and capacities of the diseased organism in the restoration of health. Replying in the *Journal,* March 1859, to a criticism made by Joseph Bigelow, M.D., of Boston, Dr. Trall said that among its *Hygienic* resources are "air, light, caloric, electricity, magnetism, personal influences, exercise, food, sleep, rest, clothing, drink, bathing, etc." (Referring to electricity, Gorton said: "Electricity and magnetism are generally classed among the hygienic agents, and perhaps justly so; but they can not be considered primitive agents.") The *Hygienic System,* he pointed out in this same editorial, embraces every directly remedial agency in the universe and rejects nothing that nature does not reject. He said it excludes nothing except those poisons which nature declares to be incompatible with the living organism. Bigelow had accused them of relying exclusively on cold water. Trall replied that: "In very many cases, cold water, so far from being the 'one remedy,' is not used at all. In the majority of cases, water, of any temperature, so far from being the 'only remedy,' is not the chief or leading remedial appliance. And in a large list of diseases we place much more stress on either eating, breathing, or exercise, than we do on bathing."

"How are pathological conditions removed by hygienic remedies?" asked Dr. Gorton. Replying to her own question, she stated:

1st. By a *normal* supply of those agents by which life is preserved and maintained.

2nd. By the application of the most available *Hygienic* remedial resources, according to the principle of care which she had previously indicated, which consisted in the modification of the remedial effort by a wise discrimination in the use of the different *Hygienic* means available. She added: "Particular remedies (by which she meant particular *Hygienic* means) are indicated in particular cases." We can deny the body water only as it refrains from demanding this element of *Hygiene;* we cannot deny it air at any time; food can be withheld only so long as the body is in possession of reserves to sustain it while no food is taken; rest is imperative in states of great weakness or prostration; exercise must be adjusted to the abilities of the chronic sufferer, etc.

The *Hygienist* regulates the food, temperature, activity, rest, etc., of the sick not with the thought that such regulation constitutes a *cure,* but with the full knowledge that these are the fountains of organism without which life cannot continue. He knows that healing is a vital or biological process, as much a function of the living organism as digestion, circulation, respiration, nutrition, excretion, etc., and that he can neither imitate nor duplicate the process.

If there is fever, the *Hygienist* does not administer antipyretics or febrifuges to reduce the temperature. Experience has demonstrated that such things are neither necessary nor beneficial. They are impediments thrown in the way of the organic energies and, though they may occasion an apparent change in the condition of the patient, they are not wanted by the living system and must be expelled from it as rapidly as possible. In thus diverting the body's effort in expelling the drug, the life of the patient may be snuffed out. At the least, his suffering is prolonged.

All this is out of place at all times; it becomes dangerous in low or atonic states of the body, when energy is low and must be husbanded with great care. Medical students study physiology, but never think of applying its laws to life, nor do they ever think of doing so when, after graduation, they are engaged in treating the sick. No amount of study of physiology causes the medical student or the medical practitioner to alter his ways of life. His studies are all related, both by his texts and by his teachers, to *medical* and surgical practices.

Hygienists do not treat disease, but supply the means of life to the sick organism in different circumstances and conditions in accord with certain definite natural principles, not with the idea that this cures disease, but with the purpose of supplying physiologic needs. These needs are not supplied by any mechanical routine, but according to the conditions and actions of the organism. In *Hygiene,* the healing processes of nature are aided from the beginning by supplying the normal needs according to the capacity to use them; hence, recovery is proportionately rapid.

There are no radical changes in the sick organism to cause it to need that which it does not need and cannot use in a state of health. Its needs are the same in kind; its changed needs reside, not in the kind of needs, but in the amounts of these it can appropriate and utilize. If digestion is suspended, it does no good to take food; if there is great weakness and an unmistakable demand for inactivity, exercise would be ruinous. *The measure of good care of the sick is the capacity of the impaired organism to appropriate and constructively use the normal needs of life.*

This rule--that the ability of the organism to utilize the normal factors of life--constitutes the measure by which these are to be supplied to the sick person and is identical with the rule that should govern us in supplying these same needs to the well. Excess, which I shall here define as any amount above the genuine needs of the organism, whether well or sick, is hurtful rather than helpful. A strict observance of this rule in caring for the sick will enable us to handle the sick according to individual needs or limitations and not according to any cut-and-dried formula which is supposed to fit everybody. *Needs and capacities vary with individuals and with the same individual at different times.*

The adjustment of means to ends that this requires is the same in kind as the adjustments that the healthy body is making ordinarily at all times; they are the very adjustments that the sick body would make were it left to its own devices. In health we take more water or less water, as need arises, and are guided in this by our sense of thirst; we take more food or less food as we require more or less, and are guided in this by the demands of hunger; we take more rest and more sleep, or less of these as we need them, and are guided in this by our sense of fatigue and sleepiness. Such adjustments are normal parts of the process of living. Our trouble in sickness arises out of our desire to have the sick, hence, crippled organism take food, air, water, exercise, etc., as though it were well and leading an active life.

We do not, as some early *Hygienists* thought we should, employ *Hygienic* means for the modification of the remedial effort--to exhaust, depress or diffuse as circumstances demand. *Hygiene* is not a means of controlling vital activities in the way the practitioner thinks they should be controlled. All the control that the vital activities require may always be secured by supplying physiological wants--that is, by placing the sick organism under the proper conditions for the successful operations of the body's remedial actions. Were *Hygiene* a system of arbitrarily controlling physiological activities, it would simply be another

system of *cure,* hence false. (Charles F. Taylor, M.D., was of the opinion that, as *Hygienists* continue the development of their system, "a complete system of medical hygiene" will be wrought out.) As study and experience have increased our understanding, we no longer consider it legitimate to juggle Hygienic means, as some early Hygienists thought they should be juggled.

It is true that by manipulating the means of *Hygiene,* it is possible to control physiological activity to a marked extent and it may still be thought by some that we can and should do this for remedial purposes; but it is doubtful that we can consider meddling with the activities of life as constructively as these may think. Instead of control, we should seek to supply needs. The greatest danger, both with the practitioners and the patient, is in overdoing and this results from ignorance of the truths of physiology and biology. Unless these truths are known and observed, *Hygiene* will degenerate, like the drugging system, from a matter of principle into a matter of routine and this will end its power.

When we fully understand that *Hygienic* means do not act on the system, but are used by the body in virtue of their fitness to serve its vital needs, then we will understand that the needs of two sick persons with the same symptom-complex are not identical in degree, although they are identical in kind. One will require more rest or more water or more abstinence or more warmth or more food, etc., etc. This adjustment of the physiological needs of life to the requirements or capacities of the sick organism is the very essence of *Hygienic* care of the sick.

Note particularly that these are not means of *cure,* but needs of life--the same needs, in fact, that are required by the healthy body every day in order that life can go on at all.

To make this plain: if we supply the sick with fresh air, we do so for the same reason that we supply fresh air to the well--not to *cure,* but to supply an indispensable need of the living organism under all conditions of existence. *Hygiene* is the preservation and restoration of health by the use of means that are absolutely essential to life and that are abundantly supplied to man to preserve him in a normal state.

The sick person is not to be cared for by some mechanical routine, but according to vital needs and vital actions. *Hygienic* means are not applied by routine according to the name of the disease. Dr. Trall was right when he said: "There is no such thing in the universe as telling a person what to do because he has a given disease. We can only indicate the rule of action." It is possible to tell him the principles that govern our actions or that should govern them, but if he does not understand the principle, he cannot follow it.

How can the people or the *Hygienic* practitioner apply a principle if they do not know what the principle is? *Hygiene* has long held out to the people the principles which govern the employment of all the legitimate means of care; but few people, as yet, have a comprehension of these principles. By applying these basic principles (not specific *cures*) to the circumstances of each individual sick person, genuine recovery is promoted.

Hygienic care is not directed to the *cure* of disease, but seeks to provide the most favorable conditions for the efficient operation of the body's own healing processes. We recognize the so-called disease as an effort to resist and expel morbific causes and repair damages, not as an enemy to be cast out or killed. When you know how to care for the sick body, you will know how to care for all sick bodies. Of necessity, all sick bodies have to be cared for alike, for the reason that, basically, all human organisms are alike. Their needs are the same. The principle of adjusting these needs to the condition of the sick body is the same in all cases. In caring for the sick, no matter what the symptom-complex is called, we are but applying a principle.

The often-heard complaint that *Hygienists* treat all diseases alike is wrong. *Hygienists* do not treat diseases. *Hygienists* are not in the *curing* business. They peddle no *cures;* they sell no treatments. They supply only the ordinary, everyday physiological needs of the living organism. As these are the same for everybody, it is natural for everybody to be supplied with the same primordial requisites of organic existence. It is a false idea that we should supply one person with fresh air to breathe and another with poisonous fumes to breathe, that we should supply one patient with wholesome food and another with unwholesome food.

The successful practice of *Hygiene* consists of applying certain principles or rules to the ever-varying conditions of invalids and to the various circumstances of disease, having not, as most people seem to imagine, a routine of processes, according to the name of the disease. Instead of resorting to a particular plan of care with a certain amount of fasting, a particular diet, a predetermined amount of rest, etc., etc., we must take a universal principle and apply it to the needs or circumstances of each individual in his particular condition. No man can tell beforehand how much rest, how much abstinence, how much sunshine, how much time, and how often and how many times the *Hygienic* means must be repeated for health to be restored. Fortunately, this is not as serious as it may at first appear; for, unlike drugs, these means of care do not poison. One needs only to persevere until the desired results are achieved.

A routine practice, adopted simply because somebody who is looked up to as an authority advised it, is unworthy of thinking beings. We should have well-defined ends in view in all our applications of *Hygienic* means. We should know why we employ a fast, or a diet, or a form of exercise, or why we demand more rest. We should know why we do one thing instead of another. One man needs only a short fast, another a long one; one needs more food, another less; one woman needs corrective exercise, another only general exercise--it is essential that we employ *Hygiene* intelligently. The indiscriminate, outrageous and unphysiological employment of the means of *Hygiene* cannot be logically expected to yield ideal results.

Of course it is true, as is often complained, that *Hygienic* care of the sick, like *Hygienic* care of the well, is a "simple monotonous repetition." What else can one expect? The needs of life are simple, monotonous and daily repeated. Of course, *Hygiene* is alike for all. All need fresh air--this is not a need of only an occasional individual. All need rest. All need food. All need sunshine. We need fresh air all the time, rest and sleep daily. It does become monotonous, doesn't it? It is repetitive, isn't it? But while we can break the monotony of daily eating by fasting, we cannot break the need for breathing by cutting off the supply of oxygen--too bad, isn't it?

The employment of *Hygiene* requires knowledge, judgment, wisdom and experience. A man, like a parrot, may be taught to repeat wise sayings; but if he lacks good judgment, he will not understand them. Judgment, understanding and wisdom cannot be inoculated into a man so as to saturate his system with them. Until biology and physiology have established for us a perfect science of life, more or less enlightened empiricism will continue to constitute a part of our work; but we must recognize that in accepting experience as a guide, we are faced with the difficulty of finding the right experience.

In consequence of the persistent misrepresentation of the system of *Hygiene* by the practitioners of the various schools of so-called healing and the general air abroad that fasting alone or dieting alone is our panacea for all forms of disease, there has resulted a tendency to obscure the fact that *Hygiene* involves the application of all *Hygienic* measures in the care of the sick. These need but be employed in keeping with the capacity of the sick organism to constructively utilize them.

When we ask: how shall the daily supply of the needs of life be adjusted to the altered needs or capacities of the sick body, we meet with a wide variety of answers and with many proposals intended to solve this problem. We need a simple and entirely physiological means of meeting the modified, but not radically changed needs of the body in illness. Certainly, the most important factor in any successful and biological method of caring for the sick organism depends on a satisfactory solution of this problem. Certainly, we cannot accept those proffered modes of care or *cure* that propose to meet the needs of the sick organism with unphysiological means.

All processes of recovery or healing are but extensions and modifications of the processes that preserve health and the materials and processes employed in caring for the sick must be in consonance with physiology and compatible with all other useful measures. There must always be a normal connection between the living organism, whether in its normal or abnormal activities, and the material things that contribute, more or less perfectly, to sustain psychological and physiological phenomena. As we have emphasized elsewhere, no substance or process that is not a factor-element in physiology can have any value in the living structure under any circumstances of life. That which is not useful in a state of health is equally non-useful in disease.

All the needs of normal physiology are present in states of disease and require to be supplied to the end

that organic and functional integrity may be preserved or restored. *Hygienic* care, therefore, comprehends not only regulation of diet, but a synthesis and coordination of all the factor-elements of normal life--drink, breathing, sunning, temperature, growth, exercise, rest, sleep and the emotions, in keeping with the altered needs of the organism.

Can we reach precision in adapting the normal requisites of life to the reduced capacities of the sick organism? The attempt to do so becomes so complex and confusing that it may be doubted that it can be done or that it is even desirable. We have to leave most of this to life itself.

The bewildering confusion that has resulted from trying to attain precision in supplying the body with the requisite amounts of the several vitamins, the various salts, the several amino acids. etc., illustrates the complexity of the subject. We simply lack the definite and conclusive knowledge and the means of supplying such elemental needs of life with precision. The senses and instincts of the sick man are often more reliable guides than is science. The sick man knows when he is chilly (in need of warmth), thirsty (in need of drink), tired (in need of sleep), hungry (in need of food), not hungry (in need of abstinence), etc. Science can be of service; it is not supreme, except insofar as it serves as a handmaiden to the instincts of life.

Dr. Jackson warned that *Hygienists* should be cautious in their application of *Hygiene* to those whom he called the "drug-smitten," making as few mistakes as possible. This is in line with the warning given by other *Hygienists* about caring for those who have been damaged by much drugging. They are by no means easy patients to care for.

Not every patient who turns to *Hygiene* successfully applies its measures and not every practitioner who calls himself a *Hygienist* properly administers *Hygienic* care. Because miraculous recoveries do not continually result from an indiscriminate, haphazard and often injurious routine of *Hygienic* applications, people become discouraged with the system and its practitioners and often disgusted with its consequences. Happily, however, large numbers of people are now studying *Hygiene* in earnest, with the view of understanding precisely what may be expected from *Hygienic* means and the proper ways of securing such benefits.

It would be false to say that *Hygiene* will save every sick individual who turns to it. The *Hygienic* practitioner, however skillful, cannot be expected to do the impossible. The value of *Hygiene* over every other plan of caring for the sick is that, when judiciously administered, it will save every sick individual who is capable of recovery, while other means of care and especially those modes that administer poisons (drugs), which tend naturally and legitimately to kill and when they do not kill, to render the condition permanent or irreversible or increase the disease, will register a great number of failures.

Let all those of us who conduct *Hygienic* institutions and all of us who live *Hygienically* at home claim for *Hygiene* that which belongs to it, that is, that *it is sufficient for the restoration of health in all restorable conditions, doing this more certainly, more satisfactorily, more quickly, more safely, more expeditiously, than it can be restored under any other plan of care, and that it can restore health in many instances in which failure results under other plans of care.*

Acute Disease

CHAPTER XXVII

Acute is a Latin word equivalent to our word sharp. An acute disease is a short, sharp illness. The symptoms are commonly severe and there is fever, but the disease does not last long. "As a general thing," so it was said in days gone by, "the suddenness of the attack, the loss of appetite, the prostration of the nervous force and the strength, proclaim the unwelcome presence of 'a fever.'" Examples of acute disease are pneumonia, typhoid fever, meningitis, smallpox, measles, scarlet fever, etc.

Chronic comes from *chronos,* meaning time. A chronic disease is a lasting one, often persisting for the remainder of the life of the individual. Although there are often exacerbations of acute symptoms in chronic disease, on the whole the symptoms are less severe than in acute disease and there is little or no fever; indeed, there may be subnormal temperature. Examples of chronic disease are chronic rhinitis, gastric ulcer, chronic arthritis, most nervous diseases, etc.

During the last century acute disease was very common, epidemics being the rule. Almost every year epidemics of diphtheria or smallpox or measles or scarlet fever or pneumonia or, typhoid fever, etc., developed. *Hygiene* and sanitation were largely neglected and *Hygienists* made slow progress in promoting *Hygienic* and sanitary science among the people. It is now everywhere admitted that progress in *Hygiene* and sanitation and not *medicine* was responsible for the disappearance of these epidemics.

The death rate in acute disease, at all ages of life under medical care, was very high, in some instances, in diphtheria, being as high as 100 percent. In typhus, typhoid and yellow fever the death rate was very high. It will be interesting and instructive to contrast *Hygienic* care with medical care of the time and compare results.

The idea prevailed then as now that the patient with high fever must be treated in a way to reduce the fever. The practice is as unscientific as it is fatal. Under the *antipyretic* treatment, so freely employed by physicians at that time, untold thousands were retired to that refuge from physicians which is located several feet below the surface of the earth. *Hygienists,* recognizing the remedial character of fever, did not seek to reduce temperature, as they did not seek to suppress other parts of the remedial process. As a consequence, they enjoyed a much more successful practice.

Thomas Low Nichols, M.D., said that the *Hygienic* practitioner is in a different position from the practitioners of *medicine*--"If he has a case of fever, he would be ashamed to take more than a week in curing it." Kittredge said that as a common thing, he scarcely had to visit a child suffering with the common diseases of childhood more than two or three times before the patient was sufficiently recovered that the family could take charge and complete the work. He said that medical men know "very well that even a very large practice would soon run out if they should stop drugging it," and that "they have only to give one dose of medicine (drug) to ensure at least the necessity for a dozen more."

The great certainty with which acute sufferers recover health under *Hygienic* care induced some early graduates of the Hygeo-Therapeutic College to offer to care for such patients, if within 20 miles of their residences and if called before any drugging was done, with the understanding that if the patient did not recover within a reasonable length of time, they would make no charges for their services. This not only served to reassure people who knew little or nothing of *Hygiene,* but it demonstrated that *Hygiene* could be as effectively carried out in the home as in an institution.

This should answer the question often asked: will *Hygiene* meet the needs in cases of acute disease? It is no uncommon thing to have one whose life has been saved by *Hygiene,* but who suffered with chronic disease, to send a child or a wife or husband to the hospital with an acute disease, saying: "I sent for a

physician who gives medicine for I do not suppose that *Hygiene* would reach such cases."

Hygiene will not reach anything, except those cases in which all the many and varied forms of treating and curing disease have been used and failed. *Hygiene* is valuable and helpful only in those cases that have been declared to be *incurable. Hygienists* are the kind of idiots that abandon all schemes that offer help to the sufferers except one that will work on the broken-down and hopeless. If it offers help to the young and recoverable, *Hygienists* want nothing to do with it. If it is helpful to those who have squandered their inheritance on all manners of *scientific cures,* but is useless in those who are physiologically solvent, *Hygienists* can use it.

In his editorial for February 1860, Trall said: "In no class of diseases are the incomparable safety and superiority of hygienic medication more strikingly manifested than in the eruptive fevers--smallpox, measles, scarlet fever, erysipelas, etc." The "old fashioned" practice of keeping smallpox patients in close, heated rooms, denying them water to drink and drugging them to death was the real cause of the high death rate. Let us always bear in mind the fact that the high death rate in smallpox was due to barbarous treatment. Physicians knew nothing better than heroic drugging and keeping the patient shut up in a foul atmosphere, denying him even the simplest gratification of his senses, literally letting him die for lack of a single drink of cool water. In those dark ages death was the most common result of *medical* treatment.

In 1859 E. M. Snow, M.D., Health Superintendent of Providence, R.I., communicated to the *Boston Medical and Surgical Journal* an account of 11 cases of smallpox which just shortly before the communication was made had all recovered in Providence, all of them cared for without drugs and not one of them dying. In this communication Snow said: "The treatment was expectant to the fullest extent. Not one of the eleven cases took a particle of medicine of any description, from first to last. My efforts were wholly directed to measures to prevent contagion, the chief of which were cleanliness and ventilation. The result was that all recovered--none died. Every case went forward to a favorable termination without a single unfavorable symptom."

Well did Trall exclaim that this is quite equal to the best of *Hygienic* care. "We never claimed for our system, when directed by the most skillful and experienced hands, any better than a cure of all the cases." He asked, if this "expectant" treatment or no-medicine plan "is going to cure all cases of so formidable a disease as smallpox, will not the same principle apply to some other diseases? And if to some, why not to all?"

I think it significant that no complications or "unfavorable symptoms" developed in these undrugged cases, although these were the rule under the drugging plan. It is true that physicians have tried this same experiment a thousand times, of treating disease with and without drugs, and in every instance the results have been in favor of the no-drugging plan; yet, as Trall said: "Prepossessed with the idea that disease would not be, could not be, or should not be cured without medicine, they have always seemed to regard the results of their experiments as entirely miraculous. They have taken the exception for the rule, and the rule for the exception."

Dr. Walter said of smallpox (the discreet variety) that it "is a violent disease, always accompanied with high fever; but if the patient is properly cared for, it is not dangerous." Of confluent smallpox, he said it "has low fever, and under drug treatment is usually fatal."

There is not the slightest room to doubt that the frightful mortality from the "Black Death," "yellow fever," "sinking typhus," "congestive chills," smallpox, typhoid fever and pneumonia was due almost wholly to the poisoning, *stimulating, narcotizing,* bleeding, blistering, cauterizing, leeching, mercurializing, *purging* and antimonial practices of the times. The more heroic the drugging in all epidemics, the higher has been the death rate and the more *malignant* the disease. Even measles and scarlet fever were *malignant* under such treatment.

Kittredge lamented that "many fevers unfortunately are not suffered to arrive at a natural termination,--but are interfered with under the plea of helping nature, and brought to a sudden and fatal crisis in a very few days from their commencement.

"If, however, they are thwarted by medicines, they will regularly put on a critical action."

It was during the war for Southern independence that typhus and typhoid were differentiated from each other. Prior to that time the two terms were usedi interchangeably and the "two diseases" were considered one. In our quotations from the past we have no means of determining what portion of the cases were typhoid and what were typhus. Trall thought that yellow fever was a variety of typhus and said that while in New York he had not had the opportunity to treat a case. He had every confidence that under the plan of care he pursued with "ship fever," "nervous typhus," "putrid typhus," etc., the worst forms of which he had treated most satisfactorily, nine out of ten cases of yellow fever would recover. "It is at least certain," he said, "that drugs do more harm than good."

His care of typhus and typhoid was simple--cold cloths to the head, heat to the feet if these were cold, sponging of the whole body with water of a comfortable temperature, moderate drinks of cold water when demanded by thirst, the wet bandage, fasting or but small amounts of thin gruel, enemas of tepid water if the bowels were sluggish. Discussing the high mortality in typhoid, Trall said that it was unnecessary and that "we do not believe these patients die of typhoid fever, but of drug medication." He was speaking of the mortality among Northern troops in the war and added that, "we notice in one of the papers that double rations of quinine and whiskey are now allowed the soldiers. Has not this extra allowance something to do with this extra mortality?"

Kittredge said: "I have known persons with well-marked typhoid fever out in a week, and I have known them for three months flat on their backs, looking up but with apparently little hope even then." Writing in the *Journal,* June 1851, E. B. Thomas, M.D., said: "I have seen many cases of the severe forms of typhus recover without any other form of treatment than attention to cleanliness, air and diet; and that, too, without the dreadful *sequelae* so justly dreaded. Again, I have seen cases of simple bilious fever treated by *salivating* with some mercurial preparation, and *presto!* the bilious was *typhoid,* and the patient lingered on a few days or weeks, it may be, of indescribable misery, and died." He thought that such experiences showed that drugs are not as essential as they are thought to be.

In an article on typhoid fever (*The Science of Health,* October 1873) C. P. Young, M.D., corresponding editor of the magazine, wrote from California that: "Absolute quiet, absence of noise and excitement must be secured. Even the clinking of latches, the creaking of a chair, the rustling of starched garments or of paper, are known to have disturbed the sensitive brain of patients and changed the disposition to rest into nervous excitement and terminated fatally." No stronger statement of the importance of sensory rest can be made.

The allopathic treatment of typhus fever was a battle-axe form of assault upon the patient. First a vomit, ipecac or antimony, the latter one of the deadliest poisons known; then a *purge* of calomel and opium, worked off with epsom salts and senna. If the head throbbed, much bleeding was performed. These preparative measures were followed with an "alterative course,"--calomel, opium and ipecac once in three hours, in a sudorific decoction of calomel and turpentine; half a teaspoonful of niter dulcit once in three hours and a tablespoonful of nitrate of potassa once in three hours, making some nauseous dose for the stomach once an hour.

If the patient had a slight cough, he was given squills, with a little more tartar emetic; if he had pain in the side, this was treated with a blister; if there was great headache, another blister was put on the forehead or side of the face. If the patient became delirious, the head was shaved and the scalp covered with little sores; if the feet were cold, mustard and vinegar were applied to these. If any part of the body became particularly hot, leeches were applied to this part to draw out some of the blood. This treatment was continued with occasional variations "to keep up confidence," until the patient (in most cases) died.

It must not be forgotten that typhus patients were forbidden water to drink and that fresh air was excluded from their rooms. It should also be mentioned that under such treatment a number of "accidental" or casual symptoms would frequently develop requiring special medication--such complications as diarrhea, black vomit, distention of the abdomen, hemorrhage from the liver, suppression of the urine. These developments, caused by the drugs, were met with sugar of lead, oil of turpentine, tincture of kino, arsenic and more calomel. What wonder the death rate was high!

Trall declared that typhus patients always got well within a week when cared for *Hygienically,* with no palliation of symptoms except that provided by water applications. Nature has no diploma from a great university and she may be excused for the fact that she never treats a sick man or a tired horse as medical men treat typhus. She rests, nourishes, purifies; she never exhausts. She seeks to husband the body's forces; she seeks to build. Even where she appears to expend the patient's energies, it is only seemingly. She makes the most of what there is to work with.

Trall said of pneumonia: "The pain in the lungs may be very severe, the cough extremely violent, the breathing exceedingly distressing, the fever intense and the patient utterly prostrated, with no danger of dying, providing nothing is done amis . . ." He said that even in very severe cases, "in a day or two, sometimes in a few hours, and in the worst cases, within a week, the patient will be fairly convalescent." "We have long been convinced that pneumonia is not intrinsically a dangerous disease. The fatality in the majority of cases at least results from the treatment. We have never heard of a single case being lost among the hundreds which have been treated hygienically. Because the symptoms are violent, the medicines are apt to be powerful and doses large; and therein is the danger."

Drug relief is an enemy in disguise. It is a wolf in sheep's clothing. Drug symptoms get mixed up with symptoms of disease and the physician cannot tell one from the other. Too many pneumonia patients were killed by *anodynes* given to *relieve* pain and by drugs to *relieve* coughing. *Sedatives* and *anodynes* make pneumonia a very dangerous disease. Confirming the contentions of *Hygienists* concerning the superiority of *Hygienic* care in pneumonia and the deadliness of drug treatment in this disease is the experience of Prof. Austin Flint, M.D., of the New York Medical College, who was in the habit of treating pneumonia patients in Bellevue Hospital without a particle of drug. Lecturing on this disease before his *medical* classes, he asserted that in the hospital where he used no drugs, he lost no cases. But he added that it would not do not to give drugs in private practice.

Dysentery, diarrhea, flux, cholera infantum, etc., were classed together as "summer complaint." The death rate in summer complaint was high, especially in infants and children. Patients were dosed with opium, alcohol, other *stimulants* and *narcotics,* aggravated and embarrassed with *antiphlogistics,* calomel, antimony, pepper and turpentine and thwarted with such *revulsives* as *emetics, purgatives* and *blisters.* In addition to the drugging, it was common to stuff these patients on mutton-broth, beef-tea, chicken-soup, panada, wine, whey and other slops.

Instead of recognizing diarrhea as an action of the body designed to free the digestive tract of unwanted and non-usable material, to be permitted to accomplish its remedial work, every effort was made to suppress the action on the assumption that it was an evil, while the digestive tract, unable to digest food, not alone because of its diseased state but also because of the drugging, was stuffed with foods.

No wonder an outstanding member of the *medical* profession once likened disease to a frightful monster and the physician to a blind man armed with a club, dealing mortal blows in the dark, sometimes striking the disease, sometimes the patient and sometimes missing both. Unfortunately, in drug treatment the patient is never missed. Whether or not the disease is ever touched, poisonous doses never fail to impair the soundness and integrity of the patient. No man ever went through a course of drug-dosing and emerged unscathed.

Writing editorially of summer complaint in the *Journal,* August 1859, Trall said: "The patient should abstain entirely from food until fairly convalescent, and then use the simplest articles of diet very abstemiously." He again says in an August 1862 editorial of the same complaint: "The diet should be of the simplest and blandest kind, for a day or two; and until the violence of the disease is materially abated, none at all should be taken."

In advanced stages of cholera, after copious watery discharges from the stomach and bowels had greatly dehydrated the body, the extremities would be cold and pulseless with vigorous cramping in the legs at short intervals, the face would present a wild cadaverous appearance and the patient would be in a state of collapse. In such a condition all that the profession offered was more *purging,* more *emesis,* more *narcotization,* more bleeding, more foul air, no water to drink, meat slops and brandy. Little wonder the disease continued to defy the skill of the profession and the death rate continued high. There never was a

virulent nor a severe disease, nor even a mild one that did not defy the skill of the profession. Indeed, the skill of the profession has always been more virulent than the disease. How absurd, the tinkering and torturing of the bodies of the sick!

Graham's opening lecture in New York City in 1832 was on cholera and this lecture was subsequently published in book form. The success of *Hygienic* means both in preventing cholera and in enabling the cholera patient to recover was phenomenal. The *Hygienic* rule in all acute disease is a simple one: go to bed, keep warm and abstain from food until comfort returns.

In his work on *Cholera* (1854) Joel Shew, M.D., says: "The diarrhea which so generally precedes the real attack of cholera should be treated like any other diarrhea, on general principles. It would be better for the individual to practice entire abstinence from all food--the hunger cure, as the Germans call it--until the diarrhea ceases." He adds that "pure water alone will sustain" the human body "wonderfully for even weeks. If you wish to cure diarrhea, effectually and without harm to the constitution, practice fasting and live on pure soft water until it ceases . . . Some will tell you that fasting produces disease, but physiology and pathology prove that neither fasting nor starvation causes any such result. The individual who is starved, having at the same time water to drink, dies of mere *inanition* and not of *organic disease."*

Nobody has yet provided a better plan of care for the individual suffering with sunstroke (heat stroke), than that given by Trall in the *Journal,* August 1853: "The patient wants rest and quiet, abundant ventilation, all the pure, fresh air possible, cold wet cloths to the head, and if the surface or extremeties are cold, bottles of hot water to the feet." I would add that no feeding should be attempted while the patient is in this state of collapse.

What a revealing commentary upon our state of health--that we cannot have two or three hot days without scores of human beings dropping dead of heat stroke and others collapsing from the same cause! Others become ill of "diseases peculiar to summer." The truly well do not suffer from increased temperature.

It is not unusual to have it said when health is recovered through the adoption of a *Hygienic* way of life that "there was not much wrong with him or he would not have responded so quickly to *Hygiene."* Of course not! *Hygiene,* unlike drugs and enervating palliatives, does not make people sick. How can a man be as sick, if he adopts a *Hygienic* plan of care, as he would be if he were drugged and enervated by treatments? When an acute disease is complicated with food and drugs, the patient will be very sick. *Hygiene* should not be censured because it fails to make the sick sicker and fails to kill.

Fasting

CHAPTER XXVIII

Although fasting has been practiced by both man and animals since the origin of life on earth and there has never been a time within this period when it has not been employed, the professional use of the fast in sickness in this country dates from 1822, in which year Isaac Jennings, M.D. began to employ it. In 1830 Sylvester Graham began to advocate fasting. From that period to this it has been extensively employed in this country, both by *Hygienists* and by others. It has also been employed extensively in Europe; but in what follows, I shall confine myself to a discussion of its employment by *Hygienists* in America.

With the exception of Graham, the men whose experiences and statements I shall discuss were medical men, almost all of them being or having been members of one or the other of four medical professions existing in this country during the last century. A few of them were graduates of the College of Hygeo-Therapy. The drug-medical graduates quoted are men who had forsaken drugs and were practicing *Hygienically* or largely so. The general attitude of these men towards drugs may be well summed up in the words of George H. Taylor, M.D., who wrote: (*Journal,* April 1857) "I have not a shadow of faith in the remedial virtues of drugs, of whatever name or nature, by whosoever administered."

Fasting, which is entire abstinence from all food but water, is a definite physiological or biological procedure that is adopted by the animal kingdom under a wide variety of circumstances; but we are here primarily interested in its employment in a state of illness. Trall stressed the fact that nothing is remedial except those conditions which economize the expenditure of the forces of the sick organism. When the overtaxed, satiated and surfeited system rebels against its abuses, what is more logical than the other extreme of abstinence or spare diet and water, such as Adam and Eve quaffed when cigars and quids were unheard of? This permits the relaxed and prostrated digestive organs to rally and restore their functioning powers. The irritableness and fretfulness of the sick, so commonly observed under conventional care, is reduced to a minimum when the patient fasts. After such a period of repose, the stomach regains its tone, the heart its usual healthy action, and the blood courses cheerily through its vessels.

Frequent references to fasting were carried by the *Graham Journal of Health and Longevity* and much benefit was described as flowing from the practice. Fasting was consistently advocated in the *Graham Journal* during the whole three years of its publication, 1837-38-39. We have no specific evidence that Graham's advocacy of fasting was based upon the findings of Beaumont, but we do have frequent references to these findings in support of their fasting practices. For example, a writer in the *Graham Journal* of September 19, 1837, points out that Beaumont found that when his experimental subject suffered with fever, little or no gastric juice was secreted and that food only served as a source of irritation to that organ and, consequently, to the whole organism. No solvent (digestive juice), said Beaumont, can be secreted under these circumstances; hence, food is as insoluble in the stomach as would be lead under ordinary circumstances.

Beaumont declared that food would lay in the stomach of Alexis St. Martin when he was ill for periods ranging from six to 32 or 40 hours, unchanged except for fermentation and putrefaction. Beaumont's findings have since been repeatedly verified by physiologists. Such facts indicate the importance of withholding food in acute disease; but Graham refers to fasting in cases of tumor and other chronic conditions, thus indicating that in what Dr. Felix Oswald called the "Graham starvation cure," the fasting practice was not confined to acute illnesses. Graham's statements regarding fasting and its employment in various conditions indicate a wide familiarity with the fast and observations and experiences that reach far beyond what would seem at first glance to have been his.

Writing September 16, 1859, a physician living in upstate New York accused *Hygienists* of starving their patients to death. This accusation indicates that the use of the fast, while general among *Hygienists,* was as

little understood by physicians of the period as by those of today. The fear of starvation has been instilled into us by the medical profession for a long time.

Discussing the fast that an acutely ill child was undergoing, Dr. Jennings said: "There is now little action of the system generally, and consequently, there is but little wear and tear of machinery; and like the dormouse, it might subsist for months on its own internal resources, if that were necessary, and everything else favored. The bowels too have been quiet for a number of days, and they might remain as they are for weeks and months to come without danger, if this were essential to the prolongation of life. The muscles of voluntary motion are at rest and cost nothing for their maintenance, save a slight expenditure of safekeeping forces to hold them in readiness for action at any future time if their services are needed. So of all the other parts and departments; the most perfect economy is everywhere exercised in the appropriation and use of the vital energies."

The prostration here pictured is characteristic of serious acute disease and results from the fact that the body marshals all of its energies, resources and attentions in the remedial work and suspends all activities that can be temporarily dispensed with while more urgently needed work is carried on. Prostration may come on suddenly. A man may be plowing in the field and feeling well and collapse suddenly and have to be carried into the house and put to bed. This does not represent a sudden loss of energy, but a sudden withdrawal of energies and resources from temporarily dispensable functions. In chronic disease, there is rarely such profound prostration; but there is always a need for conservation of energy and a period of physiological rest is advantageous.

Writing in the *Journal,* August 1850, Dr. Kittredge of Boston says that during the 12 years prior thereto, he began the "hunger cure" in his practice, remarking that he got the idea from "somebody's common sense." It is probable that this common sense was imparted to him by some of the Grahamites. Kittredge tells of fasts of seven, 21 and 22 days in acute disease and says that "in every case I had every reason in the world to believe that they not only got well quicker, but suffered infinitely less during the fever and got their strength up much better afterward than they would have done if they had taken gruel, &c., daily." In an editorial in the *Journal,* May 1851, in which Dr. Trall discussed *Extractum Carnis* (a flesh extract, developed by a German physician), he said that fever patients under allopathic care "are usually so dosed with beef soup, mutton tea, chicken broth, &c., that the febrile irritation is kept up and aggravated by the slop-dieting, when the stomach really needs entire abstinence from all food." Then, explaining the benefits reported to flow from the use of *Extractum Carnis,* he says: "Dr. Beneke, on the mistaken notion that his carnal extract is immensely nutritious, gives very little of it, and so the patient is scarcely injured at all. While the doctor intends to diet the patient strongly, the patient really gets almost a fast."

The importance which Trall attached to fasting in fevers may be gleaned from his statement that: "We can easily explain the seeming value of the article (*Extractum Carnis* was claimed to possess extraordinary efficacy in fevers) to febrile patients, and in the explanation is involved an important therapeutic principle." The explanation was that the patient was practically fasting and the important principle of care was that the fever patient should not be fed.

Without explaining why, Trall made occasional exceptions to this principle in smallpox. In this disease he advised: "Give no food save Indian or wheat-meal gruel, and not that unless the appetite calls for it. Nursing children may take the breast as usual if inclined." It need hardly be added that nursing babies are not inclined to take the breast when feverish.

There need be no fear of letting the patient fast, as there is no power to digest food and feeding does not provide nourishment for the fever patient. Whether in acute or chronic disease, in the absence of a fresh supply of food, the body appropriates its own substance for the purpose of continuing its vital activities and functions. It has large stores of nutritive materials in its bones, muscles, glands, fluids, etc., with which it can maintain essential repairs and minimum functional activities for a considerable time. Drawing only from the storehouse of its own internal treasure, it seeks to make these last as long as possible.

Writing in the *Journal,* September 1857, S. M. Landis, M.D., said: "In acute and inflammatory diseases no food should be used . . . Henceforth, brothers of the Hygeo-Therapeutic cause, I beseech you, one and all, to pay more attention to diet, and let splashing, dashing, exercising, etc., be of secondary importance . .

. do this that drug doctors may no longer have the opportunity to cry us down by saying that our system is a mere soaking and squirting practice . . ." Landis thus lays the greatest emphasis upon the importance of the fast.

'Perhaps the man other than Jennings who placed greatest stress "upon fasting was Dr. Kittredge. In an article published in the *Journal,* June 1851, Kittredge says: "Nature, knowing the impossibility of quelling insurrection in one of her chief citadels (he was dealing with diseases of the liver), while there was anything to feed the fires of rebellion, wisely stops the appetite at such times, in order that the excitement may cease, knowing that flames without fuel cannot last always." His resort to pictorial language and reversion to old fallacies about disease (a rebellion and a flame) somewhat spoils his assertion about abstinence in disease, but the fact that the desire for food is cut off in acute disease is not destroyed. Writing in the *Journal,* January 1861, Dr. George H. Taylor said: "The coated tongue is nature's peremptory method of refusing food, which indication must be respected." In this same article he advised abstinence in headaches and dyspepsia, these latter being commonly regarded as chronic diseases.

It is important for us to understand that the absence of desire for food and the lack of digestive ability seen in acute disease is but part of the general prostration of the patient. Prostration must be viewed as a general suspension of muscular, secretory and mental function as a conservative measure. The prostration of the digestive function is as much a conservative measure as is the prostration of the superficial muscles of the body. Viewed in this light, prostration is seen to be the chief means employed by the sick organism in adjusting its activities and its intake of external requirements to its needs under the circumstances of disease.

Writing in the *Journal,* May 1856, Solomon Priese, M.D., stressed the fact that the indications of the prostrated digestive function should be respected by saying: "The first thing to be done when these feelings (headache, aching in the limbs, bad taste in the mouth, furred tongue and general constipation of the bowels--the leading premonitory symptoms) are experienced is to stop eating . . ." In an article in the *Journal,* October 1851, dealing with "Bowel Complaints," Kittredge said: "Above all, stop eating." Further, he advised: "It is within the bounds of prudence to stop eating when you have 'bowel complaint' of any kind, especially when nature stops the appetite." It is important for the reader to know that a due adherence to this simple rule will speedily end most cases of diarrhea and other forms of bowel disease. Writing on "The Hunger Cure," in the *Journal,* November 1851, Kittredge said: "It must be injurious to the patient and retard his recovery, if the stomach and liver are made to work, when not in a condition to labor, or the arterial system to be stimulated by ingesta when inflammation already exists.

"Now I contend that in almost all phases of diseased action, there is more or less inflammatory action, even in debility; and argue as they may, it will not do to eat, however hungry or weak, anything requiring much of any exercise in digestion, and in very many cases nothing at all. It requires great discrimination to know when to stop, when to begin, and how much to give, I know; but a man should not attempt to practice unless he has good judgment, above all things."

Recounting a case of a woman suffering with inflammation of the liver and duodenum, whom he had to fast, Kittredge gave it as his opinion that "it would have been impossible to have cured her, while she was still eating." "Accordingly," he adds, "I advised her to stop; she did so, though her appetite was 'raving;' but immediately the question arose in her mind, how long can I fast?

"It is hard to fast, as I well know, when you are hungry as a half famished bear all the time; but it is better to fast than to do worse." "This woman went seven days without tasting food of any kind, and then contrary to my advice, went to eating; but in a short time was as bad as ever.

"My rule is to keep them fasting until the tongue becomes clean and the mouth tastes properly.

"My patient's good sense told her she had acted unwisely, and she readily assented to commence again her fasting, which this time lasted about seventeen days, and she then cautiously began to eat and increased the amount till she reached a full diet; and it is now some three months or more since that time, and she has been almost a well woman, nothing has troubled her stomach since."

In bowel inflammation, Kittredge advised: "Let the stomach alone severely . . . and abstain from all food." Of typhoid he said: "Very little treatment is necessary in these cases actually, if the patient will only consent to live in obedience to common sense, by abstaining from all nutriment."

Writing in the *Journal,* April 1856, Kittredge said, in discussing a case of severe ophthalmia: "The first thing was to stop all the fuel that was feeding the flames in the shape of food from being supplied . . . He fasted a week, when the inflammation having abated, he began to eat lightly, and in a day or two more, insisted upon going down town; the weather being intensely cold, and when he returned, his appetite having become as keen as the wind he had been facing, he ate too much, which with undue exposure, brought on a return of symptoms similar to the first, though not so severe.

"Total abstinence from all food was again enjoined . . . "

"How terribly strange," he exclaims, "that physicians generally will not make themselves acquainted with . . . abstinence!"

Writing in this same article of a case of neuralgia, he says: "I stopped all eating entirely, for a time, then graduated her food to the capabilities of her organs, altering the nature as well as the quantity of food, and so great was the change in one week . . ."

He says: "I find it necessary in almost all of these cases to abstain entirely from all food for some days, no matter how weak they be; they soon find that they are stronger without food than with it, for nothing weakens anyone like pain . . . One has to be very careful how they try the fasting experiment, as they may carry it too far, which would be injurious, and if not far enough, they do nothing. As a general thing, I make it a rule not to prescribe fasting to any extent, unless the patient will come to the establishment, or is where I can see him every day, and then I have but little trouble in curing even the most inveterate cases."

Greatest stress was placed upon the value of fasting in acute disease. Writing in the *Journal,* February 1862, of the care of acute cases by *Hygienic* means, J. H. Stillnab, M.D., said that "entire abstinence from food until the prominent symptoms of the disease--I care not what it is--abate, is of the utmost importance." He further says of the care of acute disease, which he defines as "remedial effort," that, if *Hygienically* cared for, this will "save the pains and confinement of a long illness" and "there would be no chronic disease." He recounts successfully caring for cases of ague and fever by "total abstinence and warm drinking."

In the August 1851 issue of the *Journal,* one Dr. Wilmarth stresses the value of abstinence in disease. In an article published in 1856, Dr. James C. Jackson, discussing the evils of drugging the sick, said: "What your patient wants is abstinence from food and brain quiet . . ." S. M. Landis, M.D., writing in the *Journal,* September 1857, said: "In acute and inflammatory diseases, no food should be used . . ."

Of serious bowel disease, Kittredge said: "When once the membranes become inflamed, it is in vain you try to cure it . . . while the patient is made or allowed to swallow food, as it will never be chymified, and of course, act as any foreign substance would do, provoking and perpetuating the disease."

Writing in the *Journal,* August 1858, Kittredge stressed the importance of abstinence in typhoid or slow fever. Young says of a typhoid fever case that he reported: "The patient was stubborn, and persisted in spite of the absence of hunger, in taking food. This intensified the symptoms." Discussing the sickness of the Prince of Wales, who recovered from typhoid fever after his life had been dispaired of, upon the discontinuance of alcoholic medication and the substitution of milk therefor, Trall said: "If the doctors in all similar cases will give milk instead of brandy, or will even omit the stimulants without giving the milk, there will be less danger of the patient dying and no danger whatever of mistaking intoxication for 'goneness' of one lung nor of misjudging the vomiting of narcosis for 'perforation of the bowels.'"

Speaking of rheumatism in an article in the *Journal,* August 1858, Kittredge stressed the "absolute necessity for fasting in such cases." Dr. Trall reproduces the account of one of his colleagues (*Journal,* June 1857) who cared for a case of inflammatory rheumatism in which J.P.H. says that: "No food was taken for two weeks."

Writing of a case of puerperal fever, *Journal,* October 1860, A. Augusta Fairchild, M.D., remarks that she had the assistance on the case of a nurse of "good common sense" who did not entertain the "foolish notion so prevalent regarding the care of the sick . . . she did not fear that the sick woman would 'starve' when she was not in a condition to receive food, nor that she would sleep too much, or breathe the pure air. The world would be blessed indeed if we had more such nurses."

Writing in the *Journal,* March 1862, of the preparation of patients for operations, Trall, who was a skilled surgeon, condemned both the physics employed by allopaths and those employed by the physio-meds to empty the bowels and the emetics employed with which to empty the stomach. He thought it "bad practice under any and all circumstances to disturb and, to a certain extent, prostrate a patient with a dose of medicine of any kind, just before he is to submit to a serious surgical operation. He needs at this time all of his vital resources for recuperation and reparation, and to waste any portion of them is just to that extent to hazard the final success. If the bowels require cleansing of the fecal accumulations, an enema of warm water is amply sufficient. If the stomach is foul, one day's fasting will rectify that difficulty . . . "

Both in the *Graham Journal* and in the *Journal* there are accounts of men and women employing fasting for short periods in minor troubles without professional supervision. For example, a mechanic, recounting his personal experience in caring for his sick child, in a letter which Trall reproduced in the journal, June 1857, says that "no food was taken for two weeks." He says that his neighbors protested that: "You will certainly starve the poor child to death." Neighbors are still making this same unintelligent statement. In the September 19, 1851 issue of the *Journal,* an anonymous writer, discussing "self-treatment," says: "By way of experiment, about this time, I tried the effects of the hunger cure. After abstaining from food for several days, I found the severity of my pains entirely overcome, and it has not returned to this day.

In giving instructions for breaking the fast, they said: "When your tongue is clean, your rest peaceful, your skin clear, your eyes bright, the pain gone, the soreness gone, and you are very sharply hungry, you may select from the scores of healthful articles of food that which pleases you and eat with moderation."

When we consider the facts that fasting, especially in acute disase, was stressed by Graham, Jennings, Trall, Jackson, Kittredge, Taylor, Nichols and other leading *Hygienists* of the time, and the further fact that in their writings and public lectures the graduates of the Hygeo-Therapeutic College stressed the importance of fasting in acute disease, it becomes obvious that the subject was taught in the college. But warnings were issued against using fasting to the exclusion of other essential *Hygienic* means. Fasting, they said, may be said to be in the strictest sense only an adjuvant, and properly employed is a most useful auxiliary, and in almost all cases is much to be desired; but it is possible to lay altogether too much stress upon it to the neglect of the more important elements of *Hygiene.*

In the January 9, 1875 issue of *The Science of Health,* Trall reproduced a letter from a correspondent, who after thanking him for his letter of advice says: "I immediately commenced a protracted fast, eating nothing for several successive days and, after that, barely enough to sustain life . . ." This man says that for years he had been a "miserable invalid," thus stressing the fact that his disease was chronic, one which had "defied" a "vain search for health." This case indicates the advice to fast in chronic conditions.

Graham said: "Fasting removes those substances which are of the least use to the economy, and hence all morbid accumulations, such as wens, tumours, abscesses and so on, are rapidly diminished and wholly removed by abstinence and fasting." The reader will note that the conditions here instanced by Graham are chronic, thus stressing the use of fasting in chronic conditions.

Kittredge probably made more use of fasting in chronic disease than did any of his contemporaries. He said: "I know very well I am peculiar in my treatment of chronic disease, and many cry out "starvation, &c., but I know also that I have cured hundreds of what the faculty had pronounced 'hopeless cases,' by my plan, and shall not, therefore, be frightened by any bugbear from pursuing it." He "most respectfully" suggested to the hydropaths of the time that they try fasting in connection with water treatments in chronic disease. He said that he was certain they would find it most valuable as an auxiliary to their water applications, and that it would greatly expedite *cures* in many cases, and that in some cases a *cure* is impossible without it.

On the whole, however, the early *Hygienists* did not make as much use of fasting as we do today and rarely used a long fast. This fact is brought forcefully to our attention by the comments of Dr. Walter on Dr. Tanner's second fast, made while the fast was in progress, which appeared in *The Laws of Health,* August 1880. His editorial, written on the 22nd day of Tanner's fast, predicted that Tanner could not live much beyond 40 days and expressed doubts that, if he succeeded in fasting 40 days, he would ever recover from the ordeal. He said: "A man in certain conditions of disease might live 40 days without eating, but we doubt if it be possible for a person in vigorous health to accomplish so remarkable a task."

This seems to be an echo of a statement made by Dr. Jennings, who seems to have thought that in some manner the sick organism was better able to sustain itself without food than the healthy organism. Writing of a sick child Jennings had said: "The child has taken no nourishment for a number of days and may take none for many days to come, if it should live; yet there is nothing to be feared on this account. Take a healthy child from food while its vital machinery is in full operation, and it will use up its building material and fall into ruin within two or three weeks, but in this case the system has been prepared for a long suspension of the nutritive function."

Dr. Walter continues: "We can but admire, however, the pluck, energy, and we believe, devotion to a principle, that has induced the doctor to make a martyr of himself. We hope that he may succeed, if not in fasting for 40 days, at least in convincing the medical profession that it is not necessary that a man should stuff himself three or four times a day in order to live. There never was a more ridiculous fallacy than to suppose that a man will die if he abstains from food for a few days. The ignorance of the people, not only, but the total subjection of reason to appetite, of the profession, was surely proved by the prediction of medical men that a week or ten days would finish Dr. Tanner. We have never doubted his ability to live four or five weeks without eating; but to return to health and vigor after a six-weeks' fast is more than we expect."

Although there was plenty of evidence available to the men of the era to show that return to health and vigor after a lengthy fast was easily possible, the idea persisted even into our own century that there is something basically different in fasting by the sick and in fasting by the healthy. Dr. Walter said on this occasion: "And yet, moderate fasting is not destructive to life or health. On the other hand, we hold it to be one of the most powerful agents in many cases toward the improvement of nutrition, and consequently, of health and vigor . . . Fasting, whereby the vital powers shall be permitted to free themselves, is one of the most efficient means for recovery. We have remarkable cures, and one of the most remarkable that we ever performed was on a lady who, under our direction, abstained from food entirely for four days. She was a hopeless invalid, and according to her physician's diagnoses, hopelessly incurable, and yet in three weeks she was restored to good health . . . One of the greatest errors of the medical profession today consists in the habit of stuffing patients whether they can use the food or not. Appetite we hold to be the language of nature. When the appetite fails, the evidence is clear that food cannot be used . . ."

Dr. Walter thought that "Tanner has proved by his experiment that the people are not so dependent upon food as is generally imagined." It was his view that this error of the people and the profession grew out of the common practice of employing so-called stimulants. "No man," he wrote, "is so dependent upon food or some other staying influence as is the man who eats or drinks stimulating substances. Who does not employ stimulants will live 24 hours without food and suffer no serious inconvenience; but if he is addicted to coffee, tobacco, alcohol, or highly seasoned food, he needs to return to his stomach every few hours the substances which will keep up its activities."

Continuing his remarks, Dr. Walter says: "Dr. Hammond is to pay Dr. Tanner $1,000 if the latter succeeds in his undertaking. Though Hammond should save his thousand dollars, Tanner will, nevertheless, have proved Dr. Hammond to be one of the poorest and wildest medical philosophers of the age. No man has done more to sustain the practice of stimulation, increase drunkeness, exhaust the vital powers of the patient, and bring about gluttonous excesses than he." Tanner's fast was taken under the strictest surveillance, being carefully watched by medical men and others around the clock, both day and night, and when the 40 days of abstinence had ended, "even Dr. Hammond, who was most loud in his declarations of the impossibility of the performance of such a feat," admitted "that the fast was a genuine one." In spite of the fact that the fast was admittedly genuine, the *Encyclopedia Britannica* continued to carry the statement that human beings could not go without food for more than six days, until after the

Cork hunger strike.

Returning again to his prediction that Tanner would not live long beyond his experiment, Dr. Walter ends his editorial with the following words: "We venture again the prediction that Dr. Tanner will not live long beyond his experiment, and yet he is not likely to die for two or three weeks yet. Possibly we may be called upon to congratulate the Doctor on his recovery after his long fast, though in common with most physicians, we doubt his ability to endure." It will interest my readers to learn that Dr. Tanner recovered excellent health and remained in good health for 30 years thereafter, or until his death in 1910.

In the September 1880 issue of *The Laws of Health,* Dr. Walter returns to the fast by Tanner. "The long fast has ended," he says, "as we predicted it would, successfully; but we admit to some disappointment as to the Doctor's ability to immediately retain food. Though he had been vomiting continually for days, up to the end of the fast, he, nevertheless, was able to drink half a pint of milk and eat a large slice of watermelon without any apparent difficulty, and soon thereafter repeat the doses of victuals until one would suppose he had a stomach capable of enduring anything, notwithstanding its long season of depletion." It must be admitted that Dr. Walter's prediction that Tanner would successfully complete the fast was a rather hesitant and doubtful one.

Considering then, the question that was being asked: "What good will come of it all?" Dr. Walter said: "It must be apparent to physicians generally that man's dependance upon food has been greatly overrated.

Food is not, by any means, of first importance; air and water certainly precede it. If the doctors will hereafter cease stuffing their patients when the system is already gorged with material, the fast will not be without its uses." Thus it will be seen that he regarded the success of Tanner's undertaking as an object lesson and that he hoped that the lesson would not be lost to the medical profession. Amazingly enough, to this day, *Hygienists* are still trying to impress the medical profession. We never seem to learn the simple lesson that medical men cannot be impressed. Instead of going directly to the people with our message, we waste too much time trying to convert an unconvertible profession.

Sometimes it is contended by physicians that the employment of food and fasting in the care of the sick is no new thing, that they have employed and sanctioned these things for ages. But the venerable sanctity of the profession cannot hide the fact that, as a body, they have relied on drugs and have neglected both diet and abstinence for ages. Nor can the profession any longer claim that it possesses a monopoly of facts pertaining to health.

The more frequent employment of the fast by *Hygienists* of the present in chronic disease and the employment of longer fasts followed the work of Edward Hooker Dewey, M.D., who became known as The Father of the Fasting Cure. Dewey was not a *Hygienist* and promoted the fast as a *cure.* His work, together with that of his successors, especially Dr. Linda Burfield Hazzard and Benarr Macfadden and his associates greatly popularized the fast, not so much as an integral factor of a *Hygienic* plan of care, but as a *cure.*

Today we do not stress so much the length of the fast as its effectiveness. To arbitrarily limit the duration of the fast is to limit the benefits one may derive from it. The only logical plan of determining the length of a fast is to watch day-by-day developments and to break or continue the fast according to these. No man possesses sufficient knowledge to determine in advance how much fasting one requires in one's particular condition. In adjusting the length of the fast to individual requirements, a close study and observation of the faster, as the fast progresses, is required.

The Suppression of Disease

CHAPTER XXIX

We have defined remedial action as the sum total of all those modifications of function (diminutions and dramatic exaggerations) and structure designed to resist and expel injurious substances and to repair damages. These modifications of structure and function are commonly called disease or symptoms of disease; they might just as well be called the healing power of nature. Not understanding the nature of disease, the efforts of physicians, from the time of Hippocrates to the present, have been directed at the destruction or suppression of the very efforts and processes by which the living system is endeavoring to protect itself and restore itself to a normal state. Suppressing or trying to suppress remedial action is the usual practice of the schools of *healing.* In every possible way *curative* measures are employed to stop vomiting, repress coughing, check diarrhea, palliate pain, reduce fever, etc., etc. Stopping the remedial activities of the organism is called *curing* disease.

If a poison is swallowed and vomiting follows, the vomiting, although it may be regarded as disease or as a symptom of disease, is an action of the body designed to expel the poison. It is *remedial action.* If instead of vomiting there follows violent bowel action with griping, the secretion of much watery mucus and violent expulsion of the poison held in dilute solution in the mucus, this is but another means of expelling the poison. It is *remedial action.* If some of the drug gets into the blood stream and the kidneys hurriedly expel it in the action called *diuresis,* we observe another *remedial action.*

The questions obtrude themselves at this point: should the vomiting be *cured* (suppressed); should the diarrhea be treated; should the diuresis be *medicated?* Should anything be done to interfere with either of these actions of the organism trying to protect itself from poisoning? Should we seek to *cure* the *remedial processes* of the body? If the vomiting is suppressed (with an opiate, for example), is not the poison left in the stomach? If we suppress the diarrhea, do we not prevent the expulsion of the poison; if we suppress the diuresis, is not the poison left in the blood? Are not such efforts at *curing* the disease severe blows (below the belt) at the integrity of the organism itself? Is the one who seeks to *cure* disease not making war upon life?

The dynamic quality of life is all too often overlooked when we consider disease and the fact that the body is capable of exerting violent effort in its own behalf is missed. The violence of the vomiting and and diarrhea designed to completely empty the intestinal tract when a poison has been swallowed is exactly the same as the violent vomiting and diarrhea that we see employed in emptying the digestive tract in typhoid or other acute disease. It should be quite obvious that the more complete and more prompt is the emptying of the digestive tract when a poison has been swallowed, either by accident or intent, the less damage will be sustained by the individual and that anything which will sooth the organism and reduce or suppress the expulsive effort will tend to result in death no matter how kindly the intentions of the man who applies it nor how scientifically it is done. Indeed, the more efficient the method of suppression employed the greater will be the danger to the individual. The same reasoning applies with equal force to the suppression of the dynamic actions of the body in sickness.

Mucus or blood or a bread crumb in the bronchial tube or the bronchioles is expelled by violent coughing. Should the cough (the *remedial process*) be *cured* (suppressed) and the *irritating* and obstructing material left in the air passages? Mucus or dust in the nose is expelled by sneezing. Should the sneezing (the *remedial process*) be *cured,* or should it be permitted to clear the nasal passages of obstructing and *irritating material?* These same questions could be asked about fever and the other symptoms of disease. *The disease process and the healing process are identical.* This statement needs a certain modification, due to the fact that the term disease is a broad one that is made to cover many phenomena, some of which are the very opposite of the others. It is not correct to say that paralysis or the wasting of an organ and other pathological states of this character are *remedial processes.*

Coughing in pneumonia helps to free the air passages of the accumulated exudate and makes continued breathing possible. To suppress the cough is to permit the exudate to accumulate in the lungs and it may cause the patient to drown in his own excretion. Indeed, many thousands of pneumonia patients have been killed in precisely this manner. The high death rate in so many acute diseases is due to the frustrating effects of treatment, especially of drugs. The operations of the redemptive power within are thwarted and suppressed. A physician may spend his whole life throwing obstacles in the way of the healing processes; year after year he may add insult to injury and die without realizing that he has been a foe of the sick.

The remedial process cannot be expected to achieve its object if it is suppressed by vigorous drugging and treatment. If diverted from its remedial work by the presence of more dangers in the form of drugs, the remedial work will be neglected or discontinued. The more virulent the poison, the more will the remedial action be suppressed. Replying to a man who contended that with their drugs medical men control and direct vital activities, Trall said: "Our friend has overlooked the important distinction between *dividing* and *controlling* action, and *wasting vital power."*

Explaining this, Trall says: "With the system warring against one poison, the introduction of another poison is simply to cause two battles to be waged in the vital domain at the same time. The vital power would be wasting itself in two directions instead of one. In this way 'nature,' which is another name for vital action, could never 'rally all her forces.' Why put another enemy into the system so that nature can triumph over both?"

Drugs to suppress symptoms are not only evil because they suppress the symptoms at which they are directed, but also because they temporarily depress other functions of the body. For example, so-called *cough medicines,* while they do temporarily suppress coughing (a truly undesirable effect, as the cough should not be suppressed), at the same time depress the digestive system and occasion constipation. To take *cathartics* to force bowel movement also impairs digestion. Drugs to suppress pain do so by depressing the whole nervous system, thus reducing all of the processes of life, both the normal processes and the remedial modifications of these processes. We should know that when we have suppressed pain, we have not removed the reason for it. It is a physiological outrage to render the senses oblivious to pain by obliterating (with drugs) the capacity or ability to feel. There are many ways by which pain may be suppressed, but they all amount to muffling the alarm bells during a conflagration.

What do we gain by our efforts to interfere with, hasten or frustrate the processes of nature? We may reduce fever by a variety of means, but we cannot do so without reducing the very activities that depend upon the extra temperature for their efficiency. A drunk man may be noisy and quarrelsome. His noisiness and quarrelsomeness may be *cured* by giving him more whiskey. He becomes so drunk that he is as quiet as a lamb and as stupid as a log. Indeed, he may be reduced to a state of anesthesia, which represents the acme of physiological depression short of death. It is impossible to think of remedial processes being carried on effectively in such a profound state of depression.

Among the structural modifications that are seen in the remedial processes is the enlargement of the tonsils. Tonsils enlarge to increase their working capacity, just as one kidney enlarges to increase its working capacity if the other kidney is removed. Muscles enlarge when called upon to do extra work in order to increase their working capacity. Removing the tonsils because they are enlarged is as foolish as would be removing the muscles because they are enlarged or removing an enlarged kidney because of its increased size.

Convalescence

CHAPTER XXX

The advantages and superiority of *Hygienic* care over drug treatment are shown as much by the rapid convalescence as by the speed of recovery. Proper care of the invalid is *Hygienic* care and calls for no resort to drugging or forcing measures. Any attempt to hasten convalescence by forcing measures will only delay full recovery.

Dr. Susanna W. Dodds tells us that, in lectures before his classes in the college, Trall repeatedly cautioned his students against overtaxing their patients. Again and again, she says, he warned them against making extra demands upon the energy and resources of their patients when there was no need for such demands. He insisted that the energy of the patient be conserved in every way possible and extended this to the period of convalescence. For example, Dodds tells us, employing typhoid fever as an illustration, that Trall emphasized that in convalescence there is little or no need for "treatment." When the crisis is passed in all acute diseases, even if there should be a slight recurrence of fever, he would slacken or discontinue even the little treatment, in the form of hydropathic applications, that he employed.

Conservation of the energy and resources of the patient was the secret of the successes of Jennings, Walter, Tilden, Weger and others who have been so outstandingly successful in their care of the sick. None of these men sought to *cure* disease; rather, each. of them recognized that over feeding, over bathing, over sunning, over exercising and aggravating patients in any way overtaxed them and retarded or prevented recovery.

"Many a patient," Dodds quotes Trall as saying, "has been killed by giving treatment that was too heroic after the critical action had passed." He insisted that "no extra demand upon the patient" be made during the post-critical stage. She adds that he applied this same rule of conservation to all feeble people, whether well or ill, reminding his students again and again that the only capital they had to work with was the vitality of the patient and to waste this was to diminish the chances of recovery. No part of the patient's organism was ever to be taxed.

Sickness is a virtual surrender of individuality; but what a beautiful, instinctive trait of human nature it is which causes the strong and well to serve every whim of the invalid who no longer has power to enforce a preference, but whose will--if he has any--is regarded as a hundred fold more imperative, now that he is helpless, than it was when he had strength to command. We will seek to find what a sick person wants, though we may be indifferent to his wishes in health. This willingness to cater to the whims as well as to the actual needs of the sick, commendable though it is, is a source of danger.

On the other hand, those nurses who neglect their charges and who take every opportunity to gossip outside the sick room, or when within it, of telling long irrelevant stories to any visitor whom they can catch as a listener, may do their patients as much injury by their careless neglect as others may do by pampering them.

Returning health is a rose beset with prickles. Its thorns prick and sting. The convalescent is tired before he has done more than sit up--he is disgusted with clothing; he shrinks before his own sallow sunken visage in the mirror. It is a trial to get his hair properly arranged. He is likely to want everything that he is forbidden to eat and to care nothing for those foods that are allowed. It is essential that he not be permitted to overdo his activity or his eating.

When one has just escaped from the throes of great pain, it is not difficult just to lie still and be waited upon. It is so nice that everybody wants to do something for you. You have only to lie still and sleep and have everything brought to you. Indeed, if you make an effort to burst the bonds of invalidism and

promote yourself to the status of convalescence and do things for yourself, you are likely to be urged not to do so. There is a tendency towards too much pampering of the convalescent. Care should always be exercised not to over pamper him.

It is important that the person who is recovering health, but who has passed the stage in which he stays in bed, should lie down in the day time, preferably after the noon meal and have an hour or more of rest and, perhaps, sleep. It is well to sleep at this time. The vigorous man may go all day without rest and he may diversify his activities so that he does not become fatigued; but the weak man, recovering from illness, is not capable of such continuous activity. It is our conviction that no human being, however strong and vigorous, should be forced to engage in physical activity, unless it be of the least taxing kind, for more than three, perhaps four hours without rest. If this is physiologically true of the healthy and vigorous, it certainly becomes imperative that the weak and sick secure rest, even more rest, than is commonly secured by this class of individuals. Many convalescents work so hard at recovery that they keep themselves enervated.

Watching the green waves of verdure in the distance, it is easy to forget that there is anything wrong with you. The clumps of trees, the fields white with daisies, the lovely garden plots before rustic homessurely a tramp amid such inviting beauties would be better than to lie in bed! How inviting the prospect and how desirable when sufficient strength is present! But the invalid, convalescing from a serious illness, should make haste slowly.

Eating should be of the most wholesome food, but the invalid should eat lightly. Heavy overeating, eating of concentrated foods, frequent eating and other such practices in the hope that one can gain weight and strength rapidly is very unwise. The digestive system is not in condition to properly process such meals. One should be content to take it easy and take time to evolve into a state of normal health.

Do not force exercise. Avoid exposure to extremes of heat and cold. Retire early and sleep late. Conserve the invalid's energies in every way possible. Forcing measures will only retard recovery. It will be possible to increase his activities as strength and endurance increase, but it is important to avoid fatiguing him.

Chronic Disease

CHAPTER XXXI

In their very nature, acute diseases are evanescent. On the other hand, chronic diseases are of long standing. Chronic disease is of no speedy termination, but it is not nearly as devoid of remedial processes as our *Hygienic* predecessors thought. When chronic disease becomes acute, this is a sure evidence that it is in a recoverable state.

Chronic disease does not tend to come to a spontaneous end, as does acute disease. Although not lacking in the purifying tendencies of the acute state, it represents a feeble struggle against chronic provocation. It must be remedied by measures that are skillfully, carefully, appropriately and unremittingly directed to that end. Far more skill is required in adapting *Hygienic* means to the needs of the chronic sufferer than is required in adapting them to the needs of the acute sufferer. Indeed, as we have already seen, this adaptation is almost wholly automatic and spontaneous in acute disease.

In most chronic disease there are periodic intensifications of symptoms, which should serve to remind us that the sufferer is really in a permanent crisis. These recurring crises are but intensifications of the permanent critical efforts of the patient. The statement that the crisis is permanent needs to be qualified. As things are, the crisis must be perpetuated. It can, indeed, end in but one of two ways--in the death of the patient or recovery, if a thorough *Hygienic* reconstruction of his way of life is instituted. We are not to be fooled by the quiescent periods between the recurring crises. The dying down of acute symptoms does not mean that danger has passed. Nor should we gamble recklessly on short-run results without regard for long-run effects in the patient. Modes of treatment that give temporary relief are, in the end, disappointing.

Today there is a great and general increase in chronic and degenerative diseases and people in general have been induced to accept all of this disease and degeneracy as normal or, at least, inevitable. Indeed, they are being led to believe that it is due to the allegedly increased life span, as though it is aging and not disease that is increasing.

It is necessary, in order for us to understand why there is so much increase in chronic disease, to know that there are two general causes for this multiplicity of chronic sufferers. At least three-fourths of those treated for acute disease by the prevailing drug method have some form of chronic disease if and when they recover from the acute disease. This has long been true. Kittredge doubted that half of the physicians of his time knew or realized the "potent poisoning" they engaged in, nor the "incredible amount of chronic disease they were causing in their patients," or, if they did, they must "have very elastic consciences."

Is it possible to find a man or woman who has been dosed through an acute illness, who is now well? Are they not all pretty well riddled by the drug bullets? If it were possible to supply accurate figures of all those who die yearly of acute disease because of this poisoning practice, who would, otherwise, have recovered and the many more whose constitutions were strong enough to enable them to survive in spite of the poisoning, but whose after-history will be filled with aches and pains due to the poisoning, the people would be awakened. A book of such facts would be of incalculable value to rising generations, however disastrous it would be certain to prove to the practice of medicine.

We have previously stressed that chronic disease is due to chronic provocation. By this is simply meant that the patient's mode of living is such that he builds trouble daily. He lives in such a way that he keeps himself chronically enervated and chronically toxemic so that his tissues are constantly poisoned. The various so-called diseases and their modifications that grow out of the all too common penchant for overstepping our limitations can never be recovered from unless the sick person himself has an understanding of the causes of his illness and the needs of recovery. What is needed in chronic disease is

not a medley of treatments, but a changed way of life, so that the body can undo its damages and renew its structures. This is not always easy and, as the poet has said:

> "Habits are soon assumed, but when we strive
> To strip them off, 'tis like being flayed alive."

"Oh! My God!" exclaimed a woman *Hygienist* in the last century. "The patient died in the midst of his time-honored filth and surrounded by all his bad habits. Had he lived, it would have been only to wish for a return of the 'good days' that made him a sick man." People do find it difficult to break old habits and establish new ones and so long as they believe in *cures,* they do not even make the effort.

Nonetheless, difficult as it may prove to give up old habits and cultivate new ones, this must be done if health is to be restored. Writing in the *Journal* in October 1853, Charles Parker, M.D., said: "To my mind and feeling the change from the lancet and diseasing ratios of poisonous drugs, in which I was engaged many years, to a cure effective not only in chronic, but in acute disease, with a means so simple, and so much in accordance with the natural laws . . ." is a radical, but meaningful revolution.

Nichols said that: "In chronic disease, the patient makes such steady progress, and gets so thorough an understanding of his case, as to soon get beyond the necessity of advice." Better even than this, he said, is that when the patient gets well, he gets with his recovery the knowledge necessary to maintain his health forever after. Thus, he said, "a patient cured is a patient lost," and if the patient is the head of a family, "don't count on that family's practice to meet your current expenses." So-called local treatment is a mere treatment of symptoms. *Hygiene* is constitutional in its influence, rather than local. To employ Alcott's explanation, *Hygiene* seeks "to lead the patient into a course of life, by which he can gain physical capital."

An example of the constitutional approach to the problems presented by chronic disease may be found in the *Hygienic* care of the patient suffering with worms in the digestive tract. The reasoning of physicians about worms in the intestines was direct and conclusive: the worms must be killed. Thereupon, they dosed their patients with *vermifuges*--poisonous drugs--hoping thereby to kill the worms without killing their hosts. They rarely injured more than a few worms, but they frequently killed their patients. Today's medical practices are no better--they are still trying to kill the worms.

Hygienists held that worms can neither subsist on the proper food of man nor upon the products of any normal digestive change that these may undergo. "They feed on morbid materials" in the digestive tract, especially the products of indigestion. Addressing parents and nurses, Dr. G. H. Taylor said: "It is not *worms* of which the health of your children stands in danger, but it is those causes that so deteriorate the digestive power as to allow the growth of these creatures that are to be avoided. In a healthy stomach they would be entirely out of place and would soon perish for want of their proper food. Institute, then, such measures as will secure good digestion, and aliment will be converted to better uses than either to poison the system by morbid changes, or the lesser evil of serving as substance for worms. To dislodge these creatures, then, it is only necessary to *improve the digestive powers,* and they must either pass away or, losing their own vitality, will no longer resist the action of the digestive juices.

"The *symptoms* of worms will differ a little according to the kind, and the locality they infect. Generally, we can enumerate a *leaden countenance,* bad breath, red lips, picking at the nose, tumid abdomen, shrunken extremities, voracious appetite, looseness of the bowels, and general loss of power."

Another example of the *Hygienic* approach to chronic troubles is provided by the care of fallen (*ptosed*) organs. In prolapsus of the uterus, instead of removing the womb, why not remove the intra-abdominal pressure from gas, fat and constipation and permit the womb to resume its normal position? The study of the physician has ever been to correct what he conceived to be the abuses of nature, not by correcting the causes of the "abuses," but by correcting nature herself.

Patients suffering with *chronic* rheumatism were tortured, poisoned and depleted with blisters, leeches, calomel, opium, arsenic, hydriodate of potassa, antimony, bleeding and other ruinous drugs and procedures. What wonder that the victims of such barbarity never recovered! It is pretty generally

admitted today that the present treatment of arthritis is ineffective. Patients are goaded with aspirin, gold salts and cortisone, which drugs provide a little evanescent palliation of symptoms. However, they produce side effects that are often worse than the arthritis itself. There has been a change in drugs, but no basic change in the way of treatment; consequently, arthritis is still regarded as an *incurable* disease.

Even so simple a condition as constipation baffles the learned men of *medicine.* It seems to be generally accepted that the bowels cannot act freely unless they are mechanically irritated. The average person has no idea of the freedom of the bowels and is always goading his to action, either with drugs or with great quantities of bulk. If he abandons these, he employs injections of water. He must be continuously meddling with the function of his bowels. But what is done to the bowels today is insignificant compared to the abuses to which they were subjected in the past, when harsh *cathartics* and *drastics* were in common use and frequent *purging* was regarded as not only essential to recovery from disease, but, as essential to the preservation of health.

In the early part of the last century asthma was treated with the lancet (bleeding), cupping, *emetics, purgatives, narcotics,* tobacco, stramonium, lobelia, spider's web, coffee, opium, camphor, ether, and ipecac. It hardly needs to be said that under such abuses asthmatics never recovered, just as under the prevailing abuses of today they do not recover. Frequently the sick become sick and tired of drugs and physicians and take matters into their own hands and try to do for themselves. With old and antiquated notions, false habits and ignorance clinging to them, they go to work and what work it is! They are no more successful than their physicians.

To recover health requires the correction and removal of causes and the treatments of the schools of healing are not directed to this end. Another requisite of recovery is an adequate supply of all the primordial requisites of organic existence and these are commonly ignored by the treatment peddlers and *cure* mongers of these schools. Only in the *Hygienic System* are these two basic needs of the restoration of health regularly and consistently given the attention they deserve.

This is the beauty of the *Hygienic System:* it renews, renovates and restores the impaired organism, removes the causes of the aches and pains, cleanses not only the digestive tract, but the whole organism as well. Lashing a sick organism into increased activity with drugs is as *scientific* as lashing a tired horse into greater effort with a whip. The one exhausts the sick man as surely as application of buck-skin exhausts the tired horse. A tired horse requires rest, then food; the sick man equally requires rest, then food.

Hygienists have patiently gathered and collated facts and from these facts have made their generalizations, not hasty generalizations, but generalizations that are arrived at by patient and long-continued study of the subject. It should be fully understood that *Hygienists* have different facts from those offered by the drugging schools; consequently, they necessarily make different inductions. Facts, so far as our experience can reveal, show that many of the chronic diseases now regarded as *incurable* are radically remediable by *Hygienic* methods. Long experience has demonstrated the great value of a period of physiological rest (fasting) as a primary and preparatory step in recovery from chronic disease.

It is not always true that there is a lack of desire for food in chronic disease, although it is common for the chronic sufferer to lament that he has lost his appetite. In some cases, however, the sufferer complains of being hungry all the time. It is a rule that when such patients are placed upon a fast, the fictional demand for food soon ends and often there develops a definite repugnance to food. It is essential that the fasting individual shall rest, both physically and mentally, during his fast and for some time thereafter; but this does not mean that he is to give up everything in life while fasting. *Hygiene* should not be regarded as a plan of denial, but one of fulfillment. In the matter of caring for the fasting individual, the same rule applies as when caring for the non-faster: namely, the capacity of the fasting organism to constructively use the normal requirements of life is a sound rule of care.

The fasting body needs and must have oxygen; it needs and must have water; it does not need and should abstain from work. As a matter of fact, all "stress factors," whether physical, mental, sensory or emotional, are to be avoided. Every possible activity of the fasting organism is not to be regarded as a stress factor. There are many activities that become stresses only when they are carried beyond certain limits.

There is a division of opinion among present-day *Hygienists* about whether fasters should indulge in sun baths or not. It is the view of the present author that sun bathing is not necessarily contra-indicated during the fast. It is recognized that it is easy to overindulge while fasting; but it is our thought, based on ample experience and observation, that sunshine can be beneficially employed during a fast in most chronic cases. If the bath is taken when it is not too hot, if the bath is not too prolonged, if the exertion of reaching the bath and getting back to bed is not too great, it is our contention that it will prove definitely beneficial. We do not think that moderate sun bathing in a comfortable temperature constitutes a stress while fasting.

Thus does the *Hygienist* care for the chronically ill. He does not administer a collection of *cures,* but provides the sick organism with the good conditions required for the efficient operation of its inherent restorative processes; and he finds that, if he has a recoverable organism to begin with, sooner or later health will be restored. Our confidence in the success of *Hygiene* in the care of the sick is based not alone upon a knowledge of the laws of life, but also upon observations of *Hygiene* at work and the normal requirements of mankind, physical and mental.

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Crises

CHAPTER XXXII

There are those who employ *Hygienic* care who have generally acquired the idea in some way that health is to be restored through some kind of experience that has received the technical appellation of *crisis.* So *crises* have come to be regarded not only as an essential concomitant of care, but often as the object of it and, hence, care is pursued in these instances with the production of *crises* as the desired end, never doubting that this is the most feasible way of acquiring health.

Many *Hygienists* early questioned the validity of this plan of care and many of them, by the most acute analysis, showed that crises often have but an obscure connection with the causes of the patient's suffering. They said that the desire for crises is the result of false education, in which the profound virtues of drugs continue their hold upon the mind. The effects of drugs are to occasion disturbance, disease and a pathological state. The patient suffers an "operation" and the bettered condition that is supposed to follow is attributed to the effects of the drugs rather than to the continuance of the causes of life. One great error of the allopaths was that of converting the stomach and bowels into "critical organs," thus trying by violence to force a crisis upon one organ and compel it to carry off all the effete matter of the whole system. Carrying this thought over into the field of *Hygiene,* the mind of the uninstructed patient is intent on some important and new manifestation rather than on trying to secure the ordered harmony of the body by an insensible progression similar to that by which it was lost.

The doctrine of *crisis* (that disease ends by crisis) is attributed to the legendary Hippocratis. Whoever may have been the authors of the ancient writings known as the *Hippocratic Corpus,* the doctrine is found in them. It would seem to have been applied largely, if not wholly, to acute disease; but when it was adopted by the Priessnitzian wash women, it was applied primarily to chronic disease. The crisis (not one but several) became essential to recovery from chronic disease and the watercure practitioners were very proud of their abilities to produce crises. For convenience of description, crises were divided into acute and sub-acute forms. Acute crises consist of febrile symptoms such as lassitude, fever, headache, chilliness and pain in various parts of the body, or increased discharges at some outlet of the body. When these symptoms develop, it is supposed that disease is in some way deported through the system, either through avenues previously opened or some new one.

The second form of crisis consists of various types of skin disease, such as boils, pustules, rashes, ringworms and efflorescences of varied forms. The appearance of such symptoms was regarded as signifying a change of the feelings of the patient, especially with the effects of the irritant applications of drugs. Similar symptoms constitute the effects of drugs when administered with therapeutic intention and, so, the only principle involved is the choice of means whereby they are to be produced--that is, either a perturbed state of the physiological system which has been produced by drugs or by some other means of disturbing the vital functions in an unnatural way. But when similar symptoms develop from unknown causes or by *accident,* their occurrence is considered a grave matter, most imperiously demanding medical interferance. The crisis is now regarded, and rightly, as a pathological condition or disease.

Thus it seemed to the *Hygienist* to be only relatively, and in a sense fulfilled by acute disease, that crises could be regarded as advantageous. They represent merely the best the organism can do under the impairing circumstances that have been imposed upon it and these conditions are never to be tolerated when we are aware of their existence and much less are they to be sought by artificial means. Under compulsion, the ordinary faculty inherent in the system becomes conservative and develops such unusual action as will tend to restore the lost physiological balance. The occasion of such tumultuous action is to be avoided and the action not to be sought. Though the two may end in harmony, we cannot regard it but as the result of an evil to be guarded against, and its occurrence is generally attributable to some unwitting mistake or accident that ought to have been avoided. Why, then, should we endeavor to produce a state of

acute disease in trying to remedy chronic disease that at other times we ought to avoid. Dr. Taylor, discussing this very subject, said: "I have yet to find a case where it was really necessary to become sick in this manner in order to get well." He added: "Health, which is balance, can never hang upon such contingencies. The chronic invalid still lingers on through all the trials of his constitution, a martar to the conjoint folly of himself and his prescriber." He gave it as his opinion, without implying the existence of sinister motives on the part of others, that the stay of invalids in many institutions is often unnecessarily and tediously prolonged because of the pursuit of crises. He said that the credulous and unfortunate patient, frequently disappointed to find that the crisis, the sign of his deliverance, is but the seal of a new extension of his enthralment.

It was the conception of many *Hygienists* that the idea that serves as the true basis of the program of restoring health is radically different from that which seeks deliberately to produce crises. The sensibilities and powers of the living organism do not require to be wrought upon in certain cases, nor in any case by causes of extraordinary power, differing totally from the fixed conditions upon which vital activities depend. In health, the congeries of vital parts of which the organism is composed act in harmony; this harmony is not to be restored by violence when lost. In the light of *Hygiene,* the restoration of the adjusting powers are not promoted by disturbing causes, derived from whatever source. The chief object of remedial care should be rather to restore the disturbed harmony of consensual parts. The conditions of this harmony or health are founded in nature and are not subject to the fitful variations that our ignorance or perversity respecting these matters would seem to imply. *Hygiene,* theoretically at least, interdicts disturbing causes, derived from whatever source. The resources of the prescriber are limited to just those principles and conditions as together evolve life and not sickness, only in some needful variations of their proportions. It fritters away none of the precious vital capacities for insignificant or inappropriate or useless purposes. It merely affords the proper scope and just direction while the obstacles that would circumvent the desired object are removed and health is silently and unostentatiously restored.

Jennings and Graham did not discuss crises and must have thought very little of them. Alcott, also, ignores their supposed need. I once asked Dr. Tilden what he thought of this assumed need for crises and he replied that, under rational care, they are of rare development. Trall discussed, but did not stress them. Walter and Page never stressed them. In general, I think it correct to say that *Hygienists* were not enamored by the doctrine that critical actions are always essential to recovery from chronic disease.

Dr. James Caleb Jackson was a notable exception to this rule. He laid great stress upon crises and the need for them. In the June 1857 issue of the *Journal,* he not only elevates water-cure processes to top rank in the care of the sick, but stresses the need for crises in the process of recovery. He discusses this subject at some length in his controversy with the allopaths, these having severely criticized and condemned the crisis-inducing practice. Declaring crises to be "harbingers of redemption," he proceeds to explain the why and wherefores of crises. He explained that medical men see no such crises in their practice because their modes of treatment are such that the life forces must war against them, whereas his methods of care (chiefly hydropathic) were most gratefully received by the body.

He explains that whatever the disease of the patient, "only treat the case naturally, that is, scientifically--not artificially, that is, empirically or quackishly--and before the patient gets well a critical state will show itself, and which will be from various causes, more or less severe, but in no instance dangerous, but, on the other hand, decidedly encouraging to the patient as well as to the physician . . ." He thought that under "natural" or "scientific" treatment (by which was meant water-cure) the body was so invigorated that it mounted a determined resistance to accumulated impurities, while under "artificial" (drug) treatment, the body was expending its energies so prodigally in expelling the drugs that it had no energy with which to evolve a crisis.

Dr. Jackson says that: "Four out of five of my patients have crises of some sort. Ninety-nine out of each hundred who have them are benefitted by them, or, to speak perhaps more correctly, are better after them." He also says that: "For my own part, I *hail* crises. They are like a finger-board at a cross-road . . . a crisis is like a light shining in a dark place-it makes darkness visible."

Explaining the forms that crises take, he said: "In the treatment of chronic disease, the crisis is *quite apt* to be the same disease in an acute form. Thus, chronic rheumatism is quite likely to show critical action in

the shape of acute rheumatism, which latter is much more easily managed than the former and when overcome, the patient puts on good, sound, vigorous health." Boils, ringworms, rash, miliary eruption, diarrhea, diuresis, chills, fever, vomiting, headache, neuraligia, pains in the back and other such developments are listed by him as crises. The newer term for them is "reactions."

Crises were thought to be revivals of formerly suppressed acute disease--the suppression being done with drugs. In recovering from long-standing states of chronic disease, the crises were supposed to develop in inverse order of the occurrence of the development of the acute diseases with which the patient had suffered. Chiropractors will here recognize the origin of their notion of "retracing," which they borrowed from the *nature curists.* Dr. Jackson presents a case to illustrate this inverse order of critical developments.

He cited a male patient who suffered with "fever and ague" (probably malaria) seven years before coming to him. In the iterim the man had suffered with "bilious fever," dyspepsia, liver complaint, hemorrhoids and severe chronic constipation. He consulted Dr. Jackson for debility, this affecting chiefly the reproductive system--probably impotency. He says: "I placed him under treatment and his ailments took the back track and he had every one of these diseases over again, closing up with fever and ague. It took him nine months to get well, but he has not had a sick day since and can do very hard work and do it well. It is only fair to say that the appearance of these various ailments was symptomatic, lasting but a little while, but he passed over the ground retrogressively . . . and he closed his sickness at the *beginning."*

This is one side of the picture. There is no doubt that crises do occur in getting well of chronic diseases; but, so far as our observations go, they are not as frequent, not as orderly in their assumed retrogressive occurrence and not so absolutely necessary to recovery as the hydropaths contended. It is our opinion that in the majority of cases, at least under *Hygienic* care, excretion can take place through the ordinary channels of elimination sufficiently rapid that no crises are essential. The advantages supposed to be derived from what are called crises are at least of very questionable import; the disadvantages are often very many and distinct.

In the October issue of the *Journal,* replying directly to the statements made by Dr. Jackson, Taylor lamented the fact that both patients and practitioners continued "to overlook the great fundamental principles that underlie our system and, like the allopath, continue to seek health through some formidable operation." He pointed out that "health does not necessarily follow forced acts of elimination, however complete or long continued they may be, or by whatever means it may be effected, since this does not imply, on the part of the system, the ability of self-regulation of function."

He says that it was frequently asserted by water-cure practitioners that "all the virtues of drugs are embodied in this single substance (water), in its power to produce emetic, stimulant, anti-febrile and a host of other effects, rivaling the vaunted qualities of remedies set forth in the most approved pharmacopoias. Some argue for a verbal modification of this statement, in the distinction that one set of curative measures employs poisons while the other does not. This distinction becomes insignificant," he says, "when *effects* are regarded, in which we are really to decide which is least inimical to vital welfare, rather than upon abstract chemical quality."

He further said that "it is this reliance upon the use of water to produce these manifestations, not inaptly called crises, that is the cause of much danger to the perpetuity of the system of medicine that we employ, and though the ignorant and empirical use of these means be decidedly better than any other, because based on a higher fundamental idea, yet the practice should be carefully guarded lest it degenerate into a practice no better than the theory."

"No one will contend," he said, "that what is called Water Cure crisis is absolute health. The effects of aloes might as well be called health. In both cases the system does the best it can under the circumstances to repel unnatural impressions. Whether drugs or water be employed, the organs may suffer a depression of their vital capacities from the inordinate tax imposed upon them and when repeated impressions upon the sensory organs be the chief means employed, abundant injury can follow, if the means are in inordinate excess."

The skin is an expanded nervous organ, adapted to originate and transmit to correlative parts two kinds of sensory impulses, that of touch and that of temperature. Every sensory impulse, however slight, transmitted by any terminal nerve, however minute, even though not capable of effecting the consciousness, is still competent to occasion action in the nerve center connected therewith. The repeated application of extremes of temperature, either hot or cold, in the application of hydropathic measures, may thus easily reduce the functioning powers of the patient by as much as they waste his energies.

This depressing effect of water treatment was strongly emphasized by Dr. Robert Walter, writing several years later. But we are here interested in Taylor's analysis of the doctrine of crisis. He correctly traced these "water cure crises" to the accumulation in the blood stream of "secondary products" or "evolved products of organic change" that are retained due to the depression of the organic capacities. As we would phrase it today: enervating treatment, placing an added tax upon the nervous system, further checks excretion and the resulting increase in toxemia precipitates a crisis or a process of supplementary elimination. The crisis becomes necessary, not because the treatment has raised the body's resistive powers, as was and is taught in some quarters, but because the treatment results in increased toxemia.

"I regard the production of crises, whether by drugs or water," continues Taylor, "as an evidence of the impropriety of the remedial means employed, or of the method of using such means, and of a radical misapprehension by the physician of the mode in which health is maintained and acquired, unless, indeed, these effects are traceable to his cupidity." Further: "It is lamentable to witness the effects of these extreme purgative efforts, whether by means of drugs or water. The victim, sustained only by that paramount function of the puerile mind, *credulity,* buffets the injuries heaped upon him till they transcend physiological endurance and then, instead of the promised health, finds every sense converted into a means of deceiving the judgement . . ."

Coming to direct reference to Dr. Jackson's article, he says: "In spite then, of authority not altogether unknown to readers of the *Journal,* I maintain that, in the practice of Medical Hygiene, water is no 'medicamentum,' nor is it a `specific remedy for disease,' as distinct from whatever else is appropriate to the wants of the system . . . To maintain the opposite faith is a stronger implication in favor of specific medication than is often claimed by the more intelligent of *any* school of practice. Let us cultivate a willingness to let the doctrine of *crises* and *specifics* go to the partisans that rely most on them, the vendors of pills and balsams. Though 'four out of five get a crisis and get well after it,' as they would in the case of drugs, many of my patients recite the tale of such a getting well with deep sorrow."

The two views of crises, as they prevailed in *Hygienic* and near-*Hygienic* circles in the last century are, perhaps, not as antagonistic as they may at first appear. The differences seem to grow more out of differences in emphasis than of principle. If we exclude the forced crises that were so common under the heroic processes of hydropathy and think only of those spontaneous crises that occasionally arise in the course of disease, whether one is being treated or not, both views are the same. We know that when enervating palliatives and forcing measures are discarded, the crises are not as common as otherwise. Thus it was that the two views of the crisis, as we have here pictured, grew directly out of the opposite modes of care of the chronic sufferer.

Any influence or indulgence that further enervates and inhibits excretion will precipitate a crisis and this is as true of methods of treatment as of habits of living. The heroic use of cold application can precipitate a crisis (by inhibiting excretion) as certainly as can overeating or dissipation. In either event, while the crisis serves to free the body of a part of its load of toxins--hence, is beneficial--it does not succeed in restoring health for the reason that the enervating mode of living or treatment is continued. The thing that Dr. Taylor objected to most in his article was the practice of water-cure practitioners of deliberately seeking to induce crises. He recognized that they were doing this by reducing the functioning powers of the body and thereby increasing the toxic load it was carrying.

All of this serves to confirm our oft-repeated statement that had the early *Hygienists* given more attention to Jennings, Graham and Alcott and less to Priessnitz, Schrodt and Rausse, *Hygiene* would have fared better.

Feeding in Disease

CHAPTER XXXIII

In an age when everybody is demanding a diet that will *cure* them of their various maladies, it may be idle to say that a fast, rest in bed and giving up enervating habits will enable the body to restore itself. But it must be said that diet *cures* are as false as drug *cures.* What Trall said in the *Journal,* April 1850, concerning the diet prescriptions of the physicians of his day, would apply with equal force to much of the dietary advice handed out at present. He said: "Of all the bungling, blundering, nonsensical, ridiculous, absurd and absurdly unnatural twattle which makes up a large proportion of that 'budget of blunders' which swells out the pages of medical journals, the most exquisitely foolish is that part of it which pertains to diet."

Only when the body has excreted its accumulated impurities and normal nerve energy has been restored and the life of the patient has been corrected can he be said to be restored to health. In saying this we do not wish to be understood as decrying the value of proper diet in recovering health in chronic disease. In acute disease, as we shall show later, no feeding should be considered. It is important for us to understand at this point that no food possesses eliminating properties--*medicinal qualities.* The body excretes and has organs specially constructed with which to do this work. These organs do their work well when abundantly supplied with nerve impulses and falter in their function when nerve impulses are reduced.

Early *Hygienists* placed varying emphases upon the different *Hygienic* factors in their care of the sick. Some stressed exercise; some stressed rest; some stressed diet; others stressed other factors. Writing of serious cases of dyspepsia, Kittredge asserted that they can be restored to health, but that "all the water in Christendom won't cure them, alone, however skillfully applied." As Kittredge was one who placed great emphasis upon the *curative* power of water, this statement of his is significant in revealing the limitations of hydropathy.

It is important that we recognize that in chronic disease all *Hygienic* factors are to be employed within the needs of the sick organism and its capacity to make constructive use of them, and not just one or two of them. In all states of impaired health (acute and chronic disease and wounds) the physiological needs of life (air, water, food, sunshine, temperature, activity, rest and sleep, etc.) must be supplied in keeping with the ability of the body to appropriate and use them.

There is more to living than tinkering with diet. People get sick as a consequence of bad habits of body and mind and if they are to recover health, they must correct all of these habits. In this same vein, foods constitute but a part of the subject of diet. There is the eating of foods and this involves many facets that are commonly overlooked by the gum willies who teach that "diet does it." Rapid eating, insufficient mastication, overeating, eating when feeling bad, eating in states of overworked emotions, passions, etc., will impair digestion and wreck the best of diets. All of these things were well recognized by *Hygienic* practitioners from the beginning.

The great importance placed upon the subject of diet may be well understood by reading portions of an article carried in the *Journal* of September 1857, from the pen of S. M. Landis, M.D., who said: "It is not sufficiently impressed upon the minds of the people, that physiological food is the principal medicine that should be used in the successful renovation of the system from disease. Proper food is the *main* agent upon which a *true* 'healing science' can be founded. If we desire to be successful practitioners, we must make this point the *most* prominent feature of *the* 'healing art.' "

Landis advised: "Patients whose appetites are stronger than their reason should never be allowed to choose any quantity of food they may desire--even though it be of the proper quality." He contended that *Hygienic* practitioners "should prescribe food--as the drug-doctors do their medicinal agents--measuring it,

according to circumstances; and they should also know that it is possessed of the right properties, that it may claim a healthful relation to stamina. If our tables are provided with food of improper qualities, and patients are also allowed to partake of as much as they wish, they often eat *too* much, thus impeding the various functions of the system, and retarding or entirely preventing any curative operation whatever. Physiological food in *quantity* and *quality* is the great *panacea* of a *true* hygeio-therapeutic or hygienic practice. If this be a fact, then why not have more confidence in its *precise* administration, especially in chronic complaints, and let bathing, exercising, etc., be of secondary importance? On the contrary, if all the electro-chemical baths, kinesipathic or movement cures, large boots, compressed-air baths, drugs included, if you like, and the various processes in hydropathic use are *strictly* and *skillfully* applied, and the *dietary* is not of the proper *quantity* and *quality,* there can be but meager success attending the practice."

He said that, although patients may be temporarily improved under such treatment, "where diet is made of secondary importance no lasting relief and physiological recuperation can take place. If we wish to be *truly* scientific and successful hygeio-therapeutic practitioners, let us *always* remember that *Nature,* the Almighty Author and Ruler of all health and happiness, is the *only true physician."*

Food may be regarded, as Landis seems to consider it, as the coordinating factor which, to a great extent, transforms the other elements of living; but we cannot afford to forget that the totality of animal life is made up of manifold functions with their various instruments or structures, each of which has its appropriate external relations which supply the needs of life and which must be supplied in due proportion if life is to continue. Not only must these be supplied in accordance with the purposes of function, but the supply must be in proportion to the body's ability to appropriate and constructively use them. Too much or too little can be equally hurtful. It is not enough to tinker with diet; it is essential that the whole life of the individual be brought into proper relations with the laws of being.

"Let us equally bear in mind," Landis further says, "that the living body is a self-regulating, self-rebuilding and self-restorative apparatus; hence it requires a proper *quantity* and *quality* of food to accomplish its end--established health and happiness." As indispensable concomitants to proper food, he said that a judicious combination of "pure water, pure air, proper light, rest, exercise, etc., properly adjusted and administered" will produce sound minds in sound bodies.

"More confidence," said Landis, "should be placed in Nature and its Author, and less in bathing and other curative measures . . .," although he was of the opinion that these measures were serviceable.

Landis says that it was a daily experience of his that many people lost confidence in *Hygienic* practices simply because many *Hygienic* practitioners either lack proper knowledge of or neglect the first principles of a true healing science, and that, as a consequence, theirs was but a limited success. He indicates that great numbers of patients came to his institution who had "found only great disappointment at other institutions. Upon inquiry," he says, "we learn that they had received plenty of bathing, plenty of exercise, plenty of proper light, plenty of pure water, plenty of pure air, and last but not least, plenty of *food,* of any unphysiological *quantity* and *quality.*

"Many of these desponding creatures," he continued, "recover health under our treatment in a few weeks, who have spent months, and even years at other cures. Our success does not depend upon our superior skill or learned attainments . . . " He stressed his "precise administration of food," saying that he never makes a hobby of new isms, thereby forgetting or neglecting first principles.

"We plainly teach our patients the importance of proper food," he says, "and we do not place anything upon the table but what every patient is allowed to take his share of. We tell our patients how much to eat, and we are present when they are eating, so no one can eat *too much or too fast.* We keep a house for the *speedy* cure of disease, and for well persons to preserve health. We do not keep a promiscuous set of boarders, as do *too many* similar institutions; in other words, we are strictly physiological in all our doings, and our success attests the fact.

"If patients do not comply with our dietetic habits, as well as in other matters, we decline treating them longer. I have lately visited some of the so-called *leading* Water-Cures, where I found meats, butter, milk,

salt, molasses, etc., on their tables; yet the same physicians are continually protesting against use of these articles. To preach one thing and practice another appears to me absurd. Why not have thoroughly scientific institutions? Is it a wonder that the skeptic has so *little* faith in our practice when he finds that our *leading* men are thus slaughtering their principles? Why do they thus? It must be for the sake of a few boarders, who (do) not choose to eat proper food. Oh! what trifling compensation for the sacrifice of such *valuable* principles!"

The reader may think that Landis was somewhat dictatorial in insisting upon proper eating by his patients. This is especially likely to be so among the undisciplined, who resent restrictions that are placed upon their living habits and among the incorrigible, who refuse to go even a little way in correcting their ways of life. "Who made you God?" is a question that we are frequently asked when we insist upon instructions being carried out. Yet it is true, as Dr. Tilden so often stressed, that the limitations that we place upon these unruly ones are only such as nature herself dictates. They are not for our benefit.

We do not advise rest, for example, for our own profit, but because there is a distinct need for and a natural call for rest. What good does it do the *Hygienic* practitioner for a man to give up coffee or tobacco? The patient derives all the good out of abandoning these practices. But, in insisting that these poison habits be discontinued, have we done anything more than to demand that the normal rules of life be carried out? Nature herself is the tyrant; she is the dictator. She is the one who does the penalizing when her rules are flouted.

What or who is this nature that penalizes us for our wrongs to ourselves? It is none other than our own body. If you try to live on deficient food, it is the tissues of your own body that fail to renew themselves ideally. If you do not secure adequate rest and sleep, it is the tissues of your own body that fail of ideal renewal. If you smoke or drink, it is your own tissues that are damaged. The limitations you face are your own limitations. They are set by your own constitutional capacities and powers.

Dr. James C. Jackson once advised one of his physician correspondents, P. H. Adams, M.D., of Florence, Texas, to "be autocratic in your determination to have them (the patients) do as you wish to have done." How far Adams carried out this advice the record does not reveal. But if we can judge the past by the present, he was inclined to go easy with his patients and cater to their whims and compromise with their habits of life. He was successful or not to the degree in which he insisted upon strict compliance with his instructions.

Recovery of Vigor

CHAPTER XXXIV

The living body is organized for the performance of function. Function is its great purpose, the normal and vigorous performance of which constitutes health; it is only when abnormal action occurs, coincident with and usually dependent upon reduced power, that the operations of life become painful and we seek relief. For this reason it is desirable to emphasize the importance of vigorous function. No high standard of health can be maintained upon a basis of feeble function. Inefficient performance of the vital functions is precedent to the development of every symptom complex, whether acute, sub-acute or chronic.

The key to robust life, to functional vigor, to the preservation and recovery of health, to the solution of the problems of invalidism, lies in an understanding of the normal means by which life is evolved and maintained. As sure as effects follow causes in any and all departments of nature, an understanding of the causes that lead to the evolution of disease will enable us to remove these causes and provide the causes of health and thus be restored to health.

The sick seek to be *cured;* they expect this to be done by drugs or by something else outside of themselves--by baths, by electricity, by radium, by x-rays, and most practitioners of the various schools of so-called healing practice upon the same erroneous theory. It should be understood that there is no more healing power in a Turkish bath, an electrical current, a massage or any other agency of this type than there is in a drug. A mud bath possesses no more healing power than a dose of penicillin. It has the negative virtue of being less harmful and this is all that may be said in its favor.

In an article which was published in *Health,* May June (1883), Dr. Walter tells us that many *Hygienists* of the period had adopted the opinion that baths, electricity, massage, Swedish movements and other such agents possess *curative* virtues, and they employed them to such excess that they brought odium upon both the method and upon *Hygiene.* They reasoned, he tells us, that, if massage *cures* patients, why shall they not be manipulated every hour of the day; if baths or electricity or movements possess *curative* virtue, how can the patient have too much of them?

Walter calls this reasoning and the practices based upon it a "fatal blunder" and says that it grew "out of indefiniteness of thought and language." He says that the odium this practice brought upon the *Hygienic System* was "hardly to be measured" and adds: "Formerly it was the water-cure and the extremes to which water-cure practices were carried is almost passing belief. Others assert that health is to be restored through movements, and patients are manipulated and rubbed and stretched by the hour, only to fail of the results sought . . . massage by the hour is the practice everywhere."

Dr. Walter himself was instrumental in helping to popularize massage and thought that it could be made to work wonders in improving the circulation and nutrition of the patient; but he advocated five to 15 minutes of massage rather than hours of it. It is true that if a thing is good, it can be overdone and Walter's criticism of the work of his fellow practitioners was that they were overdoing a good thing.

The means employed in restoring health and vigor, to be effective, must harmonize with physiology and biology, as manifested under the peculiar circumstances of disease. The difference between health and disease is not radical. The invalid is subject to the same laws, affected by the same agencies and is to be cared for on the same principle as the man in health. The subject of getting well by the use of the same means that keep one well should be of utmost interest to everyone, whether well or sick.

How are we to improve in strength and vigor? Are strength and vigor not to be obtained in the same way and by the same means which have given us whatever power and capacity we now possess? Is not the natural way of gaining power also the scientific way of increasing it? Nutrition alone is the source of all

vital power. It is through nutrition that we come into existence; it is through nutrition that we have whatever vigor we possess and our health corresponds precisely to the quality of our nutrition. This is not only true of all human beings, but of all plant and animal life. Life itself, wherever found, with all its marvelous capacities and enjoyments, is wholly the result of nutrition. Whatever improves and maintains nutrition is the source of increased vigor.

Better digestion of better food, more oxygen and more sunshine, adequate rest and sleep, better circulation through exercise, while thought, worry, *stimulation,* etc., are restricted or discontinued, will enable us to accumulate the very gold of vital existence and will enrich us with the power that lives, enjoys, maintains health and restores health when ill. But these things are merely the materials of nutrition and no forcing measures are to be considered in our efforts to increase vigor.

When the vital forces are maintained at a low ebb, they are frittered away without accomplishing the best results. The engineer who would open the valves of his engine and permit the escape of the steam while the pressure is scarcely sufficient to propel the engine would be justly regarded as a fool because he foolishly wastes power without accomplishing the desired work; whereas, to close the valves would result in an accumulation of a degree of pressure sufficient to produce vigorous action and consequently perform efficient work. In like manner, the man who creeps through life half exhausted, perhaps a chronic invalid, never allowing himself the opportunity for sufficient recuperation to secure vigorous function or who indulges in habits that are exhausting, is equally unwise. He fritters away his time, his talents, his opportunities, and in the end is snuffed out prematurely because he refused to hoard a little power as provision against an accident or emergency. The quality of the work done must ever bear close relation to the force employed in doing it and he whose powers are low cannot do work of good quality.

It is a truism that something cannot come out of nothing. The performance of work requires corresponding expenditure, necessitating, in order to its continuance, a constant supply of working capital. The use of structures wears them and this necessitates sufficient repair. From the blood is derived the materials not alone of function (work), but those also of repair. Deoxygenation, devitalization and depletion of the blood is the necessary result of the extraction from the blood stream of the materials of function and of structural production and repair. This necessitates regular revitalization, reoxygenation and replenishment. These desirable processes are not to be achieved by overfeeding, forced feeding, forced deep breathing, excessive water drinking, excessive sun bathing, or by excesses of any kind. These do not guarantee good nutrition, but rather, in most instances, the reverse.

If food is strength, we need never be weak. Food is not strength and no amount of it crowded into the stomach when there is no power to digest will add to our strength. The sudden upsurge of bodily energy sometimes seen when food is taken into the stomach or is merely held in the mouth indicates that the ingestion of more food results in a release of stores that have been held in reserve, not that the undigested food has added strength to the body.

Rest and sleep are nature's great representative restorative processes. The man who is depleted and weak needs rest. Massage, manipulation, electricity, hot and cold baths, steam baths, forced exercise, *tonics* and *stimulants* and other means of forcing expenditure prevent rest and recuperation, hence add to the invalid's depletion. Restoration of health and strength depends not upon non-nutritive elements and processes that invariably disrupt the processes of life and impair nutrition, but upon nutrition in its broadest sense.

We divide rest into four kinds: *physical rest,* which may be obtained by discontinuing physical activity, going to bed and relaxing; *sensory rest,* the need for which is more urgent in acute disease but is also marked in chronic conditions, and which is secured by quiet and by refraining from using the eyes; *mental rest,* which is secured by poising the mind, this is to say, by ceasing to worry and to fret and by the cultivation of mental equilibrium; and *physiological rest,* which may be obtained by reducing physiological activities. This last form of rest may be best obtained by either greatly reducing the amount of food taken or by abstaining from food altogether.

How much rest must one take? Just as much as is required to recuperate nervous energy. The amount of rest required will vary with the circumstances and conditions of life. In youth, recuperation is commonly rapid and short periods of rest suffice. As age advances and, also, as the condition of the body deteriorates,

the process of recuperation is correspondingly impaired and longer periods of rest are needed. Invalids, especially chronic invalids, often need prolonged periods of rest. Rest in this instance should be understood to mean physical, sensory, mental and physiological rest.

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Palliation

CHAPTER XXXV

Medically, things were never worse for the world. Discussing arthritis, a television commercial says: "There is no cure, but there is anacin . . . " It was then explained how anacin provides temporary relief from symptoms. This was an advertisement for a patent medicine, television having supplanted the newspapers and billboards as channels through which to purvey such products; but the advertising follows the approved medical line--there is no cure, but we can give you relief. "Palliate the symptoms," "tickle the senses"--this is the rule of practice. Causes are systematically and consistently ignored.

Drugging to relieve symptoms--to relieve a headache, to relieve flatulence, to relieve constipation, to reduce fever, to check a cough, to allay nervousness, etc.--is the common practice. The cause of the headache or of the constipation is completely ignored, both by the patient and his physician. Wine, for example, may "relieve" a sense of flatness and inertness by the momentary glow and fillip of excitement; but the "relief" thus occasioned is "like the heat of a fire of thorns." There is constant inducement to repeat and increase the "remedy." Thus, drug addiction becomes one of the most commonplace facts of modern life.

Medicine is a system of spectacular palliation. A man is in pain. Something must be done. He demands relief and he is determined that the physician's drug and not his own natural powers shall provide the relief. He takes aspirin upon the advice of his physician and while this provides a temporary respite from pain, it causes irritation of the stomach with hemorrhage; or he prescribes a "pain reliever" containing phenacetin, which may provide a few minutes respite from distress, but damages his kidneys. Mankind pays a fearful price for its drug-provided relief.

Basically, there are two ways to handle the sick. These are: (1) remove the causes of the disease; and (2) treat the symptoms with a view to palliating them. The drug system is devoted to palliating symptoms; it does not seek to remove cause. It administers an aspirin, for instance, in headache and ignores the cause of the ache. The patient does not get well of the headache, but does suffer from the drug and does develop a drug habit. Drugging is not the answer to a single one of the many problems presented by human suffering.

Another case in point is the treatment of peptic ulcers, when these are treated with the diets commonly prescribed and the drugs commonly used. It has come to light that scurvy is a frequent result of such treatment. But a few years have elapsed since Donald Berkowitz, M.D., warned that "milk and antacids, the mainstays of therapy for peptic ulcers, may lead to metabolic alterations potentially more serious than the primary disease being treated." He continued by showing that such treatments may produce many changes in the body of the patient, including the evolution of gout. Naming as a new disease pattern what he called the milk-alky syndrome, he called upon the medical profession to realize the "necessity of re-evaluating and re-appraising these therapeutic concepts in the light of newer findings and beliefs, with the hope that these undesirable side-effects of the medical treatment of peptic ulcer be prevented."

For years we have warned that the diets fed in peptic ulcer are deficient or inadequate and tend to the production of deficiency disease. Now, Berkowitz adds to this the fact that the alkalies given for the purpose of palliating the hyperacidity tend to upset the acid-alkali balance of the body and, if continued, lead to the development of alkalosis. How much safer, more convenient, more effective and more sane is the fast followed by a *Hygienic* program of care and feeding!

Palliation deals with symptoms only. It seeks to deaden pain or relieve discomfort in the shortest possible time and do this with any means at its command. This kind of treatment must always carry the stigma of callous evasion of the necessity to remove the cause of the suffering before health can be

restored. Such *cures* as aspirin for headache, morphine for pain, barbiturates for sleeplessness, Miltown for emotional disturbance, digitalis for the heart, quinine for malaria, mercury or arsenic or penicillin for "syphilis," collapsing the lung for tuberculosis, surgical removal of organs or parts of organs to *cure* disease, the cause of which is unknown, fail to restore health. This *curing* program amounts to a smothering of all of man's discomforts with palliation, continuing to palliate so long as it seems to be effective--at the same time, trying to make the sucker like it and continue to pay for it.

How long is it going to take us to distinguish between spectacular palliation and getting down to basic causes and removing these? Any fool can take an aspirin for a headache, but it requires intelligence to ferret out the cause of the headache and remove it. Any ignoramus can trim a corn; it requires more intelligence than most people seem to possess to get a properly fitting shoe. The land is overflowing with people who take an antacid after every meal, but few try to find and remove the cause of their almost perpetual gastric distress. How few correct their mode of eating so that they may enjoy gastric comfort!

Let us take the man whose gastric acidity is so intolerable that he keeps taking alkalies with which to neutralize it--it is never suggested that he remove the cause of the hyperacidity. His meals may well be described as a "heterogeneous comminglement of compounded contrarieties." No matter how much his stomach protests and cries out in pain and sourness, he will continue to eat indigestible mixtures and palliate his symptoms with drugs.

What a depressing prospect lies before the sick who devote most of their time to palliating and suppressing their symptoms. They finally end within the ever-narrowing confines of the vicious circle of symptoms grown to complexity from very simple beginnings. The *suppressing, depressing, stimulating,* and enervating effects of drugs are not health building under any circumstances of life. When a drug is taken to silence pain, we but defy the warnings of nature. Instead of obeying the admonition that is pain, we slay the messenger boy and pretend that no warning has been given. To remove an organ and ignore the cause of its impairment is to fly in the face of nature.

There is no recovery where cause is not removed. The practitioner who putters with palliatives and treats effects and ignores causes is a pretender, a charlatan. The man who cuts out affected parts of organs and permits cause to continue until it destroys the patient is a criminal.

Drugs and manipulations, heat and cold, electricity and super-sound, prayer and psychological soothing syrups may palliate for a time; but there must inevitably come a time when these fail. There is but one genuine road back to good health and this is a radical about face in the way of life. If disease is the result of gluttony, there can be no restoration of health until the overeating is discontinued. If tobacco is the cause of suffering, nothing short of giving up tobacco will enable the body to return to a state of health. If alcohol is the cause of discomfort, only sobriety will enable the sufferer to evolve into a state of good health. Whatever the habit or habits that are impairing health, they must be discontinued and their places taken by constructive habits of life.

Just so long as our pleasure-crazed and self-indulgent people can be made to believe that disease is something apart from their daily life--germs or viruses or something over which they have no control--they will refuse to attempt to govern their frenzies, but will continue to wreck their health and life and, when they suffer, they will stupidly resort to palliatives and to surgical removal of affected tissues. The world is filled with means and methods of palliating symptoms and discomforts, but there is only one sure road to good health and this is the removal of the causes that impair health.

Sedatives and *anodynes* check elimination; to continue to administer these substances is to continue to check elimination. This is but one of the reasons that drugging prolongs the illness of the patient, where it does not kill outright. A mode of care that seeks merely to palliate the symptoms, the headache for example, does not make sense.

We are unwilling to bear the pain, to suffer the discomfort, to wait patiently upon the processes of life, while these correct the situation; instead, we reach for a *pain killer,* a *tranquilizer,* a *cathartic,* an *anti-pyretic,* or some other poison with which to smother the discomforts and add to our troubles. We should know that *sedation* is not rest; *hypnosis* is not sleep; *stimulation* is not vigor; *tranquilization* is not

tranquility. An *anodyne* that smothers the sensation of pain does not produce a sensation of pleasure or euphoria. Drugs but feebly imitate; they do not duplicate the normal conditions of life. Harmless substances do not "relieve" pain.

All drug treatment is directed at palliation; but fighting the palliating schemes of the world, as these are exploited by commercialism, is a difficult and endless task. If the effects of wrong but "pleasurable" habits of life can be *cured* or if we can be *immunized* against them, why not have a "good time" and be *immunized* and *cured?* It is all too much like the *electrotherapy* that is employed in the effort to *cure* certain types of crime, which has proved to be a failure. It kills the patient but does not prevent the recurrence of crime.

To think that we can avoid suffering by prayer, kill it with drugs, cut it out with a knife, deny its existence with Christian Science, annihilate it with metaphysical soothing syrups or banish it with the magic of the shaman, while its cause is ignored, is not an intelligent way to view the problems of health and disease.

A man is in the habit of eating soup and salmon, oil and vinegar, ham and eggs, roast pig, all sorts of poultry, a half dozen incomprehensible French dishes and many more unmentionable American horrors, and then has the audacity to complain of being ill, as if it were possible for him to be anything else. When such eating produces discomfort and distress, he refuses to give up his disease-building eating practices, but wants a pill to provide him with relief. He has been taught to seek for relief rather than to remove causes; he has been conditioned to expect relief; he has been told that cause is unknown. Taking drugs to relieve the distress caused by wrong eating habits is like putting a pain killer on a painful heel instead of removing the tack that is causing the pain.

Get the sick man out of the false position he is in and get him into one that is in accord with nature and keep him there and he will become comfortable and remain so. This is not palliation, but a removal of cause. Sometimes all we can do is to stand in,the way between the patient and those miscellaneous ministers of drug substances which are most mischievous in their effects. Nothing they can have gleaned from the highways and byways of folly and fatuity can be more mischievous than the deadly prescriptions of their physicians, and every additional poison, is of course, an additional evil. Palliating practices, instead of removing cause, add to the cause, the additions often being more destructive than the original causes of suffering.

By habitual violations of the laws of life, by repeated indiscretions in his ways of living, a man becomes ill. His digestion is impaired, hence his nutrition suffers. He becomes emaciated. His elimination is checked and he becomes toxemic. Life becomes burdensome and he desires and seeks relief from his suffering. He consults a physician with full confidence that the gentleman of *science* will understand his malady and will have a *remedy* for it. He commences a course of drugging, receiving no benefit, but on the contrary, gradually failing. He tries another physician or another *remedy,* but with no better results. This process continues indefinitely; but no changes are made in his way of life, no causes are corrected, no violations of natural law are discontinued--hence no recovery is possible. Perhaps at this stage he begins to do a little thinking for himself. He searches for other means of recovery. He tries chiropractic, Christian Science, massage and similar modes of *cure.* These fail him. He tries exercise, concluding that he has been too sedentary. He walks; he does setting-up exercises; he exhausts himself--but he refuses to abandon his darling vices. His low state, caused by his wrong living and greatly aggravated by drugging, cannot endure so much exercise--he is hurt more than helped by the activity.

He takes to bathing--taking hot baths, cold baths, steam baths, plunges and rolls in the waters of the seaside and rolls and plunges for hours to wash away his disease. He basks in the sun on the beach, exposing his nearly nude body to the sun for hours. His skin becomes as black as that of the Ethiopians, his nerves lose power from the excess, and still he continues to go down in health. He tries diets. Juice diets, grape diets, dry diets, high protein diets, salt-free diets, vitamin pills--he runs the gamut of the trick diets; but the results are not satisfactory. He still has a most important lesson to learn but he is unwilling to learn.

He tries one thing after another, still persisting in his indiscreet living, still believing that somewhere (if

he can only find it) there is a healing agent which will *cure* his malady and will do so without requiring him to cease his violations of the laws of life.

Whoever performs an act or takes a drug as a *curative* element, believing the "power to *cure"* resides in the act performed or in the drug taken, will always injure himself thereby. Whoever acts upon wrong assumptions in any matter, cannot end well. And whoever possesses faith in *"curative* elements" will not adopt a *Hygienic* mode of living.

All teachers of *Hygiene* should, not only by teaching the true nature of disease and its true causes, but by the expressions employed, do all they can to banish faith in drugs and treatments as possessing any *curing* power. Nothing should be called a *curative agent* simply because nature requires it to sustain life at all times and, consequently, needs it when sick.

He who demands a correction of the ways of life as the one and only means of securing a restoration of health will not be patronized by the millions who still believe that among the myriads of so-called *cures* there is palliation for them and who are content with mere palliation. There is a mighty army of invalids today who cannot get well in spite of their travels, their patronage of the great specialists and their submission to operations, but they are still unwilling to make a few simple corrections in their ways of living in the interest of better health.

When one of these sufferers does condescend to break away from the *cures* of *science* and to undertake a wholly new and, to him, untried way back to health, he is often in a desperate condition. Much organic change has occurred so that nothing short of the creation of a new organ can restore full health. We do not expect such sufferers to recover full health, but we do witness some remarkable improvements in great numbers of these desperate cases. In the less damaged we see great numbers of full recoveries.

It is often in these desperate cases that we witness the most remarkable effects of the fast. To withhold food provides relief from pain and discomfort, enables tired and damaged organs to rest and repair themselves, gives the enervated organism an opportunity to excrete its accumulated load of waste and exotic poisons and to, in great measure, rejuvenate itself. Even in cases where full recovery is no longer possible, comfort may be restored and by teaching them how to eat and live, life may be prolonged for months and even years.

People must be brought to a full realization of the fact that, when ill, all the elements they require (all the elements they can use) are those that are necessary to sustain life in a state of full health and that these must be supplied in the manner that nature requires under the circumstances. This done, they must wait upon the orderly and lawful processes of life to restore health.

To correctly care for any patient it is first necessary to understand the causes that have produced and are maintaining his trouble. We cannot be satisfied when we have found the pathology in the patient's body--when we have found an enlarged tonsil or an enlarged prostate, an ulcer of the stomach, a stone in the kidney or in the gall bladder, a fibroid tumor or inflammation in the colon. These are only effects and they throw no light on cause. To operate, as is usually advised and carried out, is not to remove causes but effects. The operation may temporarily palliate symptoms, but the unremoved causes produce another crop of effects and the patient has "other diseases." Most surgery, like all drugging, is purely palliative.

It is not enough to correctly diagnose a disease. The most essential thing in restoring health to the sick is the removal of the cause of the illness and providing the normal factors of health. Diagnosis leads to the resort to specific *cures* and symptomatic treatment which are often worse on the patient that the original causes of the disease. When diagnostic skill is meager, mistakes in diagnosis are the rule. If specific treatment is required and the mistake is made in diagnosis, it is inevitable that the wrong treatment shall be used. If cause is found, its removal is never a mistake, whether the diagnosis is correct or not.

Statistics of recoveries from disease and of death in disease are based on diagnosis. When mistakes are made in diagnosis, the statistics giving the causes of death (which are based upon these mistaken diagnoses) are thoroughly unreliable. When diseases have not been differentiated, the statistics for a so-called disease include two or more diseases. A classic example is that of smallpox. Prior to Sydenham,

smallpox had not been differentiated from chickenpox, scarlet fever and other eruptive diseases--hence all estimates of the incidence of smallpox prior to that time are hopelessly impossible.

It is correct to say that the suffering of the sick is in keeping with incorrigibility. Cause and effect are well balanced; they are equal to each other. Any effort to force a condition of comfort in spite of incorrigibility must ultimately end in disaster. Somehow it is difficult to whip "rebellious organs" into the traces. They persist in their faulty secreting and lagging functions in spite of whip and spur. The first thing the whippers know the whilom possessors of the *contumacious* organs are in the land where livers "cease from throbbing" and stomachs are "at rest."

The layman has never studied the foundations of medical practice. He has never studied the actions of the human system in casting out toxins. He has unconsciously imbibed a belief in the *curative properties* of drugs and from his earliest infancy he has been told that disease must in some way or other be bled, purged, puked, sweated, blistered or poisoned out of the body.

The testimony of history is that man has long been sick, has long taken the advice and swallowed the remedies of the medical profession and has grown sicker. This is a story of failure. Since men have come into a knowledge of *Hygiene* and have partially and imperfectly applied it to their lives, they have grown steadily better. How do medical men account for this improvement? We challenge them to do it on any hypothesis that does not expose the absurdity of their own practices. For this change in the lives of men there is a cause and we ask medical men to account for it on grounds that are satisfactory to themselves so that their confidence in their drugs does not receive a rude shock.

Is it not strange that a large class of patients who have had extensive and varied experience among physicians, as well as among the newer schools of so-called healing, with little or no benefit, should get well under *Hygienic* care, but without any help from *Hygiene?* It just so happens, according to medical men, that these patients, although perhaps repeatedly told that they are "incurable," had reached the place where they were going to get well anyway at the time they abandoned the destructive and enervating palliatives of the schools of healing and resorted to *Hygiene.* Their recovery under *Hygienic* care is, therefore, a mere coincidence. As a rule, they are desperate cases to deal withmostly cases of long standing, with whom all the prevailing methods and systems of *cure* have failed. They come to *Hygiene* as a forlorn last hope. With such cases to deal with, marked improvement takes place in nearly all cases, a very large percentage are restored to excellent health and the mortality under *Hygienic* care is very low. Coincidences are the most common things of existence, but coincidence is not the explanation in this case.

The Time Factor in Recovery

CHAPTER XXXVI

One of the most trying problems of the *Hygienist,* in dealing with the sick, and this is particularly true of chronic sufferers, is the demand for speedy results. Everybody wants to get well in a hurry. As Mary Gove so well put it: "The great trouble with Americans is they are in too great a hurry. They are in a hurry to eat and drink and to get rich. They get sick as fast as they can, and they want a short cut to health. Chronic diseases that have been inherited, or induced by wrong doing through half a lifetime, cannot be cured in a day by any process now known to the world."

It is not unusual for sufferers to demand recovery in a week to two weeks. And why not? Have they not been led to believe that if there is anything wrong, the removal of an organ or part, an operation that requires but a few minutes to an hour or more, and a few days in the hospital, will make them as good as new? Have they not been taught to be content with mere palliation of symptoms, a thing that may be achieved in many instances in a few minutes? Will not an antacid relieve stomach distress in a very short time or will not an aspirin relieve a headache in a few minutes?

Quick relief, even if only temporary, is what is so generally demanded. Indeed, they are so determined to get relief that they will die to get it. It is generally true that the means of providing speedy results produce an aftermath of troubles of their own that are often worse than the troubles they are given to relieve. Certainly they never, not in a single instance, nor in a single trouble, remove any of the causes that are producing and maintaining, even intensifying the trouble. They constitute symptomatic treatment and doubtful palliation and produce cumulative side effects.

Why do we expect to get well in a hurry of a condition that requires half a lifetime for its development? Perhaps one is 50 years of age and has had a chronic disease since the age of 35, the condition slowly becoming worse during this time despite (or because of) the faithful employment of the commonly administered means of palliation. Before the disease became apparent at the age of 35, there was a long antecedent series of developments that led up to it. It is literally true that the disease had its initial beginnings with the first cold, colic, diarrhea or hives of infancy. The man may have given the methods of cure a full 15 years of time in which to restore health; but if he turns to *Hygiene,* he wants to get well overnight. Not only is he in a hurry, but he wants to achieve his recovery with as little disturbance of his accustomed routine and as little change in his habits of living as possible. He may be willing to change his diet (temporarily, of course), but why should he give up smoking? He may be willing to fast, at least he may be willing to miss a few meals, but why should he rest? He has no insurmountable objection to a temporary abandonment of coffee, but why should he exercise? He actually enjoys sun bathing, but why should he not be permitted to overeat?

There is no instantaneous healing. Time enters as an essential element in working for the perfection of the condition of the invalid and healing must necessarily go through a consecutive series of developments. To believe in the sudden restoration of health is to believe in miracles. It would be to believe that the laws of life can be violated for years and the consequences quickly wiped out or that these laws can be violated with impunity. Disease, once induced, can be removed only by a return to obedience. The return to good health is no more sudden than was the evolution of disease. All changes in nature from bad to good are slow--according to the law of growth and perfection of the thing considered. An organism, like a pear tree--which grows slowly, matures slowly and lasts a long time--heals slowly. This is so because the measure of change is ordinarily the law of growth--the process of healing being nothing more nor less than the process of growth in special exercise.

What we desire for *Hygiene* is a fair trial for a sufficient length of time. *Hygiene* is the most economical system of care. It supports no druggists or drug manufacturers and requires few practitioners. Its materials

are ever abundant, often free, and the best diet is often cheaper than the worst. The universal practice of *Hygiene* would lead to universal health. For these reasons, *Hygiene* is destined to be the greatest blessing ever bestowed on a diseased and suffering race.

Certainly the man whose condition has required a lifetime for its evolution will require the employment of all the means of *Hygiene;* to reorganize and reconstitute his organism. So long as even one of the causes that have contributed to the evolution of his trouble is permitted to remain a part of his daily life--this cause may be one of omission as well as of commission--it will contribute to the progressive development of trouble. All causes of weakness, impurity and suffering must be removed from the life of the individual, else recovery will be retarded and full recovery prevented.

One of the worst things about chronic sufferers is that, almost invariably, they have been drugged so much with all sorts of poisons that their recuperative power is low and the organic damage is so extensive that recovery, where possible, is disappointingly slow.

It is essential that we recognize the fact that recovery of health is an evolution in reverse and that it requires time to be completed. What we term chronic disease is an evolution out of wrong ways of life; recovery of health is an evolution out of correct ways of living. As it takes time to evolve disease, so it requires time to erase the abnormal changes that have taken place in the tissues of the body and to evolve normal tissue to replace the abnormal tissue.

We can watch the evolution of pathology in the drinker, as he progresses from the so-called moderate drinker to the habitual and so-called excessive drinker, with the progressive weakening of the functions of the body and the slow evolution of liver sclerosis, delirium tremens and insanity. Is it to be thought that the effects of ten to 20 years of drinking can be erased in a few days or weeks and that full health, with its integrity of structure and vigor of function, can be restored so quickly? If this could be done, certainly the evils of alcoholism are not as great as we are accustomed to think.

The evolution of pathology out of any type of habitual or chronic poisoning, whether tobacco poisoning, drug poisoning, or a general and persistent toxic state of the body arising out of lowered functioning power (enervation) resulting from an enervating way of life, is not unlike the evolution of delirium tremens out of alcoholism. Likewise, the road back, when the pathology has arisen from some of these other causes, is a slow and gradual one. In all pathologies, as they continue to evolve, a stage is ultimately reached from which there is no turning back. This is the stage of *irreversibility.* When this stage is reached, there is no longer any hope of recovery of health.

If we understand the nature of the phenomena with which we are dealing and its causes, and if we realize that time is required for the causes that are operating to impair the organism (in which to evolve their effects), we can both understand the urgent need to remove the causes of the suffering of the sick and the need for time in which to evolve into a state of health. The average chronic sufferer cannot expect to evolve into full health in less than two years and many will require more time than this. A few will require less time. Knowing this, we can with patience and determination launch ourselves into a way of life out of which good health evolves and stick to it until we have achieved the desired results and then stick to it to the end that we may maintain our gains.

The Tragedy of Irreversibility

CHAPTER XXXVII

Chronic sufferers are frequently told that their disease is *incurable.* For those of us who do not believe that any so-called disease is *curable* or that there is any such thing as a *cure,* the whole concept of *curability* and *incurability* is wrong. Past experiences have shown that the so-called *incurable* frequently recover health when they abandon drug treatment and resort to other forms of care. To be assured by one or more *scientific* physicians that one is hopelessly *incurable,* to go through a medical clinic and to be informed that there is no *cure* for your disease, to have the verdict of a consultation of physicians handed to you in a word--*incurable,* to be treated for years with drugs and surgery and grow progressively worse and then to turn to some form of "quackery" and recover health is to upset one's faith in *science.*

Medical men, in pronouncing a condition *incurable,* have only their own experiences in mind. Neither the people nor the physicians have any sort of conception of the health-destroying effects of drugs. Every dose of every drug administered to a patient is not only disease producing in its own right, but it depresses the healing operations that are always going on in the sick organism. When the drugging is discontinued, when the body is relieved of this intolerable burden, it can do for itself much that it fails to do while being poisoned.

The strength of the body's self-healing efforts is graphically illustrated in those many instances in which they succeed in restoring health in spite of the use of drugs. Should we then be surprised that they are frequently successful in more advanced cases, when drugs are abandoned? *Incurability* is often nothing more than drug poisoning.

All diseases are the results of causes and when these causes persist, the disease persists. When the causes of disease have persisted for a sufficient length of time, the cells and tissues bearing the brunt of the toxic load, being in a state of chronic irritation, give down and degenerate, with the result that organic disease evolves. The line of demarcation between functional and organic disease is not well defined as the first fades insensibly into the other. Functional disease is of a remedial character; organic disease is of a destructive nature.

In chronic disease the first stage is purely functional, entailing only a modification (of a remedial nature) of the work ordinarily done by the part and in no way involving any loss of integrity of the affected tissues; the second stage of chronic disease is one in which the cells composing the affected organs are in a state of degeneration. The practical importance of this differentiation of the two stages resides in the fact that the first stage is remediable if cause is removed; the second stage is often not completely remediable because of irreversible changes in the cells involved. The tragedy of irreversibility lies in the fact that all irreversible pathologies are the culmination of a pathological process that went through a long period of remediability before reaching the irreversible stage. Failure to remove cause during this time permits the evolution of irreversibility.

Fortunately, in the great percentage of cases of chronic disease, no irreversible changes have taken place in the tissues. This means that nearly all chronic diseases may be fully recovered from. There is but one reason why chronic disease is not remedied in every recoverable case: namely, *because the cause of the disease is not removed.* It does not matter what is done in the way of treatment; recovery cannot occur until cause is removed. When cause is removed, no treatments are needed. Recovery is a spontaneous process.

The pessimism of the medical profession in regard to the so-called *incurable* diseases lies not only in the fact that they begin their treatment in a stage that is past redemption and ignore the insipient stages, but at the same time they ignore the real causes of the organic decay. The fatal ending of advanced pathology

should not be regarded as presaging the victory of pathology over life--of evil over good--when causes are removed at a much earlier stage of the process. The time to remedy so-called *incurable* diseases is before they have reached the *incurable* stage. We are daily implored to *cure* some advanced and hopeless condition, such as cancer, apoplexy, advanced tuberculosis, etc. But nature's laws are inexorable and unalterable and only ignoramuses and imposters pretend to effect restoration to health in spite of these laws. There is a point of no return, a point of irreversibility after which, no matter how ideal the condition supplied for recovery, the movement toward health is feeble and ineffective.

Fortunately, the point of irreversibility is commonly much beyond the point to which medical men apply the label "terminal case." Their classifications are based on the failure of their drugs and have no validity under other and.more rational plans of care. When irremediable structural changes have taken place, function can be restored only to the extent of the limits imposed by the structural damage. The individual so structurally impaired may be properly designated a "physiological cripple" and must be taught to live within his limitations, else will he bring greater trouble upon himself.

Practically every organ in the body is larger and possessed of greater functional capacity than the ordinary activities of life require. This makes it possible for an organ that has undergone irreversible changes, provided only that this has not occurred in too much of the organ to permit of efficient function, to meet the regular needs of the body, provided that the causes of its impairment are removed and its remaining functioning tissue is restored to health. It is due to this reserve power possessed by each organ of the body that the organism is capable of compensating considerable pathology, if impairing influences are removed. In case of injury, if not too much of the organ is destroyed, it will be able to meet the demands of life. An excellent example of this compensating power is the ability of one kidney to do the work of two kidneys if one is destroyed or removed.

In many cases the damage is great enough that the individual is forced to function on a lower physiological level. As a physiological cripple, he gets along well so long as he lives within his much lowered limitations. He is no longer able to behave as a whole man with full functioning capacity. In such cases, as Graham so graphically pictured, the weaker organ must form the standard by which activities are to be gauged, just as the weakest and not the strongest part of a bridge must be employed in determining the load it will sustain.

The great reason why so many die prematurely, even after they adopt, more or less, the *Hygienic* way of life, is that they are altogether too prodigal of their resources. They are likely to think that because they "live *Hygienically,"* there is no limit to their energies--they can walk unheard of distances, work long hours, do more work than anyone else, get along on insufficient sleep, and not suffer. Some of them work so hard at getting well that they keep themselves enervated.

Irreversibility is often due entirely to the fact that the original and sustaining causes of disease (to which drug poisoning is merely an addition) are not corrected or removed. No case of sickness should be classed as *irreversible* until after the full correction of all causes, it fails of recovery.

Another reason for failure of recovery is the failure to provide the sick organism with adequacies of the primordial requisites of organic existence. If drugging is discontinued and the physiological needs of life are neglected, many will fail of recovery who might speedily recover were these *Hygienic* requirements fully and adequately met. As the practitioners of the various schools of so-called healing both ignore causes and provide only inadequately and haphazardly for the physiological wants of the sick organism, while throwing monkey wrenches into the vital machinery, they can have no adequate conception of the marvelous efficiency of the body's self-healing abilities when operating under favorable or healthful conditions.

In the final analysis, then, it seems correct to say that irreversibility, which exists far less often than is popularly and professionally thought to be the case, is almost always due to maltreatment, ignorance and simple neglect of the most elemental needs of life. None of the schools of so-called healing can be exempt from the charge of contributing to the production of irreversibility, but it must be recognized that what Graham appropriately termed the "mere drugging cult" is by far the worst offender in this respect. Perhaps if correct care is inaugurated in the initial stages of disease, no such thing as irreversibility would evolve.

This brings us to a brief consideration of the question: what and when are the initial stages of disease? The *Hygienist* regards the first cold or diarrhea or skin eruption of infancy as representing an already established toxemia. This is the initial stage of pathological evolution that will culminate years later in apoplexy, arteriosclerosis, heart disease, Bright's disease, or cancer, etc. The time to begin to head off the evolution of advanced and irreversible pathologies is in infancy or even before birth. There is no time of life when it is safe to neglect the genuine needs of the body or to subject it to abuses.

There can be no doubt that there are irreversible pathologies--there are patients who are so badly impaired that they are past vital redemption. But there was a long stage in the life of these sick individuals before the irreversibility was reached, when they could have recovered health. We can say of these that failure to remove causes, failure to provide primordial requisites and the evils of drugging and enervating palliatives, have persisted so long that an irreversible stage has been reached. Correct means of care, even if now employed, come too late. Palliation of discomforts permits the evolution of irreversibility without the patient or his adviser realizing that it is developing.

There is no such thing as an insidious disease. All pathological evolution is accompanied by frequent warnings that all is not right within the body. Irreversibility does not slip upon us unawares. It evolves without our recognition only because of our ignorance or perversity. Either we do not understand the warnings or else we ignore them. Two questions must be answered concerning any alleged solution of the suffering of the sick. First, does it really remedy the state that is back of the distressing symptoms? Second, is the remedial work only temporary or is it permanent? The correct answer to these questions will determine the real, as opposed to the illusory value of the alleged remedial measure. If the apparent benefit is only superficial and temporary, the measure can provide no genuine benefit. In view of mankind's long experience with measures of this type and their invariably harmful effects, we may properly consider such measures as evils.

It is precisely here that there exists the most marked difference between the traditional drug systems and their imitators on the one hand, and *Hygienic* means on the other. Before we can consider the permanency of results flowing from these various measures, it becomes essential that we draw a sharp line of demarkation between those means provided by nature for the care of the body and the means that are in vogue for the *cure* of disease.

Many things are proclaimed as natural that have no normal relation to the living organism and serve none of its genuine needs. Many of these are effective as palliatives. But if such a system of cure is to be accepted as a *natural system,* it must be admitted that *natural cures* are not permanent; for it is assuredly true that the same individuals frequent these *cures* year after year, whereas, if the basic causes of their diseases were removed, this would not be found necessary. It should not be necessary to stress the fact that *cures* that have to be repeated over and over again are not satisfactory from the patient's standpoint. *Cures* that require that the patient spend the remainder of his life in the hospital or sanitarium are equally unsatisfactory. A *cure* that one has to carry around in his pocket and take at regular intervals cannot be accepted as real. If a man must nurse and indulge himself and abstain from the world's work, he cannot feel that he has been restored to health.

It is important for us to understand that removing causes does not heal the patient. It only ends the production of effects. It enables the body to restore soundness of structure and efficiency of function by its own intrinsic powers and processes. This is healing, not *curing.* This is natural healing; it is a biological process. It is not accomplished by the application of *cures,* but by processes of life. Another and common reason for failure of recovery is the inability or unwillingness of the patient to carry out instructions long enough and faithfully enough to effect recovery. "Just this one cup of tea! Just one last cigarette! Just this one more hot dog and tomorrow I will begin to live *Hygienically.* Today let me enjoy one last non-*Hygienic* fling." Words like these or actions such as these words describe are all too common and represent a common cause of failure. It is unfortunate that so many sufferers fail to recognize the harmfulness of their habits of life and are unwilling to radically and permanently correct these. Yet it is absolutely true that unless all enervating causes are corrected, full recovery is not possible.

The Prevention of Disease

CHAPTER XXXVIII

"Health by healthful living," was the slogan of the early *Hygienists.* This slogan stressed the fact that the preservation of health and the prevention of disease are identical processes and involve the proper use of the normal elements of living. One may build and maintain such a high state of health that no disease will evolve. Precisely in proportion to the individual's neglect or disregard of the laws of his being will be his liability to evolve disease, and the deeper will be its evolution. So long as, with a healthy organization, he carefully observes the laws of his being, he is proof against the evolution of pathology.

Illness does not develop without cause; there are laws which regulate human life as well as any other system or constitution, and the man who violates any of the laws of his being, whether unwittingly or knowingly and deliberately, ought to know, when he suffers mental and physical distress, that this is a consequence of the transgressions; he is not suffering from any sudden Providential or diabolical visitation, nor from any malignant infection.

In an editorial in the *Journal,* February 1851, Trall said: "We have often asserted, as we think, proved, that cholera can have no existence among those whose physiological habits are correct. We believe further, that it is in the power of all persons, at all times, and in all places, so to control their voluntary habits, as to avoid this or any other similar pestilence." He admitted that we are "subjected to many unavoidable disease-producing influences," yet these alone, he said, will not produce cholera. Before cholera can evolve, he said, whatever may be the "predisposing or exciting causes, there must be a morbid condition of the body," resulting from impairing habits of living.

The prevention of disease and restoration of health by the intelligent use of such means, as are abundantly supplied to man to maintain him in a normal condition when so, is the only logical plan of preventing disease. Given a perfect knowledge of the laws of life and an environment in which they could be perfectly obeyed, disease would become impossible. In the *Science of Health,* November 1873, Trall says that "during the cholera epidemic in New York in 1832, of the thousands of persons who adopted the hygienic habits above suggested, called in those days 'Grahamism,' not one died of cholera, although a few had the disease in a mild form." He expressed the *Hygienic* view of epidemics when he said that the key that unlocks their mystery lies in the fact that their bodies are internally foul and depleted as a consequence of their un*Hygienic* and intemperate lives. He said that whatever "exciting causes" may and do exist external to the body, within is the "nucleus on which it fastens, the food element on which it feeds." An allopathic physician, a Dr. Wilson of Airmount, Ala., voiced the prevailing medical view in a discussion with Trall. He asserted that, "almost all men of science and experience sustain me in the position that the most rigid and perfect system of hygiene, not even excepting that taught by Hygienists, will not afford immunity to malarial diseases." With very little modification, this view still prevails with the profession.

The medical plan of preventing disease, like its plan of curing disease, consists almost wholly in the employment of poisons. At the time of the revival of *Hygiene,* the medical profession had but two preventives. These were quinine for malaria and vaccination for smallpox. Aside from quarantining so-called contagious diseases, about the only other "preventive" measure they employed was fumigation of the premises where a *contagious* case had been housed. Fumigation, which was a prehistoric procedure and is mentioned in Homer, was originally intended to drive out evil spirits. At the time of the revival of *Hygiene,* the profession hardly knew what it expected to accomplish with fumigation. By quarantine it sought to isolate *contagious* cases and thus prevent the spread of disease. Having no concept of law and order and no rational views of cause, the profession could not conceive of so simple a plan of prevention as that of living in harmony with the laws of being. Poisoning the sick with drugs and vaccines, that is, making them sick, to prevent disease is an upside down view of life, a delusion which the profession

continues to hug to this day. "Preventive drugs" or drugs of any kind, like "preventive wars," are a real danger and a blunder.

Assuming the validity of their immunizing programs, they take into consideration only a few of the symptom complexes with which man suffers and leave the great mass of human suffering outside of the reach of their preventive measures. The insufficiency of medicine's program of prevention is admitted by medical men themselves when they say that disease is inevitable, that health is a mirage. In the words of Dr. James C. Jackson, the present author says: "I am disgusted with sickness. I am tired at the sight of it. I do not believe in its necessity, nor in its propriety. I detest the philosophy that argues that to be ill is to be natural, and I will not accept any generalizations as sound that lead to such conclusions. The world is all wrong on this matter, and I rejoice in any movement from any quarter that legitimately seeks to set the world right."

The following two axioms, growing out of *Hygienic* principles, will sum up the *Hygienic* position concerning the prevention of disease:

Axiom No. 1: *Whatever tends to establish and fortify the general health of the individual is a natural means of enabling the system to avoid the evolution of disease.*

Axiom No. 2: *Whatever tends in any way to depress or deteriorate the general health must necessarily render the body more liable to the evolution of disease.*

These are self-evident principles and cannot be too strongly emphasized, not only with reference to so-called infectious diseases, but with reference to all diseases. It is doubtful that a perfectly healthy man could be made sick by a so-called infection. Our object, therefore, should be to teach the people how to avoid sickness, how to grow stronger and wiser in their generation, how to live to good old age in the fullness of health and joy.

Physicians know not how men should live. Every hamlet, every town, every city attests to this fact. Where physicians are, there is no health. Practically everybody is sick and they receive no proper leadership from their physicians, who are, together with the members of their families, also sick. The schools which are attended by student physicians have them, class by class, attend to

> "The study of man
> In his abnormalities and sickness,
> And to frame shrewd theories of a cure."

So long as *medical science* is hinged on pathology instead of physiology, it will continue to sow seeds of error and disease; still more, it will neglect to sustain the health of the community, whose peril is in proportion to its ignorance. No medical penance or sacrifice can atone for physiological transgression.

So far as the profession's present-day valid contribution to disease prevention is concerned, it consists in supervising the sanitary institutions of our cities and states. This is not enough. As important as is public hygiene (sanitation), private hygiene is even more important. The principles of *Hygiene* must be applied to individual habits and to the removal of causes of disease from the individual life. It is not sufficient to clean our streets, empty our garbage cans and drain stagnant ponds; our habits of eating, drinking, sleeping, exercising, smoking, passional indulgences, etc., must also be carefully analyzed and correct rules emphasized. *Hygiene* can offer the sick no special advantage that can equal that which will accrue to man in maintaining health, thus preventing the evolution of disease. The performance of doubtful, yet "beautiful" *cures* by the *cure*-mongering professions, which necessitates the multiplication of practitioners, rather than promoting the public interest, is a way of life that no intelligent and informed people should long tolerate.

Preventive measures are certainly of far more value than remedial ones, and here the *specifics* of the medical profession are valueless. At intervals some medical propagandist breaks into print with some comical remarks about the need to prevent disease, but he always has in mind the need to sell more vaccines and serums. His proposed war on disease is as much of a sham battle as President Johnson's "war

on poverty." Three years ago at the World Health Assembly held in Geneva, a new kind of physician and his education was discussed. The report of this meeting said of this new physician that, "his aim will be to prevent illness. He will be a social scientist, knowing his patients' social background and their families, and ready to change people's settings and way of life to save them from disease."

A kind of medical aristocrat is here proposed who will change people's way of life and their settings. He will govern out of the depth of his great wisdom, acquired from what source? What do physicians know about the relations of ways of life to illness? To give them this knowledge would be to revolutionize the profession and destroy the drug industry and it will not be done. That a change in the ways of life is essential to both the preservation and restoration of health has long been proclaimed by *Hygienists* and the medical profession has denounced this as faddism and quackery. Are they likely to make an about-face at this time and become quacks and faddists? Not if we know the industry and its economic moorings.

Any serious proposal of a program that is genuinely designed to prevent disease will be sure to meet with stubborn opposition from those who have a vested interest in disease. Prevention, if genuine, would put the disease treaters out of business. Without the sick man the entire medical industry would collapse; consequently, it becomes necessary that there shall always be a sick man.

The medical profession has never placed the issue on health, but has blithely assumed that the sick, like the poor, we shall always have with us. It is now held that health is a mirage, an illusion that only cranks and radicals or extremists think is a genuine possibility. This assumption is essential to the very continuance of the medical industry. If it becomes generally known that health is a universal possibility, there is always the danger that the suffering millions who are now subjects of the merciless exploitation of the medical industry may demand that a genuine health program be provided them.

To be at ease, to have their powers at command, to have mind and body on good terms, to be free of pain, to have their instincts perfect, their senses sources of real pleasure, to be free from fever and fits of passion--these are states that to the people seem Utopian and are by the profession untaught. But to all of these and much more is man entitled. He is rich by *divine* descent. In substantial health, what a rich domain lies spread before him! Heaven with its overhanging canopy of of blue; earth arrayed in clothing of green and bedecked with vari-colored flowers; sunrise and sunset, sunshine and shadow, star and cloud, dawn and eventide--these constitute a beautiful home for man and beckon him to the enjoyment of healthy life. But, lured by the revolving, parti-colored false lights, modern man finds himself in an inextricable maze, to escape from which will require a radical about-face in his ways of life.

Though rotten with falseness, the old systems are supported by the conventionalities and proprieties of society, the conservatism which age begets and the power which is conveyed by long-continued custom. They are fixtures and are presumed to be permanent. They have rooted themselves deeply into the ideas, notions and customs of men. They are welded with the hopes and the fears of their votaries; they are fully protected and fortified, for fallacy always braces itself. Error must outwardly brace itself or fall, for its support is entirely external. It is destitute of internal force and every position which it assumes violates the law of gravity.

Germs are said to be the cause of disease, but the exception is the rule in this case. Instead of everybody being infected by all germs at all times, only a few are infected at any given time, and then not by all germs. One may have pneumonia, but it is rare that he also has typhoid or smallpox with the pneumonia. It would seem that if one's resistance is sufficiently low that he can be infected with pneumonia germs, it will be sufficiently low for him to be infected at the same time by any germs.

Germs are as ubiquitous as the orthodox God. They are inescapable and barricades against omnipresence are ridiculous. To suppose that disease is due to something against which man lacks the power to protect himself is to implicate the forces of creation or evolution and assume that man has not been as well provided for as the lower animals. It is to assume that man's constitution is not as well adapted to his natural environment and not as adequately surrounded by the requisites of healthy life as is, for example, the turtle. There is a whole group of "science writers" who account for the decline and disappearance of ancient civilizations by having them destroyed by mosquitoes, flies, fleas, etc. These men are so *scientific* that they have swallowed--hook, line and sinker--the whole confusing muddle that

constitutes the etiological hypothesis of the so-called medical profession. They never question; they never doubt; they simply parrot the follies of the poison pushers. Nature is kind but precise, gentle but exacting, loving but severely just, and whoever chooses to place his reliance in art rather than in her makes a mistake, often a fatal one. So long as there is life, an effort for its preservation is the proper use of it. Its abuse can only snuff it out quicker. Were human beings half as careful as they are careless of health, they would know but little illness; were they half as reverent of the laws of being as they are audacious in their violation, health would now be the rule and disease the exception. If one course of life is rewarded with health and an opposite course is penalized with disease, shall we not choose the healthful course? Nature does not look with serene and placid eye upon ignorance and recklessness.

Some organisms are so weak from birth that they are not physically strong enough to resist the effects of the commonest kind of daily violations of the laws of life. The answer to the problem that some organisms are capable of resisting violations for a lengthy period is found in the possession by the living organism of compensatory provisions which, in all cases of health, are capable of neutralizing effects that would otherwise be permanent.

Parents can transmit to their offspring only such organizations as they carry potentially in their germinal elements, but they have control over the environmental elements of the evolution of their offspring. The child may be better or worse than the parents, depending on the control of nutritional and kindred factors. It may be an improvement on or a degeneration from the parental stock, according to favorable or unfavorable evolutionary conditions; but it must have the same relations to the organizations from which it is derived that the giant oak has to the acorn, the unfolding of which gave rise to it. The seed or egg and other circumstances being equal, inferior or superior to the parental seed, egg or circumstance, so will the plant, animal or person equal, be inferior or superior to its parental stock.

The greatest perfections are the most spontaneous outgrowths of nature. With the forces of life doing the best possible for the unfolding new organism, its parents are often unwittingly tugging in the opposite direction. The forces of evolution are frustrated, but the parents are convinced that nature is at fault and that somehow the poisons of the physician or the *kind* knife of the surgeon can and will correct her mistake. Instead of relying upon the doubtful arts of physician and surgeon, we should rather ask ourselves: where is the defect in carrying out the *Hygiene* of nature? The defect is ours, not that of nature.

It was the view of the early *Hygienists* that health reform was to anticipate: to remedy is to do away with present pathological conditions in the system, to preserve health is to prevent the development of pathology. There are diseases, such as cancer, cerebral hemorrhage, etc., the mortality from which can be reduced only by prevention and not by any remedial processes. Prevention in these cases requires the preservation of high level health and this calls for continuous self-control in the ways of life. The need for self-control makes retrogression possible. Where this possibility is realized, it is proof that the control we exercise over ourselves and our circumstances is unworthily exercised.

Most people expect too much from their partial ways of life. They should not expect to escape the development of all disease, even if they comply with all the sound rules of dietetics. They should only expect less disease, for health does not rest upon right food only. To escape disease entirely, the organization must be perfect, the environment must be equally so, and the total way of life must conform with the laws of life in every particular. Polluted water, contaminated air, poisoned and processed food, and many other elements of present-day life render the escape of all illness impossible. Few, if any, are perfectly organized; nobody conforms to the laws of life in all their particulars. Complying with one or two conditions of health will not assure health.

We must show the people how to keep well. It is one thing to tell them how to do a thing--it is quite another to show them how to do it. Ours is a practical age and the best of all instruction is that of example. To see a thing done is to learn how to do it; to do it is to make the knowledge more fixed. Merely to be told of it is not enough. We need to illustrate our *Hygienic* principles to the people, to show that we have and maintain better health than they because we live better; that while they are feeble, we are strong; while they are sick, we are well; while they take poisons, we employ the normal things of life and let poisons alone; while they live ignorant of the general and special conditions on which health depends, we are growing, every day, more and more wise in such matters. Such testimony will tell. It is of no use to

preach *Hygiene* to the people unless its benefits are obvious in our own lives.

The Prevention of Epidemics

CHAPTER XXXIX

An epidemic is mass sickness. In all epidemics, the so-called epidemic disease is but one among several symptom complexes presented by the sick. For example, in the 1918-19 influenza-pneumonia pandemic, there were great numbers of cases of mumps, of measles, of typhoid fever, of sleeping sickness and more cases of colds than influenza. Epidemics are due to mass prostrating influences, commonly of an environmental character. The first cold spell of winter may precipitate an epidemic of colds. The overeating of winter may also precipitate an epidemic of colds. The overeating of Thanksgiving and Christmas is invariably followed by a great increase in illness in all elements of the population. Mass want (as in famines), mass fear and insecurity (as in war), mass overwork (as in national emergencies), may result in increased illness. Prolonged heat, prolonged cold, prolonged dry weather, prolonged rainy weather and similar meteorological stresses are sufficient to further prostrate the already greatly enervated and toxemic and result in mass illness. Whether we have an epidemic of influenza, of poliomyelitis, of smallpox, or of measles, seems to depend more upon psychology than any other factor. The profession singles out one single so-called disease from among all of those present and declares it to be epidemic. The other diseases miss the headlines, even though they may be more prevalent.

In all epidemics, the enervated and toxemic are the first to develop the epidemic disease. When these have all developed the disease and either died or recovered, the epidemic ends and the profession knows no more about why it ended than why it originated.

Nothing in man's environment causes disease except as it reduces nerve energy, thus producing enervation, checking elimination and building toxemia. The retained end products of carbohydrate and protein decomposition in the intestines are also prolific sources of poisoning. When the blood becomes super-saturated with cell waste, a safety valve must be opened to relieve it of pent-up toxin. This safety valve is called disease.

When the medical profession is confronted with the term toxemia, it has visions or nightmares of germ infection, or its corollaries--focal infections of the teeth, tonsils, sinuses, gall bladder, appendix, ovaries or pent-up pus somewhere in the body.

The modern substitute for the evil spirit theory of disease is the evil germ theory. Instead of having the body invaded by demons, today it is invaded by germs. When Pasteur gave the profession the germ theory, it was still wearing the three-cornered panties that Hippocrates had placed on it almost 2,500 years previous. The profession accepted Pasteur's theory with avidity and today explains, not only epidemics, but many non-epidemic diseases by recourse to this theory. Historically, bacteriology sprang from the limbo of obsession and exorcism and to this limbo it should again be relegated. Indeed, were it not for the fact that vast and exceedingly powerful industries are founded upon the hypothesis that germs are the causes of disease, the whole science of bacteriology, as this relates to disease, would be discarded tomorrow. The owners of these industries will not stand idly by and watch, without moving heaven and earth to prevent the destruction of their highly lucrative source of income.

If we assume, with the medical men, that germs cause disease, and observe a dog licking his wound with a dirty tongue, we naturally wonder how the wound ever heals. This licking process often follows closely upon the heels of a meal of decaying flesh. The tongue must be teeming with bacteria, yet no infection occurs. This may be interpreted in one of five ways:

1. It may be assumed that bacteria are not the cause of infection.
2. It may be assumed that the dog is naturally *immune.*
3. It may be assumed that, so long as the wound does not become pent-up (this is to say, so long as

drainage is perfect), no infection can occur.

4. It may be assumed that the bacteria that cause the decay, of the flesh do not cause infection in living tissues.
5. It may be assumed that a combination of all three of the first assumptions may be involved in the phenomena observed. Which of these interpretations shall we, as *Hygienists,* accept, even if only tentatively?

If, in the long run, it should be established that germs and viruses (the virus is at present described as a sub-microscopic germ--the original meaning of the word virus in Sanskrit, Greek, Latin, French and English is poison) play a secondary role as causal factor elements in disease, it is not possible to escape the fact that they are as powerless as a feather in a whirlwind in a healthy body. The primary cause of disease remains, as *Hygienists* have insisted from the beginning, violations of the laws of life.

Medical men talk of "tracking diseases to their source," as though they have a local habitat in which they breed and from which they sally forth to invade the surrounding territory. They refuse to recognize that the basic causes of disease he within the organism of the sick person himself. Likewise, they refuse to recognize that the chief cause of the mortality in endemic and epidemic diseases is medical treatment. In all epidemics, as the *curing* becomes more heroic, the death rate increases. As Trall said: "There never was an epidemic since the world was made, in which allopathic drugging did not make a bad matter worse. The usual *remedies* resorted to are bleeding, blistering, calomel, antimony and quinine. A worse medley of manslaughterous missiles can hardly be contrived." The simple history of all the severe endemic and epidemic diseases which the world has ever known has been that the more drugs were used the higher was the death rate.

Prof. Eli Metchnikoff once wrote: "Parasites strike with great intensity, bringing about the destruction of numerous animals and plants. Nevertheless, in spite of the disappearance of a large number of species, the world continues to be well populated. This fact proves that, by the special means at the disposal of the organism, without any aid of the medical art or human intervention, many living specimens have held their own throughout the ages." It is important that we understand that these plant and animal organisms have survived in the absence of any assistance from man or the medical profession; that they have survived by reason of means at their own disposal. We should understand that the means of survival are integers of life; that they are intrinsic to the living organism and that they depend, not upon some exotic and adventitious means that are to be found only after long periods of research, but upon the common and easily accessible means of life.

In *Rubies in the Sand* the author has shown that the normal way of life was from the beginning and that man's survival depends upon the adequacy with which the basic needs of life are supplied to his organism. *Hygiene* is the normal way of life and each animal has its own normal mode of existence which preserves it in existence so long as it adheres to this. *Hygiene* is not something that belongs to man alone, nor is it something that man has discovered. It is coeval and coexistent with life. It belongs to life as specific gravity belongs to the elements.

If we grant to Metchnikoff the truth of his premise, that extinct species have been killed off by parasites, we are faced with the need to determine why some species succumb to the attacks of parasites while others proved highly resistant to them. Few animals are free of parasites; yet, in some instances they are relatively harmless. We suggest that the real cause of the disappearance of species is the cause that renders them susceptible to parasitic attack, or in other words, the cause that reduces their fitness to live. Fat organisms, giant organisms, acromegalic forms, parasitic organisms, predatory organisms, beasts of prey--insectivores, carnivores, cannibals, etc., etc.,--plant assassins and the like have passed from the scene in great numbers, while normally constituted organisms and those that continue to live non-predaciously have survived. Even many predacious animals have retained a great measure of their original ability to protect themselves.

In thinking of the survival for great stretches of time of great numbers of species of plants and animals, let us not overlook the survival, through vast periods, of the human species. Compared to the great length of time that man has been on the earth, the "medical art" is but a fledgling. Man, like the animals, survived for a long period of time when there was no "medical art," by reason of the fact that he is also possessed of

great powers of resistance and self-repair.

It is assumed by the medical profession that in epidemics the so-called epidemic disease spreads by *infection* or *contagion.* By one means or another the disease is transmitted from patient to patient. This assumption, while apparently borne out by experience, fails to account for the origin of the disease. How does the disease spread from patient to patient until it has come into existence? This question may seem like the old one of which came first--the hen or the egg; but it is a question the correct answer to which would be of great practical importance.

For the sake of having somebody to begin with, let us start with the Biblical Adam and Eve and work down from there. Did the first man have smallpox; did he have bubonic plague; did he have cholera; did he have gonorrhea; did he have syphilis; did he have measles or chicken pox? If not, how many generations of men lived and died before the birth of the first individual who developed one of these supposed *infectious* or *contagious* diseases? Where did he "catch it?" With what prior case did he come in contact? Where did the first man to have smallpox come in contact with the disease, that he acquired the *infection?* With what first case of yellow fever did the mosquito come in contact, that he could convey the disease to another man? How did the first case of gonorrhea develop?

When we ask these questions, it becomes self-evident that the first case of every so-called *infectious* or *contagious* disease had to arise without contact with a prior case. If we think on this fact a little, it becomes equally evident that if one case can so arise, millions of cases can arise in the same manner in which the first case arose. Then we are faced with the question: in every epidemic, how many cases arise as did the first case and how many cases arise from contact with another case?

Discussing poliomyelitis, Cecil's *Textbook of Medicine,* fifth edition, p. 77, says: "The paradox of the isolated case remote from civilization, on the one hand, and on the other the epidemic force which offers a picture of mass group infection is well known but unexplained." Isolated cases of all so-called *infectious* diseases are well known; the phenomenon is not confined to poliomyelitis. If we but stop and think a minute, we will understand that the first case of every so-called epidemic disease that ever developed was, even though the patient was among friends, an isolated case. It could not, in the very nature of things, have been the result of "infection" by a prior case. Is it not possible that every case of every so-called *infectious* or *contagious* disease develops in precisely the same way that the first case develops?

If we have cases that develop *de novo* and cases which arise from transmission, how do we differentiate between these two classes of disease? If it can be shown that one case developed after contact with another case, is this enough to demonstrate that the second case arose out of the contact and did not arise *de novo?* If disease can arise in both ways, it is quite evident that to avoid epidemics we must avoid the *de novo* evolution of the first case and it is precisely here that *Hygiene* is of greatest value.

What is the reason, if contact with a case of *infectious* or *contagious* disease accounts for its spread, that all who contact the case or cases do not develop the disease. It is not enough to reply that these *fortunate* individuals are *immune* unless it can be explained what is meant by *immunity* and the reasons for the *immunity* are given. *Immunity* is a mere word and as it is at present used, covers a world of ignorance. We want a rational explanation. If germs are ubiquitous and are capable of *infecting* man, why are not all *infected?* Why is contact with a case of disease ever essential to *infection?* If the germs are everywhere, why can they not produce infection without the intermediary of a prior case? If the prior case is essential, how did the first case arise?

What is the essential difference between what is called *immunity* and health. Does *immunity* rest upon the same factors of existence that health rests upon? If we build and maintain a high state of health, are we *immune?* Or is *immunity* a pathological state, arising out of *infection,* as is now the general view of the medical profession and its rulers in the bacteriological field. Do we become *immune* by first becoming sick? Is sickness the route to *immunity?*

It is the condition of the individual and not the so-called *contagion* that determines the character of a disease. If the *contagion* determines the character of the disease, each person in the community, certainly each one in a family, would have it with equal certainty. As a matter of fact, the same disease may be

malignant in one case and benignant in another, the difference being determined, not by the *contagion,* but by the patient's vital states. In the same family the so-called *contagious* disease may differ in the different individuals, whether the disease is smallpox, diptheria, scarlatina or measles.

The following classifications of some of the more common so-called *contagious* or *infectious* diseases have been made by medical classifiers.

Small Pox: discrete, confluent, or malignant

Diptheria: benignant; malignant

Scarlatina: simplex, anginose, or malignant

Measles: benignant or common; malignant or black

The condition of one's blood or of the system generally explains also most of the dangers arising from bites of venomous snakes, insects or animals. Pure blood and abundant vitality are the correct protective agencies of the life of any man.

Developing and dying of so-called infectious or contagious disease is not accidental; it is not an irregular phenomenon. This is to say, such developments are not out of the regular order of nature. A self-controlled individual possesses sufficient capacity to adjust himself to the extremes of human habitat and enjoy the pleasures of life within his limitations. Those who habitually overstep their limitations break down the powers of life and build disease. Everyone who suffers with disease and dies prematurely has himself to blame.

Let us consider malaria, a disease that has long been known and for which a sure *preventive* and a sure *cure* has long been in the possession of the medical profession. It is asserted by the medical profession that quinine both prevents and *cures* malaria. Quinine, a protoplasmic poison, was introduced to the profession by Catholic priests who invented a romantic story about its use by South American Indians and about its saving the life of a Spanish princess. The profession long opposed what they called Jesuit bark before finally accepting it. Untold thousands of nervous systems have been wrecked by quinine; deafness and blindness have been caused by it and no case of malaria was ever *cured* by it--yet this protoplasmic poison is still in good repute with the profession. It has devised substitutes for quinine, but these have not proved to be any more successful in preventing and *curing* malaria than the quinine itself.

Physicians who believe that quinine prevents and *cures* malaria should have had their faith shattered by the Civil War experience with this poison. Although Federal soldiers were liberally dosed with quinine to prevent malaria, many thousands of them developed the disease. The quinine dosage was increased as a means of *cure,* but it failed. Any remaining vestige of the old faith in the saving potency of quinine certainly should have been shattered by its failure both to prevent and *cure* the disease in our soldiers in the South Pacific in World War II. Our soldiers on the Bataan Peninsula suffered more fatalities from malaria and from the treatment for malaria than from the bullets, bombs and bayonets of the Japanese.

The people who develop malaria in the so-called malarial regions (it should be understood that thousands of people live their entire lives in these regions and never have malaria) are those who habitually carry a cesspool under their diaphrams. Normal people or nearly normal people, who are self-controlled and not sensualists, do not have malaria, even when working in marshy lands. Alcoholism and food excess kill many in every climate and under all circumstances of life. It is obvious that something has been left out of the theory of cause and this something is not explained by calling it *natural immunity.*

In all cases of malaria there is gastro-intestinal indigestion and as soon as this is corrected, by correcting its causes, the malarial subject gets well and remains well so long as he does not re-establish his digestive impairment. When malaria patients can be induced to give up their wrong habits of living and their habit of taking drugs, they are through with malaria forever. If the malaria patient returns to his enervating habits and again checks excretion of metabolic waste, he will again become toxemic, his digestion will again be impaired and he will again develop malaria.

In his *New Biology,* M. L. Johnson, Ph.D., says: "Where social conditions have been improved, malaria has gradually receded before any special measures have been taken to conquer it, as in England and in many parts of the United States." What this means is that improved social conditions have been followed by a gradual decline in the incidence of malaria, as of other so-called epidemic diseases, before medical measures were taken to prevent it. What better evidence is needed that advancing civilization, and not *medical advances,* is the real factor in the elimination of disease? Better housing, better plumbing, better clothing, shorter working hours, cleaner cities, better food, etc., and not vaccines and serums and oiling frog ponds, have resulted in the passing of certain diseases.

It is often asserted that certain *infectious diseases* have changed character and have lost virulence over a long period. This is attributed to changes in the virulence of the causative microbes, and the changes in the modes of living and changes in the environment are completely ignored. Any decline in virulence of a disease must be due to either or both of two major causes: namely, to a change for the better in the mode of living or to a less lethal form of treatment. If the incidence of a disease decreases, this is due to changed environment and mode of living and not to an *acquired immunity.* Lowered incidence is commonly accompanied by decreased virulence, as a consequence of these same factors. If the old heroic medical treatment was abandoned and diseases lost their virulence as a consequence, this was not the result of any change in the disease, but to a less lethal form of treatment.

While a close connection is traceable between epidemics and the economic status of a people, *medicine* never seeks the eradication of a social system that breeds and perpetuates poverty. Rather, it seeks to drug away and cut away the effects of insanitary surroundings, overcrowding, malnutrition, etc., or it seeks to *immunize* with vaccines the victims of social inequalities and injustices against the consequences of their economic plight.

The classic *preventive* vaccine is the smallpox vaccine. Although by no means the first such substance to be used, Jenner's vaccine was the first to be universally employed. Jenner appropriated the work of another man and claimed it as an original discovery. Without adequate testing, he proclaimed that the cowpox vaccine would *immunize* one against smallpox for life. He presented his material to the British Royal Society, which rejected it on the grounds of lack of proof. Neither Jenner nor any of his successors ever re-presented the claims for this vaccine, together with proofs, to the Royal Society; hence, it has never been approved by the Society.

England was the first country in the world to adopt compulsory vaccination. After about 40 years of compulsory vaccination, Britain suffered the worst smallpox epidemic in its entire history, with the highest death rate in history. This is but one among thousands of instances of the failure of smallpox vaccination to prevent smallpox, but it should have been enough to convince the most case-hardened advocate of vaccination of the futility of the practice. In addition to being a failure as a preventive, the vaccine produces a whole train of evil side effects and iatrogenic diseases. It is kept alive only because of the enormous profits that are derived from the practice.

The New Human Redemption

CHAPTER XL

Since the morning stars first sang together no single event has occurred in this earth of ours more significant in its nature and more instructive in its consequences than the rebirth of *Hygiene. Hygiene* holds out to every human being the most perfect health, the best physical and mental development, the most entire liberty and the most perfect happiness of which man is capable. In that glorious future which is even now, with the aid of our advancing knowledge, opening before us, when man shall live in a day-long, life-long observance of the laws of his being, there shall be no diseased life, no painful death. Such unceasing obedience of the laws of life can result only in health and length of life. Happiness and peace shall reign where now is misery and strife. Beyond that, what is there to be wished for?

We assume radical ground for *Hygiene* and insist, as we have done for years, that if the *Hygienic* revolution is permitted to complete itself, it will sweep over the world with its saving message and means. Before it, in its majestic march, the prejudices and false theories of centuries, the passions of the interested, the opposition of physicians and the cynicism of skeptics will fall. The gross habits of the masses, the wretched modes of life of the more particular and select, the thoughtless, careless conduct of the guardians of youth, the prevailing ignorance of the laws of life and the yet worse indifference on the part of those who have been set apart to proclaim to man the "way to heaven," will all be destroyed and a new, fresh, unsophisticated life will evolve. Out of this turbid, dark, half-chaotic mass will evolve good health, physical beauty and intellectual and moral excellence.

What poor creatures are men and women! How little do they do that lasts! They are born, they suffer, they die and are forgotten. They give birth to offspring that suffer and die as they do. How departure from the laws of being has tamed man and shorn him of his pristine glory! How it has destroyed the image of his Maker from his face and left in its place horrible disfigurement! How it has dimmed his eyes and quenched the bright flash these should wear! How it has bowed the back of once majestic man till his carriage resembles that of felon or slave! How it has robbed his heart of noble impulse and planted there instead low desire and passion! How it has transformed man!

With exceptions so rare as to be remarkable, man has presented himself in every phase a creature of low, grovelling appetites and passions, a bond-slave to desires that are abnormal and overpowering. His higher faculties have been subordinated to his propensities, his habits are masters of his principles; his convictions constantly yield to his desires. His aims are low, his gratifications lower; his successes, about which he boasts and swaggers, are sheer fictions; his achievements are practical defeats.

From all this degradation and defilement, from this low tone of existence, this groveling in indulgence, this hibernation in darkness, this sub-bestial life, is there no deliverance? Are no means of redemption at hand? There is the primrose path of self-destruction; is there no straight and narrow way to health and happy old age? Let the truthful answer be to all these questions: yes, there is a way to superior health. To those of us who love our bad habits and who refuse to look at them in the bright light of noonday to see what they really are and who refuse to give them up, either for health or for life, but will die first, there is no redemption. For the rest of us, if we start new and saving habits and keep them growing until they have smothered the bad ones, we will have laid the foundation for future health. When all of mankind has been freed from the thralldom of disease-producing habits

> And from fashion's iron sway
> Shall the race, in pristine vigor,
> Go rejoicing on their way.

Those grand engines of oppression--"the iron trammels of despotic government, the brazen chains of

intellectual tyranny, the mountain pressure of ancient customs"--pervert the noblest impulses of the human heart, paralyze the highest aspirations of the human intellect and crush and dwarf humanity itself. Remove these and the repressed image of God (man) rises up and asserts his dignity, develops his highest nature and achieves his destiny. Give man freedom (he cannot be independent) and he will work out his own salvation.

A revolution involving a modification of nearly all of our habits--voluntary habits, social usages and many of our established institutions and large-scale industries--is not begun and completed in a single generation. But, after centuries of ignorance, disease and crime, mankind is again on the road to health. What a blessing is health and what is life without it, but a miserable dragging out of existence without pleasure or enjoyment! It is quite true that but relatively few of those now living have tasted the virtue of the *Hygienic System* and know its value. But the number is increasing.

How little can a human being know of his own nature, his powers, his relations, his destiny, while all his energies are crushed by dissipating government, his aspirations worked to suit particular creeds and his actions interpreted by the false standards which ignorance and tyranny have established and consecrated!

We view the progress of *Hygiene,* with the science and philosophy upon which it is based, as being at the very foundation of all progress. The first object of a sick man is health and he can do nothing effectual in the way of bettering his condition, in other respects, until he has gotten rid of his diseases. So with the sick world--its first want is health; with that will go vigor, clear-sightedness and a capacity for all other progress. Give the world health and you give it capacity for every kind of physical and moral improvement.

Men pray for a home of beauty, one in which there will be no violence and suffering, yet they turn the earth into a shambles and destroy the beauty that surrounds them. They long for freedom and bow to the power of state and church--to the forces of repression, suppression and compression. Men can be more than they are. They can recapture the joyous exuberance of life that our primitive ancestors knew. When that happy day arrives the sick will hold a jubilee and earth will look more joyous than ever. Then where weakness now is, there shall be strength; where there is now weariness, shall be repose; where haggardness now is, shall be beauty; where sickness now is, shall be health. Such an existence as we have pictured will be a satisfying foretaste of that future Utopia or Eden for which humanity has longed since the dawn of history.

Our highest ideals, whether of manhood and womanhood or of institutions and life, are merely foreshadowings of possible realities. The wildest speculations of one age become the common-place facts of the next. We may seek every day for the perfect man and woman; but we are not, therefore, justified in declaring that they are never to be found. Perfection comes within the range of human capability. It is a possibility for the race if not for the individual. "There is no telling what tall oak may grow from this little acorn, especially if it is warmed with golden sunshine and watered with silver showers."

The more we compare the condition of the people of the present with that of the people of the past, the more we dwell on a reasonable hope of better conditions in the future, the more dissatisfied we become with the condition in which we find ourselves. When the reason for all our past and present miseries shall have been fully revealed to us, we shall be in a position to enjoy still more the health and happiness that is in store for us. Should this world of ours come to an end in its present state, it would have to be pronounced a failure the same as a plant is a failure if it withers before coming to maturity.

Writing editorially, May 1856, Trall said: "Just so soon as the masses of people learn the great lessons that it is easier to keep health than to regain it; cheaper to prevent crime than to punish it; better to acquire knowledge than to suffer from ignorance and happier to be in peace and comity with our neighbors than in envious competition, just so soon will we have panagyriums in the place of jails, penitentiaries, grogshops, theatres, gambling halls, horse-racing, general trainings and, shall we say it ladies, *tea parties!"* In some places, he said, eating parties and tea-table scandals are all the amusements the females can find, while the males can only relieve the tedium of dull hours by resorting to the tavern or saloon and talking politics and puffing cigars.

We now think of the dawn of the day when the people shall know how to live without sickness. The laws of life are the great supporters of the great way of life and a sickly community is always weak in its obedience to the laws of being. "After all, we are too sick to live our own lives--not to repeat the stupid prejudices of each other--not to make our law the law of others." We have to create a proper environment for man's most enduring hope and no man's mind can rise above his physical deterioration.

Heredity gets the blame for anything that is not understood. If the individual is sick and the physician cannot ascribe a cause to the sickness, he can always blame it on heredity. In the April 1930 issue of the *Review and Critique,* Tilden tells of a little three-year-old girl who was brought to him from a great distance. He says that indigestion caused by *scientific feeding* had produced great acidity of the stomach and bowels. The mucous membrane of the child's vagina was excoriated from an acid leucorrhea, causing behavior that was distressing to both the parents and the physicians. "The severe itching was driving the child mad." He tells us that she "was continually trying to relieve herself by rubbing and scratching." Her physicians decided that the child was a "natural-born sex-pervert" and that she was "a very vicious abnormal child." Even the parents were accused of sex perversion, otherwise they could not have produced a child "cursed" as this one was.

The parents had carried out the advice to punish the child severely, but the punishment did not seem to do any good. How could it have relieved the intolerable itching and burning? What wonder that Dr. Tilden says he was filled with disgust when he heard the story of the "child's viciousness" and its inheritance from the parents. He says that he had seen other cases of this type, but he had never seen one that had been abused as this child had been.

With proper fasting, feeding and cleanliness, he says, within ten days the little patient had lost all of its diabolism--its proclivities for masturbation. Besides the fasting and simple feeding, he instructed the nurse to give vaginal douches of hot water, as hot as could be borne without doing injury, to cleanse the excoriated mucous surfaces. The child "soon became the idol of all who had the pleasure of knowing it." This was "after it was made happy by having its health restored." This simply means that as soon as the vaginal inflammation ended and the acid state of the digestive system was corrected, the child ceased to be a "sex-pervert." It is strange, says Tilden, "how *satisfying unscientific treatment is.* Remove cause and nature does the rest." Let the psychoanalyists take note.

The foregoing is an example of the suffering that grows out of wrong information and abuse, no matter how *scientific* these may be. The parents of the little girl were, perhaps, as loving as most parents are and did for the child the best that they knew. When love gives hurtful indulgence that results in sickness, that poisons the well-springs of life, it can cause as much suffering as studied abuse. My heart goes out to those whom the accidents of this world have thrown upon charity, and often a charity so unwise that its loving kindness is only a calamity.

Not only the child, but woman as well has been special victim of mankind's ignorance. She has been made a slave, not merely to man's greed, but also to his lust. Women especially are in need of health and strength. They are in need of knowledge of how to care for themselves.

She stood before the *Hygienist,* a beautiful ruin seeking for help. What could he do for her? If by any course of treatment, he could free her body of poisons, he could not by such means secure her against that mode of life which would reproduce the state of poisoning. Any system of medicine which deals with so-called remedies, whatever their kind, and which does not embrace physiology and a complete mental philosophy, will fail in nine cases out of ten in restoring health and will succeed only by chance in the other tenth.

He endeavored to make her understand the exceeding folly of still further taxing her diseased system with health-destroying substances--so-called medicines. With a mind exceedingly clear on most subjects, she was a child with respect to the economy of the human system, the laws of life and of healing. Like so many others, she looked to a physician when ill with as much faith as that with which the ancients consulted the oracles or the American Indian his *medicine* man. Though she failed always of receiving any lasting benefit, she had gone on trying old and new *medicines* and old and new physicians with a zeal worthy a better fate, with a faith that did not fail, because it was continually fed by hope. Men and women

absurdly expect their physicians to create health for them while they themselves do nothing but manufacture disease. After searching for years through the medium of physicians and their pills, injections, wonder drugs, etc., she found what she had been looking for through the simple application of rest, fresh air, sunshine, pure water, wholesome food and a corrected way of life. There is no other way to return to health.

Hygiene did for her in ten months what medical treatment had failed to do in 15 years. She is a picture of health and beauty, her whole nature having undergone a change for the better. What will physicians say when they see what *Hygiene*--good, applied *Hygiene*--enabled her to do for herself in so short a time? The skill of the medical school had failed; let them account for the successes of *Hygiene,* if they can, on any ground that does not involve them in condemnation of their own failure.

As the people become more intelligent on physiological subjects, drugging grows less and less popular. The whole people are being affected through the influence of the small but growing number of *Hygienists* who are among them. Rapidly we are growing from a kindergarten to a kingdom. Upon us who have a knowledge of *Hygiene* and the glorious results it is capable of working in mankind falls the work of demonstrating its practical blessings, laying them kindly at the door of the humblest human habitation and shouting its message from the housetops, Its spread is our opportunity and our responsibility.

Even those of us who reject the dogma of man's *total depravity* cannot well reject that of total ignorance. Though not synonymous, the two words are twins. As light is the only remedy for darkness, so knowledge is the only remedy for ignorance. How many of us are prepared to consecrate our time, energies and talents to the promulgation of the glorious truths that are in our possession? How many of us are ready to become leaders? Those who have the heart to do it will find the work of educating the people a very noble work--grand, glorious and sublime!

Everywhere men are beginning to lose their faith in mere political reforms. They are beginning to discern that more radical changes are needed than those proposed by any of the party leaders--hence the growing interest in the various proposals for the social and economic reconstruction of society. The *Hygienic* reconstruction of society must form an integral part of that broader socio-economic reconstruction without which *Hygiene* in its glorious fullness is not possible. Man's urge to regain wholeness finds expression in the revolutionary cry for freedom from disease and suffering. Men have lived in a world of terror and darkness, but now the terror is being dissipated by *Hygiene* and when this is completed, there will be only sunshine.

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Medicine and Hygiene Contrasted

CHAPTER XLI

One of two things is true. The drug system is either right or wrong. If right, the *Hygienic System* is wrong. The issue is plain. There is no middle ground. The two systems are essentially antagonistic; they cannot coexist. They admit of no compromise. One must destroy the other or be destroyed by it. All attempts that have been made to teach both systems in the same school have been, as Trall pointed out, "unmitigated farces." And, as he further said in the *Science of Health,* May 1875, "the fact that one or the other system cannot survive a critical examination is what the advocates of both systems are beginning to see."

Present *Hygiene* and let other systems alone is advice we are frequently given. We may do things *offensively* or *defensively;* we may overthrow error or we may establish truth. Whichever of these ways of doing things we may prefer, it seems best to employ both ways. We may prefer to establish truth; we may not like to be always attacking error; we may think that if the truth is made plain enough, error automatically retreats. We wish that this were so; unfortunately, the human mind is capable of harboring, at one and the same time, the most contradictory notions. It becomes necessary, therefore, to demolish error before truth can be fully established. We have nothing to do with individuals, but we recognize it as a duty to expose fallacy and to denounce error and we cannot withhold our criticisms because these errors and fallacies are popular.

Peradventure, some of our readers may imagine that we would better act our part by simply telling what we know of our own side of the question at issue between *Hygiene* and *scientific* empiricism, leaving the medical side to take care of itself. There could be no greater mistake. The people have generally been educated in foolish whims and groundless theories; they are steeped in allopathic sophistries; hence, before we can teach them the sublime truths of *Natural Hygiene* and expect these to be understood, we must enable them to give a reason why they should abandon the teachings of the medical system, as well as for the adoption of the new faith as found in nature's *Hygienic* scheme.

The question is an old one: is the cause of truth and science promoted by criticism of medical systems and their alleged medicines? In reply to this question, it may be said, in the words of Trall, that "error must be exposed before it can be corrected." It is all very well to feed milk to babies, but those of older growth and especially those who have dealt with the "doses of death" and have "drawn floods of the vital liquid" need something stronger than moral suasion. To build a new house on a solid and enduring foundation, it is necessary first to remove all the rubbish of the old one. To raise a flower garden, it is essential that we eradicate the weeds.

A system may be judged in the light of its principles or in the light of its illustrators. The principles upon which it is founded may be sound or otherwise; its theories and its teachings may be logical and well based, or they may be illusions. On the other hand, we may judge the system by what it does, by its accomplishments. Perhaps the wisest means of judging a system is by looking at both its principles and its achievements.

The *Hygienic System* is opposed to all other systems that now or in the past have sought popular approval. Let us, at this time at least, ignore all the other systems except the regular or self-styled *scientific* medical system. *Hygienists* oppose the drug-medical system because we believe it to be false. It has no scientific basis. It is in opposition to nature. It is at war with life. It is disastrous in practice. Let us draw a few contrasts between this system and the *Hygienic System.*

1. Medicine teaches that disease is inevitable; *Hygiene* teaches that health is man's normal state.

2. Medicine teaches that disease is a destructive process; *Hygiene* teaches that disease is a remedial

effort.

3. Medicine teaches that diseases are to be cured; *Hygiene* teaches that they are to be permitted to accomplish their remedial work. In the *Science of Health,* July 1873, Trall said: "The broad and distinct issue between the Hygienic System and all other systems is simply this: The drug system endeavors to cure disease. The Hygienic System endeavors to cure patients." Medicine has always pictured this process of *cure* as something so intricate that only the initiated could understand it and they have taken great pains to keep alive this delusion, lest the people assert their right to investigate the matter and thus reveal the fallacies and inconsistencies of the system.

4. Medicine teaches that poisons are the proper things with which to *cure* disease; *Hygiene* teaches that the normal things of life are the proper substances and influences with which to build health. Believing, as they do, in the *curability* of disease and this by drug administration, if physicians condescend to consider *Hygiene,* they think of it as something to place beside their most virulent and deadly poisons and to be administered together. Failure is then blamed upon *Hygiene,* not upon the poisons.

We know that some who posed as *Hygienists* have declared that drugs are not wholly useless, that a "little medicine" now and then will do good, that drugs may sometimes save life, etc. But, have these ever really given *Hygiene* a full trial; have they ever made a full study of the relations of drugs to the living organism? It would break a fundamental law of nature for a drug to have a beneficial effect.

5. Medicine teaches that drugs act on the body; *Hygiene* teaches that the living organism acts on the drugs.

6. Medicine teaches that drugs *cure* disease; *Hygiene* teaches that drugs occasion disease. (To make this more clear: *Hygiene* teaches that the administration of every new drug requires new and additional remedial efforts to free the body of the poison--with every drug there is a new disease. The physician *cures*--or attempts to do so--by producing "iatrogenic disease.") A sick man is given a substance (drug) which results, as is known from experiment and experience, in impairment of function and destruction of structure, and if and when he recovers from his illness, his recovery is credited to the drug and not to the restorative operations of the body. The drug *cured* him. This is tantamount to the proposition that an agent that is known to be destructive occasions a restoration of health.

7. Physicians used to bleed, blister, puke and purge; now they inject, transfuse, cut and vaccinate to *cure* disease; *Hygiene* supplies food, air, water, sunshine, activity, rest, sleep and cleanliness--in a word, physiological wants. There is a radical difference between the *Hygienic System* which saves and the drug system which kills, but some cannot understand this difference. They think of the two systems as merely two different, perhaps opposing systems of treating disease.

Although every school of so-called healing insists that it is working for the betterment of the health conditions of mankind, their works all demonstrate that, however successful they may claim to be in grappling with the health problems of the day, they fail to take due cognizance of certain fundamental principles of physiology and biology and, failing to take cognizance of these principles, they have all failed equally to provide measures that truly meet the situation that has arisen. The *Hygienic System* alone meets this need.

8. Medicine seeks to *cure* disease; *Hygiene* seeks to remove cause. Look further at our differences, for we are radically apart. We are not the same, with only seeming differences. There is a vital antagonism between the two systems. Medicine has a great advantage of position and rests securely behind ancient fortifications, but these do not constitute criteria of truth.

So long has the world been accustomed to the thought that diseases are to be *cured* with drugs that the proposal to care for the sick without drugs, but with only the normal things of life, seems at first absurd. It is absurd--just as absurd as was the theory that the earth is round and turns on its axis, when it was first presented. The theory was controverted for 1,200 years. We may expect *Hygienic* principles to be controverted for a long time, too, before they are finally accepted. Physicians say that they give drugs to "help nature throw off disease." Sublime thought! What is this disease that nature is trying to "throw off?"

In what way do drugs assist in the process? They give their drug, but they do not stop to remove or correct causes and if this is not done, all of their efforts are in vain.

9. Medicine holds that diseases are caused by germs, viruses, parasites, etc. *Hygiene* teaches that diseases result from violations of the laws of life. Physicians seem to be ignorant of the simplest rules of life and health.

10. Medicine teaches that disease may be prevented by *immunization; Hygiene* teaches that obedience to the laws of life is the only preventive of disease.

11. Medicine is a system of treating disease, largely a system of spectacular palliation; *Hygiene* is a way of life. The results of the two systems are as different as are their theories and practices. Writing in 1853, Dr. Thomas Low Nichols said that if a *Hygienic* practitioner "had a case of fever, he would be ashamed to be more than a week in curing it. In a chronic disease, the patient makes such steady progress and gets so thorough an understanding of his case as to get beyond the necessity of advice." This is not all, as he pointed out. The best part of the matter is that when a man gets well under *Hygiene,* he gets with his recovery the knowledge necessary to maintain his health forever after. "A patient cured, is a patient lost; and if that patient is the head of a family, don't count on that family practice to meet your current expenses."

He further said: "In common medical practice, when a physician gets a few families to take him as their regular physician, his fortune is made. He deals out his medicines and the diseases come as seed-time and harvest. The more business he has, the more he may have. The more he tinkers, the more the constitutions of his patients want mending, until the doctor and his drugs become the necessities of life." *Hygienic* practitioners find all this changed and the more thorough and conservative they are with their patients, the less they will have to do with them. We must rely upon continually making new converts. We must use every means to spread a knowledge of *Hygiene* or our very successes will destroy us. But true men can never fear the progress of intelligence, nor regret the happiness of mankind and when the medical core is finally disbanded, it will be because we have triumphed over suffering and there is no enemy to conquer.

The people are familiar with the practices of the medical system; they know only too well how futile, even lethal, are its practices. Millions of them are admitted by medical men themselves to be suffering with iatrogenic disease. The people know that medical practices are in a constant state of flux, that medical theories are as unstable as quicksand and as changeable as the wind. Physicians keep them on a constant teeter-totter ride--up into the clouds of hope and expectancy, then down into the dark valley of despair--as they promise new wonders with their newly discovered *cures* and then discard them as failures.

It is becoming increasingly obvious to everyone that a false system of medical practice prevails. Notwithstanding the great number of reformatory modes and systems that have come into existence within this century or just before and the number of drug systems that have died out, nothing significant has been done to perfect a science of medicine. Have physicians and pharmacologists ever made a serious attempt to prove that drugs possess *curative* properties? By reference to what general principle can their *curative* powers be proved? So far as we can see, they make no pretense of proving the *curative* power of their drugs but rest their case entirely on experience (their so-called clinical tests are merely part of their experience). Certainly, they fail to apply scientific rules to the verification of their claims. In the past, at least, certain medical leaders (Broussias, for example) have denied the applicability of scientific rules to the testing of drugs, on the ground that *the facts oppose science.* Bleeding, said Broussias, is well known to *cure* inflammation, no matter what science says.

We ask for evidence. What reason have we to believe that any drug can ever restore a sick person to health? Is it because it is in the nature of drugs to do so? Drugs either *cure* or they don't. If they do *cure,* disease should decrease in proportion to the increase in drugs and physicians. The contrary is the obvious fact. Concomitantly with the increase in the number of physicians and the number of drug remedies, there has been a steady increase in the incidence of disease. "How wonderful!" I exclaimed as I finished reading a lengthy list of remarkably efficient curative drugs now at the command of physicians. "Certainly there is now no need for more sickness in the world. No more colds, coughs, corns, consumption, constipation,

worms, skin eruptions, backaches, fevers, etc., for the world now has an arsenal of 'wonder drugs' that should speedily free mankind of suffering."

12. In the regular practice of medicine, it is not good manners to ask questions and explanations are never volunteered. You must respect the wisdom of your physician and trust your case in his hands. He is entitled to your confidence and his fees and you have nothing to do but to follow his prescription and his directions. If you ask what you are taking, he will use his discretion about telling you; or if he condescends to tell you the truth, you will be little wiser. The common practice of medicine, as with every other kind of charlatanry, is based upon confidence and credulity.

Hygiene has changed all this. In *Hygiene,* the first step towards restoring the body to health is enlightenment of the sick. The best foundation for a belief in *Hygiene* is a thorough knowledge of physiology and the causes of disease. We have no mystery except the great mystery of life. When we have explained the human constitution and its relations to external nature, our work is done; when this explanation is understood, our convert is made. People's attention is attracted by recoveries under *Hygienic* care, but it is only by an understanding of principles that they are converted-hence the necessity for a multiplication of books and the promotion of *Hygienic* journals, hence also the duty of all who can write or speak to use pen or tongue in this most worthy cause.

The aim of the physiological system of *Hygiene* infinitely transcends that of medicine; it proceeds from a knowledge of the reason and nature of things, and is scientific; the other can establish no connection between the disease and the drug that is applied to it, and is empirical. *Hygiene* depends for its success upon the intelligence of those who adopt it; *medicine* depends on the faith that is ever a concomitant of ignorance.

The *Hygienist* must educate his patient. To control the captiousness and ignorant whims of the sick requires much tact, but little deceit; it is generally best to supply knowledge in these matters, to supplant incorrect notions, as fast as it can be received. Knowledge is the only true corrective of ever-recurring vital mistakes. The laws of life, so intimately connected with our wellbeing and happiness, should not be conjectural or of ambiguous significance. They are carved on a page as broad as the face of nature and are exemplified in all that breathes. Every patient should have a full knowledge of them.

The modern *Hygienic* movement, or so it seems to the author, is the result of real progress in knowledge. The most thorough *Hygienic* converts we know are the most intelligent. Indeed, up to this time, there are few others. A man can believe in *Hygiene* just as far as he understands its principles, but his belief in the common practices of medicine or the use of drugs in any way is just in proportion to his lack of understanding. In all this *Hygiene* is peculiar. Other systems have their books and journals, but they are for the profession alone and cannot be understood by the uninitiated. For thousands of years the sick world has trusted practitioners to cure it and the result has been an increase of diseases and a more premature and frightful mortality.

13. Under the prevailing system of medicine, as in past systems, it is sought to restore health by the use of those things which destroy health; invigoration is hoped for through processes that exhaust, and it is sought to develop the powers of the body by defying nature--hence it is that the plans in vogue are by their very terms and nature empirical and not scientific. The plan of *Natural Hygiene,* on the other hand, is nature's own plan and method and is, therefore, the scientific one.

The *Hygienist* employs no agents that are in their very nature destructive of the welfare of the animal economy, which is always the case with drugs in whatever amounts given or in whatever dose employed. It has long been lamented by physicians that, in the administration of their remedies, they cannot count on universal results. They claim that the most inexplicable peculiarities and individualities interpose themselves so that their supposedly salutary remedies become pernicious. Drugs (poisons), instead of assisting the body in its restorative work, check the healing processes of nature and deaden and stifle disease instead of restoring health. Often they change acute infections, which left to their own courses would result in health, to chronic and irremediable diseases. In *Hygiene* there is no patching up, but a thorough renovation, both of the individual organism and of the ways of life of the individual. In *Hygiene* there is no tampering with evils. They are all rejected and only beneficial agencies are invoked. "We

neither bleed nor madden, nor stupefy, nor intoxicate--in a word, we do not *poison."* We restore the vital functions to their natural harmony and their highest vigor by the employment of physiological requirements.

14. The medical man finds a sick body filled with toxic debris and he proceeds to add the equally potent poisons of his *materia medica* in the vague hope that somehow one poison will expel the other, then get rid of itself. In such a case, the *Hygienist* calls to his aid the elements of health. Every drug, every potent article of the *materia medica,* is a poison and, as such, in large or small doses, exerts a deceiving influence upon the system. Of this there is no question--it is on all sides admitted--and the whole practice of drug medication is confessedly a choice between evils. It professes to *cure* a greater evil by producing a lesser; but in practice, too often, this rule is reversed, for one evil is added to another.

In medical practice, when one drug is given to act upon a disease, another is given to counteract the effects of the first and so on, until the patient, feeble and exhausted from the actions and reactions due to a whole series of poisons, is left at last with just the breath of life remaining, to get well by the operation of what vital power medication has spared him.

Health, once established by *Hygienic* care, is maintained by it ever after. It is rare that a *Hygienic* family ever requires the services of a *Hygienist* a second time. *Hygiene* threatens, in this way, to destroy all so-called medical practice. Mothers learn, not only to care for the diseases of their families, but what is more important, to keep the family in health. The only way that a Hygienist can live is by constantly getting new clients, as the old ones are too thoroughly restored and too well informed to require further services.

15. The *Hygienist* cares for a sick person very much in the same way that he would a well one, whom he desired to keep well. The homeopath treats him just as he would if he were well and he desired to make him sick. The allopath loses sight of the *man* altogether, making use of him only as a medium through which to fight a myth he calls disease--which myth no man has seen and the allopath can tell neither from whence it comes nor whither it goes, when its action is present (if present it be) nor give any description of it further than its name, *disease.* In the melee, if the man escapes, it is well for him; if he dies, the death is charged to the disease, not to the physician.

Under the plan of care prevailing at the origin of the *Hygienic System,* sufferer after sufferer lingered and was dosed, bled and blistered, but died. In such cases, it was assumed that, all having been done to save them that could be done, their "time had come." God had so decreed and, of course, it was best that they go. What logic! What worse than ludicrous muddle! Concurrent events in the one class of cases are accepted as causes and effects; in the other, an imaginary decree is conjured up to relieve the shameful failure, not to say drug murder. Strange, is it not, that nobody ever thought to credit recovery to the fact that the "patient's time" had not come--God had not decreed his death?

Worse than the foregoing, if this is possible, was the habit of charging *Hygiene* with responsibility for death if a patient, far gone under wrong living and worse treatment, was not brought back from the dead by pure physiological care. *Hygiene* was denied the benefits of good logic. It was not even provided with the scapegoat that protected the drug system--if a patient died under *Hygienic* care, this was not because his "time" had come. God did not decree that he should die.

16. The means of medicine are artificial methods, a coinage of their own ingenuity. The drug-medical system seeks, with all the causes of disease in all the kingdoms of nature, to cure disease by creating new disease. How different the work of the *Hygienist!* He employs only such substances and conditions with which the organism is entirely familiar and which it uses daily, seeking to adjust these to its altered requirements. His is a legitimate effort. The means of *Hygiene* are natural and have belonged to man's normal way of life from his origin. *Hygienic* means have their foundation in the fitness of things. There is a radical distinction between the *Hygienic System,* which seeks to aid and assist the vital organism with the normal things of life in its reconstructive work, and the drug-medical system, which seeks to *cure* disease by the use of poisons.

Writing in the *Journal,* June 1860, W. T. Vail, M.D., said: "The mass of mankind seem to think that there is a drug for every disease and could they only be so fortunate as to find that drug when they are

sick, or find the physician who knows it and can administer it properly, they might be speedily restored. These learned doctors believe, while they are so bountifully and indiscriminately dealing out drugs to their patients, there is scarcely *one* disease in *four* in which drugs have the least efficacy towards effecting a cure." Thus he bears witness to the fact that the profession of his day had little confidence in the drugs they so freely administered. Two wrongs can never make a right and giving poisonous drugs to remedy the effects of prior violations of the laws of life is like knocking a drunken man down because he won't stand up. If a substance is harmful, why take it into the body? Why think that because it does not produce instantaneous death, we may take it with impunity? Why not refrain from burdening the body with it? Why not give your body the best opportunity to maintain high-level health? If we are content to suffer, if we want to watch ourselves go down year after year, then we will give no attention to the ways in which we feed and care for ourselves; but if health is worth having, it is worth the simple effort that is required to refrain from habitually abusing the body by habits that are foreign to the elemental needs of life. If health is worth regaining, it is worth the simple effort required to provide the elemental needs of life and to refrain from destroying life by dosing the body with poisonous substances drawn from all the kingdoms of nature.

There is but one way to solve the health problems of man and this is to abolish the practice of medicine and replace it with *Natural Hygiene.* What are the other schools of so-called healing (those other than the medical system) doing towards this end? Exactly nothing. In fact, with their contradictory propaganda and their inconsistent activities, they only add their weight to the elements which confuse the health seeker. These various competing schools serve to obstruct humanity's progress towards a world of health and sanity. When, finally, they go out of their confused and hapless existence, there should not be a glimmer of regret.

All those writers who gather their ideas from the current literature of the day without examination and critical analysis must necessarily advance, or rather, teach the fleeting errors of the times. They may expose an occasional error; but, basically, they propagate the very errors they seem to expose. Never in all history has so much praise been wasted on a fundamentally evil thing as today goes out to *medicine.* Indeed, wasted is too mild a word. Perverted would be more accurate. When once the people have acquired a genuine understanding of the nature of *medicine* and its practices, it will be regarded with aversion and downright loathing.

When our opponents lay down their arms, retreat from the field and ask for quarter, there will no longer be necessity for us to pursue them. Then we can devote our attention exclusively to the welfare of the living, guarding them against ill health, drugs, physicians and the whole paraphernalia of medical slop-shops, blisters, man mid-wives and every other unclean thing. Until then, we must continue to fight, as did all past reformers and revolutionaries. When light and knowledge have obtained the ascendency over darkness and evil, then and then only shall our swords be beaten into ploughshares and pruning hooks and mankind learn war no more, nor swallow pills, pukes and other drugs.

It may be objected that *medicine* is scientific, hence, one of our sacred cows. *Science* is radically empirical and is devoted to *methodology* rather than to *ontology.* It treats general propositions as working hypotheses, that is, as "provisional truths" to be continually revised as the results of observation and experiment demand. *Science* is at least partly conventional. It emphasizes the operation of verification as essential to verity, but is rarely, if ever, satisfied with its verifications. All of its conclusions are provisional and subject to revision, change or discard. The *scientist* is, in sober fact, an instrumentalist. But, in addition to his dependence upon his scales and measuring rods, he is, in many areas of learning, a guesser. Biology, physiology, geology, anthropology, archeology and kindred *sciences* are shot through with guesses. Pharmacology is one stupendous guess and a wrong guess. That mythical science called the *science of modern medicine* is a system of incongruities, absurdities and morbid products of the imagination.

Physicians often complain that they are forced to treat their patients in the manners in which they do treat them, because the patients demand it. This complaint is made in utter disregard of the all too obvious fact that the teachings of *medical science* constitute the starting point of popular beliefs and demands. When physicians yield to the clamour of their patient for the popular drug, as they so often do, there is reflected back upon them the fallacies they have so assiduously promulgated in the public mind. In his

maze of learned stultification the physician is hopelessly lost at sea without rudder or compass. Deprive him of his drugs and he knows nothing to do in caring for the sick. After all, *Hygiene* does have a guiding principle which is the fundament of true practice.

Allopathic medicine is crumbling like an old building beset with fungi and the fact that it is a gigantic building does not stay the process. The ideological decay of the medical system is no less apparent than its structural collapse and only those people who seek the obscure and cabbalistic, when the simple truth is right on the surface, can fail to discern this fact. The "euphoria and public complacency" cultivated by the medical organization and the public press cannot long hide the going to pieces of the poisoning system. When you permit your faith to oust facts or your fancy to oust memory, you lay yourself open to deception.

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What is a Poison?

CHAPTER XLII

What is a poison? What is a medicine? How do drugs act on the living organism? It is vitally important that we distinguish scientifically between food and poison, because they are confounded in the popular mind and employed indiscriminately by physicians, it being frequently asserted, as a justification for the employment of drugs, that "there is poison in everything." Due to the fact that the question: what is a poison? has not been satisfactorily settled, there is much ambiguity of language indulged by speakers and writers who are unable to distinguish between a poison and a *Hygienic* means.

Who does not know that for over 200 years physicians, chemists, pharmacologists, etc., have sought to prove that alcohol (a protoplasmic poison) is both poison and food, or either, according to circumstance? Of this substance it was said: "Alcohol is like every other chemical, whether it be a poison like strychnine or a food like protein--that is, there is an amount below which it is *not* a poison, and above which, it *is* a poison. Too much table salt is a poison; a little is not." Thus, one fallacy is used to support another; in reality, the fallacy is the same in each instance. It is the fallacy that poisons are such by quantity and not by quality. Salt is a poison only because we get too much of it and not because it is intrinsically a poison, so with alcohol. Even if alcohol is partially oxidized in the body, all evidence is still lacking that this provides the body with any energy or usable substance or that it takes part in the useful functions of life.

As vital structure can be evolved only out of food, air, water and sunshine, we can distinguish between food and poison without reference to popular opinions. Every substance in the earth has a definite relation to the living organism; either it may be used with which to build and maintain the organism and carry on its functions or it may not. If it is usable, it is food; if it is not usable, it is, so far as its relation to the organism is concerned, a poison. This principle was early arrived at by *Hygienists.*

As Wm. Bailey Potter, M.D., said in an article entitled "Health Reform" (third in a series, the *Journal,* June 1859): "Eat a pound of bread--it will not injure a well person. The natural appetite craves it. The stomach digests it, and it is assimilated and becomes a part of the living organism. *It is a food.* Eat a pound of tobacco--it will kill you. The natural appetite rejects it. It is not digested by the stomach, nor assimilated, nor changed in the system. *It is a poison.* If you drink a pound of alcohol--it will kill you or at least seriously injure you. The natural appetite rejects it. Early navigators found that savages at first disliked it. So do children who have never used it; *but such are scarce.* It is not digested in the stomach, not made into tissue. *It is certainly a poison.* A pound of tea, cooked and eaten as food would kill any person." Thus, the distinction between usable substances (foods) and nonusable substances (poisons) is made quite clear.

We may now answer our question: what is a poison? Everything is poison that cannot be assimilated by the living organism and used by it to sustain life. Every substance that can have no place in the normal metabolic processes of the body wastes the body's energies in resisting and expelling it, thus inevitably inducing debility and premature death. In other words, poisons are those substances which the living organism cannot use, but must resist and expel.

That which cannot be appropriated to the growth and strength of tissue is neither food nor drink, but poison. If a substance cannot be appropriated to the development of living tissue and employed in healthy action, it is hurtful to the structures of the body. Poisons are such substances that are chemically incompatible with the structures and physiologically incompatible with the functions of the living organism. They are those substances which are not in any form or quantity, convertible into any of the structures of the human body, nor employed by the organism in the performance of any of its functions. This definition is true in itself; it lets all substances take care of themselves.

To reiterate: all things in existence are, in their relations to the vital organism, either foods or poisons. Foods are those things which the organism uses by appropriating them into the formation of tissue; poisons are those things which the organism cannot use in the formation of tissue and, hence, rejects. On the basis of this principle, we unhesitatingly declare that all those substances (drugs) that are employed as medicines are destructive of the structural integrity and functional vigor of the organs and tissues of the body.

All drugs are physiologically incompatible with the functions of the human body. Take epsom salts as an example: when a dose of these is taken into the stomach, there is immediate and great disturbance of function. Fluid is poured out to dilute it and to protect the tissues against its chemical incompatibilities, while the alimentary canal and the abdominal muscles contract violently to expel it. It is not conceivable that such a violent disturbance would follow the salts if they were compatible with or in friendly relation to the vital structures and functions.

When opium is first given, the preternatural excitement which is followed by stupor, delirium, convulsions and, if the dose is large enough, death, and in smaller doses, a lesser degree of the same symptoms, it is impossible to miss the physiologic incompatibility of the drug with the vital organism. A whole catalogue of drugs could be listed and the same and similar disturbances of function would indicate their physiologic incompatibility with the vital organism.

What phenomena indicate the alleged *modus operandi* of drugs? Pain, agitation, disorder of body, derangement of mind, nausea, vomiting, griping, spasms, trembling, dizziness, drunkenness, staggering, blindness, deafness, prostration, and so on to the end of the catalogue of abnormalities. Certainly these symptoms, feelings, effects, phenomena, operations, or whatever else one chooses to call them, are no part of the healthy or natural state. They are symptoms of disease, symptoms of poisoning.

When drugs are "chemically incompatible," as are all the metalic or mineral poisons, with the structures of the body, they corrode, decompose and destroy some portion of some of the constituents of some of the fluids and solids of some organ or structure. Take these examples from among the older drugs: carbonate of potassa resulted in ulceration and in corrosion in the stomach; an application of Spanish fly to the skin occasioned vesication (blistering), followed by corrosion or decomposition of the skin; tartar emetic or ipecec, applied to the skin, destroyed the cuticle and corroded or destroyed the true skin, leaving large scars where they were applied; calomel and mercury in other forms produced salivation, decay of the teeth, violent diarrhea and many other effects; sulphuric acid burned or corroded the structures like fire. Such results prove to a positive demonstration that drugs or apothecary stuffs are not assimilable by the living body, that they cannot be transformed into the substances of the tissues and that they are chemically incompatible with the structures of life.

It will now be readily seen that drugs interrupt the functional harmony of the body, first, by their chemical incompatibility, and second, by their non-usableness, which renders their immediate removal an object of particular concern to the living tissues, and third, by the fact that their very presence occasions vital resistance in direct proportion to the difficulty of expelling them. Drugs assassinate the human constitution.

None of the medical schools existing at the time the *Hygienic System* came into being was able to make valid distinctions between drug poisons and *Hygienic* means nor between food and poison. Poison is poison and food is food and they are as distinct from each other as life and death. They cannot be used interchangeably and any effort to so use them must result in evil consequences. The prescription of a physician lacks all power to convert one into the other; they remain the same under all conditions and circumstances. Poisons are poisons by virtue of their own elemental character. They are not poisons by virtue of their simple relations to some individual organism.

Substances that cannot be metabolized, and this means substances that cannot be transformed into cell substance, are of no possible use to the living organism in either a state of health or in a state of disease. The presence of such substances in the body can serve only as disturbing elements. They are foreign bodies and must be expelled, often at great expense to the organism.

Metabolism is defined as "tissue change, the sum of all the physical and chemical processes by which living organized substance is produced and maintained and also the transformation by which energy is made available for use by the organism." Metabolism is the sum of the biological processes upon which the processes of growth and repair of the cells and tissues depend. As it is common to confine the process to the cell, it has been said that "metabolism is the cell; the cell is metabolism." This, however, is a mere play on words. The process of metabolism is comprised of three activities, as follows:

1. The preliminary stage of taking food substances.
2. The transformation of these materials into cell substance.
3. The elimination from the cell of products resulting from cellular activities and which are not to be retained in the cell as part of its protoplasm.

From the foregoing it may be seen that metabolism may be defined as the sum of the processes by which nutritive materials are utilized and ultimately discarded. As substances are discarded, they require to be replaced-hence the need for a more or less constant supply of food materials to the cell. All of this involves another consideration that is not commonly noted by physiologists: namely, the kind of materials that can be metabolized. Metabolism refers to the changes that foods undergo in being appropriated and used by the body. It involves the actual incorporation of food materials into the substances of the cell. It is a large part of the process by which we live and grow and develop.

Substances which are not adapted to the normal processes of metabolism, whether introduced into the body from the outside or generated within the organism itself, are not usable by the body and nvaribly prove to be harmful. A sane method of caring for the sick will not attempt to force the body to utilize substances that are not subject to its metabolic processes.

The metabolism of the human organism is radically different from that of the plant. Whereas plants can appropriate and utilize elements from the soil, the animal organism is unable to do so. As a matter of fact, the animal organism will not tolerate the presence of soil elements in inorganic form, but resists and expels them to the limit of its capacity. Iron, for example, can be assimilated by the animal organism only as it comes to us in the organic combinations found in food. Otherwise, it is a poison. Although for many decades drug preparations containing iron have been fed to anemic patients in large amounts, no cases of anemia have ever been remedied by this type of drugging. It is stated by a writer in the *Scientific American,* May 1966, that: "At least 12 children a year in the U.S. die of eating the sugar-coated iron-containing pills (ferrous sulphate) that their mothers may be taking for anemia. In Britain this raiding of the medicine cabinet for ferrous sulphate tablets accounts for about 10 per cent of all the fatal poisonings of children. In South Africa, the Bantu, who drink a beer made in iron vessels and thus ingest 50 to 100 milligrams of iron daily, commonly suffer from many ailments partly induced by iron, including cirrhosis of the liver, by the time they reach middle age." These are merely a few examples of many evidences that iron is a poison when taken in inorganic, hence, non-metabolizable form. What is true of iron is equally true of sulphur, phosphorus, iodine, calcium and other minerals that form normal constituents of the living body.

Pharmacologists and biochemists have developed the habit of talking of the metabolism of drugs. For example, one man says that some "apparently normal individuals" have impaired ability to metabolize "certain chemical agents" and suggests that this may be due to "inherent defects in their cellular metabolism." Pharmacologists speak of the "concentration of the metabolite," meaning an end-product of drug metabolism. They speak of drug metabolites in the same way that physiologists speak of the metabolites that are the normal end-products of the metabolism of food. They also speak of the "capacity to metabolize the drugs," and of "drug-enzymes" that exist in the microsomes.

Some drugs are said to have "variable rates of metabolism" and it is said that "each person seems to have his own pattern of metabolism for these drugs" and that "the consequences of individual differences in drug metabolism are exaggerated in long-term therapy and may account for the variable time of onset for side effects." The pharmacologists have developed the habit of speaking of "drug-metabolizing enzymes" and of saying that "the importance of the drug-metabolizing enzymes in drug therapy is demonstrated by the prolonged action and high toxicity of many drugs in new-born infants, whose microsomal enzyme systems are not developed during their very early days of life." This simply means that because infants are

"ill-equipped to metabolize drugs," they have less power to defend themselves than do adults.

It is becoming quite a habit among physicians and pharmacologists to talk learnedly of the metabolism of drugs when what they are talking about is not metabolism at all, but the mere chemical changes that drugs undergo in the organism as the body defends itself against them or prepares them for excretion. They speak not only of drug metabolites and of the body's capacity to metabolize drugs, just as though drugs were handled by the living organism in the same way as food is handled, but they speak of drugs that are slowly metabolized and of those that are quickly metabolized and of variability in the ability of different animals and of different individuals to metabolize drugs.

We are told that recent studies suggest that enzymes which metabolize drugs are not the usual enzymes of intermediary metabolism. Rather, it is speculated that they are the results of evolutionary developments that had to take place before animals could migrate from water onto the land in order that the organism could protect itself from a multitude of fat-soluble compounds which it would receive in its food. We are also informed that, in general, drugs are not metabolized by processes acting on substances normally present in the body and that usually they are not even metabolized in the organ where they are supposed to act. Instead, so we are told, their action is terminated by specialized microsynes which have a predilection for fat-soluble compounds. It is customary to go further in this discussion of drug metabolism and speak not only of the metabolism of drugs, but of their *tissue distribution.* For example, they talk of the tissue distribution of thalidomide. Distribution is the action of distributing, apportioning, arranging or disposing. To distribute is to divide among a number, a portion; share; make a distribution; to classify or arrange; to separate, as from a collection.

Within the broad meaning of this definition, drugs are not distributed. It is true that they are carried by the blood to various tissuesbut they are not apportioned; they are not allocated. They are not divided among the tissues; they are not shared by the tissues. As the tissues have no need for them, can make no use of them and must reject and expel them and, as they are poisonous to every tissue in the body, they have to be met with resistance. To speak of the mere carrying of toxic substances by the blood stream throughout the body as their distribution is to misuse the term and to mislead the unwary reader.

That drugs undergo chemical changes in the body, in the digestive tract, in the blood stream, in the liver and elsewhere, as the body seeks to protect itself from them, that is, as it seeks to lessen their toxicity and to render them more easily excreted, has long been known. But this is a far cry from the biochemical process by which food substances are metabolized. Drugs do not, as a consequence of these changes, become cell constituants and they are not used in performing the functions of life. They provide the body with no energy. There is nothing in the changes that drugs undergo in the body that contribute to tissue change or that help to build and maintain organized substance or that provides energy for the use of the organism. The drugs are simply "detoxified," altered and expelled. They never become part of the body's tissues; they are never used in performing any of the functions of the body; they form no part of any of the body's functional results. Drugs are not, in other words, metabolized in the body and all efforts to confuse the changes they undergo in the body, as the body seeks to protect itself from their chemical union with its tissues, with the metabolic processes by which foods are assimilated and disassimilated, can only lead to greater confusion.

It would be proper to speak of drug changes as metabolism if the cell could actually incorporate drugs into their substance as integral parts of their protoplasm and make use of them in the same way they do food substance. Inasmuch as this transformation of drug substance into living protoplasm is not possible, but as drug substance must be expelled as foreign material, it is not proper to talk of the chemical changes that may take place in the drugs while in the body as metabolism. If they could be metabolized, they would be classed as foods and not as *medicines.*

It is not enough to understand the normal relations of various substances to living organisms as a whole, for many organisms can metabolize substances that other organisms cannot make the slightest use of. Soil is food for plants, but is useless to animals. The tobacco leaf is food for certain forms of insect life; it is a virulent poison to man. Belladonna is poison to man, but is food for the rabbit. We need, most of all, to understand what has a normal relation to man. If certain types of organisms flourish in sunless caves, this is no clue to the needs of man.

It is so appropriate to judge of things in their relations to life by their effects, rather than by their names, that it is a matter of wonder to us that the principle has been so long overlooked. A substance is not beneficial or injurious because of its name, but because of its effects on the living structure. Without reference to its name, a substance is to be regarded as good or bad in its relation to the living organism in exact ratio to the beneficial or injurious effects it produces. All things must be measured by the same standard and accepted or condemned under the same rule.

It is stupid for physicians and pharmaceutical chemists to speak of the *physiological effects* of toxic substances. Their effects are always pathologic and experiments to determine their pathological effects are understandable.

It is not difficult to demonstrate that drugs that are poisonous to man are also poisonous to animals; that if a dose is large enough it will kill the animal if it will kill man. Chloral will *hypnotize* a rabbit or a pigeon; bromide or potassium will render the pigeon stupid; alcohol will do the same for birds; strychnia will induce spasms, coma, paralysis; chloroform will *anesthetize* a gold fish--but what has all this production of disease in animals to do with curing the sick? That poisons will sicken and kill both men and animals is well known. We want something that will restore health.

There is a large element of stupidity in the belief that when it is demonstrated that drugs will produce disease (coma, paralysis, narcosis, etc.) and death in animals, this demonstrates that they are valuable in the treatment of sick human beings. We must learn to respect that which saves life, not that which destroys it. Anything that finds its way into the organism or that evolves within the organism that is unusable and must, therefore, be expelled may necessitate greater than usual or modified vital actions for its removal-this is disease.

It was demonstrated by *Hygienists* more than a century and a quarter ago that the living organism seeks to repel or expel anything that is harmful to its constitution. This is to say, it rejects and expels anything that it cannot transform into living structure. Whatever is not a normal constituent of the fluids and tissues of the body is foreign to the organic constitution and must be resisted and expelled. As we will learn later, the actions of resistance and expulsion that follow the ingestion of a drug are mistaken for the actions of the drug; whereas, the drug is just as inert and passive in the body as in the bottle on the druggist's shelf. Perhaps now we can answer the question: what is a medicine? The body wants and can make use of only such substances as it can assimilate and use as food. There are no substances that can be so used in disease that cannot be used in health. This is to say, anything that is to be used remediably must bear a normal or physiological relation to the living organism and must be useful and needed in a state of health. When the public learns the truth, it will see the absurdity of talking about the *physiological* influence of drugs on the human body and will understand that no drug can have a physiological effect or influence, but that its influence is always and invariably pathological and that no man who understands the nature of disease or the so-called *modus operandi* of drugs will ever apply the term physiological to any disease-causing substance. Then the public will abandon the nonsensical and frankly contradictory facts of the medical profession and the practices built thereon.

Can a logical reason be provided why a person should swallow or permit to be sent into his blood and tissues by injection, a nauseous, noxious substance because he is sick? No such reason has ever been given; if it can be done, is it not high time somebody did it? It is everywhere admitted that drugs are poisons, that they are always poisons to persons in health. All of us are very careful to exclude them from our food and drink; we are well aware that if we take them into the body while we are well, we will become sick as a consequence. What person would dare to take an ordinary dose of penicillin, streptomycin or cortisone while in health? Yet, let him become sick and he swallows them, not only without fear, but as the essential condition of safety and recovery. It should be obvious that there is a terrible delusion abroad on this subject.

W. T. Vail, M.D., writing in the *Journal* (October 1858) asks how could one in wisdom and goodness "invite you to embrace and press to the very bosom of your life, the most deadly enemies of your being?"

He thought that "a demon might take upon himself to persuade you that the fair and innocent look of some poisonous element, so disorganizing in its nature that a simple drop placed upon the tip of your

tongue should destroy your life in a few moments, might, under form of certain reductions and combinations, in consequence of some delusive temporary effects, be good for you to introduce into the life currents of your bodies, there to be diffused in contact with all the delicate tissues and minute fibers of your wondrous composition . . . ;" but he thought it difficult to conceive of an intelligent and philantropic man doing this.

The practice of poisoning a person because he is ill is based on erroneous notions of the essential nature of disease. In all the teachings of the medical schools, disease is regarded as something foreign to the system, as an attacking entity, and poisons are administered to war upon, drive out or destroy the enemy. But, as the truth is the exact contrary to this ancient notion, all poisoning practice is exactly wrong; it is nothing more nor less than a blind war upon the human constitution. When the great, grand, glorious and revolutionary truth that disease is remedial action, that it is the action of the living system itself instead of a foreign something making war upon the body, is generally understood, then the whole poisoning practice will be viewed with disgust and horror.

It is the general opinion that men die of disease and that they are sometimes saved from dying by taking poisons. There is no evidence that these are the facts. There is no valid authority for saying that disease is a crippler, a destroyer, a killer. No one has any evidence that poison is a savior. There is no evidence to controvert, but much to sustain the opinion that poison is always destructive to man and that disease is a conservative effort of the living organism to free itself of poison. It is by no means certain that anyone ever died of disease. There is strong reason, however, to think that all who have not died of violence or exhaustion have died of poisoning and that all who have died of exhaustion did so prematurely by being robbed of life by poisons.

Can organic function be restored and organic structure be repaired by means and measures that are destructive of structure and subversive of function? Can the exhausting *narcotics* and deadly chemical poisons of physicians, choking and irritating the bodies of the sick, the pungent, smarting compounds, the caustics, corrosives, stupefyers, the bowel-rasping, stomach-emptying, blood-poisoning, brain-disordering medley of poisons that dose the sick into a state of lethargy, muttering delirium and phrenetic excitement be expected to restore the sick to health? Let the truthful answer be: these things are all health destroying and too many deaths from slow poisoning are passed off as deaths from disease. Viewed in this light, the administration of drugs is seen to be a crime.

There is no mystery in this. It is not difficult to understand why poisons do not save us from suffering and death. The mystery lies in the fact that, after the truth is demonstrated, the mass of mankind go on to their destruction nevertheless. When one considers the immense masses of poisons that are merchandized in the drug trade, some of it so toxic that a small drop of it will kill an ordinary pig in a matter of minutes, one cannot help but think that human life is shortened under the drugging practice. It is a bit foolish to think that all of this poison can be diluted and swallowed at intervals in such a way as to promote health instead of impairing and destroying life.

Drugs never have a remedial influence, but their administration is always and necessarily attended by a loss of constitutional power. To bring disorganizing poisons into contact with the living tissues of the body is to damage and destroy, not to build and renew. The fact that these poisons are prescribed by a physician does not alter their relationship to the tissues nor render them adaptable to the purposes of life. Prof. Martin Paine said in the latter half of the nineteenth century, after admitting that all drugs are poisons: "In a remedial sense, however, we do not know them as poisons, but as among the choicest blessings bestowed upon man." How actually absurd!

However good and benevolent the motive that leads to the administration of poisons as medicines, it cannot alter their actual qualities, nor mitigate their hurtful, even deadly, effects on the powers of life. If they are poisons before they enter the living system, they must of necessity be poisons after they enter. As soon as the people fully understand the intrinsically poisonous character of all drugs, they will convict the medical profession of manslaughter and destroy their fame as healers and their character as useful citizens.

Medical men cling to their implanted fixations which were developed in advance of all experimental verification and before the development of biologic, physiologic and pathologic knowledge. The only

relation which a true interpretation of facts shows drugs to have to the human organism is that of poison and no amount of falsification of nature can make this relation any different. What recent discoveries in physiology have been made which show that drugs (poisons) have the same relations to the human organism as foods? Medical authors neglect to give us even a brief account of such discoveries. The relation of all drugs to the living organism, even in those cases in which they may be useful, as in *anesthesia,* is always anti-vital. It may be thought that so-called sleeping drugs serve some good purpose, but it should be known that stupefaction is not slumber. The barbiturate physician might as well benumb his patient by a blow on the head.

It is not true that substances which are poisonous in health become innoxious in disease. Nothing changes its relations to the human organism when it is well or sick. If it is a poison, it is so once and always--under all possible circumstances. If it will corrode the tissues of a well person, it will corrode the tissues of a sick man. The unceasing clash of the organism with these unassimilable substances gives rise to pathologies galore. The body must maintain a state of perpetual vigilance against poisons and this reduces it to the status of a maladept.

When poison is taken, the powers of life are excited to increased actions to resist and expel it. This will be followed by *reaction,* more or less severe, depending on the prior expenditure. The introduction of foreign elements into the blood stream is sufficiently guarded against by the living organism and only men of *science* recklessly disregard these safeguards of internal purity and break through the defenses and deliberately introduce foreign materials, some of them highly toxic, into the blood. Many drugs produce no appreciable immediate damage but are retained, as they are eliminated with difficulty, and accumulate in the body and it is said by toxicologists of some of these that small amounts of such drugs may be retained in the body for months and even years.

Most people think that it is necessary to take drugs when ill; they must take them, if not for *cure,* at least for relief from discomforts and pains, so many of us once thought. But millions today are rejoicing in better health because they have learned that there is no balm in poison; they have been emancipated from the belief in the necessity of drugs and have been freed from their diseases. It is possible for every reader of this book to free himself from his slavery to drugs. The daily consumption of drugs as mere palliatives or subterfuges, to paralyze some aching nerve or to goad some faltering organ into renewed (increased) activity, is a practice that cannot be justified on any scientific ground. Today, the American public is practically pickled in drugs. *Anodynes, analgesics, antacids, laxatives, cathartics, sedatives, soporifics, tranquilizers,* for headaches, gastric distress, constipation, emotional disturbances, sleeplessness, etc. are swallowed by almost everybody. Indeed, drugging has become a way of life. For the reader to free himself from his slavery to drugs, it will cost him a little effort, a little resolution, some persevering effort, the exercise of some faith in the powers of his own body, some transient sacrifice; but the rewards are well worth the cost.

To call this poisoning of the life currents and the body's tissues a rational, scientific mode of *treating disease* is to do violence to human reason. Taking poison, so far from diminishing disease, always makes more work for it to do. There is no surer means of evolving chronic disease than that of treating acute disease with poisons. There never can be and never ought to be any congenial relationship between the living organism and rank, disorganizing poisons, no matter how these are sugar coated.

Man must disabuse his mind of the fallacy that when he is ill or that when we call drugs medicines and take them upon the directions of the physician, that poisons are transformed from deadly foes into kindly friends, ready to do him good in his time of need. When, with all the gravity they can command, the professors of medicine assure us that there is no other source under heaven whereunto we may turn when ill with any hope of succor, than the myriads of poisons that exist throughout the earth, we must think them to be laboring under a delusion.

Instead of the most poisonous and deadly substances being good for us in the days of our suffering, only the friendly and congenial substances can be of genuine service to us. These are serviceable in restoring health as they are serviceable in preserving health. It is false to think that what is poisonous in one circumstance or condition of our being is the very supporter of life in another, that what will destroy health when we are well can be made to build it up and establish it when we are sick. There is no more harmony

between drugs and the sick body than between drugs and the healthy body. There is never a circumstance in which there is a genial relationship and adaptability between drugs and the living organism.

To invalids of every age and description, who are subjects of disease, suffering, weakness, irritability or despondency, who hope to secure a return to the normal vigor of their organization or to realize the joys and rich blessings of uninterrupted health through the agency of poisonous and disorganizing substances, I address this important question: is it logical to think that the causes of disease and death are also the causes of health and renewed life?

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Drug Relations

CHAPTER XLIII

Hygienists affirm that all medical systems, wherever and whenever practiced and by whatever names they are called, whose remedial agents are drugs, are false in conception, absurd in science, contrary to nature, in antagonism with the laws of the living organism and wholly injurious in practice. To be wrong in fundamental principles is fatal to the superstructure, however beautifully it may have been reared.

Let us briefly examine the applicability of the methods of the drugging schools to health. What relations have their drugs to the human system in a state of health? As an advocate of drugs, is not the physician necessarily confined to advising sickly human beings? What drug can he give that will improve the growth in health and sturdiness of the infant? From the first to the last of his *materia medica,* he has nothing adapted to the healthy child.

Any genuine maxim which the physician may give for the betterment of human conditions, if these conditions are such as to not involve ill health, must be rendered by him independent of the drugging system. At best, his drugs come into play only in sickness. But the most robust man who takes a drug prescription will have his robustness impaired or destroyed. The healthy man does not live who can take a drug and not be the worse for it. Is it not evident, then, that the physician can enter the health-preserving kingdom only if he leaves his drugs behind? For, to such as possess ruddy health, to whom bracing breezes and ample exercise, healthful heart-throb and a serene mind, are a perpetual heritage, drugs would be as uncalled for as would be an electric fan in the arctics.

The alleged antiquity of the medical system is not a basis for confidence. Age does not sanctify a fallacy, nor does it convert the false into the true. Why should we adhere blindly to a system that had its origin in times of grossest ignorance? Why venerate relics of barbarism? Whenever the subject of the *modus operandi* of drugs is thoroughly understood, there will be reason abroad which no man can gainsay why no drugs should ever be taken. Let this knowledge become general and it will come to pass in a few years that drugs and drugging shall come to an ignominious end. The drug stores will be closed and the pharmaceutical factories will have to shut down.

Normal activities and developments require normal conditions as essentials. When these are consistently and adequately supplied, the most perfect development is attained. On the other hand, the absence of perfect adaptations or physiological conditions is the chief source of all the faulty developments and inharmonies that abound in nature. Let us examine more closely the relation of drugs to the living organism. "The direction of our investigations," said Dr. G. H. Taylor, "in order to learn the science of life, and to promote the interests of health, is to study the usages of matter in the organized body, and the relations of matter endowed with life, to that which is extraneous; certain qualities of it establish a mutual affinity, and the acts of vitality are connected therewith, while all other qualities bear an antagonistic relation to the organic welfare, and are only capable of bringing its forces out in defense of its integrity."

"When the qualities of matter and the functions of life are better understood, and when it is seen *how* all its endowments flow from qualities inherent in the matter of which the living thing is composed, set in motion by certain suitable relations--then it may be more easily seen that neither the possession nor restoration of health can flow from any extraneous chemical agency, but always and inflexibly from the maintenance and restoration of the necessary conditions, and these are connected with the will and the deeds of him who craves the boon. It will be seen that no matter what may be the attending accidents of medicines, the cure is but slightly connected with them."

The living organism has its own way of doing things and does these with its own materials. For example, many efforts have been made to supply the body with parts from foreign sources. These have been

unsuccessful, as the body rejects alien cells. Blood that is transfused is treated as a foreign substance and expelled. If it is sought to graft a piece of skin onto some part of the body, it may be done only if it is from the one receiving the graft. An organ from the body of another cannot be grafted onto it. The exception to this rule is seen in the case of identical twins and even this is not always successful.

If we consider non-living substances, we, discover the same thing to be true: the body can make use of only certain usable substances. Materials that cannot be metabolized-substances that cannot be transformed into cell substance--are of no possible use to the organism in either a state of health or in a state of disease. The presence of such substances in the body can serve only as disturbing elements. They are foreign bodies and must be expelled. Any substance that cannot be transformed into living structure is a poison and must be resisted and expelled if it is taken into the body or applied to its surface. The processes and actions by which the body resists and expels these substances are commonly mistaken for the actions of the poisons (drugs) and are not recognized as defensive actions of the body.

Even useful substances have to be specially prepared by the body itself before they are fit for entrance into the blood stream. The process of digestion reduces complex substances that we call food to certain assimilable products before they are fit to enter the blood. Protein, as essential to life as it is, is a virulent poison if introduced directly into the blood without first undergoing digestion. Amino acids, when introduced into the veins in an effort to feed a sick organism, are followed by anaphylactic symptoms, damages to the kidneys, progressive loss of weight and other symptoms which indicate that the amino acids are not metabolized. Evils of a similar kind follow the intravenous injection of glucose. When we try to by-pass the digestive system and feed the body in some other manner, we run into difficulties.

A substance is not usable merely because it is a constituent of the body. Nitrogen and carbon, as such, are non-usable. The body can use proteins and sugars, but it cannot use free nitrogen and carbon. It uses iron, calcium, sulphur, phosphorus, etc., only in certain organic compounds and is poisoned by each of these elements if taken as such. Even oxygen can prove hurtful, as was found in the incubation care of premature infants. The process of extracting oxygen from the air is unquestionably one that is subject to as well-defined laws as the assimilation of solid matter and all efforts to flout such laws must end in disaster. In the early part of this century a method was devised to introduce oxygen directly into the blood, by-passing the lungs, as a: means of curing disease. It proved to be as abortive as were all other methods designed to flout the normal order.

Every substance in the earth has a definite relation to the living organism--either it may be used to build and maintain the organism and carry on its functions, or it may not. If it is usable, it is food; if it is not usable, it is, so far as its relations to the organism are concerned, a poison. When extraneous substances and conditions are brought into contact with the living organism, it must act in relation to them in one of two ways:

1. If they are useful materials, to appropriate and utilize them.
2. If they are non-usable materials, to resist and expel them.

This principle must explain the phenomena attendant upon the administration of all drugs which are supposed to possess *remedial properties.* As drugs are not food--this is to say, they cannot be transformed into cell substance--the body must resist and expel them. These resistive and expulsive actions involve, not merely the use, but the expenditure of the energies of the organism, thus leaving the body exhausted of functioning power.

Man has so long disregarded the true adaptations of matter to fulfill the organic wants that one is scarcely to be found that is not embarrassed and debased by influences counter to his perfect development and highest good. The physiologist knows no power in the living organism that enables it to synthesize living tissue or to generate functioning power out of the elements of drugs, nor of any power, either in the drug or in the body, that enables it to use drugs to remove the cause of disease or to repair damages. He is well aware that they are only means whereby tissues may be destroyed or damaged, functions impaired and the body exhausted in a very unnecessary and wasteful manner.

If disease so changed the body as to make a demand for drugs and in a way that would enable the body

to use the drugs, there might be some excuse for their administration. But disease makes no radical change in the living organism. That which the body cannot use in a state of health, is equally nonusable in a state of sickness. If it cannot synthesize tissue and generate functioning power out of drugs in a state of health, it is equally incapable of doing these things in a state of disease. Only that which is useful to the body when it is well can be of service to it when it is sick.

Our principle is either true or false. If it is true, the whole system of giving drugs to *cure* disease ought to be abandoned as unscientific and deadly. If our position is false, it should be met and refuted by men of science. Think of a man taking arsenic until he is blue, for a disease caused by wrong life, or a delicate female made to take calomel until every tooth in her mouth is loosened and she is forever after diseased, and you will understand why we object to the drugging system. Drugs goad and torment--they are tormentors, not restorers. It used to be said that patients were drugged up hill, but in sober reality they were drugged down hill.

Physicians gave their patients "strengthening medicines" to increase their strength, the delusion being quite common that *strength* actually resided in poisons. The veriest horse that knows how to eat oats knows better. Of course, those so dosed did not grow strong, as they ought not have grown; but on the contrary, the more their sick organisms were fretted and worried by the foolish manuvering, the weaker they grew, until at length their functions were almost too feeble to carry on. What is the greatest wonder: that some people have died from such treatment, or that any person has lived in spite of it?

The smallness of the "success" of medical men is due, in large measure, to the unfitness of their "remedies." They are not remedial in character. They are wasteful, rather than conservative of the energies of the body. They possess no useful elements to supply the body. Their balance is on the wrong side of the scale and they weigh on the sick like a horrible nightmare on a disturbed sleeper. If a patient cannot get well without drugs, he should know that he cannot get well with them. Indeed, the sicker he is, the greater is the need to avoid drugs.

We read occasional reports of deaths due to carelessness on the part of pharmacist, nurse, physician, surgeon or anesthetist, although these reports probably do not reveal all instances of such deaths that occur. They are generally regarded as "natural exigencies of the healing art," according to orthodox science. Of course, there is no quackery about them; but let somebody die under the care of somebody other than a medical man and the *savants* of the medical school pounce upon the "responsible" individual and his mode of care like a wolf pack upon a wounded deer or like vultures upon a dying lamb.

Now the fact is that these accidental deaths under medical care are but a bagatelle when compared with the numbers of deaths that occur that are the direct result of the regular and approved administration of the healing art according to *medical science.* The most obvious fact in the world is that non-medical quackery in the hands of the most illiterate is not half as dangerous as medical quackery in the hands of the best minds of the medical profession. A man can endure a great deal of cold water or chiropractic thrusts or Christian Science jollying without dying. But the poison of the profession tends to kill always. The idea that *medicines* differ from poisons only in the size of the dose is too ridiculous for serious consideration.

We unhesitatingly declare that if physicians would cast their diplomas into the fire, their drugs into the sea and close their offices, an untold amount of suffering, grief and premature dying would be avoided. As was said by a noted British physician of the last century: if there were not a single physician, surgeon, druggist, man mid-wife, nor drug in all the world, there would be less sickness and less mortality than otherwise--hence the wisdom Shakespeare puts into the mouth of one of his characters: "Throw physic (drugs) to the dogs; I'll none of it."

Kittredge says in the *Journal,* 1844, that he once thought that drugs were "absolutely necessary to man's salvation from sickness," but he adds, "I have learned better things in my old age. For fifteen years I groped in darkness, wondering why my patients did not oftener and sooner recover ... I know now . . . Drugs are not only unnecessary in sickness, but decidedly injurious. This to anyone who has reflected on the subject unbiased, will be apparent; for all drugs are irritants, and foreign to our nature, and cannot but disturb the harmony of the system; and when anywise powerful, produce mischevious effects that often result in the crippling of the energies of life . . ."

There is no healing potency in poisons. If the sick get better after taking drugs, it must be something else that helps them, as drugs cannot under any circumstances give assistance. There are two ways of accounting for recovery in every case where drugs are administered: first, the patient may have recovered by virtue of his own inherent powers of healing, alone; or it may be assumed that the drug restored him to health. A third explanation may assume that the drug assisted his own powers of recovery. As there is no healing potency in poisons and nothing in them that can assist the patient's own powers of recovery, it must be accepted as a fact that patients recover by virtue of their own inherent powers of healing.

If they are to survive, medical men must continue to teach that drugs act on the living system by virtue of certain *inherent affinities* which each possesses and exercises upon certain organs and structures in preference to others. If this doctrine is false, there is no basis for the drugging practice. Absurd as it is, this doctrine is the very foundation of their pharmacology and therapeutics. Deprived of this fundamental and first premise, they have nothing left to stand on.

We would say that their system is too comprehensive, that it comprehends too many substitutions and fallacies promiscuously jumbled together without any recognizable principle.

It may be assumed that medicine has made great advances during the past hundred years and what we have said above about the relations of drugs to the living organism is no longer true. This would be to assume that there have been fundamental changes in nature herself. It may also be assumed that what is said above does not apply to the new drugs. This would be to assume that the body possesses two sets of relations to non-usable substances. Current facts deny both of these assumptions. The *Statesman* (New Delhi, February 1, 1967) quotes C. E. Paget, M.D., a British pharmacologist of repute as stating in a lecture on "Withdrawal of Drugs from Medical Practice," delivered before the Delhi Medical Association that, not only are modern drugs used wrongly, but that their "pharmacological, clinical and statical" trials are too short to reveal their "dangerous potentialities." He stated that if a balance sheet of the risks and benefits of modern drugs were drawn up, the risks would certainly be bigger. He said also that this fact has become markedly clear since the pharmaceutical "explosion" in 1950.

Testifying before a Senate investigating committee in 1967, Prof. Leighton E. Cluff, M.D., of the University of Florida, told of the findings of a six-year study of what he called adverse drug reactions. Prof. Cluff launched one of the first major studies of adverse drug reactions in 1962 while at Johns Hopkins University. This research revealed that:

"Four to five per cent of patients admitted for hospital medical service are found to have adverse drug reactions while three to four per cent are admitted because of drug illness. Ten per cent experience ill effects from drugs while hospitalized.

"Twenty per cent of adverse reactions are caused by non-prescription drugs such as laxatives, analgesics and antacids. Eighty per cent are caused by such prescription items as penicillin, digitalis, sedatives and tranquilizers.

"Drug illness involving medical service was the seventh most common cause of hospitalization."

Cluffs investigations covered drugs used in treating sickness in more than a thousand patients in three major hospitals in the United States. They also showed that of the five percent who were hospitalized for illness caused by drugs, 30 percent suffered further illness from drugs given in the treatment of the drug-induced disease while in the hospital. The increase in what are called iatrogenic diseases has been very great during the past few years.

It is estimated that some 5,000 new drugs have been introduced during the past ten years and that 400 new drugs are coming off the assembly line every year. It is the view of Dr. Cluff that unless means are set up to control this drugging, there is danger of a great increase in the amount of drug-induced disease.

The London *Times* for November 22, 1966, carried a story headed "Cortisone led to patient's death," and reported: "After a year's treatment with cortisone, a woman suffering from arthritis died," and the pathologist "said the dose of cortisone given had been a normal one but it had contributed to her death.

The question of the risk of side-effects was always a difficult decision facing a doctor " It seems to the writer that the question of side effects should be considered by the patient and the fact that these side effects are on the increase should convince the intelligent reader that the relation of drugs to the living organism is not friendly.

What has all this production of disease and death to do with healing? Are we so constructed that we have to take our lives in our hands and risk death in order to recover from illness? Or is it that the medical profession bears a false relation to society and its methods are killative rather than *curative?* Concerning this last question, we may consider the employment of penicillin in gonorrhea. There has been a tremendous increase in this disease in recent years, especially among teenagers, who have been led to believe that one or two doses of penicillin is a "sure cure" for the disease. The failure of penicillin to remedy gonorrhea is now everywhere admitted; but the explanation for the failure, which is offered by the medical profession, is false. They state that the germs of gonorrhea have developed resistance to penicillin, so that it no longer kills them. Penicillin did not remedy gonorrhea from the outset.

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Biodynamics vs. Pharmacodynamics

CHAPTER XLIV

For generations it has been asserted that drugs, food, drink, etc., act upon the living organism and that disease is a something which seizes upon the organism and seeks its destruction; in a word, it is an almost universal belief that the living organism is an object to be acted upon by extraneous matter, and not the actor which seizes and appropriates or rejects food, drink, drugs, etc., and that the process of rejection is the essential disease. Due to the folly of supposing that the nature of life on the one hand and of drugs, food or drink on the other is changed because the individual has become weakened, it has proved difficult to immediately abandon the belief in the action of lifeless things.

While in health it may be admitted that the organism acts, in disease it is said the drug acts or the food and drink act upon the organism. The folly of thinking that the relations of lifeless substances to the living organism are changed merely because the organism is sick or weak should be patent to every intelligent individual. The *Hygienic* theory that, in the relations between living structures and lifeless matter, the living is active and the lifeless passive, always, was first advanced by Dr. Trall in 1850. This principle is a vitally important one and must sooner or later be accepted by the men of science.

Writing in 1865, the famous French physiologist, Claude Benard, said: ". . . when we reach the limit of vivisection, we have other means of going deeper and dealing with the elementary parts of organisms where the elementary properties of vital phenomenon have their seat. We can introduce poisons into the circulation, which carry their specific action to one or another histological unit . . . poisons are veritable reagents of life, extremely delicate instruments which dissect vital units. I believe myself the first to consider the study of poisons from this point of view, for I am of the opinion that studious attention to agents which alter histological units should form the common foundation of general physiology, pathology and therapeutics."

Benard's idea that poisons act upon histological units and that a study of such actions would supply a foundation for therapeutics, while expressing a popular view of life, is the exact opposite of the *Hygienic* view. Trall had previously employed the phenomena of drug administration as a means of studying pathology, but it certainly has no relation to physiology nor can it be said to have any possible connection with any system of therapeutics that could be based upon physiological principles. Today one sees such unscientific statements as "a potential therapeutic agent (a drug) is first screened for biological activity in laboratory mammals." How any sane man can seriously speak of the biological activity of a drug (a poison) is beyond the writer's comprehension. The only possible actions of which drugs are capable are mechanical and chemical and, as these relate to the living organism, such actions are destructive.

It was generally admitted that "the operations of medicines (drugs) are not susceptible to that precise demonstration peculiar to the sciences of chemistry and mathematics . . ." It was also admitted that, though a drug "may fulfill an indication so far as its sensible action is concerned, it may still be doubtful whether it has accomplished a single point in the curative process of the case; in fact, we know that it has not unfrequently happened that medicine has essentially aggravated the disease, without any suspicion, at the time, that it had any relation to the change which followed its operation." This simple confession of ignorance of how drugs act was repeated over and over in many forms.

The celebrated Dr. Meigs of Philadelphia wrote in his letter on *Woman and Her Diseases:* "I conceive that we have not and cannot ever reasonably expect to have any very clear notions as to the *methodus operandi* of any medicine. Who can explain the cathartic power of jalap as contradistinguished from the emetic force attendant upon the general constitution of calicea ipecauna, or the tartrate of antimony and potash?

"We are well acquainted with the facts, the phenomena; yet to say why tartar emetic shall produce vomiting, while sulphate of magnesia shall have the effect of a purgation, is beyond the power of the human mind . . . I do not consider myself as credulous in believing that iron has a special affinity to invigorate the tissues composing the paermatosic membrane; certainly not more so than ten thousand American physicians, who confidently administer five or twenty grains of calomel, with the utmost certainty of exciting the liver into greater or more healthy activity; squills to excite the mucous follicles of the bronchi; nitre to arouse the kidneys, or belladonna to arouse the skin; and strychnia to wake up again the torpid muscles of a paralytic leg or arm. In the *methodus operandi* of drugs and medicines, all our cogitations are purely empirical."

In its issue of March, 1853 (page 672), the *New Orleans Medical and Surgical Journal* says: "We are free to confess that the profession knows, in reality, little or nothing of the modus operandi of therapeutic agents; from the most obvious effects of medicines, we are too ready to conclude that we appreciate their full influence upon the economy; forgetting in the meantime, all those molecular changes which are undoubtedly brought about by every perturbating agent which may be applied to, or introduced into the living system. To know that one medicine acts as a cathartic, another as a narcotic, and so on, is indeed to restrict our information to a few simple self-evident facts; but to go beyond this limit--to fathom the mysteries of therapeutics, *hic opus, hic labor est*--this is the Gordian knot, which as yet we are not prepared to untie. Perhaps the day is not far distant, when, by the aid of organic chemistry, we may be made acquainted with the influence of medicinal substances upon the organism; at present, however, we must be content with the knowledge of a few isolated facts and look forward to the future for more reliable information on the subject of therapeutics. The great discrepancy of opinion which everywhere exists on the peculiar action of most medicinal substances, proves conclusively how little we actually know of therapeutics."

It must have been a pleasant feeling to have been able to look forward, hopefully, to the future to demonstrate that they were right and to have no doubts about the outcome. To be able to rely upon the "self-evident facts" that "one medicine acts as a cathartic, another as a narcotic, and so on," and to be secure in the blind belief that in the near future, organic chemistry would give them a basis for their therapeutics, must have steadied the hand that poured the poisonous drugs; but it provided no safety for the patient.

During the more than one hundred and fourteen years that have slipped into the past since the foregoing quotation was published, chemistry and physics have undergone radical revolutions. Two whole new branches of chemistry--physical chemistry and biochemistry--have come into existence. The revolution in physics has given us nuclear physics and her sister, high energy physics. Physiology and biology have grown to maturity; pathology has come of age. Physicians, biologists, chemists, pathologists, pharmacologists, clinicians and therapeutists have performed millions of experiments trying to determine how drugs act or operate. But with all the changes that have taken place, with all the advancement that has been made, with all the study and investigation that have been done, drugs remain as actionless today as they were in the middle of the last century. How they act, if they act, is still a deep, dark secret.

For a slightly longer time, the *Hygienic* explanation of the *modus operandi* of drugs has been before the world; but the men of science have been content to ignore it. It seems to the present writer that the time is ripe for the whole subject to be made public and subjected to the judgment of an enlightened community. But, it may be asked, are the modes of action of drugs not known? Has science not discovered the answer?

In the meantime, the *Hygienic* position and explanation have been before the world for more than a hundred years. Trall gave, in the first edition (1851) of the *Hydropathic Encyclopedia,* what *Hygienists,* from that day to this, have contended is a true explanation of the *modus operandi* of drugs; but the profession, recognizing in this explanation, the complete destruction of the drugging practice, has persistently and consistently rejected it.

No pen can exaggerate the importance of ascertaining the truth about this subject. For, if our position is correct, it logically follows that all drugs are absolutely poisonous and not to be introduced into nor applied upon the body. The inference from this very plainly is thakt the true mode of caring for the sick must be predicated on the employment, entirely, of some other materials.

Our position is simply this: *the symptoms or phenomena which result when a drug is taken into the body are activities of the living structures in resisting and expelling the drug, and not the actions of the drug. Hygienists* teach that, instead of drugs acting on the living structures, *medicinally,* the body acts to resist and expel the drug; hence, they are injurious nuisances and not remedies. Admit the truth of this principle, and *medicine* is a dead system.

Whether lifeless matter acts on living structure or living structure acts on lifeless matter is a problem in natural science. It is not a medical question. It may be considered by the biologist, the physiologist, the physicist, the chemist, even by the mathematician and the mechanic, as much as by the physician.

The digestive system acts on the food substances supplied it and, in its cooperative capacities, prepares the food proper for absorption, rejecting the residium as a foreign mass incapable of subserving organic purposes. Foods do not "act as aliments of the organism." A wholesome meal would be just as active in the stomach, the function of which is impaired, as it would be in a healthy stomach; but it would not digest. A meal is digested in proportion to the functioning power of the stomach and not in proportion to the activity of the meal. It is easy to perceive that the parts of the living organism--hands, teeth, tongue, jaws, glands of the mouth, stomach, intestines, liver, pancreas, veins, lacteals, heart, arteries, etc., always act on the food to convey it to the mouth, chew it, swallow it, digest it, absorb and circulate it and make it available for the cells to assimilate it.

If we introduce into the healthy digestive tract a ripe, mellow apple, a whole series of actions follow, by which the apple is digested and assimilated. In the mouth, the apple is chewed and mixed with saliva. It is swallowed and reaches the stomach, where its digestion proper begins. Digestion, secretion, propulsion, absorption, circulation and assimilation (processes by which the apple is made into tissue) are all work of the living system, not of the apple. Introduce into another healthy digestive tract a dose of milk of magnesia and a whole series of actions follow, by which the drug is cast out of the system. Secretion, propulsion, diarrhea (processes by which the drug is expelled), are actions of the living system, not of the drug.

Neither the apple nor the drug do anything in the digestive tract; but the organs of this tract, perceiving the relations of these two substances to the vital structures, the vital instincts recognizing in the one a food, in the other a poison, institute the appropriate actions in each instance. The one, a food, is digested and absorbed, circulated and assimilated; the other, a poison, is recognized as a foreign, unusable and injurious substance, and the whole organic community cooperates in expelling it. The living system carries it out of the body and ejects it by the bowels. This expulsion is called the *cathartic action* of the drug; whereas, the action is entirely that of the living organism. As well speak of the *digestive action* of the apple as of the *cathartic action* of the drug. *Catharsis,* like digestion, is vital action. The drug is as passive in the digestive tract as is the apple.

The vital "living" organism recognizes the presence of non-usable substances and institutes measures to expel them. The action that results is not that of the drug on the system, but of the system on the drug. This principle may explain the phenomena attendant upon the administration of all drugs which are supposed to possess *remedial properties.* These actions involve, not merely the use, but the expenditure of the energies of the organism, thus leaving the body exhausted of functioning power. The dynamic capacities of the human system, as these vary with the conditions and circumstances of life, are reduced by every dose of drug that is administered.

We may correctly say that whatever is taken into the domain of life that is incapable of supplying nutriment for the living tissues, is speedily ejected, without compromise or reserve, through the most convenient channel. Thus it is that, when deleterious (unusable) substances are taken into the body, either as food or drink, it becomes necessary that conservative action should interpose resistance and expel the injurious material. So long as life lasts, this is to say, so long as the power of resistance remains, active resistance to incompatible substances will be manifest when they are taken into the body. The powers of life manifest a deep interest in removing toxic substances from the body.

Trall's premise was simply that the alleged *remedial agents* of the medical system do not act upon the living system, but that those effects which were called *remedial* result wholly from the action of the living

system upon or against the *remedial agents.* His premise was simply this: in the relations between the living organism and lifeless matter, lifeless matter remains wholly quiescent and passive. Action is the greatest characteristic of life; inertia is the leading characteristic of lifeless matter. According to this principle, all the actions we witness when a drug is administered are actions of the living system.

Our mental vision often suffers from great errors of refraction and our preconceived notions frequently prove to be distorting media that sometimes cause the most sublime truths to appear absurd. Our general proposition involves the relations of those substances that we call drugs, chemicals, "remedies," medicines, foods, etc., to the structures of the living body. It does not involve a denial of what is called chemical action, which is but the union and disunion of elements. When elements unite, such chemical action means the formation of a third substance out of the union of two. If this were to take place in the living organism, this is to say, if the drug should combine with the cell or with some of the constituents of the cell, this would be the death of the cell. Cells resist such unions so that they can occur only after the cell is dead.

Our position is that drugs do not act on living structures. We have nothing to do with the relations of such substances to dead tissues. A dead body is not a living one, and the relations of chemicals to dead tissues are not identical with their relations to living structures. In the one case, there is chemical affinity; in the other, there is vital antagonism. The living organism protects itself from the injurious agency of all material things-no chemical can act on organized bodies so long as they continue alive. We do not deny chemical actions on lifeless tissues. But let us think for a minute of the essential distinction between dead or lifeless and organic or living structure. Living structure acts on or appropriates or resists and expels lifeless materials-it acts upon lifeless substances. So long as the cell retains the power of resistance, it prevents the union of chemicals with its constituents.

It is the nature or property of lifeless substance to remain quiescent and do nothing. Inertia is its leading quality. Inertia, the tendency to remain forever in the same state and place, is its nature and its last and only property. Its property is a negative one. It may be moved or impelled as acted upon from without; it cannot move or impel itself.

Inertia is a principle indelibly stamped upon every constituent part of the universe as an indispensable necessity. The countless multitudes of suns and planets that roll through the heavens; the ocean's waves cleaving, clashing, sporting with the clouds their mists have formed; these clouds sailing on the wings of the wind, to be sprinkled by electric flash over the earth's green carpet, livening up all nature, then murmuring off along the valley, trickling down the mountain's craig or rushing headlong over the waterfall, seeping into the sandy bosom of the earth and gushing forth in bubbling fountains to return murmuring, spouting, splashing, dashing, sporting back into the "parent ocean," there to be again lifted up into the clouds to fall again--in all this vast universe of ceaseless motion, we see but the principle of inertia in operation.

Action, as distinct from mere motion, we meet with only when we come to view organized and living bodies. In the growth of plants, the sporting myriads of winged creatures, the happy choir of feathered warblers, the buzzing, creeping, roaming, running, jumping, dancing multitudes of earth, we see action. Here we see beings that are organized and energized for action. Even in the countless contrivances of man--the iron horse, driven by steam; the motor responsive to domesticated lightening; the internal combustion engine that is harnessed to use the explosions of gasoline; the linotype machine that matches the human body in its complexity; the printing press that is the "archimedean lever" that lifts mankind upward--in all these we observe motions that are somewhat analogous with the actions of the living body. For action in its purest and truest form, we must turn to living structures for our examples.

Living structures have the property or power of action and nothing else does, this being one of the distinctions between lifeless and living things. The nature of living structure is to act; the property of living organs is action. Living structures act on everything else, to use or to resist. This should be clear enough.

We insist upon the full recognition of the fact that the living organism is a dynamic and initiating being and is not merely the plaything of inanimate existence around it. The so-called scientific world has gone overboard for the concept of environmentally-conditioned action and fails to recognize the genuine source

of activity.

The muscular and nervous tissues are the instruments of action. To the physiologist, the organs of the body are animated and active, every fiber pulsating with sensibility and endowed with the power to act. The conclusion is forced upon us that the characteristics of each organ are involved in the action which produces the results in all cases. The wonderful delicacy and definiteness of actions which are constantly occurring in the body imply a corresponding delicacy and definiteness of structure. We do not have to assume a wholly mechanistic view of the living organism to recognize the fact that the peculiar actions of the body are grounded in its peculiar structures. If we concede that the peculiar, definite and delicate actions of the many varied structures of the organism rest on the structural modifications there existing, we are forced to recognize that those many and varied actions that have been mistaken for the actions of drugs are not drug actions at all, but actions of the highly differentiated and acting organism. Drugs lack the structural arrangements and the energies essential to such actions.

The medical world has labored long enough under the delusion that lifeless matter has the property or power of action. Physicians say their drugs act; *Hygienists* say that they remain passive. In every case, when the "action of a drug" is explained, the act described is that of the living organ in resisting and expelling the drug. The error has always been that of placing the action in the lifeless substance; whereas, it is in the living, acting, perceiving organs themselves. In all this sensing or perceiving and the resulting actions, the outer world is entirely passive; the living structure alone does the acting. Let me repeat the *Hygienic* principle that: *in the relations between living structure and lifeless matter, the living is active and the lifeless passive;* hence, in its relation to the living organism, the property of lifeless matter is inertia. This has nothing to do with the relations of lifeless matter to lifeless matter. One is a vital problem; the other is a physical or chemical problem.

Pharmacologists speak of the effects of drugs and the actions of drugs as one and the same thing and tell us that the duration of action of a drug depends in part on the extent to which it becomes localized in various tissues, but they have no means of knowing in most cases what the drug concentration in an organ amounts to. They know only that to occasion its characteristic effect, a drug must gain access to the tissues of the body in sufficient concentration to cause the tissue to resist and expel it by appreciable action.

If it is administered orally, the drug must first be absorbed from the intestinal tract and carried by the blood stream to the various tissues of the body. When administered by injection, drugs have to be picked up by the blood at the site of injection and carried throughout the body. When a poison is brought into contact with the living tissues of the body, by medium of the circulation, each tissue acts to resist and expel it, thus giving rise to what are mistaken for the many side actions of drugs.

When a pharmacologist lists the effects of a drug, he lists the symptomatology and pathology of an iatrogenic disease. This is not only true when he lists what he classifies as side effects and toxic effects, but it is equally true when he lists what he calls *physiological* and *therapeutic* effects. What physicians mean by iatrogenic diseases are such things as hepatitis, phlebitis, asthma, aplastic anemia, leukemia, cataract, cancer, etc.; but these are simply more or less localized symptomatologies and pathologies growing out of a systemic poisoning. They by no means represent all of the symptoms and pathology that result from the poisoning.

Thus, however administered, drugs come in contact with the tissues generally; consequently, all talk of "sites of action," "target organ," "target site," "tissue distribution," "reactive site," and other such expressions are but jibberish by which the technical mind combs the wool of illusion, first, over its own eyes and, then, over the eyes of others.

The great number and complexity of differentiated structures in the human organism, each possessed of its own particular behavior pattern, makes possible a great number and variety of actions as the poison, circulated by the blood, comes in contact with the body's different tissues. It is the complexity of human structure that makes possible the many and varied types of action that have been mistakenly credited to drugs, which possess none of the structural complexity upon which must rest so many different activities. It is this great complexity of structure and the resulting diversity of actions that makes possible the many alleged side actions of drugs.

Pharmacologists say that "the duration of action of a drug depends in part on the extent to which it becomes localized in various tissues." This statement might have some validity if it could first be proved that the drugs have any action. But it is more correct to say that the duration of action of the body in resisting and expelling the drug depends in part on the extent to which it becomes localized in various tissues. And, living tissues, by virtue of their own inherent power to do so, resist all chemical actions and reactions with chemical substances that may be taken in. So long as they are alive, they continue to resist. Only when they are no longer alive can chemical unions occur. We do not dispute that lifeless matter can act chemically and mechanically. Our position is simply this, and has been from the time Trall first stated it: in the relations between lifeless matter and the living organism, the living organism is the actor.

We explain the alleged actions of drugs by saying that they are actions of the body. When a drug is expelled through the kidneys by diuresis, it is misbranded a *diuretic.* It is wrongly said to act on the kidneys, when the opposite is the truth. Diuresis is kidney action in expelling the drug.

The effects of their drugs may be choleresis, emesis, diarrhea, diaphoresis, diuresis, expectoration, tonicity or feverishness, antiphlogistication, etc.; but how are these effects explained? How do you explain a diarrhea, except in terms of bowel action? How do you explain diaphoresis, except in terms of sweating? Do the various drugs act, as we are taught, on these various structures, to produce these effects, or do the structures act on the drugs to expel them? Is the stomach a "receptor site" for a so-called *emetic* and the bowels a "receptor site" for a so-called *cathartic?* Is it reception or expulsion that we witness? Is it drug action or vital action that is observed?

Pharmacologists ascribe the so-called action of a drug to its *selective affinity; Hygienists* admit the *selection,* but insist that it is the living organism and not the lifeless drug that makes the selection. If it be asked: what difference does it make which acts and which is acted upon, we reply: no truth can be insignificant to the scientist. Rather, it is true that to be *exact and observing,* and *correct in describing what we have observed,* is the all-important quality of the scientific mind, which well knows that mighty consequences often hang upon apparently insignificant trivia.

"Drugs have a *modus operandi,"* it was frequently asserted; "and whether the system acts on them, or they on the system, what's the odds?"was frequently asked. We can only marvel at such reasoning: as though ignorance can be just as valuable as knowledge: as though it makes no difference to our conduct whether we recognize that the man eats the potato and not that the potato eats the man: whether it makes no difference that it is the living organism that appropriates and rejects things in or from its environment, or these appropriate andreject the living organism. To us, the subject is all important; the progress, the very salvation of the human race is involved in it. Unless we start right, we travel forever in the wrong direction. On the contrary, if our first premises are correct, we are on the right road.

When a man acknowledges the principle and then asks: "Of what practical use can it be?" he evinces a lack of sagacity which can be excused only by crediting to him inferior powers of observation. To know that a certain fact, theory or proposition is true, is sufficient in itself to commend it to our consideration. Does it make any difference whether the *cathartic* acts on the bowels or the bowels act on the drug, so long as a copious bowel movement results? The difference is precisely that between good and evil. Does it make no difference in a case of gangrenous limb, whether the gangrenous portion casts off the body or the body sloughs off the gangrenous portion? In teaching physiology, does it make no difference whether the muscles move the bones or the bones move the muscles, whether we say the stomach digests the food, or the food digests the stomach?

If, as we contend, the body acts against drugs, as it acts against all injurious substances, all incompatibilities, all poisons, then the inevitable inference, that no sophistry can destroy, follows that all drug medication is a war upon life.

The significant truth that the living organism acts upon lifeless or extraneous materials and not *vice versa,* is a fact exactly analogous to and quite as important as if the earth revolved around the sun and not contrariwise. It is the living organism, as it is the sun, that is the center of all life, power, action, in its own domain, and not the earth or the inert things of the earth.

It was once a self-evident truth that the earth is flat and that the sun moves around the earth. A wealth of facts were adduced to prove that the sun, the center of our solar system, revolves about the earth and rises and sets each day; but perhaps the most convincing proof was the fact that people could see, with their own eyes, the sun rise in the East each morning, travel across the heavens each day, and set in the West each evening. With an equal show of reason, the pharmacologist can prove that aconite or gamboge acts on the muscular coats of the bowels. Like the older astronomers, they are guided by appearances; but appearances are deceptive.

It was certain to our ancestors that if the earth rolled over instead of being "kept right side up," all the water in the oceans, lakes, rivers and ponds would spill out. They were deceived by appearances. They knew nothing of the phenomena of gravitation. In like manner, men are deceived by appearances when they talk learnedly of the actions of remedies. Having no conception of what Trall called the "law of relation between living and dead matter, between the human body and drug medicines," they lack a means of interpreting what they observe.

Medical men do not doubt that their drugs act. Indeed, do they not see the actions they perform? They know that *tranquilizers* calm the emotional and steady the nerves of the irritable, because they see it. They know that *cathartics* move the bowels, for they can see the movement; they know that *diuretics* act on the kidneys, for they can see the action. But physicians and pharmacologists have got the cart before the horse. They have reversed the whole order of nature and have left out of their account the real actor--the living organism. They have given us the very opposite of truth. They have made the drug the actor and the living tissues the things acted upon--drugs the subject, life the object--the former more valuable than life is itself, because life is subordinate to them. They have mistaken one of the occasions for action as the actor or for the action itself.

Physicians and pharmacologists speak of the properties of drugs, describing such properties as an *emetic* property, a *cathartic* property, a *diuretic* property, a *narcotic* property, a *soporific* property, and even discuss the *physiological* properties of their drugs. A *property* is a characteristic quality belonging to a person or thing. Bodies possess certain qualities or properties which are called essential because they are invaribly found in them; these essential properties are impenetrability, extension, figure, divisibility, attraction, inertia, etc.

Matter has physical and chemical properties, but no physiological properties and cannot perform physiological actions. No chemist and no physicist has ever discovered the alleged medicinal properties that various drugs are supposed to possess. These are fictions of the medical imagination and grow out of mistaking the actions of the body in resisting and expelling drugs for the actions of the drugs. For example, a *cathartic* is a *cathartic*, not because of any alleged *cathartic* property of the drug, but because the bowels expel it by catharsis. A *powerful cathartic* is such only because the body expels by a powerful action.

Every truth is explainable and we can never know it to be a truth until we can explain it. When it is asserted that we know that drugs act, but we cannot explain how they act, it is revealed that what is said to be knowledge is but a belief. The point is assumed that ought to be proved. Their argument amounts to nothing more substantial than: "We know they act because we know it."

It is important that we have clear ideas of the relations that drugs hold to the living organism and that we understand that living tissues are not reagents that drugs may act chemically upon these. The actions seen and attributed to the lifeless, inert drugs are actions of the living structures.

When extraneous substances and conditions are brought into contact with the living organism, it must act in relation to them in one of two ways:

1. If they are useful materials, to appropriate and utilize them.
2. If they are non-usable materials, to resist and expel them.

It thus appears that there are two modes of vital action, each of which must be maintained, or dissolution is the legitimate and immediate result. These are *preservative* and *conservative.* So wonderfully diligent and

constant is the conservative action of the organism that many physiologists have thought that "life is a forced state."

When the physiologist mistakes the feverish excitement and heat that constitute the process of expulsion of alcoholic beverages for the *invigorating effects* of this protoplasmic poison, he makes the same mistake as the physician and pharmacologist who attribute the actions of the body in resisting a poison to the poison itself. Precisely this same error is made by all those who think that tissues can be nourished and diseases *cured* with drug poisons.

When it is declared that "cocoa acts directly on the sensory apparatus in the same manner as does strychnine," we can accept the toxic character of cocoa, but not its alleged action. Practically everybody knows that alcohol will cause a man to hic and spew, lie down in the gutter, hug a lamp post, utter nonsense, vomit, even wallow in his vomit; but we are skeptical of the hypothesis that attempts to explain how alcohol "excites the exercise of thought." We are also skeptical of the theory that tea and coffee do the same.

In an effort to explain drug action, pharmacologists have come up with the idea that most drugs form reversible complexes with plasma proteins and with one or more intracellular components of cells. They say that these non-specific drug attachments provide reservoirs of drugs which are in dynamic equilibrium with the drug unbound in plasma. If it is true that these drugs combine with the proteins of the blood plasma, they destroy the suitability of these proteins for use by the cells.

An example of the destructiveness of drug unions with intracellular components is supplied us by the so-called anti-tumor drugs, which are said to be usually anti-metabolic, and which block the pathways of metabolism common to normal as well as neoplastic tissues. Their alleged anti-tumor *action* is explained by saying that, "in being metabolized, they become enmeshed in mechanisms essential to the normal economy of the body." For the same reason, so it is said, they are toxic. These drugs *act* by so impairing the normal processes of metabolism that they kill cells. In simple English, they are poisons.

The chemical combination of drugs with plasma constituents and with cell constituents cannot explain the alleged actions of drugs, for the reason that these combinations render action impossible. It was pointed out by Trall that when arsenic combines with the tissues, it converts these into dead, but fixed, chemical compounds. Certainly, there is no action, physiological or therapeutic, in *arsenate of flesh.*

Another explanation of the alleged action of most drugs used *medicinally* is that they change the intensity of body function by acting on physiological control systems, especially those that mediate the adaptive response of the living organism. In keeping with the medical notion that drugs have power to act, such drugs are designated pharmacodynamic agents. It is said of such drugs that they mimic or release hormones or neuro-hormones or that they serve to block the action, synthesis, release, storage, or metabolism of these hormones. In further explaining the alleged action of such substances, it is said that *untoward effects* are due to an exaggeration of the *desired action,* or to an unwanted effect on a second physiological control system.

When it is said that drugs act by acting on physiological control systems, the very thing that needs to be proved is assumed to be true. How explain the action of the drug on the physiological control system? To assume that they act by acting is not a solution to the problem before us. To call them *pharmacodynamic agents* is merely to embalm in technical jargon an ancient fallacy. From the *Hygienic* viewpoint, we observe biodynamics and not pharmacodynamics.

Medical students, studying in their *materia medica* what are designated the properties of all the poisons of the three kingdoms of nature, firmly believe everything they read of the *medicinal properties* of herbs and minerals, and become lost in wonder and admiration at their astonishing qualities and powers, and at the great array of *cures* with which the physician is equipped.

All manners of ingenious "incentives" to action are possessed by the medical profession--drugs to cause the stomach to empty itself, drugs to occasion violent bowel action, drugs to occasion diuresis, from the gentle *tonic* persuasives to the powerful *revulsives* and when, after such abuses, the offended organs cry

out in pain or fail in their functions, they have other drugs with which to silence the outcries and further goad the organs to action. The basis of our objection to the employment of these substances in treating the sick is the well established relation existing between the living organism and all extraneous substances, properties and forces.

Drugs can have but one primary effect, when introduced into or applied to the body, and this is the effect of bringing the forces of the body into activity in defense of the integrity of the body. The nervous system is a protective system of the general organism and, while it is unimpaired and filled with energy, no noxious substance can long be tolerated in the organism. In any action of the complex organism, there must first be the *decision,* what is to be done; then the nerves that control action must carry the *message* to the appropriate structures. These organs then act as instructed. Suppose, when an *emetic* is swallowed, the nerve wires get crossed and convey the message to the muscles of the lower limbs, then we would walk or run or kick or jump, but not vomit.

It may be no easy task to determine the precise *methodus mendendi* of the living organism in producing the many and varied phenomena which have been mistakenly considered *properties* of drugs--such as *tonic, astringent, emetic, cathartic, diaphoretic, diuretic, expectorant, narcotic, depressant, stimulant,* etc.--but if we can establish the principle of vital agency and can demonstrate it as a general cause, it will require no stretch of the imagination to accept it as the probable truth rather than endow inert drugs with mystical virtues.

The resident forces in the various tissues, acting in their preservative capacities against that which is unusable, hence hurtful in its relations with the living organism, give rise to all the actions that follow the administration of drugs. Vital resistance in order to self-preservation is the law. Hence, what we view is not the modus operandi of drugs, but the *modus operandi* of the vital organism. There is no such thing as the *modus operandi* of a drug. This term, when applied to drugs, is a misnomer; its use tends most certainly to lead the mind astray, since it expresses a fallacy.

On this basis, we do not say that cantharide has a "special affinity" for the kidneys, but that the poison is excreted through the kidneys; it has no *diuretic property,* but as a poison, is expelled by diuresis. So-called *cathartics* do not have a "special affinity" for the membranes of the alimentary canal, but are recognized by these membranes as unsuitable for entrance into the body and are expelled by catharsis. To express this as a law, we would say that, *resident forces in the various tissues, acting preservatively, expel the non-usable substances,* and this determines the *modus operandi* of all drugs.

The doctrine of the older pharmacologists that drugs *elect* or *select* particular organs or structures on which to act, either *therapeutically* or *toxicologically,* constitutes the basis of the whole system of drugging the sick. The *Hygienic* doctrine, as developed by Trall, is the exact opposite of this. We say that the living system, the organism itself, elects or selects the particular structure or organ through which it can best expel the drug.

It is a law of organic existence that living structures reject, resist and expel all injurious substances, that they shall act on the defensive, that they shall protect themselves from injury, and maintain so far as possible an equilibrium of organic and nervous forces--hence, the resistance and expulsive actions when any incompatible thing comes in contact with the living structures, the resistance being in direct proportion to the degree of incompatibility, and in keeping with the power of action of the organism. In extreme cases of paraplegia, when the bowels and lower extremities are paralyzed, *cathartics* lose their "special affinity" for the bowels.

The actions of the living structures in relation to drugs determine the *properties* of the drugs--they are one thing or another, depending on the manner in which the body finds it expedient to cast them out. Some are ejected by vomiting, some by diarrhea, some by diuresis, some by diaphoresis, some by expectoration,etc. No greater blunder was ever made than that of having drugs act on the body.

Drugs will be expelled in the most convenient manner, through the most efficient channel. In all ages, medical men have mistaken these defensive and expulsive actions for the actions of their drugs. Their drugs have *acted* on the stomach, on the bowels, on the kidneys, on the circulation, depending on the

resistive and expulsive processes instituted by the body.

Suppose we apply drugs to a dead organism, which, as we know, is a bundle of useless inertia: will there be any action? No action whatever will be perceived, simply because the presence of the drug will occasion no vital resistance; and there is no vital resistance, because the dead organism lacks all power of resistance. Dead organisms do not act to preserve and to repair themselves. There is no living system to act and, hence, no action. Yet, the *properties* of the drug would remain the same.

If drugs are applied to the living organism, there will be increased action. If they are applied to the skin, there will be increased redness of the skin. The increased redness is caused by the increased amount of blood in the part and the increased blood in the part is sent there by the living organism to resist the drug. The phenomena of emesis, catharsis, diuresis, vesication, etc., cannot possibly occur in the dead organism. The dead body does not act to defend itself from or to cast out poisonous substances.

If we return to the past and view the phenomena resulting when a blistering plaster was applied to the skin, we get a graphic picture of the difference between the behavior of a living and a dead organism. If capsicum, Spanish fly, caustic potash, sulphuric acid, tartar emetic or a mustard plaster was applied to the skin of a well man, the surface was first reddened, then the skin became hot, painful, inflamed, and blood serum was poured out in defense. If the application was continued, serum was poured into the "space" between the inner and outer layers of the skin, the cuticle was raised and a blister was formed. The blister formed a bar or partition between the poisonous drug and the living tissues underneath. Not until the living cells underneath have exhausted themselves does the drug combine with their substance and destroy them. The outer layer of the skin was sacrificed, being ultimately cast off, to defend the deeper tissues. The deeper layers of the skin may also be sacrificed, if necessary, to protect the more vital tissues beneath.

Even admitting that the structural constituents with which poisons combine are not forced to do so by chemical extraction, but are set out defensively by the living principle as a sacrifice to prevent its more important tissues from being harmed, you cannot certainly prove that this is not a living sacrifice. It appears that the living body sacrifices part of itself to save its more important parts.

How do we explain these phenomena? Were these processes the actions of the blister (the drug) or the vital structures? Does the drug act to raise the cuticle? Does it drain the capillaries of their serum? Does it act on the glands to induce them to defend themselves? What acts and why? What is acted upon? Does the drug sacrifice the outer skin or does the body make the sacrifice?

Perhaps the solution to these questions may be found if we consider the application of a "blistering plaster" to the skin of a dead man. If we try the blister on the body of a freshly killed man (one killed in an accident), perhaps we will receive the answer. There is no apparent effect at all. There is no action and this inertia speaks louder than words. The skin does not redden; no serum is poured out; the layers of the skin do not separate; there is no smarting of the skin; there is no sacrifice of the outer skin; no healing follows. Why? Because there is no power of action in the dead organism; there is no power to resist.

If, in and of themselves, drugs have the power to act, why is it always necessary, in order to secure the action, that they be administered to a living organism? If the blistering plaster, for example, acts, why will it not raise the cuticle of a dead man? Drugs have the same power to act on the dead surface as on the living; indeed, they have more power, if they have any, because the dead skin can offer no resistance. But, here, when there is nothing to oppose them, they have no effect at all.

When the body is in a very low state, as in dropsies of long standing, and in all greatly debilitated patients, it is very difficult to blister or even to redden the skin with the strongest plasters. When the power of resistance is low, vesication does not take place; but it should do so more certainly under these conditions if it is the drug that acts.

It will be noted that when there is no power to act there is no action and that when the body is feeble, its actions are feeble. This is to say that the actions of the body in resisting and expelling noxious substances are directly proportional to the integrity and vigor of the body. This is demonstrated not only in the case of a blister, but in all its other actions. A *cathartic* drug will be expelled with great violence if taken by the

healthy and vigorous; the expulsive process may be sluggish and feeble if the drug is administered to a sick individual. Emesis, also, is feeble if a so-called *emetic* is administered to a feeble patient; it will be violent if the same dose of the same drug is administered to a vigorous individual.

There are two terms that are freely and loosely used in *medical* and *scientific* literature that have no particular meaning in *Hygienic* literature. I refer to the terms *stimulant* and.*tonic.* A *stimulant* was formerly rather loosely defined as a substance that produces a rapid and transient increase in vital energy. A *tonic* was a substance that produced the same effects more slowly and continued to do so over a longer period of time. Both of them, as we now know, are merely means of increasing vital expenditure. It should not be difficult to understand that the excited action called *stimulation* is vital action and that vital action cannot be exerted or performed by matter unendowed with sensitive properties. The vital structure is capable of acting, both on external and internal physical agents, as well as on the subordinate forces of nature. This is the exact reverse of popular and scientific thought on this subject.

If, in weakened digestion, a *tonic* is given, there is an apparent strengthening of the stomach. This is only apparent and evanescent. The ultimate result of such ill-advised dosing is greater digestive impairment. Actually, the stomach loses functioning power in its tussles with a *tonic.* The so-called *tonic* action of the drug is a waste of the power of the patient. This position is fundamental and, if true, all drug medication is wrong. Any system or plan of *curing* disease by the administration of substances that are naturally incompatible with and injurious to the structures and functions of the body is radically false. It constitutes no superstructure of science, but one of error and deception.

Physicians have mistaken the actions of the living organism in resisting and expelling poisonous substances for remedial operations of their drugs--for a *curative* action in relation to disease. The physician administers an *emetic* and, forthwith, vomiting empties the stomach. Action occurs--of this there can be no doubt. But what was it that acted, the drug or the organism? If a *purgative* is given and a violent diarrhea follows, is this the action of the poison or of the living organism? Which acts and which is acted upon? What acts and why?

Emetics occasion inflammation of the stomach, a determination of blood and nerve supply to those structures involved in ejecting the emetic from the stomach, all to protect the membranes of the stomach and expel the poison. When lobelia (a favorite *emetic* of the old physiomedicalists) was taken, it occasioned a pungent, burning sensation in the throat, a copious secretion from the salivary glands and mucous membranes, a distressing nausea at the stomach, then a gripping of the bowels, with a spasmodic contraction of the abdominal and dorsal muscles, and, finally, the ejection of the contents of the stomach. As the body initiates and carries out the remedial effort designed to free the stomach of the *emetic,* the lips will pale, the eyes become glassy, and the blood will be temporarily withdrawn from the surface and concentrated in those structures most concerned with the remedial effort.

Lobelia, a foreign substance that cannot be used in the formation or replenishment of tissue, is resisted and expelled by actions of the body. The glands and mucous membranes pour out their fluids to dilute it and wash it away. The energies of the body are concentrated in activities in the abdominal region. There is dizziness (in the head), general muscular relaxation (simply because the main force of the body's action is directed to the abdominal region), then, the abdominal and dorsal muscles violently contract (the violence is proportional to the virulence of the drug), pressing the abdominal viscera against the stomach and this upon the diaphragm, producing vomiting. The actions of the body, especially the muscular contractions in vomiting, are quite obvious. Certainly muscular contraction is not drug action, nor is the *emetic* in the stomach in contact with the muscles that contract.

The stomach itself is almost passive; the principal action is of the muscles forming the external walls of the abdomen and those of the back and loins. As before stated, these muscles are not in contact with the lobelia. If the drug acts on the stomach, what is its action? We can describe the actions of the body in expelling the drug. If it be replied that the drug first acts and the body reacts, the question still will not down-how does the drug act and what is its action? We place all the acting principle in the living organism. The foregoing reply divides it equally between the lifeless drug and the living organism. It is a strange confusion of ideas that forever confounds causes, actions and effects.

Narcotics and *anesthetics* do not combine with the brain to produce stupor and insensibility. Pain or pleasure is the recognition by the mind-organ of the state or condition of the affected area. The organ of feeling (sensation), whether of pleasure or of pain, is the brain and nervous system. But feeling depends on a certain condition or degree of circulation of blood in the organ or part, as well as upon the presence of circulation in the brain and nerve centers. A lack of blood in these centers renders them inactive or reduces awareness. Pressure on the carotid arteries below the ears will produce partial or complete insensibility, according to the degree of pressure.

There is also a close connection between respiration and feeling or sensibility. If, from any cause, respiration is suspended, sensibility is lost. If respiration is diminished, more or less, sensibility is correspondingly reduced. Pressure on the pulmonary branch of the vagus nerve will so lessen respiration as to occasion insensibility that teeth may be extracted without pain. No matter how respiration is diminished, sensibility invariably corresponds with it in degree.

The absence of sensibility during sleep is not wholly due to the diminished respiration of the sleeping state, but is largely due to the withdrawal of blood from the brain and its concentration within the trunk. With anemia of the brain, there is diminished power of the brain centers to function. Morphine reduces sensibility in a similar manner. The vital energies, which were previously exerted toward the brain are diverted to the stomach, where the poison or enemy is to be combated. This leaves the brain inactive or stupid. Instead of the drug acting on the brain, the vital powers are drawn off from the brain to defend the stomach.

Brain anemia, with which is also usually associated reduced respiration, results in a profound systemic depression and a loss of awareness. Toxicologists refer to the anesthetic dose of barbiturates and tell us that such a dose is practically the same in all animals. It is important for us to know that what might be called the *therapeutic* dose, that is, the dose which occasions so-called sleep, is only a little smaller than the so-called anesthetic dose; and the two states, *sleep* and *anesthesia,* are simply varying degrees of the same state of physiological depression. What toxicologists speak of as the "acute lethal toxicity of many barbiturates," and of which they say, "this is almost identical in various mammalian species because of the short time lapse between administration of the drug and death," is precisely the same condition, except in degree, as the so-called *sleep* and the state of *anesthesia.*

Both the limits of our space and those of our present knowledge prevent the possibility of particularizing the peculiar *methodus mendendi* of all the drugs or *medicinal* preparations which fill the various pharmacopeias in existence. Our object is rather to demonstrate the law which governs the behavior of the living organism when in intimate relation with drugs--all collectively. We may logically assume that this law applies to the actions following the administration of all drugs and that there are not two laws governing this phenomena. If this is correct, we may confidently expect future developments to supply us with explanations that are now lacking. In the meantime, it should be evident that so long as the idea is accepted as true that drugs--lifeless, inert, passive drugs--act with a compensating power in, upon and through the living tissues, just so long will pharmacologists be forced to admit that they are ignorant of the *modus operandi* of drugs.

When the people know and understand that the *modus operandi* of a drug is the manner in which the body resists and expels it, that when, for example, a *cathartic* is expelled by means of a diarrhea, they are witnessing the *modus operandi* of the body, that what has been mistaken for the *cathartic action* of the drug is the expulsive action of the living organism, then will the charm of drugs be dispelled. We may then expect to see them abandon the taking of poisonous drugs for their health.

The question would not down and came from many sources and in many forms: if drugs are uniformly actionless, why should the action be so different in the same organ, with various substances? Why, in other words, do different effects follow different drugs, if they are actionless? Or, stripped of its superfluous verbage: why does the living system act upon, reject, resist or expel different substances in different ways, if these substances are entirely actionless? In the relations between lifeless matter and the living organism, where and what is the actor was the puzzling question to many.

This question would have more logic to it if it were asked concerning the drug rather than the body. If

drugs exert their alleged remedial influences according to the known laws of chemistry, why do we not see the uniformity of action for which these laws provide? Why do substances of the same or like chemical nature produce different results? Why should they not all act alike? Morphine and quinine have analogous chemical properties, but they do not "act" alike, as remedies. On the other hand, substances that are very unlike, such as castor oil and sulphur, have analogous *actions* when taken internally. The varieties of actions of which the body is capable are easily accounted for. But the marked variations in alleged drug actions are not explainable by the known laws of chemistry.

The answer to this question would seem to lie in the inability of the body to deal with different substances in an identical manner. It finds it necessary to expel some substances through one channel and some through another, just as it expels its own waste through different channels-carbon dioxide through the lungs, urates through the kidneys, etc. Different modes of action are required to resist and expel substances of different character.

The important fact is not so much the variety of means the body employs in getting drugs out of its fluids and tissues, but the fact that it invariably makes the effort to do so. We can easily describe the action of the body in expelling a drug from the stomach by the act of vomiting; we find it most difficult to describe or even to imagine the action of the drug on the stomach.

But there must be a reason why certain drugs affect certain organs more than others. This is a fact that cannot be disputed. The effects that flow from taking opium differ quite largely from those that flow from taking strychnine, and those of alcohol from digitalis. Taking belladonna results in behavior that differs greatly from that that follows taking castor oil. The close observer will not miss the display of a degree of intelligence--the intelligence of instinct--in the disposal of these different drugs. From whence comes this intelligence? Certainly, it is not of the drugs. Not from the lifeless drug, but from the instincts of the living organs comes these displays of purposive activities. The actions of the body in relation to these drugs implies recognition of their presence and their relationships to the living structure-instinct, if not reason, is involved. Drugs are not supplied with either instinct or intelligence, nor with will to act.

The living organism is abundantly supplied with instruments of action and these are powered and energized for action. The drug, on the other hand, is a homogeneous substance, lacking in all the structures that serve as instruments of action, and is not energized for action. That it is the living body and not the drug that acts may be easily shown when the drug is given or administered to a dead body. Drugs of all kinds lose the *properties* they are supposed to exercise when administered to an organism, the tissues of which are no longer alive. If the tissues have lost their power to act, the drug fails to act; whereas, if the power of action is resident in the drug, it should possess more potency under all such circumstances.

If the drugs do not act, why does a piece of chalk and arsenic produce such different results? This question, like all others of similar import, confounds effect with action, results with the causes which produced them. Because chalk and arsenic are different, they are resisted and expelled differently. Different substances have different chemical affinities with the elements of the living structures. Were it not for the resistance of the living structures, these substances would enter into chemical combination with the structural elements and the structure would be destroyed. It is precisely to prevent chemical combinations of this kind that resistive and expulsive actions are instituted and, according to the degree of these chemical affinities, are the poisonous characters of these substances and, hence, the intensity of the vital actions will naturally, necessarily, properly and remedially be proportioned to the chemical incompatibilities.

The body does not act in the same way in relation to all kinds of food. Instead, perceiving the physiological relation of all foodstuffs to the organic community, it acts on them in a manner best designed to make good use of them. And so, too, do the organic instincts perceive the pathological relations of all kinds of incompatibles or poisons and act upon them in the manner best calculated to get rid of them.

The digestive organs in their collective capacities act on the substances supplied as food, appropriating the food proper and preparing it for absorption, rejecting the residium as a foreign and useless mass, incapable of subserving organic purposes. It may properly be said to be a law that whatever enters the

precincts of life which is incapable of supplying nutriment to the organism is speedily rejected and ejected without compromise or reserve, through the most convenient channel.

It is clear enough that the living system, by means of its acting instrumentalities--hands, teeth, tongue, salivary glands, stomach, peptic glands, intestinal and pancreatic glands, liver, muscles, absorbents, blood vessels, etc.--acts on the food to digest, absorb, circulate and, finally, to assimilate the food. After the food is used and has become waste, the same living system collects, circulates, excretes and voids the waste. All the action seen is vital action.

It has been asked, why should the stomach resist anything that is perfectly inert and, therefore, harmless. The assumption that because it is inert, it is "therefore harmless," is the thing that we deny. If the stomach were inert and not living, it would not resist. Life implies growth, development and self-preservation. Let us suppose that the stomach should not resist inert substances, or should not act upon them until first acted upon by them. What then? The stomach might become filled with the accumulation of such substances, with the resulting destruction of its function by mechanical obstruction. It is to prevent just such catastrophes that all living tissues and organs are endowed with capacities to perceive the relation of the organism to everything brought into contact with it, that it may appropriate to structure that which is usable and reject and expel that which is non-usable. Non-usable matter is no less a poison because it is inert.

Although the action of the body is basically the same in relation to all drugs, its actions are different in relation to different drugs--some are expelled by vomiting, others by diarrhea, some by diuresis, etc.

The error of medical men has always been that of attributing to their *medicines* the actions, both physiological and pathological, of the organism. We deny that so-called *medicines* have any actions, "specific" or otherwise. We maintain that drugs are entirely passive in their relation to the living organism. In a remedial sense, drugs do not act at all; they may possess chemical affinities for some of the constituent elements of the tissues, and could undoubtedly combine with these elements except for the active resistance of the vital tissues. Medical men mistake the actions of resistance and expulsion for the actions of their drugs.

How much longer is it going to take men of *science* to learn that those vital activities that result, when poisons are taken into the living organism, are but the efforts of the living structure (efforts of the *vis medicatrix naturae,* if this pleases you better) to expel from the channels of life uncongenial, foreign, unassimilable and, consequently, injurious substances? If they could but grasp this important fact, they would have learned a more valuable lesson than anything taught in *medicine* and *pharmacology,* a lesson that will guide them in life, not only in their conduct in disease, but in health as well.

Misunderstanding the various actions of the body in relation to different drugs, as actions of the drugs, has led to great errors. The actions that follow administration of a drug follow because the drug is a poison and poisonous in doses of any size.

Drug Indulgences

CHAPTER XLV

The prevalent habit of drug taking is a potent cause of disease. Not only do drugs cause disease, but their use causes a neglect of the primary causes of disease. *Hygienists* have, to use the words of Dr. G. H. Taylor, all along questioned "the morality of even attempting to annul or obscure the penalties of wrong-doing." How, other than by their consequences, are we impelled to correct the causes of suffering? The first instinct, even of the most stupid, when pain is felt, is to avoid it by avoiding its cause; but if we can *cure* it or annul the consequence of our wrong actions, there is no lesson taught, no need to avoid cause. We partake of a seductive sweet, unconscious, it may be, that concealed within the sugar-coating is a deadly poison. "This, then, is medicine," said Taylor, "a savior from the consequences of sin--conveying implied immunity by accepting its grace, and receiving a professional benediction."

Let us consider this matter rationally. Disease is the legitimate result of false living. If a man eats a third more food each day than he needs, secures inadequate sleep, smokes tobacco habitually, drinks beer or soft drinks or coffee regularly, omits to take even moderate exercise in the open air--if such a man becomes sick, as he surely will eventually, what number and kinds of drugs will it be necessary for him to take in order to get well while continuing these same habits? Yet this is the precise state of things that regularly exists--man is taught that he can continually violate all the laws of his being and drugs will restore him to health in spite of his violations.

When pepsin was first employed, it was presented to the public as an antidote to "excesses in eating and the too free use of ardent spirits. It almost reconciles," it was said, "health with intemperance." In 1855 one patent medicine man who promoted pepsin as a sure-*cure* for digestive troubles advertised that the people could eat and drink whatever they desired and yet could safely and cheaply escape the consequences of their mistakes by taking pepsin. His was a direct invitation to gluttony and intemperance. Today's gluttons and topers can rely upon Alkaseltzer for the same services. Such offers to sell indulgences to the sot and epicure is very pleasing to those who want to live riotous lives.

Organs not functionally used lose their functioning powers--hence the mischievousness of substituting gland extracts for the normal secretions of the patient's own glands. When pepsin is administered to digestive cripples, their own pepsin-secreting glands cease to function. But we cannot dispense with their services. If the gastric juice can be profitably dispensed with, would it not probably prove even more desirable to dispense entirely with the services of the digestive system?

Instead of teaching moderation in eating, temperance in all normal things, abstinence from all intoxicating liquors and obedience to the laws of life, the knavish profit-gathers preach (by inference, if not overtly) all manners of dissipations and licentious indulgences, the consequences of which can all be prevented or erased by paying a few dollars for drugs.

G. W. Arnold, M.D., entered the College of Hygeo-Therapy and graduated therefrom. In his paper, read at the graduation exercises upon the occasion of his own graduation, he said: "Ignorant of the physiology and laws of their being, they (the people) trample upon and trangress them, and being overtaken with the penalty, they cast themselves into the hands of the physician with the ignorant confidence in his power to absolve them from physical sin. . ."

The physician's pretense that he can absolve man from the effects of transgressions of natural law and issue him exemption from all harm, while the law breaking is continued, merely by a few cabalistic characters which he inscribes upon a piece of paper, to be taken to the apothecary shop to be exchanged for a bottle of poison which, "when taken, must be well shaken," is too absurd even for the most gullible to swallow. These deeds of absolution will not be accepted by nature.

Just as far as the physician and his remedies tend to lead the patient to think that he and his remedy can relieve him of all obligation to respect the laws of life, inasmuch as he affirms that for the results of his violations *science* has provided a specific remedy, he and his remedies are enemies of mankind. It should take the intelligent and thoughtful man but a moment's reflection to realize that in the very nature of the case no specific remedy can be provided and that this belief in specifics is but another phase of the general delusion under which mankind now labors in respect to the laws of life.

The profession long taught that its *medicines* had specific relations to the diseases of man. Perhaps homeopaths were louder in proclaiming this delusion than were allopaths. Because of this alleged specific relation to disease, poisons could be used as specific remedies.

It is so stupid to believe that against all the penalties that are attached to violations of the laws of life, a specific can be found, that it is remarkable that the delusion has held mankind in slavery for so long; for the idea, when reduced to its essence, is simply this: a drug can be found that will set aside the law of cause and effect and thus erase the natural consequences of our actions. If we think again of the act of putting our hand into the fire, we know that we get burned at once--right then and there. The consequence is not later; it is not dependent upon some third thing, but is inherent in and concurrent with the act. How, then, can we find a specific to remedy the burning? But if we cannot find a specific that will remedy the burning, can we logically expect to discover a specific that will remedy the results of any other violation of the laws and conditions of life?

It is like shaking one's fist in the face of law and order. It is like remedying the tire following work or exercise while we continue the activity. It is like trying to restore potency to the sensualist while he continues to practice excessive venery. It is like trying to sober up a drunk man while he continues to drink. If one develops colic from gorging at meals, all one needs to do is swallow a specific. Then one may gorge again. Instead of permitting his patient to fast, the physician will insist upon him eating and smothering the resulting discomforts with his drugs.

Just in proportion to the strength with which we believe in the power of specifics to relieve us of the results of our violations of the laws of life are we, in our own minds, relieved of all obligation to obey the laws of being. In morals we would regard such a philosophy as sublimated Devilism. Why, in the sphere of health and disease, do we regard it so highly?

So far as knowledge extends, medicine makes no effort to remove the cause of disease, but vainly endeavors to *cure* effects while cause remains. An excellent statement of this fact was made by Alva Curtis, M.D., the leading light of the physio-medicalists, who contended that it is well known that the world would never obey the laws of life and that "they will need, and God has certainly provided for their cure, other remedies . . . ," by which he meant herbal remedies. This means that God himself, knowing that man would not behave himself, provided in advance means for man to escape the consequences of his misbehavior.

Well did Trall say: "There is nothing so absurd in relation to food, drink or medicine that, a physician may not advocate. Indeed, the medical profession is chargeable with the prevailing errors on these subjects. The ordinary habits of the people, which are inducing their diseases, hurrying them to their graves and deteriorating the race, are but the practical doctrines of the medical schools."

The Evils of Drug Medication

CHAPTER XLVI

In an editorial in the July 1873 issue of *The Science of Health,* Trall said: "Disease being an effort of the vital organism to restore the normal state, the causes which necessitate that effort should be removed, in order that the effort may be successful." The superior efficacy of physiological care, that is, care that supplies the physiological needs of the sick organism, as contrasted with those systems that ignore physiological needs and tamper with the structures and functions of the body with chemical and mechanical means, is too evident to have to dwell at great length upon it.

Before any genuine advancement in the care of the sick can be made, the killing method of *curing* disease will have to be abandoned. Physicians are engaged in "fighting disease," not in removing its causes. They think of disease as due to germs and viruses and not as the result of ways of life that conflict with the best interests of the organism. Even if they think that stress may be involved in the causation of disease, they are sure that this may be met with gland extracts and that the removal of the sources of stress is not really essential. Their drugs and their gland extracts are *indulgences* that enable their deluded victims to continue their harmful practices and not be hurt by them.

They treat each so-called disease as though it were a single soldier or a guerrilla band, ambushed or ensconced in isolated regions of the body, and charge it with their hypodermic guns, bombard it with their vaccinal canons, gas it with their antibiotics and seek to destroy it with their atomic bombs-fission products. Viewing disease as an evil entity that has attacked the organism, there is always a driving effort, on all sides, to make the break-through, to develop a parry for every possible thrust of disease. Thus it is that against the most urgent remonstrances of the organic instincts, the physician forces upon the body of his patients vile compounds that should never be taken into the body of man. It cannot be said with any show of truth that the man is the greatest physician who most violates the laws of nature.

A recent (1966-7) study made at Johns Hopkins Hospital in Baltimore revealed that five percent of "medical admissions" to the hospital were attributable to some sort of "drug reaction." Their report showed that 13 percent of the patients in the hospital had had "a severe drug reaction while undergoing treatment." The great majority of these so-called reactions followed the administration of antibiotics, of which penicillin had been most used. A so-called "drug reaction" may be anything from a simple skin irritation to death and it is practically impossible to foretell what "reaction" will occur, so that the patient who takes drugs always runs a serious risk. In the United States alone between 200 and 300 patients a year die from what they call "penicillin reactions," which simply means from penicillin poisoning. To make matters worse, it is admitted by medical authorities that "penicillin is certainly the least toxic of antibiotics." Thus it will be seen that the medical program of care is one of producing disease and death.

Are the poisons of the physician necessary to save life, or do they destroy life? Is man so constituted that some certain and irremediable evil must be produced *on* him to produce *in* him some uncertain good? Is poisoning the sick not contrary to all the requirements of natural law; is it not abhorrent to the very nature of man, hateful to every living thing? Mothers, before you consent to poison the life-springs of your precious darlings, for whom you have suffered and worked, let us assure you that there is no need for and no good to come out of this poisoning for anyone. *Hygienists* have publicly protested for nearly a century and a half against the monstrous absurdity of attempting to cure disease by agents the natural effects of which upon living structures are destructive.

Dr. Alcott describes his thoughts at the bedside of a typhoid patient who had been treated allopathically. After saying that he "saw very clearly" that what the patient needed most "was rest and sleep," he records his thoughts about the drugs at the bedside. "What does all this mean," he asked himself. "Why all this array of war-like implements? What indication is there of the necessity of alcohol, quinine, morphine,

opium, ipecac, nitre, &c.? He is burning with fever; shall we add fuel to the fire?"

Dr. Alcott reports that he discontinued the drugging and permitted the patient to have all the water desired to drink and that immediate improvement followed. If the sick individual is cared for kindly and in strict accord with the genuine needs of life under the circumstances, the illness should be of short duration; however, it is often prolonged and life destroyed by mistaken efforts to *cure.* The idea that disease can be *cured* and that it should be *cured* has enabled physicians to kill more people than "war, pestilence and famine combined."

We do not deny that the regular practices of bleeding and antiphlogistication, in dealing with fever patients, were not without apparent successes. But this did not prove that the stimulations were good per se. It only proved that it is the least of two evils. We do not hesitate to say that 95 percent of the people who die in this country each year die needlessly.

Of every thousand cases of a particular acute disease a certain number, which can be determined within prescribed limits of deviation from the *normal,* will recover with or without treatment of any kind whatever. This fact is true under any and all forms of treatment, of neglect and abuse; it has always been true. Hence, it is difficult to determine, when a treatment is employed and a certain percentage of patients recover, what effect if any the so-called remedy has in restoring health. The use of the *remedy* and the recovery of the patient may have been mere coincidence; the *remedy* may have actually retarded recovery; it is conceivable that, in some instances and with some *remedies,* recovery may have been helped.

Patients also die under any and all forms of care. The question is both pertinent and logical: what is the office of the treatment in killing the patient? Certainly, the death rate in every so-called acute disease is much higher under some forms of care than under others. When, for example, the death rate in typhoid fever was 40 percent, the treatment administered was lethal. When a method of treatment was introduced under which the death rate fell to 12 and eight percent, the question still remained: does the new treatment *cure* more cases or does it merely kill fewer? Obviously, statistical studies cannot supply an answer to this question. Today, great store is laid by statistical studies; but it is obvious that they give results without revealing what the results are due to.

When we read of the procedures and discoveries of *modern scientific medicine,* whether we read the news accounts or the accounts in the medical journals, reports and standard texts, one thing stands out above all else: always there are doubts, misgivings, compromising qualifications, exceptions, complicating, often dangerous side effects. There is lacking any clear and demonstrable principle that unifies the whole and reduces the jumble of uncertainties to certainty. Statistics also share in this uncertainty and lack of clear principle. As a consequence, they also lose value. The conflicting views that arise out of analyses of the same set of statistics by different medical men of equal authority are enough to demonstrate the unreliability of such statistics.

Firmness is required to prevent officious friends and relatives from meddling with the life of the patient. For, when one is very sick, as in typhoid or pneumonia, the powers of the patient are as easily depressed toward death as toward life, as the most delicately adjusted scales are turned by a fraction of a grain of weight. It is the *Hygienic* view that drugging practices are directly responsible for great numbers of deaths which would otherwise not occur. Where they do not cause death, they greatly retard recovery.

When a strong man in full maturity and vigor becomes suddenly ill and is soon numbered among the dead, we cannot reconcile this with any principle in the order of nature that predetermines the results. Those of our people who attempt to reconcile such occurrences with the attributes of wisdom, benevolence and unchangeableness with which they have endowed the Governor of the universe, fail to present us with a satisfactory answer to our misgivings. We cannot accept such deaths as the outworkings of a "mysterious Providence," against which the physician pits his skill and learning. We can perceive nothing but violated laws asserting their immutability and exacting their results. It may be and commonly is in such cases that the worst violations, those really responsible for the death, are committed in the treatment of the sick man. Treatment kills where, otherwise, the sick would recover.

The newspapers are loud in flaunting to the world the fact that the physicians struggled valiantly against

the disease, that they employed all the resources of modern medicine, yet the patient died in spite of their heroic efforts. Editors seem never to suspect that death is most often the result of these very efforts, that, except for the resources of modern medicine, there would be a much lower death rate.

The clergy, seeming to take the position that the physicians and their poisons are the friends of the sick and God their enemy, attribute death to the "will of God." The Almighty sends disease upon a man and terminates his existence by violence in spite of the opposition of his physicians. God is the enemy of his own work. God killed the patient in spite of the efforts of the physician to protect him from the decree of the Almighty.

Against such sentiments, which they declared to be most pernicious in their bearings upon the human mind, the *Hygienists* vigorously protested. Trall said that it is "such talk, such solemn twattle, that misleads and deceives the world, and makes the great and terrible lessons of wisdom taught through affliction so nearly lost to us."

What are the *remedies* employed by physicians? Clearly they are poisons--other causes of disease. Their alleged remedial effects are the actions of the body in its struggle to resist and expel the drugs. The physician, so far from counteracting the causes of death, actually cooperates with them. His drugging is a concealed war upon the human constitution. The drugs, to which hasty and inconsiderate men so frequently resort to "aid nature a bit," often cause much more serious disease than that for which they are administered.

The reigning preference for drugs can be ascribed to but one thing: namely, ignorance of the laws of life and the conditions upon which life depends. The complaint frequently made by physicians that the people, in their ignorance, believe that drugs are necessary to cure disease and, therefore, will have them, is but an effort to whitewash their practices. We ask: "Who taught the people to believe in the saving potencies of drugs? Whose business is it to enlighten the people and teach them better? Medical men are just as much addicted to unphysiological habits as are other people and are just as prone to disease. They have deliberately abandoned the sure and simple ways of nature and have created, as a substitute, a highly complex and ruinous artificial system.

Trall wrote: "If all the physicians who become convinced that the whole drug system is wrong would at once refuse to countenance the wrong, either by word or deed, the people would sooner or later see their error. It is the business of the true physician to be a health teacher, not a panderer to depraved appetites and erroneous opinions. Otherwise his profession, which ought to be ennobling, sinks to the level of the meanest chicanery and the most mercenary trades." It is, of course, a mistake to think that the office of the physician has ever been that of an educator. From the time of Hippocrates to the present, he has been a disease-treater--a dispenser of drugs.

How can we expect otherwise, as medical colleges are busy teaching the poisoning practice and nothing else? These carefully standardized and rigidly controlled colleges are not permitted to teach anything except what is approved by the medical society. The young medical graduate is equipped, by his training and clinical experience and by his internship, to poison and carve the sick and he is prepared for nothing else. Where is there a medical college that has a chair in dietetics? Where is there a medical hospital that feeds anything other than restaurant fare such as may be obtained in the third and fourth rate restaurants of the country? Where is there a medically trained dietician who is anything more than a second-rate cook?

Here is a learned profession that for centuries have by prescriptive right, by statutory authority and by general consent, had the care of the people's health, and the best that they have found it expedient to do or the best that they have been able to do, has been greatly to impair that health. Such is the character of the drugging practice that its apparent successes are miserable failures. The good drugs seem to do are evils. Drugs only lure to deceive; whatever of good they may appear to do is evanescent and illusory. Sooner or later their true effects become manifest.

How does the physician and his poisons cure the sick? Can he provide us with an explanation that does not involve the admission that, at their assumed best, his drugs are but "auxiliaries of nature?" But is he not engaged in constantly trying to force nature to accept as helpers, in her need, substances the legitimate

effects of which upon the human system are *killative?* It is confessed by those who manufacture them and by the men who prescribe them that drugs are poisons.

Poisons kill; that is their nature. This is known to all. To say that a substance is poisonous is not to awaken a recognition that it has as one of its essential properties, one that preserves health and life or that restores health to the sick. The contrary thought is immediately aroused. We associate with poison the idea of destruction--of disease and death. Naturally, then, in considering arrangements which preserve life, no informed man can include a giver of drugs. It is conceivable, to return to an ancient conception, that the drug system is the creation of the Angel of Death. He must "grin horrible a ghastly smile" everytime he watches the physician and nurse at the bedside of the sick.

What a list of nostrums the physician has at his command! What a library of books a man must study to understand such a dealing out of poisons! Equipped with a pharmacopeia filled with nostrums and with a lot of unmeaning, incomprehensible jargon, with mystery as black as night, the physician goes forth on his mission of mayhem and murder secure in the knowledge that he has the law, custom, popular credulity and general ignorance all on his side. He even dares to flaunt the evidence of the crippling and lethal effects of his drugs in the public print, knowing that he is not going to be called to account by a credulous people nor by the authorities who have connived with him to give him a monopoly of the care of the sick.

The medical school frequently boasts of the number and variety of its *remedial* appliances, processes and agents. Few mistakes have been more egregious than to suppose that medicine's usefulness is in proportion to the number and variety of its means of treatment. Its means are not truly remedial and, even if they were, there can be no conceivable reason for so many thousands of them. Their very number and variety testify to their ineffectiveness and fallacy. The reader may inquire: are there not some good drugs? He should understand that any valid principle which will give us one good drug will give us a million of them.

Drugs are essentially disease producing when placed in contact with the tissues of the living organism. It is a fact that has been demonstrated by more than 2,000 years of medical experience, that every drug that is or has ever been used in the treatment of the sick will occasion in the healthy individual symptoms that are identical with the symptoms of disease. This is to say, drugs make well people sick. It is bad enough to be sick; but when, in addition to sickness, one is dosed with poisons, he is truly in a pitiable state.

Nothing can be more preposterous than the idea that those things that make well men sick or that tend to kill when administered to the healthy are proper things with which to restore health to the sick. Yet on such nonsense as this the whole healing art--healing art!--has rested for 2,500 years. May we not, with the utmost propriety, call it the killing art? Has it not been a stupendous evil? Indeed, does not the testimony of its most illustrious advocates and teachers admit that it has been evil from the outset? Is there within the reach of written memorial another thing so tenaciously held, so persistently defended and regularly employed, while the reasons for its employment are so diverse and contradictory, as drugs?

When such substances, the ordinary and inevitable effect of which upon the healthy organism is to disturb, damage and even to destroy it, are called *remedies,* there must be something wrong with the understanding of those practitioners who make use of such so-called *remedies.* When, notwithstanding the combination of all the false, morbid and, not infrequently, deadly means that are applied to the treatment of the sick, the sick succeed in surviving and returning to a measure of health, what more evidence can we ask for than this--that between health and sickness, life and death, the forces of the organism are on the side of the former?

Drugs are commonly thought to be necessary to healing. But if they are necessary, why are they not afforded a separate compartment in the individuality of man? Why are they not desired as food and drink? Why is the healthy man not made sick or even killed without them? Why is there such a strong, instinctive repugnance to them? Why are they indignantly rejected by the body when taken? Why are they causes of so much harm? In science there is not the slightest show of grounds for identifying drugs with *Hygienic* materials.

The physiologist knows of no power in the living organism that enables it to synthesize living tissue or

to generate functioning power out of the elements of drugs, nor of any power, either in the drug or in the body, that enables it to use drugs to remove disease or to repair damages. He is well aware that they are only means whereby tissues may be destroyed or damaged, functions impaired and the body exhausted in a very unnecessary and wasteful manner. The evils of drug medication lie in the necessity of the sick patient spending his strength "casting out devils" instead of employing it in "entertaining angels." Every drug (poison) administered to the sick requires new and additional remedial efforts, so that with every new drug there is an additional disease, resulting in greater waste of functional power. If disease so radically changed the body as to make a demand for drugs, enabling the body to make use of them, there would be some excuse for their employment. But disease makes no radical change in the human organism. What it cannot use in a state of health it cannot use in a state of disease.

Drugging necessitates a critical squandering of our energies, which must be concentrated upon the elimination of the drug poison, while the causes of the disease for which the drugs are given are permitted to corrode the very vitals of the human constitution. We are so intent upon finding means for the erasure of the effects of our modes of living and treatment, that we have no energy left for living, as a good, *per se.* When poisons are administered to the sick, all the powers of his system are taxed to a fearful extent in casting them off through the excretory and other channels. When the patient is dosed with drugs, his digestive system, bowels, liver, kidneys, nerves--his everything--are in a state of universal revolt. His entire organism is involved in the effort to resist and expel the poison.

His whole being is outraged by the drug and is up in arms in defense. Is it, then, any wonder that when he begins to convalesce (if he does), convalescence is slow, digestion is impaired, excretion is inhibited and he is weak (exhausted, in fact) and nervous?

If a drug will prostrate the powers of a well man, it will do the same for the powers of a sick man. If it will reduce a man from strength to weakness, it will reduce him from weakness to even greater weakness. It is not within the power of drugs to evolve strength out of weakness. Their natural and invariable tendency is the reverse of this. If, in the whole kingdom of nature, a drug can be found which, if given to one in full health, tends to make one more healthy, one may use it with confidence when ill. It will improve the health of the sick with irresistable effect. It will restore his exhausted powers, purify his fouled tissues, improve his impaired secretions, accelerate his slackened circulation and restore him to that soundness of physical body that belongs to health. If, in health, it will contribute to his strength and beauty, in disease it will do the same. To believe in the necessity of drugs, we must first admit or demonstrate that they are useful in effecting some necessary result in a state of health. We must then regard them as *Hygienic* materials. We must believe that their habitual use by a person in perfect health would be not only beneficial but necessary.

Drugs simply produce a series of complications--drug diseases. Hence, the more a physician medicates a family, the more they demand to be drugged. After he has had the management of a case for a year or two, he seemingly becomes an indispensable necessity to existence. Seldom does such a case pass through the day, never, perhaps, a week, without discovering a new ache or pain requiring another visit to the physician and another drug. If the physician has 100 such patients, he is set up for life.

It is just the opposite of this with the *Hygienist.* When he cares for a fever patient, *Hygienically,* the patient is left perfectly whole and if he should later become sick again, he knows how to care for himself. He does not need to call in the *Hygienist.*

How common is the practice of dosing patients whose sickness is mild with poisons that make the condition worse! The more drugs taken the worse the condition becomes. Many are killed outright by the practice. Others, who would have speedily recovered with a little intelligent nursing, have their illnesses greatly prolonged and their suffering intensified. Many infants and children are sacrificed to the drugging practice, while a great army of adults are drugged to within an inch of that river over which there is no re-ferriage. Drug medication is a self-sustaining institution; when a drugging physician gets into a family, health departs. If his drugs seem to *cure,* they actually complicate the condition of the patient--hence, the more he drugs a family, the greater grows the apparent need for drugging.

Drugs are inherently noxious, large numbers of them being very virulent. So-called medical science

treats the sick with poisons that are more virulent than those that are responsible for their illnesses. Commonly, the more grave the symptoms, the more heroic the means employed with which to treat them. As all of his alleged *remedies* are poisons, one of the important studies of the medical student is *toxicology,* the science or study of poisons. He must learn the so-called *toxic actions* of every drug that he is to give to his patients. As all of his drugs occasion effects other than those he seeks to produce, he must also study their so-called side effects or untoward actions. He must be forever on guard against giving what is called an overdose; he must watch for symptoms of poisoning and sensitivity and discontinue the drug if and when these occur. He is well aware that his drugs are disease-producing, that they are not useful in a state of health and that they are fraught with danger in a state of disease.

It is only under the sway of false teachings and false training, when wrong ideas of the way, the manner and means of living have been ingrained in man's mind, that he can contemplate with complacency or approval the drugging practice or any other practice of treating the sick which enjoins the employment of substances and procedures the natural and inevitable effect of which, if taken into or applied to the healthy organism, is to kill or to tend to kill. A man whose instincts have been subverted and whose intelligence has been obfuscated may accept poisons for the *cure* of disease, but otherwise, he will reject such substances as vigorously as a two-days-old infant will reject forty-proof brandy as food.

If drugs *cure* the sick, the more drugs administered, the more *cures* should follow; but such is not the case. We see evidence on every hand that as drugs multiply, diseases also increase. In the first place, drugs do not truly relieve a single malady; they paralyze and irritate the whole frame, but they remove no causes and they provide none of the essentials of health. A temporary excitement (*stimulation*) may bring temporary fictional relief from symptoms, but such a strained exertion results, in its very nature, in a consequent and commensurate depression. Poison is exhaustive of the forces of life and destructive of living tissue and it is the worse kind of folly to imagine that such substances can be health restoring.

How great is that army of *cure-mongers* and disease-treaters that regularly take advantage of the general longing of the masses, even its educated contingent, for something mysterious and incomprehensible, and who must have a "sign" or a statistic, however fraudulent and inaccurate, and fill their pockets with money thus obtained. Their cures change rapidly, but their modes of operation continue to revolve about this love of money.

Everyone must be conscious of the constant changes which medicine undergoes, changes which are assumed to represent progress, improvement and increased effectiveness. Unfortunately, these changes continue to revolve around the same old fallacies, so that no genuine progress is ever made. If their principles inclined them away from drugging and in the direction of *Natural Hygiene,* there might be some hope for them; but they incline them in the opposite direction. Don't be fooled by the popularity of a new drug or a new operation. Fashions in treatment come and go like fashions in women's hats. The most fashionable drugs and operations soon become *passe.* The ephemeral popularity of new drugs depends on no peculiar or even demonstrated common merit, but upon the skill with which its imaginary virtues are puffed by every device of publicity and advertising.

Physicians are busily engaged in establishing the myth that they are capable of weighing the probable harm of a drug against its possible benefits in a given case, thus determining the wisdom of giving or withholding the drug. They possess no such power of discrimination. Indeed, for the most part, they are engaged in administering their drugs, not in withholding them. They know, even if they disregard this fact in practice, that their drugs are always hazardous. They also know that the "possible benefits" of their drugs are only hypothetical.

Physicians have cultivated the myth that they know how to give drugs, whereas the layman is unacquainted with the intricacies of medical science, hence does not know how to employ them. Neither the character nor the intent of one administering a substance determines its relation to the organism. A malfactor with murderous intent may administer a poison to a man; a most benevolent individual with the best of intentions may administer the same size dose of the same poison to the same individual--the effect or the result will be the same in either case. To take poisons under the direction of a physician does not alter the relation of the poison to the body. Whether taken in large doses or small, it remains a poison and the effects are those of poisoning. Poisoning is never constructive in its effects or its results.

If the activities of the living organism are governed by law, when it is in intimate relations with foreign substances of any kind or quality, we may be certain that the law recognizes no differences between a poison when administered by a physician and the same poison when administered by a malfactor with murderous intent. Whatever the principle that presides over the organic structures and protects them with an eternal vigilance, it is no respecter of persons, but treats every intruder within her secret domains as unworthy of a place therein and promptly rejects it.

Medical students, studying in their *materia medica* what are designated the *properties* of all the poisons of the three kingdoms of nature and firmly believing everything they read of the *medicinal properties* of herbs, minerals and synthetics, must be lost in wonder and admiration at their astonishing qualities and powers and at the great array of cures with which physicians are equipped. No one ever hints to them that the alleged medicinal properties of drugs are their poisonous qualities--that the so-called *cathartic property* of a drug is due to its poisonous quality, that the so-called *emetic property* of a drug is due to its poisonous quality, that the so-called *diuretic property* of a drug is due to its poisonous quality, that the so-called *narcotic property* of a drug is due to its poisonous quality, that the so-called *stimulant property* of a drug is due to its poisonous quality.

How little true claim do physicians have for the confidence of the people! A physician boasts of his success in practice and he is only boasting, without knowing it, that he did not give enough poison to his patients to kill all of them. His doses were not large enough or frequent enough to prevent the body's recuperative powers from asserting their superiority and supremacy, in spite of the brakes supplied by the physician to her wheels, to accomplish her end. The physician may pound his chest and cry in a loud voice: "What a great man am I," but his assumed greatness is an illusion. It is not customary for individual physicians to openly behave in this manner, but the profession as a whole is constantly crying out about its greatness.

The drugging practice has not the shadow of scientific principle for its basis; but its practitioners have been accustomed so long to blindly groping their way in uncertainty and experimentation, without system or consistency, that they fail to perceive the deplorable state of their alleged science. What was at first a conviction has long since been demonstrated to be a certainty--that the entire drug system is essentially, intrinsically and everlastingly false. Medical colleges turn out new physicians fast enough and pharmaceutical firms pour out a sufficient flood of new and old drugs to very rapidly lessen the amount of disease among our people, if the drugging practice were based on truth. But we do not see a lessening of disease; instead, diseases multiply endlessly and will continue to do so unless the drugging system is overthrown.

No man can watch the newspapers for a number of years without being struck by the great number of promises that medical researchers make that are never fulfilled. The never-ending stream of new drugs that are announced in the press, as offering hope to the sick, only to disappear from the drug stores in a short time indicates, as few things do, the utter confusion of the medical mind. A new drug is produced; it enjoys a brief period of newspaper glory and passes unnoticed to the land of shades, only to be followed by another new drug which goes through the same experience. No matter how high the hopes raised, no matter how great the promises made, none of medicine's *cures* remain *cures* for very long. Medicine tries so hard to find *cures* but turns up only false *cures.*

So long as they continue to live, those who suffer with *incurable* disease continue to run after the new medicines; when one nostrum fails, they go after a new one with the same eagerness with which they took up the old one. For the people will continue to run after new nostrums as fast as they are made or discovered, until they fully understand that the healing principle exists in the living organism and nowhere else and that every drug ever used always was and always will be a hindrance instead of a help to the healing process. The people must learn that the drugging practice is the arch foe of the sick.

Let us not be fooled. Physicians are well aware that their professed knowledge of the "science of medicine" is all equal to a cipher. They have no science. They cannot tell us of the *modus operandi* of a single drug. They have no correct definition of disease. Yet they utter sounds, after the manner of a certain biped that paddles in our pools, whenever they find that someone knows them and can fathom the shallow depths of their wisdom. They have cried "quack" so long and so loudly that it is now accepted as a term

belonging exclusively to them. We congratulate them upon their happy choice of a title.

The specious plea in defense of the employment of certain drugs that, "if they do no good, they can at least do no harm," is palpably false. Whatever involves an expenditure of organic forces, whether a drug or a *Hygienic* agent, must of necessity be positively injurious if it fails to do good. There can be no neutral ground that can be occupied by either drugs or *Hygienic* materials and conditions. In using them or in resisting and expelling them, the forces of life are expended and if there is nothing inherent in them that provides rumuneration, they are to be condemned and rejected as enemies of life and health. It is upon the basis of this principle that food becomes an enemy under those conditions of the organism in which it cannot be used, that exercise becomes harmful when rest is the great need, etc., etc. If *Hygienic* materials are harmful when they are not usable or needed, should not drugs, which are never usable, also prove harmful "if they do no good?"

It has long been known (it was much stressed by Trall) that there is no way to tell in advance of its administration what effects will follow a drug in any individual. As a simple example: a dose of castor oil may be given as a *cathartic* and it may be expelled by vomiting instead. Nor is it possible, by any scientific method, to predict with accuracy what side effects will develop in any particular individual. Effects may differ in the same individual at different times and under different conditions. The sex of the patient is a factor in determining this. A report comes from the Johns Hopkins Hospital in Baltimore that studies made during a two-year period established the fact that women are more *susceptible* to *adverse reactions* to drugs than men. Studies have also shown that *drug reactions* may be complicated by some foods, such as cheese and, also, by previous medication. The whole matter is so complicated that, even if drugs had any value, the physician would be forever working in the dark.

Giving drugs to the sick is a great charlantanry, the sheerest empiricism, the veriest folly, and should be classed as the most outrageous knavery and the most audacious crime listed on crime's calendar. If the men who prescribe drugs were as intelligent as they are deluded, they would long since have ceased poisoning their patients. As for the recipients, no suicide that was ever buried could compare with drug taking, did the people but know how surely they are killing themselves.

It may be questioned whether all drugs are more or less cumulative, but it is certain that all *strong* ones are. It is well known to medical men that many drugs are expelled with great difficulty and only slowly, so that, if they are taken regularly, they tend to accumulate in the body. The heavy metals, like bismuth and mercury, are excreted with great difficulty and there is a tendency of the body to deposit them in the bones. Poisons that are not expelled must be taken out of the general circulation and deposited where they will do least harm. If a substance is harmful, as all drugs are, why take it into the body? Why think that because it does not produce instantaneous death, we may take it with impunity? Why not refrain from burdening the body with it? Why not give the body the best opportunity to maintain high-level health? If we are content to suffer, if we want to watch ourselves go down year after year, then we will give no attention to the way in which we feed and care for ourselves; but if health is worth having, it is worth the simple effort that is required to refrain from habitually abusing the body by habits that are foreign to the elemental needs of life. Why do we blindly adhere to a system inherited from the Dark Ages?

Drug treatment is only symptomatic. If *anti-coagulation* drugs can prevent blood clotting and *tranquilizers* can reduce blood pressure, they constitute only symptomatic treatment. They remove no causes and as soon as their administration is discontinued, the patient's condition lapses back into the prior state. He finds that he must either continue the treatment indefinitely or else suffer the continuance of high blood pressure and the danger of recurrent clotting. In the long run, which is the worse evil: the dangers associated with blood clotting and high blood pressure or those associated with drug taking? It is true, in this instance, as in all others, that the temporary "relief" of symptoms that is gained from taking drugs must be paid for with a greater impairment of health. The international flow of drugs is merely a big business from which huge profits are derived, but no health grows out of it.

There is a popular medical notion that the more dangerous the condition of the patient, the more powerful the medication required. We can conceive of no more monstrous idea than that the more critical the case, the more poisonous the drugs that should be used to *cure* it. As a general rule, the more virulent the poison, the better the remedy. This medical notion accounts for the wonderful virtues ascribed to

deadly poisons.

Drugs present us with another evil, that of addiction. There are many drugs to which drug takers become addicted and from which they have the greatest difficulty in extricating themselves. When a man has become so addicted to tobacco, alcohol or other drug, that he can no longer control himself, his only means of self-help consists in keeping far away from the drug, and even this he finds difficult to do. If he once boasted that he could *take* it or *leave* it, the boast has become empty. His great and fatal mistake was that, when he could do so, he did not let it alone. He forged the chains of habit by repeatedly taking the drug. Our people are addicted to *narcotics, tranquilizers, pep-up pills, sleeping potions,* and other drugs too numerous to mention. Their addictions to tobacco and alcohol are old ones, but our people would benefit more from closing the druggeries than from closing the groggeries.

Writing in an editorial in the *Journal,* October 1861, dealing with liquor in the Army, Trall said: "As we predicted, the alcoholic rebel has already proved a more destructive enemy to the Federal Army than have the Confederate rebels. A correspondent of the *Tribune* informs us that the forces under Beauregarde and Johnson at Manasses were not allowed to touch intoxicating liquors and that their officers set the example of strict temperance by wholly abstaining from the use of it themselves. How discreditably for us this contrasted with the fact of free liquor-drinking in the armies of the Union! Who knows, who will ever know to what extent the disaster and rout of the Federal armies at Bull Run was attributable to the super-enemy that steals away the brains, waxes the eyes, distorts the mental perceptions and overthrows reasoning powers? Officers have been accused of being grossly intoxicated and unable, in consequence, to attend to their regiments and duties. The newspapers have teemed with, complaints of the drinking habits of the soldiers and the rowdyism, insubordination and casualties consequent thereon. Commanders have been obliged to resort to extreme measures to prevent the utter demoralization of the men under their control and it has been a common topic of remark, by the reporters in and around Washington, that the rum-sellers were driving a brisk trade with the soldiers. When the Seventy-Ninth Regiment rebelled, liquor, if not the cause, was the chief difficulty and curse attending the revolt. Many of those who mutinied were in a state of partial or complete intoxication."

The movies have always pictured alcohol as "liquid courage," but the facts of history indicate that alcohol is liquid confusion and, if anything, liquid cowardice. Certainly, a soldier who is drunk is a poor marksman and a poor marcher. In his confused state of mind, he is also poor at carrying out orders. *Hygienists* are not interested in producing good soldiers, but they are deeply interested in producing and maintaining the health of the young men of the nation and in maintaining clarity of thought in them. When we consider, first, that the medical profession teaches that alcohol is a beneficial substance and, second, that the multitude are governed in their thinking and acting by the opinions of the learned, we cannot be condemed for saying that the "sordid spirit of the liquor traffic is less of an obstacle in the way of temperance reform than are the false theories and consequent erroneous practices of the medical profession." When the temperance people and physicians learn that alcohol and its conferrers are intrinsically bad, and not only relatively so, humanity will have taken a great step forward. Must men forever be brayed in a mortar with a pestle and learn nothing?

Iatrogenic Diseases

CHAPTER XLVII

It has been made abundantly clear in preceding pages that every drug is a poison and every dose of every drug produces disease. A new drug is simply a new poison and gives rise to a new disease. The production of disease by the prescriptions of physicians is what is meant by *iatrogenic disease.* It is common today to refer to such diseases as "diseases due to medical progress." They are diseases that the patient would not develop were he not medically treated. This simply means that the physician is a foe of his patient and is engaged in producing disease in him. Many iatrogenic diseases are far worse than the original trouble for which the physician treats the patient. Today a physician may truthfully say to a prospective patient: "I cannot cure your cold, but I can give you hepatitis," or he may say: "I cannot cure your pimples, but I can give you aplastic anemia." Leukemia, cancer, spontaneous breaking of the bones, heart disease, asthma and various other so-called diseases result from the use of drugs.

The production of disease by drugs is no new phenomenon. indeed, this is precisely what they were originally administered for. All so-called *medicines,* in doses of any size, are poisons. They are used as medicines because they are poisons. Both the allopaths and the homeopaths profess to *cure* disease by producing disease. To produce disease, whether an *opposite* or a *similar* disease, they had to have disease-causing substances--poisons. All of the effects of all of their *medicines* were symptoms of disease. When a fever patient was treated for a month by a medley of poisons. the perplexities of diagnosis and complication of maladies were enough to confound the profoundest minds in the medical profession of the entire world. It was recognized, in the days of Graham and Trall, by medical authorities that after several doses of any drug had been taken, and more especially after several doses of several drugs had been administered, it was difficult and sometimes quite impossible to discriminate between the symptoms produced by the drugs and those of the disease. This difficulty becomes quite apparent when it is understood that the only distinction between a *medicine* and its *therapeutic effects* and a poison and its *toxicologic effects* is one of quantity. The dose of a drug that will occasion with one patient what they term *medicinal action* may with another patient or with the same patient at another time occasion what they distinguish as a toxicologic action, while any addition to the *medicinal dose* of any drug at any time changes the *modus operandi* to that of a poison. The fact is that drugs have no *modus operandi* and are poisons in doses of any size.

Physicians spent as much time trying to *cure* their drug-caused diseases as they did trying to *cure* the original maladies of their victims. indeed, it was often intimated in medical literature that, after a physician had attended a patient a few days, his principal effort at each succeeding visit was to counteract the effects of *remedies* prescribed at the preceding visit.

If new symptoms of disease clamour for relief and if a physician is a man of large resources, he will not be in want of a *remedy* for each symptom as it arises; for, of the thousands of drug combinations and preparations upon the shelves of the drug stores, surely one can be found to meet the needs of each case. Each new remedy creates new symptoms or aggravates old ones till, finally, the powers of the patient become exhausted in the fruitless struggle with drugs. Such a physician, so profound in science, so rich in experience, does not suffer in his practice, for each of his *cures* creates new need for his services.

It may be received as a truism, that in a nation where there are large numbers of disease-treaters and a large number of hospitals and clinics, there is a sick people. Physicians and hospitals flourish only where sickness abounds. If the people are healthy, the hospitals close and the physicians take in their shingles. Where there is no disease, the disease-treaters cannot exist. Today, we do not propose to educate more physicians, nurses, dentists, psychiatrists, create more specialists and build more hospitals in an effort to provide health for the people, but as a means of taking care of an increasing number of sick. Our research is to find more *cures,* not to find a way to preserve health. Medicine has always and does yet rest upon

unproved and undemonstrated suppositions and hypotheses. Anatomy, physiology, chemistry, etc., are, indeed, expanding sciences; but the "application of remedies to cure diseases" has always been and still is an experiment. A full knowledge of the human system, an understanding of the real nature of disease and a recognition of the relations of drugs to the living organism, will rescue man from the impositions and pretenses of the medical system.

If we can rescue mankind from the vile curse of drug taking, if we can make men see and understand that there is no reason, no excuse, no necessity for so great an abuse of their splendid organism, and make them see both the necessity and the reason why drug taking should be discontinued at once and permanently, we will have saved millions from torture and untimely death. Many there are who cannot of themselves discontinue their drugging any more than can the drunkard of himself leave off drink. They experience the same difficulty the tobacco user has in discontinuing his pipe or the chewer his quid. Without realizing it, they are addicts. Their bodily aches and pains and mental tortures all drive them back to the source of their misery for evanescent respite from their so-called (but miscalled) *withdrawal symptoms.* They are slaves to their drugs; they are bound hand and foot and need the help of a kind and sympathetic, withal skilled hand, in breaking their drug habits and making them free men again. One who knows and understands their sufferings and their anxious desires for relief and who, at the same time, knows what slumbering resources are lying within them, can alone rescue them from their bondage to the physician's poisons.

We believe that all *Hygienists,* past and present, have agreed that the worst diseases we have to manage, the ones that give the most trouble and offer least hope of full recovery, are the chronic diseases caused by the drugs which physicians employ in *curing* acute diseases. The early *Hygienists* thought that it was always unsafe to take a case or to promise anything after the "drug doctors" had had the patient in hand a few days. Thus Susan E. Capen, M.D., a graduate of the College of Hygeo-Therapy, says of a case which she rejected: "She sent for me two days before she died and urged me to take charge of the case. I confess I had not sufficient courage to do so. Her chest and forearms were completely covered with blister sores. Her tongue was black and sore, probably from calomel. She had been charged by her three doctors not to use cold water for bathing and to keep a bottle of hot water constantly at her feet; and when I got there she had two hot stones at her sides, with a burning fever, as you might suppose."

Due to their intrinsically toxic qualities, all drugs, even the least toxic of them, suppress symptoms, build complications, produce chronic disease and tend to kill. Most of the deaths in acute disease are due to drugging and practically all of the sequelae that follow acute disease are consequences of the drugging practice. Many chronic sufferers maintain their suffering by their habitual drugging and practically all of them shorten their lives in the same way. It should not be difficult to realize that the poisoning practice is disease producing and lethal. Every drug is anti-vital or antibiotic and its employment in the care of the sick is a war upon life.

In the days of heavy quinine dosage in all fevers, frequent cases of temporary insanity resulted from the quinine poisoning. Quinine also produced head noises, deafness and serious nerve impairment. Mercury caused salivation, a loss of teeth, necrosis of the bones and worked universal havoc in the system. Arsenic produced dermatitis and optic atrophy, resulting in blindness. The other heavy metals that were employed--bismuth, potassium, the iodides, gold salts, etc.--each produced their own characteristic iatrogenic diseases. Although the body seems to have been better able to defend itself against most herbal and animal poisons than against mineral poisons and against the synthetic drugs of the present, quinine was far from being the only vegetable poison that produced iatrogenic disease.

There is scarcely an alleged *remedy* given for the treatment of disease but will, when administered to a healthy person, produce symptoms and morbid actions precisely like those manifested in disease. The virus of every poisonous thing and the filth of every filthy thing has already been grafted onto the drug-medical system and it should not be difficult for the reader to grasp the fact that these poisons and this filth produce disease. That drugs often provide a temporary respite from discomforts and pains is admitted, but the relief is an illusion and the price one pays for it is great. Too many people take drugs for temporary relief and evolve, as a direct consequence, permanent trouble.

When one is seriously ill and has been so for a long time and has been under drug care during this

period, is it not possible that the continued sickness is due to the fact that the patient is so thoroughly medicated as to have his system decidedly poisoned and that, in reality, aside from troubles that may grow out of ill considered and unhealthy habits of life to which he may be addicted, his illness is the result of drug medication? When a thought of this kind occurs to one who has been brought up in faith in drugs, he is likely to be both amazed and horrified. The question will naturally come to his mind: "Do you suppose that one so sorely afflicted as I am can ever recover without medicines?"--medicine in this instance being drugs.

The answer to such a question is that it is most certainly probable not only that such a patient can get well without drugs, but that he cannot get well with them, that it is safer and surer to care for the sick by other and less harmful methods. *Hygienic* care offers such patients their only hope of recovery.

No poor, habitual drunkard is more dependent on his alcoholic liquor for "strength" than are the great mass of the people on drug poisons for "health." To live is but another name for "ill health;" to be ill is to have to be treated; to be treated is to take poison; to take poison is to suffer daily tortures for years and then die prematurely. Our country is teeming with people who are sick from being drugged and they have been so drugged--and it is *drugged* they have been--as to be sick only from that cause, and they can never again know health but must, until death puts an end to their miseries, linger out lives of unspeakable wretchedness. It is a fearful thing to give a man suffering with some slight ailment that would soon end, a drug that makes him a victim for life! What extraordinary prerogative does the profession have in its ability to kill according to law!

It would be impossible to determine, with the present habits of the people, how much of their suffering and disease should be attributed directly to the taking of drugs, sometimes as *medicines*, but often as aliment and for pleasure. It is impossible to stress too much the fact that everything that is not strictly alimentary and necessary to form and replace tissues must constitute a tax upon the body and an exciting or disturbing element and to unduly wear the delicate organs that are forced to carry it and dispose of it. Drugs and incurable diseases are corelated.

How much of the physical lassitude and inefficiency so much complained of is the result of the great and undue labor that the body is forced to perform to protect itself from the damages threatened or produced by the taking of these substances into the vital domain? Once we have established tolerance for drugs, their effects are so insidious that they often elude our notice and the one taking them is convinced that he is doing himself good by swallowing drugs. Even in small, but repeated doses, drugs to which tolerance has not been established often do much harm that escapes our notice. The only test we usually employ is that of present transient sensations. If a cigarette, for example, makes us feel better for a brief time, we do not analyze the matter and realize that we "feel" better because we do not feel so well--this is to say, we have *re-narcotized* ourselves so that we are no longer aware of our true condition. A transient sensation of *wellbeing* (of narcosis) is mistaken for a genuine feeling of wellbeing and we go blindly on in our stupidity.

Having failed to perceive the true relations of drugs to physiology, the present drugging practices, which have descended from the older practices, are the same in kind, if not in degree. The present-day physician accepts the poisoning system as a finality. But he is, nevertheless, concerned over the patient-killing effects of the new wonder drugs. He talks much of progress, but is forced to recognize that it is a kind of "progress" that brings anguish and despair to hundreds of thousands of its victims.

"There is no *cure* for the common cold. There is no *cure* for arthritis. *Science* has not discovered a *cure* for Parkinson's disease. We have no *cure* for diabetes." This melancholy refrain is heard and read repeatedly by people who are suffering and seeking a way to good health. "The cause of arthritis is unknown. We do not know the cause of gall stones. We have not found the cause of multiple sclerosis. The cause of migraine is unknown." This is the second stanza in the same lyric. "The cause is unknown; no *cure* has been found. We can give you aspirin to relieve your headache; we can give you a laxative for your constipation; we can give you cortisone to relieve you of much of your suffering with arthritis; we can give you drugs that will 'steady your nerves;' we can give you a *sleeping potion,* an *analegesic,* a *sedative,* a *tranquilizer,* a *stimulant.* We can palliate your symptoms; we can cut out your organs; but we can do nothing for you that is of any real or lasting value." This is the third stanza in the melancholy song.

But a lack of *cures* is the minor part of the story. The great flood of side effects and iatrogenic diseases resulting from drugs has brought the profession to the point where they can say to the young girl with pimples on her face: "We cannot *cure* your acne, but we can give you cancer;" to the man seeking relief from headaches: "We cannot *cure* your headache, but we can give you hemorrhages of the stomach." This is the fourth stanza of this melancholy refrain.

Notwithstanding the hundreds of vaunted *cures* possessed by the medical profession and the great volume of supporting statistics they bring forth, the fearful fact still remains that disease is on the increase and the volume of crippling and lethal side effects of drugs grows by leaps and bounds. Surprisingly rapid changes in public opinion may be expected as this evil continues to multiply.

Physicians have not yet recovered from the trouble which thalidomide brought upon them and they will not soon recover from the just alarm which this and many of their other drugs have aroused. But they will continue to reassure the frightened public and they will strive to inaugurate petty reforms to give the people a false sense of security. In this latter effort, they will receive valuable assistance from the state, which by its regulatory provisions, will seek to make the people feel that they are being duly protected. It is, nevertheless, true that the thalidomide tragedy, which was of nearly world-wide proportions and involved many thousands of babies, brought out into the open drug evils that had long been festering beneath the surface. For the first time in history the popular press dared to openly discuss the many evils of the drugging practice. The net result of this publicity of what are called the side effects of drugs was to frighten the drug-taking public, create a near panic in the ranks of physicians and make the manufacturers of drugs anxious about tomorrow. There is fear lest the public lose confidence in drugs. All efforts at setting up tighter controls, at assuring the public that this or that drug is safe, are intended to reassure a frightened public and to attempt to give them a false sense of security.

We often have it told to us that drugs can be a blessing or they can be a curse; they can relieve human suffering or they can produce human suffering. But we are faced with the obvious fact that their blessings are fictional and evanescent, while their curses are real and lasting. They are rapidly becoming a menace to the whole race. When we study what is happening, we realize that they are becoming a growing threat. Every big drug corporation in the world is in a mad race to produce more powerful drugs without any consideration for their effects upon the health and lives of the people.

The crass commercialism, economic itch and criminal acquisitiveness that dominates the profession of medicine keeps its practitioners continually experimenting on their patients with new and novel drugs and operations. Making great boastful claims for their new and old remedies and discarding them frequently for newer and more novel "wonders" underscores the lack of knowledge possessed by the profession. Yet, no one should think that they are doing all of this ignorantly. They know exactly what they are doing and why-they are doing it for money. Physicians who go from ward to ward feeling pulses, looking at tongues and dispensing poisons are not safe members of society.

There are no drugs that do not produce so-called side effects and it is certain that the more toxic of them invariably produce iatrogenic disease. For example, in his researches, Hans Selye demonstrated that animals dosed with corticoids and sodium salts rapidly developed fatal cardiac necroses followed by myocarditis. The physician gives corticoids to a patient suffering with arthritis, which he knows will not remedy the arthritis and the corticoids produce heart disease in the patient. Certainly there must be more reliable ways of caring for arthritic cases.

Not long since a study group appointed by the American Medical Association to study the effects of drugs upon the blood indicted 48 drugs for their definite blood damaging effects. Chloromycetin, which they designated the No. 1 culprit, seems to have a "definite toxic action on the bone marrow" where blood cells are produced. Among other drugs listed were others of the antibiotics, a number of tranquilizers, certain sleeping pills, the so-called anti-arthritis and anti-gout drugs--colchicine, butazolidin, benemid and gold salts--four pain killers, including phenacetin, so-called anti-diabetes pills, certain so-called kidney stimulants, the anticoagulant drugs, several anti-epileptic drugs, thyroid drugs and six different sulfa drugs.

The so-called wonder drug, chloroquine (a synthetic quinine), which is credited with preventing malaria,

was found to produce blindness among its evil effects. Indeed, the so-called side effects of the new "wonder drugs" are said to still "plague the physicians." It is estimated that 1.3 million Americans are made sick by the drugs they take to make them well. This estimate is far short of the actual number that are made sick by drugs and covers only those cases that are made sick enough that the physician recognizes the drug as cause. The fact is that it is impossible to take a drug without being made sick.

When the thalidomide tragedy frightened the drug world, there followed a few years of intensive testing of drugs in an effort to determine what other drugs would cripple and deform the unborn. So many drugs were found to damage the unborn that many physicians went so far as to advise pregnant mothers to avoid all drugs. Others urged what they called a minimum of medicine during pregnancy. So great and so extensive are the damages produced by drugs that the time must be close at hand when public recognition of this fact will compel the discontinuance of all drugging.

Facts about the harmfulness and futility of the drugging practice coming from the highest medical sources have a force which cannot be resisted. By their own showing, we are on the right side and shall ultimately and inevitably drive them from their field. Their's is a confession that speaks no less eloquently for the integrity of the men who make it than for the superiority of *Hygiene* as a way of life. It is true that medical spokesmen make no mention of *Hygiene,* but after they have completed their confession about drugs, there is nothing else left.

The people are fearful and ready and cannot be quieted by the most powerful opiate. They are asking: "What of the morning?" The profession must answer or die as a profession. If they answer truly, it must be in condemnation of themselves. If they answer falsely, the people will surely find it out, for they have been fed on falsehoods until they have nausea and are ready to spew them out. Nothing but the plain wholesome truth will be accepted when once the great engine of thought is awakened and the fires of reason propel the machinery.

One of the facts that has recently come to light is highlighted by an article in the *British Medical Journal,* March 13, 1965, which says: "Phenacetin has been used continuously in treatment for almost 80 years, and is contained in many proprietary preparations ... The association of phenacetin with renal (kidney) damage was not disclosed until the 1950's and the reports emphasized several features common to the cases . . . Clinically these patients usually presented features of acute or chronic renal failure, and at necropsy the kidneys might be normal or reduced in size, and showed papillary necrosis." Again: "Questions are now being asked whether phenacetin needs to be retained in the doctor's armamentarium . . ." and it says that "at present it would seem wise not to prescribe analgesic drug mixtures containing phenacetin as a long-term measure to patients with diabetes or disease of the renal tract. Patients in whom renal damage associated with phenacetin intake is recognized clinically may improve considerably if the drug is stopped completely."

That a drug may be extensively used for many years by the best men in the profession before its evil effects are discovered, as was the case with aspirin and phenacetin, can be due to only one thing: namely, the blindness of the profession that grows out of its faith in the beneficence of poisons. The physician who cannot tell that his drugs are producing ill effects upon his patient until serious, perhaps fatal consequences evolve, has no business prescribing drugs. Like the man who cannot tell the time of day until he hears the clock strike, hence has no need for a watch, such a physician has no need for a prescription pad.

Many times have we received long letters from husbands detailing the diseases with which their wives suffered over the years, the operations they have had, the physicians they have consulted and the drugs they have taken. The letter would tell us of how much benefit the wife has derived from the application of *Hygiene* to her case. But the husband is usually puzzled. Why should she still have any ailment at all, now that *Hygienic* attention has been applied to her? No person ever entirely recovers from so much drugging; few can suffer so long even without drugs and not evolve irreversible changes; the results of surgery cannot be removed. Hygiene may keep such a person alive and comparatively well and comfortable, but he or she is not going to evolve full health (even where this is possible, more time is required than is usually given) and both he and she should be happy that so much progress has been made. Is it to be thought that one can submit to constant poisoning for years and then wipe out every vestige of its effects?

Herbs

CHAPTER XLVIII

Medical men long held and many do yet seem to hold that nature has provided remedies for disease, that there is a "law of cure." To provide remedies, instead of requiring obedience, would be to break the laws that exist. A "law of cure" would be in opposition to other laws. Broken law provides penalties. Obedience to physiological law is the condition (not the remedy) for recovery from penalties. All penalties are limited; hence, recovery becomes possible if obedience is returned to. The millions who live on the earth today who are convinced that they must have drugs with which to dose themselves continually to keep the machinery of life operating, supported in this as they are by their medical advisors, are greatly deluded. Not one of them could but discontinue this false and destructive dosage at once with distinct advantage. We know the difficulty of convincing them of this truth, but this in no wise invalidates the fact.

No argument about the Deity having provided these things for man's use can excuse us from the results of the abuses which we deliberately or ignorantly heap upon our long-suffering body. Such an argument is specious, false, unscientific and absurd. It is not sustained by theory nor by results, neither by logic or analogy nor by experiment or experience. No argument about the *necessity* of drug taking has any basis in any sound principle. There is no such necessity. This dreadful delusion of the people is an insult to intelligence and a libel of nature. The very way in which organisms are made and organized upsets at once this foul and murderous doctrine. But little investigation should make this clear to everyone.

It has long been held that somewhere in nature there is a *cure* for every disease, if only this can be found. In the search for *cures,* the vegetable, mineral and animal kingdoms have been ransacked for 2,500 years and yet no *cures* have been forthcoming. Both in the medical profession and outside the medical profession the belief continues to be held that the vegetable kingdom, especially those portions of it that are laden with alkaloids and glycosides, contains *cures* for the diseases of man.

Nature produces a great number of poisonous plants and venomous animals. It is rare that one of these is not recommended as a medicine. Almost the whole of the herbal practice consists in the employment, as medicines, of poisonous plants. Rarely are non-poisonous plant substances thought of as remedies for disease. Sometimes, it is true, poisonous plants are regarded as foods; but on the whole, the *nutritive herbs* are non-toxic and the *medicinal herbs* are toxic. The common weed known as burdock was once recommended in America as a food and in France as a *medicine.* It is extremely doubtful that any plant substance that may be used as a *medicine* should ever be used as a food.

It may, indeed, be truly said that every substance taken into the body which is unwholesome depraves every organ of the body in proportion to its unwholesomeness. This is as true of vegetable drugs as of mineral drugs and synthetics. When a thing is nauseous, disgusting and poisonous, we should have sense enough to keep it out of our body.

It is folly to assert as many have done that *Hygienists* make no distinction between *poisonous drugs* and *innocent medicines.* By *innocent medicines* they mean their so-called herbal remedies, which, though often less toxic than the pharmaceutical preparations of the laboratory, are nonetheless poisonous. The so-called active principals of herbal drugs are poisons. As medicine's "best remedies" are among the most virulent poisons, drugs cannot serve nutritional needs. We know that the effects of poisons are injurious, even when they are not apparent, and the very actions that their presence occasions are evidences of their harmfulness. A "mild *laxative"* is a *laxative* only because it is injurious. Were it harmless, it would not be a *laxative.* This is as true of herbal *laxatives* as of other types. The same fact is true of herbs that fall under other classifications.

How and when did the notion grow up that noxious and poisonous herbs that are unfit for food for man

or beast are designed to restore man to health when, by repeated violations of the laws of life he has made himself sick? If the self-styled healers can find any plant possessing what they term *remedial properties,* which if used by a man in good health will not make him sick, we will offer no objection to its use in caring for the sick.

The herbal practice was originally a ceremonial practice, the herbs being used in the rites and ceremonies of the shaman with no thought that they possessed any healing virtues. Medical historians are well aware of this fact, yet they have helped to create and perpetuate the fallacy that from remotest primitive times mankind has resorted to herbal medicines when ill. Indeed, several of them have attempted to establish an instinctive foundation for the resort to herbal medicines. The instinctive basis of a practice that changes with the wind and that, in almost all of its appliances offends the instincts of man, would be a joke were it not such a grim tragedy.

We need to recognize that many of the products of nature are unfit for entrance into the human body. Even many of the plant substances that are used or that have been used as human foods contain toxic substances and their employment may prove decidedly detrimental. I need hardly remind my readers that the tobacco plant is a product of nature and that its green leaves are as appealing to the eye as the green leaves of chard. But, besides containing minerals, vitamins and high-grade proteins, it is a hot-bed of toxins, nicotine being its most abundant and most toxic ingredient. Whoever would eat a salad of tobacco leaves would probably not live to regret it.

It is not true, as has been asserted, that when the poison has been extracted from an herb all the *curative* properties of the herb may then be safely taken advantage of. The alleged *curative property* of the herb is the poisonous quality and when this is removed, there is left only the food values of the plant. If all the poisons could be extracted from the tobacco leaf without damage to its other qualities, the leaf would form an excellent addition to a salad, as it is possessed of a rich supply of minerals and vitamins and contains superior proteins. But it would *cure* nothing.

Thus, it is sound to say that not everything that is a part of nature, that is, not everything that is natural, is fit for human use. This is true whether we seek to use it as a food or as a *medicine.* It is also important to note that, if there is nothing in a weed or plant that is inimical to the body's welfare it will be utilized as food and there will be no so-called *medicinal action.* Calder says of lobelia, which we received from the Indians of North America, that "like so many plants, lobelia is treacherous in the wrong hands. In very large doses it can paralyze the heart's action. In mild doses," he says, "it relieves the spasms of asthma." He omits to add that the relief is evanescent and the asthma persists. This indicates that the herbal practice, like all other drug practices, is symptomatic and that it uses for this purpose poisons.

People who believe in the *curative* power of herbs seem to think that they grow only to be steeped, compounded, desiccated, extracted, inspissated, concentrated and swallowed as *medicine.* Each herb is supposed to possess its own *virtues* and to carry healing *potencies* that are significantly different from those of other herbs.

Let us consider a few of the *herbal medicines* that have been and are used in the treatment of the sick. In an old medical work I find a prescription for making what its author called a peristaltic persuader (a *laxative*) in which two drachma of finely pulverized rhubarb was the chief *active* ingredient. The formula was to be made into pills, each of which would contain three grams of rhubarb. These rhubarb pills were especially recommended for "delicate females" and for children. Their agreeable flavor was supposed to make them easy for the children to take.

Said a famous British physician of the last century: "If the bowels are constipated, they should be kept regular by a pill of rhubarb of five grains every morning." Both physicians and herbalists prescribed rhubarb as a *laxative.* It was also employed as a domestic *remedy.* A tincture was made of rhubarb and it was employed as a *purgative.* As a pill, rhubarb was declared to be "the most gentle and gradually operating form of the drug," while the tincture was said to be "the most immediate in its action." With all the *virtues* with which they invested rhubarb, it was commonly observed that the employment of both rhubarb pills and tinctures for constipation aggravated the constipation, as did all other *laxatives* and *cathartics.* For example, *podophyllum,* which is still employed as a *laxative* and which occasions griping

and purging, is well known to aggravate constipation. Indeed, it should be common knowledge today that all means of coercing bowel action aggravates the condition of the bowels. Only the removal of the cause of constipation may increase bowel action without doing harm.

Returning to rhubarb, although this was classed as a form of "mild medication," it should not be forgotten that the employment of rhubarb as a *laxative* was observed to occasion, even from a single dose, what was called a violent bloody flux, that is, dysentery with blood. It would surprise us to know all the evils that can and did flow from drugging with what we now regard as relatively harmless herbs. Still greater evils flow from drugging with the more virulent toxins that are used as medicines today, but we are not reduced to the necessity of choosing between the two evils. We do not have to choose the lesser of these two forms of poisoning the sick.

It was declared to be not always easy to force physic upon a "spoiled" child. But it was said that if a rhubarb pill was pounded into a powder and then mixed with currant jelly, honey or treacle, infants and young children would take it. Certain *laxatives* were made "to taste exactly like ginger bread" in order to induce children to take them. Every means was employed to slip their poisons past the faithful sentinels that guard the entrance to the alimentary canal. When a thing is nauseous, disgusting and poisonous, we should have enough sense to keep it out of our body. We must learn to respect that which saves life, not that which destroys it. It is a mistake to suppose that a vegetable poison may not be as great an evil as a mineral poison. Indeed, several of them are more virulent than any known mineral. Rhubarb is not a virulent poison, but it is sufficiently toxic to occasion much sufferingnausea, vomiting, griping and violent diarrhea.

Another example of the herbal *remedies* that have been popular, one that is still in use, is mandrake (podophyllum peltaturn or may apple), the roots and leaves of which are poisonous. Long employed to cure disease and thought to be especially valuable in diseases of the liver, it occasioned much griping and purging. It is an extremely bitter substance. It would appear that all bitters (among which should be listed quinine, morphine, dandelion, chocolate or cocoa, etc.) are poisonous--hence our advice not to eat "foods" that are bitter.

As all healing power resides in the tissues of the sick individual, mandrake can *cure* nothing. It is simply an evil when introduced into the body of the sick, one that must be expelled. This is the meaning of the griping and purging that follow taking it. This is the means of expelling it from the domain of life. In the days of ignorance the actions of the body in expelling poisons were mistaken for the beneficial actions of the poisons. Now that we know that poisons are inert substances and do not perform these actions, there is no longer any excuse for us to make this mistake.

We may employ mandrake as an example of the herbs that are employed to *cure* disease. Only poisonous herbs are thought to have *medicinal qualities.* If an herbal substance does not occasion actions of expulsion and resistance when taken into the body or applied to it, it is not vested with any power to cure. If the body ejects it by vomiting, expels it by diarrhea, casts it out by diuresis, excretes it by diaphoresis or in some other manner speedily expels it and, if in doing this, pain or griping or vertigo or other discomfort and physiological disturbance is caused, this is regarded as sure evidence that the herb is beneficial. If the patient that has thus been abused recovers health in spite of it, credit for the recovery is given to the herb; the self-healing power of the body is completely ignored. There is no difference in this practice from that of the *regular* or *scientific* physician who credits his patient's recovery to the curative work of his drug and ignores the body's power to heal itself.

The obvious fact is that the *regular* medical practice and the *irregular* herbal practice are but two parts of the same system of fallacy. Herbs are not *natural medicines.* That herbs are as natural as stones or rattlesnakes is certain, but that they are *medicines* (healing agents) is a fallacy. Gather up a whole armful of herbs from the fields and creek bottoms and give them to the sick with a liberal hand and they will no more remove the cause of the patient's suffering than will the pills or bottled potions that are sold in drug stores. They no more supply any of the normal and necessary elements of health than do the drugs of the corner apothecary shop. The herbal practice is no more based on physiology and biology than is the regular drugging practice.

Many common plants have been employed as herbal medicines and many of them are still employed from which to extract their so called *medicinal* qualities. The common jimson-weed, for example, is the source of stramonium. Fox glove is the source of digitalis.The medical profession borrowed this *remedy* from an English countrywoman herbalist who brewed fox glove and gave the tea to her patients. Members of the physio-medical school, which was almost exclusively an herbal school, spent much of their strength in bolstering the self-evident absurdity that while the drugs of all the other medical schools were poisonous, their drugs were not. The simple fact is that the drugs of all the medical schools of that time (as of the present) were and are poisons. Their pharmacopeias were catalogues of poisons. Even so mild an herb as peppermint has been known to kill and side effects have been reported to flow from its administration.

The vegetable alkaloid reserpine (which first came to the attention of the English speaking world as *rauwolfia serpentine*) was first used to reduce blood pressure. Then it became a "wonder drug" in the treatment of the mentally ill. The first blush of enthusiasm was soon followed by a realization that it not only does not remedy mental disease, but that it causes a whole series of undesirable effects. This has not hindered the search for and employment of other *tranquilizers,* all of which have been equally disappointing and have been loaded with undesirable effects of their own. In the face of all this failure and evil it is still hoped that something really valuable may yet be found in the socalled *hallucinatory drugs*--peyote, mescaline, mushrooms, LSD and other such drugs to be tried. If a drug will occasion hallucinations, it must be useful in remedying mental disease. This is in keeping with the whole medical idea that in order to possess *curative* properties, a substance must be capable of producing disease. Herbal drugs have been called "traditional medicines," a fact which does not alter their harmful character. A Dr. Schonental of the Toxicology Research Unit of the Medical Research Council (Britain) said in an article in the *New Scientist,* April 16, 1965: "Toxic substances found in plants used traditionally as medicines may be responsible for some diseases prevalent in isolated and primitive communities, thought till now to have been caused by either viruses or genetic factors." He points out that many plants which have been thought to be possessed of medicinal qualities, as shown by their inclusion in herbal drugs, contain substances capable of damaging the liver.

He thinks that immediate poisoning from the use of such plants would be quickly noticed and the plants would be avoided as a consequence, but he stated that it was found only comparatively recently that there may be a "delayed-action effect" and that, as a result, liver tumors may be produced some years after the plants have been employed. He mentioned ragwort as a plant long in use and still in use as a *medicine,* yet which is dangerous to use. This drug is still found in some of the textbooks and he quotes the following about it from a book published as late as 1923: "Useful in coughs, colds, influenza and catarrh of the mucous membranes generally. It gives relief in sciatica and rheumatic or gouty pains in limbs. The decoction of 1 ounce in 1 pint of water is taken in wineglassful doses as desired."

If we substitute the phrase *cumulative effects* for *delayed-action effects,* we will probably better express the facts. It must be realized that the so-called "active principle" in all *medicinal herbs* is a poison. To say that diseases caused by their use are due to viruses is to use the original and true meaning of this word. It would not be correct to call them *diseases of medical progress,* as is now the custom, but diseases due to poisoning. As almost the whole of medical practice is a poisoning practice and has been so from Hippocratic times to the present, it is absurd to say that if a substance is found to be immediately poisonous it will be avoided.

There are many misguided people who think that if a poison is wrapped up in a plant, it is harmless and they continue to hug this delusion in spite of the fact that many of these plants are capable of killing quickly. These people may be temporarily upset by such revelations as those made by Schonental; but they will return to their herbs with confidence after the first shock wears off because they do not realize that for a drug to result in a so-called *medicinal effect,* it must be a poison. The alleged *medicinal effects* of drugs are the efforts of the body to resist and expel them. Instead of digesting them and utilizing them as foods, they are expelled.

There is a tendency in many quarters to laud the former employment of what are called "natural substances" as drugs, while deprecating the employment of synthetic substances. "For many years," says a magazine article, "organized medicine employed only natural elements in animal, vegetable and mineral

realms for its drugs; but in the nineteenth century it began to turn to synthetic drugs."

It is true that there has been increasing reliance on synthetic products, but there has been no total abandonment of so-called "natural substances." But the implications of the language employed, that, "natural substances," being more like the elements of the body, are less harmful or more beneficial, are false. If this were always true, and it certainly was not true in the employment of gold salts, mercury, silver, bismuth, potassium, lead, etc., from the mineral kingdom, it does not follow that because a substance is less toxic, it is, therefore, more *curative.* It certainly cannot be contended that the animal and vegetable substances formerly so largely relied upon were harmless or that they did not give rise to untoward, even lethal side effects.

The venom of spiders, of bees and other insects, snake venom and similar animal toxins, which were so freely used as *medicine* and which are sometimes still used, cannot be thought of as harmless and beneficial substances. Vaccines and serums, now so freely employed, are of animal origin and are well known to be sources of severe damages, such as are subsumed under the rubrick *anaphylaxis.* Speedy death, sometimes following vaccination and inoculation, is dignified by the title, *anaphylactic shock.* In the past when an individual showed what is now termed unusual sensitivity to a drug, this sensitivity was called *idiosyncrasy;* today it is called allergy.

There are and have been those who rationalize the employment of so-called herbal medicines by declaring them to be foods. The physiomedicalists, who thought that drugs may "sometimes provoke the organs to do good work," contended that their drugs were absorbed and became a part of the living fabric. Thus, they dressed an old doctrine in a new gown--a doctrine subversive alike of both reason and science. If their doctrine were true, fruits would be the best remedies since they are the best foods; but in no sense can foods be regarded as *medicinal.* Foods are *nutritive substances; medicines* are substances that occasion disease.

A recent author says that, "they (herbs) are neither drugs nor poisons, but marvelous gifts of Nature herself." He attributes "healing power to them" and asserts what we know to be untrue, that this healing power "was recognized even by the most primitive peoples." He thinks that herbs are specially fruitful sources of minerals and vitamins and that "their effect we may probably ascribe to certain bitter principles which very likely sustain the alkalinity of the blood, thus aiding the combustion and elimination of the blood poisons."

With all of this pretense that they are better foods than the nonpoisonous herbs that we regularly eat as foods, he employs them in baths, poultices, compresses, in steam baths, sitz baths and in other ways that foods are not used and in which it would be impossible for them to be used as foods. In addition to these various non-nutritive means of application, he employs them as tonics, aperients, diuretics and for various other so-called *therapeutic effects.* His use of them constitutes a symptomatic treatment of the sick rather than an effort to nourish his patient. He lists senna leaves among those being specially vaulable, while he thinks that camomile is the finest of all herbs. He says: "The curative virtues of these are all well recognized and firmly established." He makes teas of indiscriminate mixtures of some of the herbs he specially likes and administers what he calls a "constipation tea," a "tonic tea" and a "nerve tea."

If herbs are really employed as foods, they will be prepared as foods and eaten as part of the meal, either as salads or in some other form in which we customarily take vegetables. They would not be given in doses to be taken at regular intervals for their alleged *pharmacological actions.* Certainly, when they are put into the bath water or in compresses (poultices), they cannot be digested, absorbed and assimilated. No man can claim that such employment of herbs constitutes their nutritive use. The obvious fact is that all the pretense that herbs are employed as foods is but rationalization. They are used as drugs or so-called *medicines.* They are not employed in health, but in sickness. Some of them are employed to reduce fever; some are employed to relieve pain; some are employed to occasion diarrhea; some are employed to occasion diuresis; others are employed to *stimulate* the patient and they are used in a variety of so-called therapeutic ways.

A New Revolutionary Situation

CHAPTER XLIX

A new revolutionary situation is rapidly building up to a climax. Within the past 70 years *medicine* has undergone a vast surface transformation. In America the physio-medical, eclectic and homeopathic schools of drugging have become extinct, their schools and hospitals either having been closed or absorbed by the allopathic school, which alone has survived. Its colleges have been standardized, its hospitals multiplied, enlarged and modernized; its pre-medical requirements for its students have been greatly extended; its courses of study have been lengthened, the curriculum has been greatly expanded; its research institutions have grown by leaps and bounds, and a large share of the wealth of the nation has been put at its disposal. If ever a medical system was provided with opportunities for advancement, improvement and progress, the present medical system has certainly surpassed all others in this respect.

Ceaselessly changing its surface through the ages, but underneath remaining forever the same, *medicine* resembles the ocean--its surface ever giving rise to small and large waves, so that it is never the same for two seconds, but underneath as changeless as the Sphinx. Today, after 2,500 years of "scientific investigation" and much boasted progress, medicine still rests on the bed-rock of magic and superstition.

For well nigh 3,000 years the medical system has been trying to redeem man from disease by medicating him. It has totally failed and worse, because it has increased rather than diminished the difficulty. There are hundreds of thousands of medical men in the world today; there have been hundreds of thousands from Hippocrates to the present. These men have labored and do now labor incessantly, day and night, to discover new *remedies,* as well as new ways to apply the old ones. They seek to acquire new skill in the application of their remedies. They wield the many thousands of drug medicines with all the science of their schools and boast of their scientific attainments. Why, then, do they continually lose ground in their war upon disease? Why do diseases continue to increase, to multiply and to become more complicated? Why do degenerative diseases continue to increase?

While reading the frequent boasting of medical men that they have greatly increased the human life span, it would be well for us to think somewhat upon the fact that there has been, coincident with this assumed increased length of life, a great increase in degenerative diseases and a steady lowering of the age at which they develop. Such developments are not consistent with increased length of life. Rather, they indicate, unmistakably, a shortening of the life span. The statistics that are provided us and that seem to indicate an increased life span are misleading in that they deal with averages and not with actual life spans.

In spite of all the advantages that have been afforded the *medical* system and in spite of all the advances of which it so proudly boasts, the health condition of America today is not only deplorable but growing progressively worse. A world writhing in pain and unable to build hospitals fast enough to house its wrecks must awaken from its somnolence and do an about face if it is to make any headway against the increasing incidence of degenerative diseases that make life all but unbearable.

Today the health of the American people is floundering in a deeper depression than at any time in the past. The crisis affects all sections of the country, all classes, all ages and both sexes. Old-age pensioners clamour loudly for a plan of state medical care, because they are sunk in physical discomfort and weakness and unable to pay the mounting costs of medical care. They are determined to saddle the whole nation with "free" medical care and are pursuing their efforts to accomplish this with the tenacity of idiots.

The period of hate, greed, suffering and infamy that the world is experiencing just now is not a forerunner of the end of the world; but it marks the summation of an age of false thinking, worse acting and stupid compromising with evils that we tolerate because they are profitable to a few. Our condition is rapidly growing so intolerable that we shall be forced to do something about it. The evils of the present

will have to be destroyed, root and branch, and a totally new way of life, one based on the eternal and immutable laws of nature, will have to be developed. Nothing in the present that will not fit into the new ways of life as a harmonious integer should be permitted to survive.

The preamble to the Republican platform of 1964 stated that: "The lives of men and nations are undergoing such transformations as history has rarely recorded. The birth of new nations, the impact of new machines, the threat of new weapons, the stirring of new ideas, the ascent into a new dimension of the universe--everywhere the accent falls on the new." Had this preamble added that everywhere except among the old party politicians and the medical world, where the accent is still on the old, the hackneyed, the outmoded, the accent is on the new, it would have been closer to the truth. The platitudenous sameness that characterizes writings and lectures on *medicine* (in all the schools) is matched only by the old-fashioned platitude and banality of the political speeches of old party candidates. The indestructible devotion to old-fashioned *medical* fallacy that is seen in all the schools of so-called healing is too obvious to need stressing. The very foundations of the *curing* systems are, nonetheless, groggy from the impact of *Hygienic* truth.

It cannot be too strongly emphasized that today the medical profession is confronted with obstacles and with problems which are insurmountable and insoluble. American physicians and their spokesmen have solid grounds for the fright and desperation which they frequently express. Increased mass sickness, the explosive developments of the so-called side effects of their new drugs, the growing number of iatrogenic diseases or what they call "diseases due to medical progress," the growing public distrust of their poisoning practices and the deadly menace of their wonder drugs--all this, and much more, constitutes an endless nightmare for all who would preserve the criminal system of poisoning the sick because they are sick. Doomed by the toxic evolution of its practices and soon to be outlawed by the enlightened opinion of mankind, physicians have every reason to stay awake at night and ponder the coming judgment.

The contemporary problems of side effects and iatrogenic diseases have forced a re-examination of the drugging practice. The spectre that haunts the drug industry is not the "quackery" that they are continually harping about, but the evils that flow unmistakably from the use of their own procedures. It hangs over them like an unexorcised ghost. They are always conscious of it. Just now the situation is hopefully chaotic; for as chaos always precedes creation, so will the present agitation, fear, uncertainty, perplexity, conflict of opinion and grand stirring up of the long-dormant brain of the people lead to something constructive.

Numerous surveys made by leading medical men themselves have revealed that there is a definite danger involved in entering a hospital. The mayhem in the hospitals is matched by the fact that 15 to 20 percent of the inmates of these institutions are suffering with drug-induced diseases. Hospitalization itself is declared to have produced a "noxious event" for no less than 20 percent of all patients who enter these institutions, and one in ten of all hospital deaths is authoritatively declared to be, in whole or in part, the result of hospital care.

Are These Our Doctors? by Evelyn Barkins, *The Doctors' Dilemmas* by Louis Lesagna, M.D., *The Therapueutic Nightmare* by Morton Mintz and *The Doctors* by Martin L. Gross are but a few of the many books that have been published within recent years discussing the evils and shortcomings of present-day medical and surgical practices. Many magazine articles and newspaper columns have also been devoted to this subject. It is generally agreed both by the lay writers and the physicians who have written on the subject that physicians are poorly educated and poorly equipped for the work they pretend to be doing. In addition to these writings there have been congressional investigations, such as those conducted by Kefauver and Humphrey, which have shown the inadequacies and evils of present-day practice. These exposures have led to the passage of laws and to many suggestions of means and measures that should be taken to improve medical practice. It hardly needs to be said that what has been done and what has been suggested to be done are but reform measures designed to sweet-scent an institution that should be destroyed root and branch.

It is fundamentally false and historically unsupported to assume that any number of petty reforms of an existing institution can result in its transmutation into something radically different. The fact is that the more an institution reforms the more it remains the same. Reforms do not merely spread out a revolution

over a longer period of time; they forestall the revolution and preserve the thing that it is sought to get rid of. Revolution is not reform concentrated in a shorter time; rather, it is a basic or radical change that obliterates the old and ushers in the new.

The writers of the aforementioned books and books like them, whether laymen or reputed scientists, professing to take a hard look at the prevailing *medical* system, manage to ignore the long-evident symptoms of its fatal illness. Nothing in the harsh realities of the past half century shakes their faith that *medicine* remains basically a sound system, which can be reformed into a beneficial system of practice by sufficient tinkering with the surface phenomena. Burdened with their unwarranted belief in the basic soundness of the *medical* system, they inevitably see the ills which they are unable to blink, with self-deceiving optimism and sterilely occupy themselves with senseless proposals for improving a *medical* system that is hopelessly doomed. Even the unmistakably grave problems of mounting crippling and lethal side effects and a continuing heavy creation of drugs that add to these fail to dishearten them because they simply refuse to believe that they are grave. They see these effects as mere technical problems and think that they can be handled without radical change in the methods of practice or in the fundamentals upon which the practice rests. Is it their fault if contrary developments insist on belying their cheerful analysis?

All efforts to solve these "current problems" are miserly efforts to make the old system work or at least to produce less harm. The most that such writings can do is to alert the *cure*-mongers to the defects of their schemes, which defects, at best, they can only alleviate, but never eliminate. Such books aid and abet the prolongation of the very evils which they reveal. Their authors waste their time in such work; the great goal for which they profess to be aiming cannot be reached by the work they are doing.

It is plain to any student of *medical* "history" that today humanity stands at a fork in the road. Inevitably and always the *curing* schemes run into a blind alley from which they cannot escape. The *medical* system is now marking time in such a blind alley. Anxious to preserve the fundamentals of their evil system, they seek by reform to modify some of its worst evils. Medical reforms and regulations, such as those that grew out of the Kefauver investigation, would preserve the system of poisoning, but would eliminate or try to eliminate some of the poisons used, or reduce the size of the doses, decrease their frequency or substitute milder for more drastic drugs, etc. Like all reformers, those who would save the medical system seek to eliminate effects without removing causes; they are like the physician who applies a corn plaster to a toe while leaving the ill-fitting shoe to produce more friction. Like all reformers, they are always inconsistent, self-contradictory and uncertain about where they are going. They proclaim against an evil, but are content to attack isolated evils instead of seeking to destroy the whole system of which the isolated evil is but a minor feature. Only those remain consistent whose principles are sound. If the revolution is not to be a still-born thing--if it ever reaches the dignity of a revolution, sweeping into it men of all ranks, the poor and the rich, the illiterate and the man of education--it must rest upon a bed-rock of great principles.

In general, those who dislike and oppose valid reforms and urgently needed revolutions have been those who are well off in the existing order of things. Although they have persuaded themselves that their opposition to and dislike of change proceeds from conservative principles and their love of that order which is "heaven's first law," the true explanation of their opposition to any change in the existing order is that they fear the loss of their special privileges, unique advantages and lucrative practices. They have developed a fine taste for the preservation of their own interests. If a valid reform begins or a revolution breaks out, how can they tell where it will end? They are not opposed to change because of any desire to see others wretched, destitute, sick and unhappy, but merely because they fear that any radical change might make matters worse for themselves. The general has its exceptions, but still it is the rule that the comfortable, full-fed and amply provided for are not likely to carry the torch of social, *Hygienic* and *medical* reform and revolution. This is the work of those who see and, perhaps, feel where the shoe pinches and supplies fail.

The suggestions made by popular writers on medical evils for correction of these evils are but petty reforms that the true revolutionist will shun. They are pitfalls to catch the unwary. The crocodile tears that were shed by Kefauver and Humphrey over the people damaged and killed by drugs were as phony as a three dollar bill. They were sham tears designed to make the poor victims of the faith in poisons think that something was being done for them. In the future these victims are to be safeguarded. All of this was

meant to encourage the illusion among drug takers that the medical profession and the government are friends of the sick, and that in these lie their real hope for the future. But, looked at from the vantage point of the *Hygienist,* all of this effort to pull the wool over the eyes of the people was but evidence of the contempt in which the physicians, drug manufacturers and politicians hold the people, and expect them to accept as real all the crocodile tears shed by the agents of exploitation.

What is not generally realized, even among *Hygienists,* is the rapidity with which the crisis in the drugging business is coming to a climax. To the flood of wonder drugs, their effects in causing a whole catalogue of disastrous side effects, and the contempt the people have brought upon themselves by their past credulity and apathy, we are indebted for the creation of a situation essential for the spread of fear and distrust, even open rebellion, in which the profession of *medicine* is going to be fatally wounded, if not destroyed. The perfidy of the people has inspired the contempt for them shown in the efforts of the Kefauver committee, the Humphrey committee and the press, to channel and dissipate the popular fear and distrust. These efforts have been, perhaps, more successful than we know; but they have not, thereby, succeeded in destroying the causes of this distrust and fear.

Side effects, iatrogenic diseases and drug-induced deaths may be said to be a kind of catalyst which is reducing the complicated thesis of the healing question to its essence--shall the sick be poisoned? In this combination of pathological phenomena he the potentials of a mass awakening and, provided we *Hygienists* do our work well and with sufficient energy, a revolution in the world of so-called healing.

The end is, or should be, an eventual non-poisoned world and the present medical system must be destroyed by whatever methods are necessary and effective if the human race is to survive. The administration of poisons, being imminently logical from the viewpoint of the medical man, will not be attacked by him. This attack will have to be mounted and intensified by a growing army of informed *Hygienists.* Whatever else they were, the pioneer *Hygienists* should be called moral and physical heroes and we should be willing and ready to receive from them whatever is valid for us today in the light of their struggles and achievements, their errors and victories.

Changing the medical system will not by itself change human behavior. Life in the present jungle has left some corruption on all and time will be required to eradicate every vestige of our unnatural and anti-natural modes of behavior. The *Hygienic* revolution can produce its own frustrations if those taking part in it forget what their goal is and do not assiduously set about changing themselves.

However limited their long-run effectiveness, those representing the persistent *Hygienic* strain in America have honored their people by their example of non-cowardice and serious thought about our revolutionary goals. Their example should serve to remind us that one quality is as supremely important today as it was yesterday: *to have tested convictions and act upon them without equivocation or compromise.*

Why a revolution? Has the world not gotten along very well on the basis on which it is now established? Must we undergo a radical change to enjoy the blessings of health and vigor? Why should we abandon the certainties of the present for something the outcome of which we do not know? Shall we take a chance that it will be better than what we now have? These are not idle questions to those of us who wish to see the insane practices of *medicine* replaced by a sane *Hygienic* milieu in which no man or woman would be compelled to live contrary to the laws of being. Then only can the people be led to permit the living organism to do its own healing work.

Questions such as these may also be running through the minds of many people today, as they view with apprehension and alarm the growing evils of drugs. Fearful of the new drugs and realizing that the old ones were abandoned because they were failures, they sense that something in the way of a change is needed; but they are likely to think that, perhaps, some petty reform will make things work. But a better understanding of the functioning and the imperatives of the biological system serves to confirm what ages of experience have already taught us-namely, that no petty reform of the drugging system will suffice.

The fact is that the world has not gotten along well for ages on the present basis. Confining our remarks to *medicine,* the *medical* system is but two and a half millenniums old. At its origin, it was a system of

mild drugging that, while it restored no health, offered less obstruction to the healing processes that belong to life. Not until after the close of the Dark Ages did the practice of drug medication become popular. From that time to this, it has grown in deadliness--in toxicity. The record of its past is nothing of which any *medical* man can be justly proud.

Why a revolution? Because the *medical* system is a false and fatal system. Its foundation is laid in error and its practices are the outgrowths of false conceptions. There are no genuine certainties connected with it, save that of evil. We know that all of its drugs are poisonous; all of its vaccines and serums are hurtful; all of its surgical procedures are damaging; all of its rays and other means of caring for the sick are harmful. It is not a source of health and vigor. No possible reform of such a system can do other than perpetuate a system of error. A real revolution is urgently needed. Reforms are dangerous in that they serve as bait; they serve to lure the people away from basic issues and tempt them to be satisfied with petty reforms.

The *Hygienic* revolution is a great revolution. It touches more interests than any revolution since the agrarian revolution that occurred before the dawn of history. Think this not an extravagant statement. It is true. The *Hygienic* revolution combats greater evils, contemplates greater benefits and will result in more ultimate good than any social, political, religious or *medical* change in the habits, opinions, thoughts and actions of mankind that has come within the knowledge, either by experience or by reading, of my readers.

I fear that few of us look at it in its legitimate bearings. We discern not its destiny. We comprehend not the grand, gradual and mighty changes which it is producing and is yet to produce in the aims and conditions of the family of mankind. If, to the great mass of the population of the world, it is still viewed as a humbug, those who understand it most view it more favorably and expect more of it. But many of these think that it is not much superior as a means of restoring health to drugs and surgery. Others think it preferable to all the *medical* means, but suppose its value to lie chiefly in its applicability to states of disease.

We must learn to see *Hygiene* in a much broader light. Its real significance lies not alone in the efficacy with which it enables the body to restore its health, but also in its fitness for use by the body in maintaining the healthy state. It is a program that reaches back to the very roots of being for its sanctions.

We view the progress of *Natural Hygiene,* with the science and philosophy on which it is founded, as being the necessary foundation of all revolutions and reforms that will truly benefit mankind. The first object of a sick man is health and he can do nothing that is very effective in bettering his condition in other ways until he has freed himself of suffering and weakness. This is equally true with a sick world--its primary need is health. With health will come vigor, clear-sightedness and a capacity for change, for valid reform and revolution.

Give the world health and you provide it with a capacity for every kind of physical, moral, social and economic improvement. When a man has pursued a *Hygienic* course to the attainment of full health, he finds that his moral ailments have been purged from him. So will it be with the whole world, when the universal adoption of *Natural Hygiene* has restored man to that pristine soundness and primeval vigor that he knew when the race was young. *Hygiene* is the best and the only means of renovating society.

The whole secret of the revolution which we are aiding lies precisely in the transition from merely quantitative changes to qualitative ones in the ways of caring for both the well and the sick. It will represent a transition from one phase of body care to another and radically different one. Whoever chooses the path of reform as a substitute for revolution does not choose a peaceful and slower path to the same end, but chooses different ends altogether. For this reason we must vigorously resist all reformist trends and expose all reform movements. We must meet reformism, not merely with the negative principle of anti-reformism, but with positive revolutionary goals and with revolutionary means. We must not be fooled by any opportunistic principle which is false and always leads to failure.

To the accusation that we betray the needs of the present by placing our hope in some far-away revolution, we reply that nothing short of a real revolution will suffice. No petty reform will do more than leave the old system intact and functioning. It will lend it a renewed lease on life, but will not serve the

people. Any apparent immediate gain of reform will be wiped out within weeks after it is gained. History records that reforms are highly useful in appeasing discontent, but they add little to the genuine welfare of the people.

The *Hygienic* movement of the present provides the only center of organized resistance to the theories and practices of the dominant school of *medicine.* It is the fate of all such movements, no matter in what field, to attract every manner of reformist and opportunist element and if these are not resisted, the movement is inevitably weakened. This calls for a ceaseless stand and struggle against all reformist tendencies. For, all past experience in all fields has shown that, if such resistance is not continued, a revolutionary movement tends to degenerate into a mere party of reform with many romantic ideas, but no fundamental approach to the problems that confront society. Our struggle against reformism must be unremitting. We cannot repudiate the revolutionary principles for which we stand and proclaim mere reformist aims.

We have to contend, not only with the false theories and fatal practices of the *medical* profession, but with the lingering vestiges of the other schools of *medicine,* as these are embodied in popular thought. Under such a situation, the possibility of tactical and eventually strategical errors are multiplied many times. If we do not understand the reformist elements that will force their way into our movement and effectively resist these, we will be transformed into a mere collection of antagonistic movements, each trying to save itself by converting the *Hygienic* movement into an outright reform movement.

The present prospects for a militant *Hygiene* are far from dark. But we must fully realize that if we are to take every advantage of the opportunities now presented to us, all of us must exert ourselves to our utmost capacities, energies and resources. We cannot, we dare not permit trivia and personalities to dominate our thinking and our acting in this time of crisis. He who thinks that the forces of organized *medicine* and the drug industry are too strong for us to overcome or who foolishly believes that the physicians themselves will change and do the work for us, is useless and spent. His own folly and inaction doom him and he thereby invites doom for the *Hygienic* movement, despite all of his protestations of loyalty to the principles and practices of *Hygiene.*

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Opposition

CHAPTER L

What new truths, reforms and revolutions, though ever so beautiful and practical, have ever received public approval when first promulgated? Which of them has not been forced to contend with the combined forces of ignorance, superstition, bigotry and entrenched privilege? It seems an unfortunate circumstance that in every age and in every department of human activity and learning, truth must engage in a death grapple with fallacies, superstitions and popular vices and defeat and rout these before it can receive a respectable hearing.

When new truth must be promulgated, when new rules of human action must be recognized by the world and inaugurated on the throne of reason, bitter strife must preceed. It has ever been so, as Trall so clearly stated: "Never was a great principle announced to the world that the world would not crucify in some way the medium. Never was a new light in science set up, or a higher standard of morals raised, that did not bring opposition and conflict. There never was a great truth established among men until its advocates have battled long and arduously for it and, perchance, died for it."

Perhaps there is something to be said for the testing of truth by such a struggle, but it does seem to delay the progress of mankind. The vital truths of *Natural Hygiene* will be accepted as certainly as were the truths that the earth is round and not flat, that the earth turns on its axis and the sun does not go around the earth. We need not be discouraged, although we may be excused our impatience with the slowness of progress.

Hygiene could not be adopted by the people without an intense struggle. The interests involved were too great not to arouse violent opposition. The principles and practices of the *Hygienic* school were new, original and independent. They had never before been written into the books of any of the schools of so-called healing, taught in any of their schools nor recognized by any of the various healing professions. While they were each and all in direct opposition to each and all of the fundamental principles upon which the popular so-called healing systems were based, they were and are demonstrably in harmony with the laws of nature. *Hygiene* reversed all of the doctrines of the schools and repudiated all of their practices.

The syngraphic efflorescence of *Hygiene* was sufficient to frighten the drugging schools into hysteria. They attempted to meet the new truths with pseudo-righteous eloquence and occasional splashes of pomposity and when this proved unavailing, they turned to repressive measures, all reproach being advocated in the interests of the public health. The difficulty with which a new doctrine makes any headway and the bitterness with which it is opposed are, as a rule, in equal ratio to the soundess of its principles and practices. Like many other important truths, when first announced, the truths of *Natural Hygiene* were almost universally scouted as having no other foundation than the impudent trickery and charlatanism or the delusive fantasies of weak intellects. Many were the coruscations of wit that flashed from the pens of flippant penny-a-liners and many were the sneers of grave and reverent philosophers at the claims of this new science. But its greatest foes were the forces that saw in its general acceptance a blow, not alone to their prestige and to their means of livelihood, but also a mockery of their pretended wisdom and skill--the medicine men.

Strong opposition developed immediately upon the first promulgation of the principles of physiological reform by Graham. Not only was he opposed by medical men, but by all others--tobacconists, brewers, distillers, saloon keepers, butchers, bakers, etc.--who saw their businesses threatened by the new doctrines. Ridicule and slander, distortion and untruth, were the chief methods employed, although an effort was made to mob Graham in Boston. Opposition to Jennings did not develop immediately, primarily because the secret of his success was unknown. Both his patients and his fellow physicians thought he was treating his patients with drugs. Yale University conferred an honorary degree upon him in

recognition of his unusual success. Perhaps Yale would have been hesitant about honoring him had its regents known that *Hygiene* was the secret of Jennings' unheard-of success. A storm broke about Jennings' head when he finally revealed the plan of care that he employed.

It was noted in the *Journal,* April 1861, that wherever a knowledge of the laws of life and health had penetrated, the sick had occasion to rejoice. It should not surprise us, therefore, that Graham, as all innovaters that attack old dogmas and substitute vital truths in their stead, was assailed by the slaves of precedent as well as by those who profitted from old evils. The assault upon Graham became more bitter as his teachings became more popular, and although he has been dead for over a hundred years, the medical profession still, when it condescends to notice him at all, disparages him and his teachings and refuses to acknowledge that they themselves have adopted, in their own ways of life, much that he taught.

Graham, Alcott, Gove, Trall and the many medical men who abandoned the drugging practice and adopted *Hygiene,* together with the graduates of Trall's school, all made themselves missionaries to carry the message of *Hygiene* to the people and from the people they commonly received a respectful hearing. Visiting Marietta, Pa., in August of 1861 to lecture to the people of that town, Trall contrasted the *Hygienic System* with the various drug systems of the day. The *Mariettan* of September 7, 1861, said of Trall's lectures that they "were certainly very different from anything we ever heard in Marietta. The facts propounded by Dr. Trall with regard to the nature of disease and the action of medicines were altogether new to us. It is gratifying to be able to say that Dr. Trail's visit to Marietta has aroused a spirit of inquiry on the subject of health and disease which cannot be otherwise than beneficial to the community. Our country friends were so deeply interested in the discussion, that some of them came every night six or seven miles to hear the Doctor. The Friday evening's lecture, on 'The Health and Diseases of Women,' was truly a masterly effort, and such as every man and woman throughout the country ought to hear. The lectures taken as a whole, were a treat of rare excellence."

No one at all acquainted with the history of mankind should be surprised that lectures of this type should arouse the opposition of the medical profession of the time. In spite of their opposition, expressed in many ways, they refused to meet the issue in public discussion.

Announcing editorially in the *Journal* (December 1861) that he had arranged to leave New York for the great West to lecture, Trall took advantage of the occasion to invite the medical men of Peoria, Illinois, where he was scheduled to lecture, to discuss or debate the respective merits of the medical and *Hygienic* systems. He offered to prove the following propositions:

1. "The Drug-Medical System which they advocate and practice is *false*--untrue in philosophy, absurd in science, in opposition to nature, contrary to common sense, disastrous in results, a curse to the human race.
2. "The Hygienic Medical System which we endorse and practice is *true*--in harmony with nature, in accordance with the laws of the vital organism, correct in science, sound in philosophy, in agreement with common sense, successful in results, and a blessing to mankind."

It need hardly be stated that no medical men came forward to meet this challenge. Medical men found it beneath their dignity to discuss such matters with men whom they denounced as quacks. Trall pointed out that all of the professors of his college were graduates of regular schools of medicine and were all licensed to practice medicine. They had, he said, everything that the medical profession had and *Hygiene* in addition.

Oh! what a noble profession is this! Reared and nourished in a free country, where every institution is founded upon the broad basis of free thought, we have in our midst a noble profession that, to preserve its dignity, shuns controversy and debate. Were they now with us, in what tones would the founders of America demand that the fires of agitation they had kindled may not go out, but be permitted to continue to burn until they have consumed every old structure, the dignity and beauty of which fades and withers when agitations open their musty petals and unravels their errors and mysteries!

Referring to this "dignity" of the medical profession, a young graduate of the College of Hygeio-Therapeutics (class of 1855) by the name of Hall, of Carlton, New York, said in the concluding remarks of

his graduation paper: "Here, Fellow Students, is a duty which we owe to ourselves and to humanity, who are suffering from this dignity. Let us be thankful that we have not had such principles inculcated in our minds and that our steps have been guided in the path we are now treading."

Truth cannot be eternally opposed. It grows in spite of opposition. And even the opposition has to recognize it. Editorially, Trall said, September 1860: "The world moves. We learn from the reports of doings of the American National Medical Convention, which met at New Haven, Conn., recently, that Dr. Reece, of this city, Chairman of the Committee on Education, presented a report in which he recommended, among other things, that a Chair of Hygiene be introduced into medical schools. We have been for years calling the attention of our professional brethren to this subject, and we are glad to see that our advice has some prospect of being respectfully entertained. Is it not a little astonishing that the subject of Hygiene--the art of preserving health--has never been taught in any medical school in the world except the Hygeio-Therapeutic? It is true that Prof. Parker, of the New York College of Physicians and Surgeons, says, 'Hygiene is of far more value in the *treatment* of disease than drugs,' and that Prof. Clark of the same school, relies *wholly* on Hygiene for the cure of many diseases, and that all medical professors testify to the good value of Hygiene, not only to prevent but to cure disease. But we must venture the prediction that the proposition of Dr. Reece will be *merely* entertained. There the matter will stop. The Chair of Hygiene will never be introduced. Hygiene and drug medication are incompatibles. They can never co-exist. Barnum in his museum has solved the problem that a carnivorous, an omnivorous, an herbivorous, and a frugivorous animal may dwell together in the same cage without devouring or being devoured. But Hygiene and drugs could not be taught in the same school without a war of extermination. The drugs would eat up the Hygiene, or the Hygiene would drown out the drugs. Whatever may be said of other conflicts, this one is irrepressible."

Further evidence that the value of *Hygiene* was recognized, even though they tended to discredit the source, is contained in a paper read before the Medical Library and Journal Association in 1875 by Henry Hart, M.D., of New York City, in which he stressed the fact that there are "benefits which patients can only receive at the hands of quacks." He referred to *Hygienists* and hydropaths as "quacks." He criticized his own profession for permitting "ignorant pretenders and irregular practitioners" to monopolize the use of "water, rubbing and passive methods" and suggested the establishment of an institution, under the control of the medical profession, to which "private practitioners could send their patients to obtain the benefits which they can only now receive from the hands of quacks."

Writing in *The Science of Health,* April 1876, on this lecture by Hart, in which he recommended a hospital "for the radical and permanent cure of chronic disease," Trall expressed the hope that such a hospital would be established, so that the merits of drugging could be thoroughly tested, and said: "For years hygienic practitioners have been confined in great degree to this class of cases, simply because the patients had been driven in desperation to try anything rather than die; for die it was evident they must, unless they received better aid than the medical schools usually furnish. In the majority of cases these chronic invalids that had been either pronounced incurable by competent physicians, or were considered beyond hope by friends, because of the repeated and absolute failure on the part of their medical advisers; and yet many, if not the majority have been either restored to health or been so greatly benefitted as to feel very grateful to the hygienic system."

Trall charged, in his reply, that the chronic diseases which Hart wanted a "respectable medical institution" in which such cases could receive non-drug treatment, were "in ninety-nine cases out of every hundred, if not in the other, the consequence of the vigorous treatment, which changed a single and simple and acute disease into a complication of chronic drug diseases. Acute diseases which are treated hygienically are *never* followed by chronic disease of any kind."

Trall further said on this occasion: "Acute diseases, we insist, are mere bagatelles as compared with the 'difficult and intractable' chronic ones, and hygienic treatment is not only as successful with them, but very much more so. Acute diseases are simple and tractable, as a rule, and the patients recover in spite of the doctor, but Dr. Hart will find that the treatment of chronic invalids is a very different matter."

Hart had referred to chronic disease as "difficult and intractable," an unusual thing for a medical man, who prefers to think of such diseases as "imaginary and trifling," especially if they are restored to health

by *Hygienic* means.

It is true that the sooner the patient can get off drugs, the better; but it is equally true that, the sooner he gets off *Hygiene,* the worse. A return to un*Hygienic* living, which caused the disease in the first place, will build disease all over again. As total abstinence is the only course for the former alcoholic (it is well known that a return to drink will result in a return of consequences), so a permanent desertion of un*Hygienic* ways is the only safe way of life.

In an article in *The Science of Health,* May 1875, Trall pointed out that the drug schools, "making a virtue of necessity, have concluded to let each other live, dosing and drugging, each after its own fashion, and make a combined effort to suppress the Hygienic system." A Dr. Smith of the New York Board of Health proposed to squelch the *Hygienists* bylaw. He proposed to put M.D. into the constitution and to have the state take the doctor-making business (under drug-medical auspices) into its own hands and appoint a board to examine all would-be physicians in the materia medical of all the drug schools. This ingenious scheme would have rendered it impossible for a *Hygienist* to have received a diploma and to receive a license to practice.

Opposition takes strange forms and resorts to devious means to achieve its end. But one hardly expects a respected member of the medical profession, who is also a professor in one of the world's leading educational institutions and who has achieved a reputation as a poet and essayist, to openly advocate permitting medical men to kill their *incurables* to prevent them from getting well under other plans of care. Whether this was the real object aimed at by the man in question may be difficult to prove, but Trall thought so.

In 1875 Oliver Wendell Holmes, M.D., of Harvard, whom Trall referred to as the funny poet, made a strange suggestion. Writing of this suggestion, Trall said that "Dr. Holmes is not the stuff that martyrs are made of." While not blaming Holmes for his weakness, he decried Holmes' demand for physicians the "right of procuring a painless passage out of this world, so far as is practicable, for the patient whom he can keep no longer in it." Trall regarded this as a direct attack upon his business and that of every other *Hygienist.*

"Grant," said Trall, "the physician the privilege of killing his patients when he cannot cure them, and every Hygeian-Home, Water-Cure, Hygienic Institute, and other establishment where patients are treated without drugs would soon be closed. Not one of them could pay expenses. For myself, therefore, as well as in behalf of every Hygienist in the land, I protest against giving the drug-doctors the right to deprive us of our patients."

Explaining this, Trall said: "More than three-quarters of our business is due to the medicines the patients have taken. We have more than three drug diseases to treat to one original ailment. If the drug doctors are to be allowed to kill their patients when they refuse to get well under drug-medication, our Health Institutes will very soon subside; and probably this is the object of Dr. Holmes' suggestion."

Principles and practices which are radical and revolutionary and are subversive of established usages and existing interests must, of necessity, be opposed by the learned and rejected by the illiterate. Before they can be generally accepted or generally established or even fairly investigated, the public mind must be re-educated. And it is infinitely more difficult to dispossess it of its ingrained errors and life-long prejudices than to educate it truthfully.

Good men, bent upon the promulgation of new and therefore strange truths are frequently surprised at the slowness with which new truths are accepted by the people. But they should not be surprised; they should know that man changes by inches, that any change that requires growth, and especially growth from long entertained fallacies to new and strange truths, from long accustomed bad to untried good conditions, must be slow, the slowness being the cosmic surety for the value of the new growth. Quick and rapid transformations more often than not betoken early decay.

We never accept new ideas all at once. We need a previous preparation, and in those instances where radical changes in the human mind appear not to be gradual, there have been previous experiences and

preparations that have, perhaps all unconsciously, prepared the way for the apparently sudden change.

Hygiene will outlive the jibes, jeers, snears, sarcasisms, doubts, distrust and the great variety of sham-practices, as well as serious, well-organized opposition, else it is unworthy of survival. While we would gladly see the people awaken to a more ready realization of the superlative virtues of *Hygiene,* we cannot permit ourselves to become discouraged by the slowness of the revolutionary process. Ridicule, rejection, trials, troubles, severe hardships, even persecutions are the handicaps that all genuine progress must overcome. Prejudices are not immortal, but truth is.

We think that we can discern the rays of the rising sun through the increasing gloom. Disease is not, in the nature of things, eternal. Ignorance, prejudice, fallacy, drug fanaticism and superstition may sway the multitude for a season, but Truth and Right in serene majesty sit enthroned forever. Order is Heaven's first law and the present subversion of reason and desertion of the paths of nature cannot last. The poisoning system has reached the end of its rope. Twenty-five hundred years of poisoning the body has been long enough for any experiment to last.

In the developing light of *Hygiene's* own intrinsic truthfulness, all of these finely polished weapons of opposition have grown dim and pointless and are gradually crumbling into dust and ashes. At the present time great effort is not required to interest and convince even the most warped and biased mind of the fundamental truths of *Natural Hygiene* and their surpassing beauty, if they can be induced to stop long enough to think for themselves. Not only have the foes of *Hygiene* been unable to demolish a single one of its basic principles and to destroy a single one of its essential practices, but these have been strengthened by all genuine discoveries made by its very foes. Every advance in knowledge of biology and physiology has served to add strength to *Natural Hygiene* and to remove the foundation from under the ancient system of the medicine man.

Considering the vast importance of this now extensively recognized body of truths and practices and its importance as a means of both preserving and restoring health and also the increased light its principles shed upon many other related phenomena, it would seem, at first view, somewhat strange that it has not been more extensively cultivated and its resources more fully developed and more generally applied to their appropriate uses. This wonder, however, will partially disappear when we consider that many of its present believers who could be among the most influential in bringing it into general notice are still smarting under the embarrassment of having been compelled to relinquish a previously avowed hostility and assent to its claims and in their wounded pride, most of these are still not disposed to give it the attention which its importance demands.

The facts of *Hygiene* are such stubborn things, however, that eventually the most incredulous will be compelled to accept them. Prejudices are like mercury in the bones: they cling to one despite his better judgment. But even the strongest prejudices must ultimately give way before the bombardment of *Hygienic* truth.

It remains to say a few words in reply to the charge of *quackery* that was and still is frequently made by the medical profession against *Hygiene* and *Hygienists.* A *quack,* in popular language, is just what you choose to make him. Calling a man a quack, however, does not make him such. The medical man regards all practitioners who care for the sick and who do not believe in and employ the same means and theories as those employed by medical men as quacks. Members of all schools of so-called healing other than the regular medical school, by this standard, are quacks. The dictionary defines quack as synonymous with charlatan. Etymologically and historically, this is not its true definition. It is a shortening of the German word quacksalber (quicksilver) and was originally applied to those regular physicians who poisoned their patients with mercury. As originally employed, the term was applicable to regular physicians and to no one else.

To make it mean a pretender to knowledge and skill that one does not possess makes it cover the entire healing profession, regular and irregular, from Hippocrates to the present. However well meaning and well-educated in the lore of the time were those men of the not-so-distant past who sought to cure disease by blood-letting, for example. they were mere pretenders--charlatans. There has never been a time in the history of medicine when the practitioners of the many and various schools of medicine that have arisen

and flourished have not pretended to greater knowledge and skill than they possessed. The same fact is true of the members of the various schools of so-called healing that now flourish.

For the medical man to brand as quacks all members of all schools of healing other than his own may be good propaganda, but it does not make good sense. For the givers of quacksalber to brand all who refuse to administer this poison as quacksalbers is the height of the ridiculous. If the brand belongs to anybody, it belongs to the members of the "regular," the self-styled *scientific* or what was formerly known as the allopathic school of drugging (poisoning), and to no other. Let them accept their proper brand and cease trying to transfer it to others.

We would define a charlatan as one who seeks to do or to make others believe that he can do by illegitimate or unlawful means or unwise methods, that which can only be done by means which are obviously natural and in harmony with law. What have physicians from Hippocrates to the present been other than a body of pretenders, seeking to do with unnatural and anti-vital means, that which can be done only by means that have a normal relation to life? They have been ignorant of physiology, pathology and etiology. Was it not the grossest kind of ignorance that caused them for centuries to bleed their victims? However well-meaning they may have been, they were, nonetheless, charlatans.

In any profession, he is a charlatan who sets up pretensions which are not fortified by knowledge and we seriously assert that in no profession is there to be found a greater proportion of its members who are ignorant of the fundamental principles that underlie or should underlie the care of the sick, than are to be found in the medical profession.

The continuous outcry of physicians against what they delight to stigmatize as *quackery* is an unconscious acknowledgement, either of their own inferiority, which they sense all too keenly, or of the monopoly they are so desirous of enjoying in their field. A physician who complains of the quack in his neighborhood is voicing his own feeling of inferiority or his desire for monopoly.

Men who asserted that it is the duty of everyone to study the laws and principles of our animal existence and to dilligently live according to these laws were denounced as *quacks* by Tully in his *Materia Medica and Therapeutics,* published shortly after the middle of the last century. He said that this set of "quacks" insist that "all disease" is the "natural and inevitable consequence of living contrary to nature," and that they teach that "the sickness which prevails" everywhere "may be directly traced to the violation of the great laws which govern our present mode of existence." From this he proceeded to write all he could to prejudice the medical student against the teachings of the *Hygienists,* even going to the extent of distorting and falsifying much of what they did teach. He set the pattern that has been unthinkingly followed by the medical profession from that day to this.

It is a bit amusing to read in the various publications--daily, weekly and monthly--of today of the continual "ding dong, sing song, often loud, but never long," attacks upon what is described as wide-spread quackery. It is confessed that "quackery" is alarmingly prevalent and constantly gaining on the regular profession of *medicine.* But why this is true is amazingly perplexing. Why do so many millions of people, many of them of more than average intelligence and many of them highly educated, turn to "quackery" when *scientific medicine* offers them so much? Is it because *scientific medicine* is not fulfilling its promises? Do people turn elsewhere for succour when the regular traffic in *cures* fails them? Is it possible that the best remedy for "quackery" is for medical men to *cure* their patients?

It is altogether too easy to credit the wide-spread patronage of "quackery" to gullibility and ignorance. Before the profession stresses these qualities of the layman, they should take a closer look at their own ignorance and gullibility. Are they not guilty of employing and even promoting a succession of new drugs, most of which, after but a brief trail, are discarded? Before they stressed so much the alleged dangers of "quackery," would it not be well for them to take stock of the dangers of their own practices--the dangerous side effects of their drugs, the mounting incidence of iatrogenic disease, the number of deaths from "allergic reactions" to drugs, the deaths from operations, etc.?

The pitiful witlings of the drugging school may continue to babble about quackery while they continue to routinely dose their victims with poisons and their chief propagandists may sharpen their pens to utter

smart things about the ignorance of the "quacks," but the public will draw their own inferences from what they observe and experience. If the profession will come out into the open and discuss their own quackery and cease "barking behind the fence," they will do the public a genuine service. For, it is evident that the quackery within the profession is the parent of the quackery outside the profession.

College

CHAPTER LI

At the first convention of the *American Hygienic and Hydropathic Association,* held in 1850, the majority of the members present thought it wise that all future members of the society should have received the degree, M.D., or a legal license before being admitted to membership. There were those who held that conformity to medical usages would give the society the stamp of respectability, and others who held that they should not stand upon the musty precedent of the past, or practice the exclusiveness of the other schools by adopting a rule which would exclude from the society the founders of *Hygiene* and hydropathy and many of their more eminent disciples, much less that a body of *Hygienists* and hydropathists should make a diploma from an allopathic school, or a license from an allopathic board of examiners, the test of membership.

On the one side, the speakers contended that the old conservative ground was the highest, or at all events, more expedient. On the other hand, those dissenting held that the more liberal course of the society, being its own judge of the qualifications of its members, was the more noble, self-reliant and respectable. Dr. Thomas Low Nichols, who was secretary of the association, makes the following comment on this in his report of the transactions: "In performing my duty as Secretary of the convention and of the Society, in reporting the above proceedings, I take the opportunity of personally entering my earnest protest against the principle embodied in the second section. I view it as falling behind the spirit of the age, truckling to the low forms of the schools of medicine we are exterminating and utterly opposed to the liberal and enlightened public sentiment upon which all the success of our system of practice depends."

Had Jesus advised his followers to first graduate from a rabbinical school as preparation for preaching Christianity or had Martin Luther advised all young would-be Lutheran preachers to graduate from a Catholic college for training of priests before they could preach Protestantism, if these men had said to their followers: get your degree from a "respectable" college and earn the "right" to preach by acquiring the theology of the older and "recognized" theological schools, they would have adopted the same thing that these would-be *Hygienists* who study allopathic *medicine* as a preparation to practice *Hygiene* are doing. If one may best fit oneself for the fidelity and responsibility of marriage by a few years of libertinism or harlotry, then one may best fit oneself for the practice of *Hygiene* by graduating in allopathic *medicine.* First learn the techniques of poisoning the sick and you will be prepared to give them intelligent care!

In the March 1853 issue of *The Esculapian,* an allopathic medical journal, C. D. Griswold, M.D., its editor, records that the allopathic colleges of the period had adopted means to prevent men from getting into and graduating from such colleges who did not intend to practice allopathic medicine after graduation, but who wanted a medical degree under which to practice hydropathy or some other "healing art." He said that these men wanted the medical degree so that they might "parade it before the community as an evidence of respectability, and to obtain a living thereby," but that, "at the same time," they "turn traitor" to the "institution to which they owe their position." He accused these men of hissing and stinging the *Alma Mater* that gave birth to their professional existence. "Surely," he declared, "the mother has a right to protect herself against the venom of such offspring."

This determination of the allopathic colleges to protect themselves against the "venom" of men who acquired the medical degree under which to practice some non-allopathic "healing art" grew stronger and ultimately reached the point where a graduate of another school, even though possessed of the medical degree, could not graduate from an allopathic college. A homeopath who wanted to also study allopathy was denied entrance into an allopathic college. The same was true of the eclectic and the physio-medicalist. As graduates of their respective schools of medicine, they already possessed the medical

degree. They did not need to enter and graduate from an allopathic college to display the degree, *Doctor of Medicine.* Some of these men wanted to study all the medical systems, thinking that, thereby, they would be better fitted to care for their patients. But the antagonisms between the medical cults was so great that this soon became impossible.

After his graduation from the Cincinnatti Eclectic Institute, a college of eclectic medicine, Dr. Tilden sought to enter an allopathic college in New York City. He was advised by Dr. Austin Flint, its head, that by paying the regular fee he could attend as many lectures as he might desire at the college, but that no man who had taken the degree from any school of medicine save the allopathic could graduate from the college. In those days it was not enough to be a pill roller; you had to be trained in rolling your pills in the fashion approved by "my school." This allopathic school, which keeps the uninformed public believing that it originated with Hippocrates, is actually but one of dozens of medical schools that have arisen from the days of the *Father of Physic.* It is but a little more than a hundred years old. But early in its career it developed a high and mighty attitude towards all the other schools of drugging.

The homeopaths, the eclectics, the physio-medicalists, the chronothermalists and the remnants of the prior schools that still existed, might have had a tendency towards liberalism--not so the allopaths. The humoralists, the solidists, the vitalists, the Brunonians, the colonists, were all still in existence when allopathy, which was given its name by Samuel Hahnemann, creator of homeopathy, emerged from a coalescence of the medical cults of the period. There were no allopathic schools at the time Dr. Jennings studied medicine and he tells us that he entered upon his professional duties under the flag of Cullen, having studied medicine under the celebrated Prof. Ives of Yale. Benjamin Rush, who was looked upon as the father of American medicine, had studied under Cullen.

Today the chiropractic profession has taken a leaf from the allopathic book and is doing much the same thing. Some of the state societies will not admit a chiropractor, even though licensed, to membership if they find that he has anything to do with *Hygiene.* A chiropractor may give drugs or dabble in the various modalities of so-called physical medicine, or he may humbug his victims with radionics and remain in good standing; but if he shows any signs of returning sanity, he does not belong. The chiropractic straight jacket is rapidly becoming as galling as the one in which the medical society keeps its members.

Why does a man study regular medicine as a preparation for the practice of *Natural Hygiene?* Why does he pour over a great mass of material that he can never use as a *Hygienist* and waste time learning subjects that are but rank voodooism? Primarily because he lacks the guts to stand on his two *Hygienic* feet and fight it out with the *medical* profession; secondarily, because he suffers with an inferiority complex. He thinks that the man who has studied pharmacology, therapeutics, bacteriology, etc., etc., has some advantage over the man who has studied dietetics, kinesiology, fasting, etc. He thinks that the medical degree carries with it a prestige that a degree in *Hygiene* lacks and he wants that prestige. He thinks if he can display M.D. after his name, he will be respected and people will patronize him. He also thinks that if he has a medical license he can practice *Hygiene* without any interference from the medical profession. He is so determined to obtain a medical degree and a medical license that he cannot be made to understand that the medical society will not permit him to practice *Natural Hygiene.*

He discovers, when he gets out of line, that the profession, ever watchful of its members who show signs of deviation, will throw him out of the medical society, will deny him hospital privileges and will deny him defense in malpractice suits. They will blacken his reputation and in other ways make life hard for him. They have even been known to frame such men and get their license revoked. Men who practiced medicine for years, who were respected members of the profession, who held high positions in the society, were professors in medical colleges, etc., found, when their eyes were opened and they tried to break away from the traditional practices, that they were driven out of the profession. Newcomers with no standing have an even more difficult row to hoe.

Writing in the September 1858 issue of the *Journal,* A. T. Compton, M.D., said that for medical men, with only an education in a false medical system, and for the layman, with no education at all, "to undertake to use and understand the principles and practices of 'Hygeio-Therapy' by reading a book or report of some cases treated . . . is all sheer nonsense, and in the end will prove a bitter disappointment, if not a positive injury." Thus does he emphasize the importance of a thorough *Hygienic* education if one

wants to practice *Hygiene.*

In 1853 the first term of the New York Hydropathic and Physiological College, founded by Trall, was started. A few years later, when the college was chartered by the state of New York, it was chartered as a college of Hygeio-Therapy, although it gave the degree Doctor of Medicine.

Wilder's *History of Medicine,* 1899, says: "Colleges of Hygiene for the instruction of students have been established in St. Louis, Cincinnatti, and other places, beginning their career with encouraging prospects. The founder at St. Louis was Miss Susanna W. Dodds, a physician of merit and intelligence, abundantly capable of bringing her views into successful realization. The courses of study include the branches of knowledge usually taught in medical colleges, together with Hygiene, Sanitary Engineering and Physical Culture. But the professional hostility encountered, and the general indifference stood in the way of success, and most of these institutions now confine their operations to professional service."

The college established in St. Louis by Dr. Dodds lasted only about three years. After its closing, Dr. Robert Walter made an effort to establish a college in Pennsylvania. The effort failed. One of the greatest needs of the present is a college of *Natural Hygiene.* At the present time no adequate means are available for training new *Hygienic* practitioners. The field is ripe and ready for the reapers. There is a growing demand for *Hygienists* and there is need to make *Hygiene* available to everybody.

We would urge all those who have a love for *Natural Hygiene* to unite in establishing a college to equip men and women to serve our people in a truly *Hygienic* way. *Natural Hygiene* is everything that it pretends to be and, in spite of the lies about it and is spite of its enemies and the wickedness and ignorance of the wolves in sheep's clothing, who prowl upon its friends, let us show the world that we are united and that we are determined. All of you who have been snatched from the brink of death by the adoption of *Natural Hygiene* should be anxious to assist in the establishment of such a college. Help make it possible for your friends and relatives to secure *Hygienic* care and instruction. All that we ask of those who firmly believe in *Natural Hygiene* is that they help us establish and maintain a college for the dissemination of the principles and practices of a true *Hygiene.*

Women and Hygiene

CHAPTER LII

The practice of medicine was a male monopoly. Medical colleges would not admit female students. Practicing physicians rejected all applications from females who wished to serve an apprenticeship in medicine. Examining and licensing boards would not examine and license females. Not until a woman's medical college was established were women admitted to the study of medicine. These facts were true of the allopathic, homeopathic, physio-medical and eclectic schools of medicine in the United States.

The newer school, represented by that established by Nichols and the one established by Trall, admitted female students to their first classes and did not hesitate to graduate women with the degree, Doctor of Medicine. What is more, these women doctors were eagerly received by the people and made an excellent name for themselves. You will not find them listed among the early medical practitioners and, although a number of them graduated with the degree, Doctor of Medicine, before the first woman graduated from the first woman's medical college, no medical historian has yet included them among the first female doctors.

When Graham began his lectures, so great was the public opposition to lectures by a man on subjects of anatomy and physiology, either to mixed audiences or to female audiences, that a call was issued for women lecturers to do this work. Among those who responded to the call was Mrs. Mary Gove. Mrs. Gove not only championed the work of Graham, but was in the forefront of the battle for women's rights, for dress reform and other reforms of her time. In common with all those who opposed established institutions and proposed new and improved ones, she underwent persecution at the hands of the defenders of the old order.

Mary Gove Nichols

In the April 1853 issue of *Nichols' Journal,* Mary Gove says: "I acknowledge I have been mobbed on

account of my dress. Fourteen years ago several persons determined to tar and feather me if I dared to lecture in a certain small city. I thought I was needed there and I went, with solemn conviction, and God gave me favor with the people. I outlived all this ignorance. Still it is true that prejudice was bitter and cruel in those days . . . Years have greatly mended the manner of the mobs, but more than one scamp has felt the weight of my husband's cane in this city."

Mary said: "Women have so long acted, and almost existed, by leave granted by the majority, that they have little idea of independent action. The public puts its mold upon us, and we come out as nearly alike as peas. Our wrists and feet just so small and 'delicate,' our minds just so dull and stupid, our bodies *bagged,* and our whole lives belittled into 'feminine propriety.' Mind, health, beauty and happiness are all sacrificed to the processes of mold; but, then, woman has the comfort of keeping in her 'sphere,' till her brief and terrible misery is over and she dies out of it."

Mary wrote: "My remedy for all this slavery of women is for her to begin to judge and act for herself. God made her for herself, as much as man was made for himself. She is not to be the victim of man, or false public opinion."

It is true that we must learn to think for ourselves and to stand upon our own two feet. Unfortunately, as she said, "it has been the habit of Americans to carry everything by force of majorities. In the immaturity of man, this must be. Those who are not men and women enough to stand alone must be bolstered up by their fellows and if very weak, by a majority of their fellows. We have become so used to the doctrine that the majority must rule that we forget that it may be a great wrong. Are a thousand tyrants better than one? We seem to forget minority rights altogether."

It is strange that in America, where more people become Protestants, at least as far as civil rights are concerned, by virtue of the very air they breathe, in which there was the beginning of a new and ultraprotestantism--the protest universal--that is, the protest against custom and authority in all things, that there should have existed such violent opposition to the demands made by women that they be permitted to join the human race. What wonder, then, that Mary could ask: "why is my friend or my neighbor, my ruler, my king or my tyrant? If I must wear the same fashion garments that another wears, if my taste, my convenience, my occupation are not to determine for me this question of clothing, what am I but a slave? If I must eat, drink, walk and talk according to the will of others, where is my freedom? My country may have emancipated itself from political interference and rule, but where is individual freedom? The recognition of the right of every human being to individual liberty is the foundation fact of all true human culture."

It is said that fools can ask questions which it takes wise men to answer. It is also true that close upon questionings come answers and, often, the ability to ask a question implies the ability to answer it. When the people boldly put the question: "Why are we to maintain kings and nobles; why are we to give tithes of all we possess; why are we to allow others to think for us, to control our thoughts and actions?" the answer is not far from their lips. In like manner, when the women of the middle of the last century asked why they had to be slaves of fashion and why they should be denied access to the professions, the answers to these questions were already in their possession.

As an example of the demands of women for increased liberty, the move for more healthful and less hampering female attire excited their attention even more than did the demand for the ballot. In 1849 the feminine costume that came to be known as bloomers was designed or invented by Mrs. Elizabeth Smith Miller. The original bloomer reached down to the ankles and was accompanied by a short skirt that reached almost to the knees. The attire was devoid of beauty and never became popular with the women of the period, although many women adopted it and suffered from the hands of the mob for doing so. In their "modesty" the early advocates of woman's rights never dared dream of the short skirts and halters, one-piece bathing suits, bikinis and nudity that are now regular features of woman's attire. The bloomer covered woman's body as thoroughly as did her long skirts, but provided for greater freedom of movement. Mrs. Miller showed a working model of her new dress to Amelia J. Bloomer, a famous advocate of woman's rights. Mrs. Bloomer was so fascinated by the idea of new garments for women that were both "modest" and convenient that she promptly sponsored them. They came to be known by her name rather than that of their inventor.

Almost as active in the demand for woman's rights and in the dress reform movement as Mary Gove, was Harriet N. Austin, M.D., adopted daughter and associate of Dr. James C. Jackson. Dr. Austin, who edited *The Laws of Life* for a number of years, was one of the early graduates of the American Physiological and Hydropathic College. She was among the first women in the world to receive the degree, doctor of medicine, having received this degree a few years before the women's medical college was established. Dr. Austin was a close personal friend of Clara Barton and Mrs. Barton left, in her own handwriting, a stirring tribute to the sterling qualities and professional abilities of Dr. Austin. Harriet N. Austin was born in Connecticut on August 31, 1826; she retired from active practice in 1882 and died in North Adams, Mass., April 27, 1891.

Hygienists espoused many causes, but the *Hygienic* movement was no mere loose collection of reform movements and measures such as vegetarianism, temperance, clothing reform, sex education of the young, the teaching of physiology and *Hygiene* in the public schools, etc. But, these things were espoused only to the extent that they could be integrated with the more fundamental problem of creating a radically different and total way of life. The part played by Mrs. Gove, Harriet N. Austin, M.D., Susannah W. Dodds, M.D., and other women *Hygienists* in the dress reform movement, though important, must be viewed against a background of the total *Hygienic* movement. Drs. Austin and Dodds discarded the regular female attire and wore pants, a daring thing for a woman to do in those days; but it took daring to be a *Hygienist* of any kind. Coming to the position of *Hygienists* on female doctors, let me quote the following from the *Journal* of October 1861, where M. Augusta Fairchild, M.D., says: "Comets were once looked upon as omens of war. Female doctors may be viewed in very much the same light; for wherever they have made their appearance, a general uprising of the people to welcome them, and the most vigorous attempt of the regular masculine dignitaries of the 'profession' to quell the 'insurrection' have been the result.

"'The people' are non-professional; therefore, they will sometimes be quieted by the dictates of common sense, and thus they are led to appreciate the offices of woman as physician. Their professional pride and dignity and *pocket-book* is not at stake, so they can well afford to open their eyes and 'see the light.'" She further says: "The learned doctors are stalking about blindfolded;" the people "are looking out clearly and rejoicingly over the beautiful landscape where 'mid the pleasant fields of life and hope flows the bright crystal stream of health, and from along its banks the fragrant blossoms of love and charity send forth their sweet perfume . . ."

Dr. Fairchild was the author of a book, *How To Be Well,* which was published in 1879 by S. R. Wells & Co. It was a small popular work describing *Hygienic* care of the sick and received the hearty endorsement of Dr. Robert Walter, who briefly reviewed it in *The Laws of Health.*

Dr. Fairchild wrote much upon *Hygiene* and lectured widely upon the subject. She asked: are female doctors acceptable; do the people receive them? "Yes," she answers, "and there is a great demand for them. 'Sick sisters' are everywhere. Young girls are sick; they apply to a male physician; he gives drugs, which fasten her name on his books as a life-patient. From year to year she drags through girlhood and if she is strong enough to live in spite of her 'remedies,' she enters with a broken-down constitution upon womanhood . . ."

Dr. Fairchild stressed the fact that it is not true that on the part of the people there prevails an utter dislike for physiological knowledge. They want it, she declared; they know they need it and they will have it; for there is a little army of men and women at work throughout the country and they mean to carry the knowledge to every part of the land. In her article, she says: "A woman doctor is naturally a hygienist. Some were educated at drug schools, but they do not imbibe the poisons--they don't believe in the drug practice, for they don't follow it in their treatment. They know and see that the hygienic treatment is most successful; it is more in accordance with nature. It is true. So they practice it--and teach it--and wherever hygiene is taught, there druggery receives a death blow . . . Assentions to the cause of hygienic medication are being made constantly and we may expect more, for in these days people think, and thinking will come to the truth."

She further says of the woman doctor: "Her suffering sisters welcome her with delight and 'will not let her go,' till she has repeated to them of how the precious boon of health may be restored to them."

Nearly half of the early enrollments in the college of HygeoTherapy were women. As an example, Trall states, editorially, in the October 1861 issue of the *Journal,* that "since our last issue we have booked nearly 20 new names, one-half of whom are females, who apprize us that they are making arrangements to be with us for the Winter term of the New York Hygeo-Therapeutic College, to commence on the second Monday of November. Among the women graduates of the college was Mrs. Amelia W. Alines, M.D., Mrs. C. L. Smalley, M.D., Mrs. E. M. Hurd, M.D., and Miss Adaline M. Willis, M.D. Miss Willis was the youngest graduate of the class of 1856.

Mrs.Lydia F.Fowler, M.D., was professor of obstetrics in the New York College of Hygeo-Therapeutics. In 1861 Mrs. Fowler visited the great hospital of Santo Spirito in Italy. Here she was told by one of the heads of the institution that the most celebrated *accoucheurs* were those who spared the greatest part of the operations which the common practitioners had thought necessary to perform; parturition being a function so closely concerned with the conservation of species, nature has been very sedulous and perfect in it. Hence, an imperfect hand ought very rarely to interfere. This statement was so closely in keeping with the *Hygienic* view that Dr. Fowler commented upon it at great length.

Many are the names of women who stand out prominently in the annals of *Natural Hygiene.* Among these is that of Miss Abigail S. Cogswell, M.D., who was a graduate of the Hygeo-Therapeutic College. Unfortunately, due to the wrecked state of her constitution, her life was short. Dr. Trall says of her death: "She died at Hudson, Ohio, May 30, aged 31 years. Four years ago she came to us in an exceedingly frail condition of health. She had been employed for several years as schoolteacher (an occupation, as school-teachers are generally obliged to live, very ruinous to constitutions); she had been seriously sick on various occasions and had been repeatedly drugged nearly to death by the doctors. Mercurial salivation had made sad havoc with her vitality and had induced a troublesome 'throat-ail' with bronchitis to a degree which so frequently proves the precursor of a fatal consumption. But by careful management she recovered a comfortable state of health and at the end of three years was a very fair, but still fragile specimen of health and vigor."

Dr. Trall says of her: "It was impossible for Miss Cogswell to see suffering and not sympathize with the sufferer. She could not witness error and ignorance without striving with all her might to correct and enlighten. She was wholly consecrated to the work of her noble calling; and though her own career was short, she has been the means of leading thousands of her fellow creatures into the ways of life and

health." He adds that, "last fall she took an arduous and responsible position in the Cleveland Water Cure and no doubt greatly over-estimated and over-taxed her bodily powers. The result we have already stated."

Susanna W. Dodds, M.D.

Perhaps the most outstanding woman graduate of the HygeoTherapeutic College was Susannah Way Dodds, M.D., whose writings and lectures upon the subject of Hygiene constitute a valuable addition to *Hygienic* literature. Dr. Dodds and her sister-in-law, Mary Way, M.D., established a college of *Hygienic* medicine in St. Louis, Missouri. Dr. Dodds lived into the present century and continued to shock the prudish of her era by wearing pants instead of dresses.

Numerous other women could be named who graduated from the Hygeo-Therapeutic College and who played prominent roles in *Hygienic* activity in the latter half of the last century and the beginning of this. But enough has been said to establish the fact that woman's role as *Hygienist* is an important one. Dr. Fairchild's language, previously quoted, indicates very strongly that the early women graduates of the woman's medical college were more inclined to practice *Hygienically* than medically. Perhaps this was the reason that the medical colleges ultimately opened their doors to women students. They probably thought it best to indoctrinate women medical graduates in the same theories and practices that men physicians were trained in. With the revival of *Hygiene,* it is to be hoped that women will again take an active part in its work.

Who was a Hygienist?

CHAPTER LIII

With the exceptions of Sylvester Graham and Mary Gove, the earlier *Hygienists* were all medical men, coming from one or the other of the four medical schools (allopathy, homeopathy, physio-medicalism, eclecticism). Growing dissatisfied with and losing all confidence in the poisoning practices, they abandoned drugging and took up other forms of practice.

Dr. Jennings escaped from the drugging practice by way of bread pills. Dr. Trall escaped from the drugging practice by way of the water cure--*hydropathy.* Most of the early *Hygienists* found their way out of what Dr. Alcott called the wilderness of pills and powders by floating down a stream of water. All too often the escape hatch became the outer world. *Hygiene* and hydropathy became so intermingled and confused that it was not possible to tell where one ended and the other began. With the exception of Jennings and Alcott, physicians were content to be known as hydropathists. Not all the water-cure practitioners became *Hygienists.* The two movements are so confused during the forties of the last century that separation is difficult and not always possible.

There came a time, however, in the fifties, when Trall and a large number of men recognized the need for another and more accurately descriptive name. The call went out for a name, one that would be acceptable, alike to the profession and to the public. Many names were proposed, such as hygieotherapy, medical hygiene, etc.; but finally the simple term *Hygiene* was settled upon. The New York legislature chartered Trall's college in 1857 as a college of hygieo-therapy, the term *therapia* being employed with the original Greek meaning "to attend" or "wait upon."

Water applications continued to be a prominent modality in their care of the sick and it is often difficult to draw a line of demarcation between the hydropath who employed some *Hygiene* and the *Hygienist* who used some hydropathy.

Among the American physicians who journeyed to Grafenberg to study the water cure under Priessnitz were Dr. Joel Shew and Dr. Kittredge, who has been frequently mentioned in the preceding pages. Returning to America, Dr. Shew opened a water-cure place first at Lebanon Springs, New York, and later in New York City. He founded and for four years published *The Water Cure Journal* and *Herald of Reform.* He was not among the hydropathists who thought of the water cure as a universal panacea, but did think that hydropathy and hygiene would rejuvenate the world. He adopted part of Graham's teachings and taught for a while in Trall's college before its name was changed to the College of Hygeo-Therapy. But he never identified himself with the *Hygienic* movement. He remained a hydropath to the time of his death.

Of Dr. Kittredge it may similarly be said that he did not identify himself as a *Hygienist,* although he wrote many fine articles for the journal that contain much *Hygiene.* The same may be said for Dr. Houghton. He remained a hydropathist to the end. There were many others who did likewise. Others who called themselves *Hygienists* were little more than hydropathists and it is difficult to separate the two groups.

Let us take the case of James Caleb Jackson, M.D., who founded the institution in Dansville, N.Y., and who made an international name for himself--was he a hydropath or a *Hygienist?* He called himself both; he employed both systems; he arrived at the point where he called his plan of care Psycho-Hygiene. In spite of this, I have never been certain where to place him.

He was an admirer of Graham and Jennings, a warm friend of Trall; his adopted daughter, Harriet Austin, graduated from Trall's college and he had many praises for Trall--but classifying him is still

difficult. I have always given him the benefit of the doubt, because he claimed to be a *Hygienist* and because others recognized the validity of his claim. But it is still a fact that he gave predominance to hydropathy and regarded *Hygienic* means as secondary and subsidiary factors in the care of the sick, while crediting "water cure" with powers that belong only to the living organism.

Writing in 1857 and addressing his remarks to allopathic physicians, he said: "I have never used any other substance as a specific remedy for disease but water. All the hygienic agencies I use--air, light, heat, food, etc., etc.--I use, but I have never made use of any of them as *specialties* . . . I produce results with water which no man has produced by any *other* means . . . as far as I have strength, the people of this land shall be led to feel and believe, and act upon the belief, that in all cases of disease which do not involve surgery, water is the best *medicamentum* that man can possibly have. I have said in all diseases, and I repeat it. I want you . . . to understand me, and I repeat the statement, that in no case of disease can you apply anything else as broadly, as successfully, as water can be applied."

One may be excused for sensing a bit of bombast in his emphatic reiteration of his assertion of the superlative value of water applications; on the other hand, they may be but the expression of over-enthusiasm. But while he credited water with such superior *curative* properties, he was no less emphatic in assigning to *Hygienic* means inferior roles. He said: "I deny that my great success as a practitioner is to be ascribed mainly or chiefly to my dietary--the kind, the quantity, and the manner of eating food at the Glen; or to the fact that my patients live in the open air; or to the quiet seclusion of the Glen; or to their faith in me. The benefits derivable from all these I cheerfully admit, but each and all hold secondary place. They are auxiliaries which I could not well do without, but they do not constitute my right arm. It is in *water as I use it* that my success lies . . .

"While you and other medical gentlemen spend your knowledge and skill in treating disease by other methods, I have been a painstaking student, concentrating all my humble abilities in the elaboration and development of the Water Cure philosophy and practice . . ." Then saying that he was satisfied with the results of his applications of the water cure and stressing his unlimited confidence in it when assisted by "other" *Hygienic* agents or forces, he assures his readers that "water as a cure for human diseases will last as long as it *runs down hill* . . . Vincent Priessnitz was not born in vain. His apotheosis is yet to come."

If this looks like the opening gun in a move to elevate Priessnitz to the rank of a god, the modern successor of Aesculapius and Apollo, as the god of healing, let the reader be assured that it was not. Others had been as laudatory in their praise of Priessnitz before Jackson wrote. Priessnitz released flood waters on the earth that, like those of the Noahican flood, were to wash away all evil; but unlike the waters of Noah's flood, they were not to kill all life on the dry land.

In the *Journal* for November 1859, Jackson reaffirms his abiding confidence in the *curative* power of water. He says: "Perhaps there is no physician in this country--now Dr. Shew is dead; perhaps none in the world, now Vincent Priessnitz is dead--who relies more upon Water as the hygienic and curative agent than myself. Certainly the generality of so-called Water-Cure physicians do not; and I know of none who does . . . With all due regard for any and every means at my command, I have steadily grown into a wider and larger confidence in Water as a means for overcoming the morbid conditions of the human body."

He further says in this same article: "Having had as large an opportunity as any living man to test the uses of Water, with a view to effect Specific as well as General changes of conditions of the human body, I deem it but right to let you see, the longer I practice, the larger my faith in it is." He adds: "I do not mean to undervalue other means, but rather than rating them as highly as *other* hygeo-therapeutic physicians do, I rate Water much more highly than they do."

In this same article, Jackson said: "I am sedulously and faithfully studying the influences of light, heat, air, electricity, food, etc., in gaining knowledge in respect to and effects on the human organism, (but) as yet I know of no way in which to apply one, or all of them, so as to substitute them for Water, either in keeping the body in health or in overcoming its sicknesses. They have their several and collective uses, and great and essential they are; but I know of no one of them that I can use as I can use Water to change and overcome morbid conditions . . ."

Nobody acquainted with the history of Jackson doubts that he enjoyed a remarkable success and that he was widely patronized and very popular; but we may be permitted to doubt the correctness of his judgment when he assigns to water applications (hot and cold water) such a high rank in the work of restoring health and, at the same time, assigns inferior roles to *Hygienic* means. There remains always the possibility that he had the roles of these means reversed.

As the foregoing statements were made somewhat early in his long and successful career, it may be thought that he later altered his views and assigned a superior role to *Hygienic* factors. If he did so, I have failed to find a record of his change of mind. While his institution grew and acquired a number of European water-cure innovations, there does not seem to have been a lessening of his enthusiasm for water cure. Hence it is that, while Jackson frequently used *Hygienic* language and gave clear and emphatic expression to *Hygienic* theory, I have been doubtful about his true place in the early history of the *Hygienic* movement.

As pointed out at the beginning of this article, most of the early *Hygienists* (all but two of them physicians) made good their escape from druggery by way of hydropathy. They were known as hydropaths and their institutions were known as hydropathic institutions. When the cleavage came, there was a separation of the "sheep from the goats" and *Hygienic Homes* and *Hygienic Institutes* sprang up all over the land. But Jackson was not among those who re-christened his institution. He did not adapt the name *Hygiene* to his place. This may not have been thought to have been necessary as it was known as "Our Home."

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Hygienists

CHAPTER LIV

Writing in June 1861, Dr. M. Augusta Fairchild said: "The *Hygienic physician* will labor in the cause, even if starvation stares him in the face." She says that when she left college, it was her "determination to teach and practice hygienic truth, let the results be what they would ... such is the beauty, the adaptations of the hygienic practice to the organic needs of the people . . . we will undoubtedly triumph over obstacles which cause other physicians to stumble and fall."

There are *Hygienists* and "hygienists." We put the latter group in quotation marks because we name them in mockery. They may and may not be learned in their respective professions and callings and successful or not in their businesses, but they lack any genuine understanding of the basic principles of *Hygiene* and the all-sufficiency of its practices. To use a description long employed to set apart the pseudo from the genuine article, they are "jackasses posing as owls" in the *Hygienic* movement. Mouthing phrases they do not understand and parading a learning they do not possess, they are a serious threat to the uninformed neophyte who enters the movement in all good faith and is seeking diligently for an understanding of its principles and practices. They do the movement more harm than good, usually removing themselves from the current of *Hygiene* in time to avoid being thrown overboard to the fishes.

Whoever aspires to become expert in the art of preserving or restoring health should empty his mind, as far as possible, of all preconceived notions and be prepared to enter upon a study of *Hygienic* truth with as little bias and prejudice as possible. All men and all systems of thought find their level; for, after their kind, things tend to a common center. The practitioner who is ruled by a reluctance to commit himself unambiguously to a *Hygienic* practice, either as a practitioner or as a man, has no place in the *Hygienic* movement. Unfortunately, there are those who call themselves *Hygienists* when they are not. It is impossible to make them so without robbing the movement of all that is valuable. Men who, on cardinal points, are apart and not together (however cunning the bonds of association which seem to fraternize them while they are thus apart), are inadequate to bring opposing systems together, even seemingly, without sacrificing the truths of *Hygiene* enough to give the pseudo-*Hygienists* a decided advantage. Truth and error cannot compromise without truth losing and taking all the loss and error receiving all the gain.

The effort has been made from the beginning to clutter up *Hygiene* by mixing it with the various forms of therapeutics. Trall repeatedly referred to those who sought to combine the methods of *Hygiene* with those of the regular schools of drugging as mongrels and said that many such "have appeared upon the stage of action, made a brief flourish, and disappeared again, to be known no more forever." It is characteristic of such adventurers that they always parade lustily for a "rational medicine." They are opposed to all extremes. They are in favor of *Hygiene* considerably and drugs occasionally. They believe in using *Hygiene* whenever it will best agree with the constitutions of their patients, as they understand constitutions, and druggery when this would agree best. In this they are *eclectics.*

They do not believe in *Hygiene.* In fact, they cannot have faith in it, for they do not know what it is. They never dreamed that there is a true philosophy in it and a complete and consistent system about it, ample and universal, including all the truly useful means and conditions in existence.

We have had many of these rational *Hygienists* today who have sought to combine *Hygiene* with the various schools of practice that now exist but now, as in Trall's day, they have not survived. We may see, as Trall said, all over the country, so far as our information extends, a heavy mortality prevails among them. We cannot name one who has, before the public, a position of respect or influence, nor who is doing the least thing toward enlightening the people on the great subject of health, nor who is not manifestly in a rapid decline. We predict that it will not be many years before the people will very generally reach the conclusion, not only that the most rational *Hygiene* is that which has the least to do with drug poisons,

under the misnomer of *medicines,* but which also has the least to do with non-drug therapeutics.

Hygiene cannot accept any mish-mash of conflicting theories and therapeutic modalities. Nor shall the *Hygienic* Arab permit the nose of the camel of therapeutics to be sheltered in his tent, lest he find himself out in the storm and the camel occupying the tent. If we do not make that first step into therapeutics, we will not be compelled to make that thousand mile journey to the abyss into which all therapeutic systems are ultimately dumped.

Either the principles that underlie *Hygiene* are correct and we should adhere to them, else they are false and we should abandon them. There can be no middle ground here. It is not possible, for example, for the principles and practices of *Hygiene* to be true and those of hydropathy to also be true. If the etiological hypothesis that underlies the "adjusting" practices of chiropractic is true, *Hygiene* is false and its principles are the merest illusions. The man who is so devoid of reasoning power that he fails to comprehend that there can be no such thing as two correct systems of care, these necessarily based on different and antagonistic principles, is like a weather-cock--unstable and carried about by every wind of doctrine. Two systems, antagonistic to each other, cannot both be based on correct principles.

As *Hygienists,* we should refrain from supporting all methods, measures and movements that tend to take the cause of *Hygiene* off its feet by maiming it. We should be radical, not rational *Hygienists*, not eclectics searching among the therapeutic devices of the schools of healing for adjuncts to our *Hygiene.*

It is admittedly true that many who consider themselves *Hygienists* take over some of the practices of the killing arts of the so-called schools of healing in order to secure popularity and greater incomes.

They argue that there is not virtue enough in *Hygiene* to insure financial success, but it is our humble opinion that the lack of virtue is in these *Hygienists* and not in *Hygiene.* The fault lies, not with the *Hygienic System,* but with those who forsake its principles--if they ever properly embraced them. One who compromises with error is not for but against us. The *Hygienist* can never rise above the excellence which belongs to his calling; he cannot rise above the innate dignity that springs from it.

It is a common error that radical *Hygienists* cannot secure favor and patronage; hence, the unstable seek a refuge in therapeutics. Various modalities suit a weak-minded practitioner and, as a natural consequence, pseudo-*Hygienists* desert our cause for something more suitable to their mental capacity. Writing in the *Journal,* November 1859, of the system of *Hygienic medication* and of the employment of *Hygienic* agencies, Trall said: "We assume that our system is true; that, being true, all persons who understand it will believe in it; and that any person who does not believe it, wholly and exclusively, does not understand it. The person, be he layman or physician, who says he believes a great deal in hygeio-therapy, and yet believes that a little medicine is necessary sometimes, is perfectly and profoundly ignorant of the philosophy, the rationale, and even the fundamental premises of hygienic medication. No such person can even state what its principles are."

Trall further says: "Many physicians and many hydropaths who also employ drugs have become convinced that the whole system of poisoning, from Alpha to Omega, is wrong. 'But,' they say, 'the people demand medicine. We know that hygienic appliances, without anything in the shape of a drug, are best in all cases. But if we tell people so, they will not employ us. They will send for a physician who will give drugs.'"

"Such reasoning," said Trall, "is conclusive with the majority as human nature is now constituted. It is the sordid argument of the opium dealer, the infernal reasonings of the rum seller, the damnable logic of the tobacco-trader. It is a conscience salve of the peculating demagogue who says: 'The public is a goose; if I do not pluck its feathers, somebody else will.' It is the conclusion of the robber, whose creed is every man for himself, so that he keeps out of the halter."

When a *medical* man, a chiropractor, a spiritual healer or other *cure*-monger, undertakes to say that *Hygiene* is not adapted to certain constitutions, and that drugs or some form of therapeutics are best adapted to some persons or to some diseases, we say in reply that he or she knows very little about the *Hygienic System.* We do not hesitate to say that we consider him or her as either an ignoramus or a

humbug.

Institutions have sprung up all through the years offering to provide the sick with *Hygienic* care that were and are such in name only. The heads of these institutions have not been and are not *Hygienists* and their institutions do not deserve the name, because they do not illustrate the principles of genuine *Hygiene.* They do not put themselves into harmony with it; they do not yield themselves gratefully and with full understanding of and confidence in *Hygiene.* They do not believe in *Hygiene* enough to live by it, to stand by it and to rely upon it. Belief in *Hygiene* is the life of *Hygiene.* They do not give themselves up to *Hygiene* and are not controlled by it. In mapping out their course of action, the pseudo-*Hygienists* follow a course exactly the contrary of that pursued by the genuine *Hygienist.* Only if the man reflects *Hygiene* in all that he does and there are no half-way measures and no compromises, is he worthy of the designation, *Hygienist.* The disciples of *Hygiene* must wear its badge. They must be marked men and women who have a home within its precincts and feel, in their principles and means of care, both of the well and the sick, confidence and enthusiasm.

All great revolutions (and *Hygiene* is the greatest revolution in human history) have been beset by these same types of conservatives, who seek to take care of the new idea and save it from destruction. They pose as wise friends, who seek to save the new movement from the destructiveness of *extremism.* They are afraid of *extremes*. They do not know that TRUTH is as much at home on the border of her empire as at its heart. Her empire ends only at the line of demarcation between truth and fallacy. It is not at the heart of the empire of truth, but at its extremes that the egg is laid that hatches into treason. Truth does not live on or between extremes, but in or at extremes.

It is a misnomer to call a journal *Hygienic* that is organized and published to advocate therapeutics in any form. It is a misnomer to call an institution *Hygienic* that is conducted on therapeutic principles and administers therapeutic modalities. It is a misnomer to call a man a *Hygienist* if he practices any mode of therapeutics. These things are more than misnomers--they are hypocritical. It is like "stealing the livery of the court of heaven to serve the devil in" to take the name of a system of mind-body care, that is doing so much good and growing so rapidly in popularity and that is bettering the lives of people everywhere, and use it for the purpose of covering up and glossing over a system that is incompatible with it.

Professionally, the eclectic is everywhere and nowhere; he is everything by turns and nothing long. These half-and-half copies of *Hygienists* are not always agreed in regards to the merits of the *curative* measures that should be brought along from the practices of the *cure*-mongering schools--whether herbs, chemical drugs, vitamins, chiropractic, hypnotism, spiritual healing, or other "aids to nature."

As we understand the various *medical* sects, no one of the multitudinous variety of *medical isms* contains sufficient truth to cement it into a system, much less to assure its permanence. They are all transient, yet serve a purpose, either in exposing the weakness of other *isms* or of revealing the folly of the whole *curing* practice.

In justice to *Hygiene,* those practitioners who are only half converted and who wish, whatever their reasons therefor, to employ the therapeutic modalities of their school, should not call themselves *Hygienists.* As the *Hygienic* revolution incorporates within it vitalities sufficient to make it independent of the schools of *medicine,* it is only fair that we demand of those who wear its mantle and set themselves up as its disciples, that they should separate themselves from the schools of curing and hold unquiveringly the *Hygienic* standard to the breeze. A radical system, like *Hygiene,* must have this course on the part of its standard-bearers or be lost. There can be no standing still for the *Hygienist.* If he advances far enough to attain his doctorate, he must continue to advance if he would be true to himself and to *Hygiene.*

The man who insists upon practicing some of the so-called healing arts should take his proper place with the school of healing whose arts he employs and should not call himself a *Hygienist.* As a *Hygienist,* he is sailing under false colors. Drugs and *Hygiene!* Poison and wholesomeness! Filth and purity! Destruction and conservation! Health and disease in co-partnership! Is it not laughable, the complacency that can combine the two in practice and call the practice *Hygiene?*

What can we expect of the poor suffering patient, when told by the professed *Hygienist,* that by the use

of drugs or by the aid of some drugless modality, he hopes and expects to make *Hygiene* more effective or to lend it much needed assistance? Certainly, he will think that there must be some inherent deficiency in *Hygiene* that can be supplied only by drugs or by treatments. He must conclude that, while *Hygiene* is good, by itself it is not good enough. As all the forces of his past education have been on the side of drugs and treatments and against *Hygiene,* it is almost inevitable that this shall be his conclusion. Let such a patient recover health under the hygeio-druggist and go abroad and in a subsequent illness he will turn to drugs as naturally as he takes food when he is hungry.

The practitioner who thinks that his treatments, whether they are drugs or physical measures, and *Hygiene* are natural allies, and who, in contemplating results, raises the very natural questions-whether the *Hygiene* or the treatments aid the patient, or whether both operate conjointly, *Hygienically* and harmoniously, or whether the patient gets well in virtue of the treatment despite the *Hygiene,* or, lastly, whether the patient gets well in virtue of the *Hygiene* in spite of the treatmentis unable to provide a satisfactory answer to such questions. Practices that are all too easily rationalized or dismissed, or even turned inside out, emerging as ends in themselves, can have no appeal to the intelligent man.

We can imagine no worse evil to imperil the whole system of *Natural Hygiene* than an alliance with some of the treating systems. Between one system of treatment and another there is about the same difference as that between Tweedledum and Tweedledee. They are all antagonistic to life, all violate the laws of life, all are diametrically opposite to *Hygienic* principles--the delusion is a very strange one that the combination of *Hygiene* with the treating systems will benefit *Hygiene.* Those who entertain this delusion have not made an acquaintance with the first principle nor the first letter of the alphabet of the system of *Hygiene.*

We believe it utterly impossible for any man to make sense and consistency the predominating qualities of his work when his leading idea is to reconcile the unreconcilable. Like all those who propose wrong practices without a knowledge of right principles, he endeavors to compromise wherever he can find a safe position. These pseudo-*Hygienists* cannot believe in *Hygiene* because they do not know what it is and do not understand it. They do not dream that it is a complete and consistent system with principles of its own, which principles are true; that it is ample and universal in its application and includes all the truly remedial appliances in the world. They are likely to accuse us of being too radical and too dogmatic about *Hygienic* fundamentals. Count us as happy to be counted in the ranks of genuine *Hygienists.* We fear an emasculated *Hygiene* almost as much as we fear the lighter forms of drugging.

Outstanding among the pseudo-*Hygienists* was Dr. John Harvey Kellogg of Battle Creek fame. Almost immediately after graduating from the Hygeio-Therapeutic College, where he also taught chemistry, Kellogg assumed editorship of the *Health Reformer* and became medical director of the institution founded by the Whites in Battle Creek for the *Hygienic* care of the sick. Mr. and Mrs. White, who also founded the Adventist Church, had learned their *Hygiene* from Graham, Trall and Jackson. Trall was a regular contributor to the *Health Reformer.* Before making it known that he had become editor of the *Health Reformer,* Kellogg challenged Trall to a discussion of a minor issue. Accepting the challenge, Trall threshed the daylights out of Kellogg and was repaid for his trouble by being denounced as too radical and excluded from the pages of the *Health Reformer.*

Kellogg subsequently graduated from an allopathic school of medicine, repudiated his degree from the Hygeio-Therapeutic College, saying that he never wanted it anyway (a fact which did not prevent him from accepting it), and went his own way with what he called "rational medicine." With the support of the Adventist Church, he built the little institution founded by Mr. and Mrs. White into a large institution of world-renown, at the same time, slowly leading the Adventists away from *Hygiene.* The name of the *Health Reformer* was changed to *Good Health* and continued to be published well into this century with Kellogg as its editor. It continued to carry on its mast-head the legend that it was a *Hygienic* publication, but it deviated severely from the primary principles of *Hygiene.* All of this desertion of *Hygiene* and devotion to hydropathy with the administering of some drugging was an effort on the part of Kellogg to get the favor of the medical profession.

Like all those who pretend to reconcile drug treatment with *Hygienic* care, and the care of the sick with and without drugs at the same time, he used a medley of inconsistencies. Kellogg was an intelligent man,

much too enlightened, I think, not to have perceived the contradictions in his own presentation of the case for drugs. One can only wonder how he reconciled in his own mind his compromises and expediencies.

It is axiomatic that reform and compromise are due to outright reaction and even to betrayal. If and when *Hygienists* become "good fellows" and seek by compromise and piece-meal reform to woo the forces of medicine (of whatever school), they are certain to become hopelessly embroiled in medical issues and problems and in the therapeutic and practical contradictions of medicine generally. The problems of the medical profession will become theirs and those of the *Hygienists* and of the people will be shoved into the background. Sooner or later the *Hygienist* reformer will become either an out-and-out medical man or will wear himself out trying to make the medical profession reform itself for the benefit of its patients.

ECLECTICISM

Almost from its origin there have been eclectics in the medical profession. As the various schools of medicine arose and competed with each other for popular favor and acceptance, there were men who advocated selecting the best from each system. Lacking any valid principles to guide them in their selection, the selections of different men differed greatly. What one man selected as the best in a system, another man totally rejected. What one man regarded as good, another man regarded as bad. As there was no good in any of the medical systems, there was really no best to select.

In his *Taming of the Shrew* Shakespeare says that between rotten apples there is little to choose. The same principle is true when we attempt to choose between the different systems of *medicine* that have risen and flourished during the past 2,500 years. As most of these *schools of healing* have already passed to oblivion, we have no choice to make so far as they are concerned. In this country, at present, there may be a bagatelle of eclectic physicians still in practice; but their schools are all closed and no new eclectic physicians are being turned out. The same facts are true of the homeopaths, so far as this country is concerned. We have left only the allopathic or self-styled *scientific* school and an aggregation of herbalists, who struggle to keep alive the ancient practice of dosing the sick with what they call "natural medicines." In addition to these drugging practices, there are a number of schools that are more or less drugless, such as the osteopaths, the mechano-therapists, the chiropractors, the naturopaths, the naprapaths and the physio-therapists.

These schools of practice are all based on different principles or theoretical foundations and their practices are as wide apart as their foundations. It is impossible that any two of them shall be right. If one of them is right, all the others must be wrong. Any selecting that is done will simply mean a muddying of the waters. Instead of fortifying the school that borrows from the other school, its principles are compromised, its practices confused and its practitioners stultified.

Lacking any valid principle to guide him in his choice of the "best" in all systems, the eclectic is forced to rely upon what he calls his experience. He merely accepts from the other systems certain elements which appeal to his imagination or to his *intelligence* and adopts them in his practice. If they do not kill his patients, his *experience* convinces him that they are good and that he has made wise choices. Eclectics have been relying upon their *experience* ever since the first eclectic began the practice and their choosings have been as varied, as contradictory and as confusing as anything can conceivably be. Experience has proved to be a very unreliable guide.

Popularly it is accepted as a fact that the utility of any mode of caring for the sick is shown by its results. But results very obscurely indicate the value of the mode of treatment. In such a test, the varying powers of the living system, upon which the whole result depends, are never taken into account. By this test, all kinds of treatments have been shown to be highly efficacious--the properties of medicines and the properties of the living system have been confounded. The seeming has not been distinguished from the reality. The apparent and superficial occupy, in popular estimation, the place of the true and demonstrable; hence, the contendings of medical men about the value of valueless nostrums is interminable and the people join in the unprofitable wrangling.

Was not Trall right when he declared that man's experience "is not worth a straw. A man's experience tells him what he likes best, and this is always what his appetites have been most accustomed to, not what

is best for him." No man's experience is worth anything if it conflicts with known principles. Unless interpreted in the light of correct principles, experience may be a very misleading guide. Experience is simply a groping in the dark--a feeling our way over obscure paths or trackless wildernesses, and wither she has led us, history has partially recorded. Not until correct principles strip the mists from our eyes and interpret our experiences can knowledge become systematic and reliable.

We do not want to be understood as disparaging the importance of human experience. It is the ultimate measure of truth, the basis of human knowledge, and yet it is valuable only when tested in the light of truth already established. Experience has been the recourse of the ignorant in all ages and every absurdity within the imagination of man has been practiced in obedience to its teachings. Experience teaches men that their bad habits do not hurt them, even that they are means of preserving health and prolonging life. Experience, except when interpreted in the light of sound principles, has always proved itself an idle tale and utterly untrustworthy. In its name every conceivable falsehood has been propagated, and under its guidance almost every woe that afflicts humanity has been practiced. Principles, on the other hand, are the keys to universal knowledge and, consequently, of universal power.

It is commonly contended that the experience of an educated man is entirely safe. We suggest that this depends upon the kind of education he has received. No man is so confirmed in falsehood as he who has been educated into it; no experience is so unreliable as that of the man who has been educated to falsely interpret that experience. Instead of a man's judgment being safe because of having been educated in medical wisdom, it is all the more unsafe on this subject because of his education. Nothing perverts the judgment like a false education and that medical education is largely education in fallacy is proved by the uncertainties and changeability of the system. It is forever changing its practices and modifying its theories. What was considered superlative wisdom yesterday is denounced today as false and absurd. What is now held to be absolutely *curative* is being daily proved to be just as certainly destructive.

An excellent example of what happens when systems are indiscriminately mixed is provided by the debacle that the "nature cure" system finds itself in all over the world today. At its origin, naturopathy possessed a few *Hygienic* principles and practices. Its present plight is the result of having repudiated these principles and of having assumed the despicable role of Mr. Looking-both-ways. It has just about selected and compromised itself out of existence. Its practitioners are all medically orientated; its lay followers are hopelessly befuddled. All naturopaths stand for progress and unity, but none of them are for the things that bring about progress and unity. They are loud in their protestations of their love of health, but none of them are for the things that produce health.

Almost from the beginning, there have been those who would *select the best* from the various systems and incorporate this best into *Hygienic* practice. We have those among us who insist upon taking a "realistic" view. They do not want to be visionary. But nobody wins in this "realistic" game that seems to appeal to so many people. There are too many things in modern life to get us "off the beam." We easily lose our ideals and descend to mere money grabbing. When we do this, we soon lose our self-respect and our will to accomplish. When love of money becomes uppermost in our lives, all the worthwhile things flee away. To toss away our vision and our aspirations, to discard our principles and act without principle, to live and perform on the basis of immediate personal gain, to resort to mere expediencies in our care of the sick, to ride each wave of popular treatment only because there is money in it-well, life can be lived that way and a practice can be conducted in this manner; but it is a stupid way and it is an unsatisfying way of life.

The *Hygienist* rejects all poisons and employs only beneficial substances and conditions to aid the healing processes of the body. Some drugs are worse than others, but they are all bad and we reject them all as not only useless, but always and necessarily injurious. In this matter we can make no compromises. There can be no such thing as selecting the lesser of two evils. So long as there is truth in the world, it is folly to choose the lesser of two evils. We should choose the good and reject the evil.

Eclecticism is a hodge-podge. We take the position, so well stated by Dr. Nichols, that "the only eclecticism an honest man can practice is to choose the good and reject the bad." It is too easy to take the "easy way." The fact that a man took the "easy way" at the outset of his career is a sure guarantee that he will continue to take the "easy way." When he discovers that the "easy way" is to drug and dose his

victims and to cut and slash them in the time-honored way, and that it will be difficult for him to care for his patients *Hygienically,* he will abandon *Hygiene* and stick with the "respectable" elements of society. He may even become a worse foe of *Hygiene* than the medical man who never made any pretense of being a *Hygienist.* In the same way, the pseudo-*Hygienist* who tries to enter *Hygiene* through a knot hole in the back door will have to prove his loyalty to the "respectable" profession of *medicine* by the strenuousness of his opposition to all *medical* heresy.

Of the many schools of so-called healing now in existence, it must be recognized that they have their origin outside the camps of Hygiene and that each was captained and crewed by opportunists and reformers who sought, so they declared, to save the new and vitally important truths from wreck and ruin by the radicals. We must offer increasing resistance to the reformist and *Hygienic*-faker elements that seek to get into the movement and who attempt to sway it in non-*Hygienic* ways.

COMPROMISE

All men and all philosophies find their level; for after their kind, things tend to flock together. Ours is an age of compromise, of half measures. We choose the "lesser of two evils" instead of seeking for radical solutions of the problems that confront us. We seek reforms instead of revolutions. We deride and despise the *visionary* and exalt the *practical man.* He rules our lives. The poverty of present-day vision is appalling.

Today we tend to exalt *liberalism.* The very essence of liberalism is to want to abolish the evils of a system while striving to maintain the base of the evils it would destroy. Thus, while those medical reformers who write learnedly about the evils and shortcomings of present-day medicine have not the vaguest urge to see the abolition of the system, they are quite voluble with their suggestions for reform. They are visibly agitated over the growing evils of the side effects of drugs and the increasing incidence of iatrogenic disease; but their reformist zeal to attain an apparent solution to a problem that, however submerged at times, will remain with us so long as the poisoning practice remains, betrays them.

We have people write us and express admiration for some respects of the *Review* and who say they would subscribe to it if we would rely upon the intrinsic merits of *Hygiene* and let *medicine* alone. But we cannot agree to let *medicine* alone on any condition whatever. We neither seek nor expect the patronage of *medical* men. Our aim is to break up, overthrow, destroy, not only their evil practice, but also their false theories. We cannot be silent so long as the practice of dosing the sick with poisons is continued. How can we compromise with a system that prescribes and administers such substances and agencies as wear out and destroy instead of building up and strengthening the forces and structures of life? It is all very well to feed milk to babies, but those who have dealt out doses of death and have removed essential organs from the body need something more than a light diet. We have a world of facts attesting to the soundness of our position. When the *medical* profession lays down its knives and saws and its vials of poison and retreats from the field, we shall let them alone and devote our attention exclusively to the presentation of *Hygiene.* Till then we must fight with the weapons we have at hand, with all the knowledge we have and all that we acquire as we go along.

Writing editorially (March 1855), Trall said: "So far as the common doctrines--the pretended philosophy of medical science--are concerned, we plead guilty of the extremist heresy and the most ultra infidelity. We believe the popular medical system is radically wrong, and its principles essentially false. So believing, we could not be honest nor humanitarian--we could not recognize a 'higher law,' without seeking to reform, or rather, to overthrow it." This well expresses our present position towards the profession of *medicine.* He who "halts between two opinions" and seeks to combine two opposing modes of practice, who sacrifices principles for popularity, such a person will inevitably become obfuscated. He is neither fish nor fowl, neither cold nor hot, and will be spewed out by an enlightened public.

Trall noted that all the schools of *healing* were willing to compromise with *Hygiene.* They were willing to accept some *Hygiene* if the *Hygienists* would accept some of their theories and practices. They were as ready and willing to make compromises as are politicians, but the real *Hygienists* took the position well expressed by Dr. Nichols, when he said: "Truth is always the loser, and fallacy always the gainer by compromises."

The principles of *Hygiene* are either true or false. If true, they will have to be accepted; if false, they will have to be exposed. They cannot be destroyed by ridicule, slander, misrepresentation, denunciation, vile epithets, cunningly-devised falsehoods, cowardly dodges and subterfuges, nor by hiding behind popular prejudices and superstitions and poisoning the popular mind against them. They have to be met squarely, openly, candidly, honestly and with fairness and decency.

The philosophy of him who would compromise involves a highly skillful effort to reconcile conflicting systems, opposite principles and conflicting modes of practice. At one time he is a shrewd *Hygienist,* attacking the *curing* professions for their antiquated ideas and practices; at another he is a therapist attacking the *Hygienists* for the "inadequacies" of their principles and practices and demanding that the need for "aids to nature" be recognized. He lacks that scientific humility that would enable him to surrender to a principle of nature in its inexplicable integrity.

Truth is never in either extreme, but always halfway between the two extremes, is the popular but false doctrine. They who hold to it are continually trying to reconcile Yes and No. Ifs and buts and excepts are their delights. They have such great faith in "the judicious mean" that they would scarcely believe an oracle, if it uttered a full-length principle. Were you to inquire of them whether the earth turns on its axis from East to West, or from West to East, you might almost expect the reply--"a little of both," or "not exactly either." It is doubtful whether they would assent to the axiom that the whole is greater than its parts without making some qualifications. They have a passion for compromises. To meet their taste, Truth must always be spiced with a little Error. They cannot conceive of a pure, definite, entire and unlimited law. These are the people who, in discussions such as the present one, are always petitioning for limitations--always wishing to abate, modify and moderate--ever protesting against doctrines being pursued to their ultimate consequences.

The platitude that nobody has a monopoly on truth has been repeated so often that it has worn threadbare--indeed, it has become a dogma that we begin to suspect. Those so-called friends of *Hygiene* who class themselves as liberals and who pound their chests and say they will not accept *Hygiene* as infallible are but parading their own assumed infallibility. *Hygienists* are well aware of their many shortcomings and mistakes; if the liberals can do no better than to remind them of these, their criticism is in vain. All too often the liberal position is but a camouflage for commercialism.

In terms of sacrifice of the individual's character, the price of "success" can be high. Conformity is the first requisite of "success" in almost all societies. If one does not conform, one speedily becomes an outcast. This is the reason that so many begin life as rebels and end as conservatives, even in some instances being more strict conformists than those who have never rebelled. The cultural pressures towards conformity are often stronger than legislative enactments. The conventions of society are chains about the necks of its members. These conventions may be social, political, religious or medical, they may exist in almost any sphere of human activity-wherever they are, they stand in the way of change, advancement and the discovery of truth.

The position of the *Hygienist* is a peculiar one in our society. He is in opposition to many things. No sooner than he gets through denouncing the evils of *modern scientific medicine,* its terroristic methods and its effort to coerce the people into patronizing it, than he is forced to take up the cudgels against some proponent of some stupid new scheme of *curing* that, although it may not be as damaging as drugs, is equally as unfounded and ineffectual. But, if we are not willing to stand up and be counted, no matter what the cost, if we surrender to the group pressures that bear upon us from all sides, we are certain to be lost. Only the courageous can ever hope to stand out in this herd-minded society of ours.

Man's best qualities are tested and tried in the crucible of struggle. Man is developed by opposition, not by herd acceptance. Mass culture tends to reinforce existing low standards rather than elevate the general level. It is an observed fact that when everybody is exposed to education, only a small fraction of them are genuinely improved.

Henry David Thoreau declared:

> "There are a thousand hacking at the branches

Of evil to one who is striking at the root."

The true radical applies his axe to the root of the great tree of evil; he is a revolutionist, not a reformer. He is a true conservative, not in the sense that he seeks to preserve outmoded institutions and special privileges, but in the sense that he seeks to preserve the integrity of life itself. The radical is the man who would abolish the slave system; the reformer is the man who would eliminate some of its worst features to the end that slavery may be made more bearable. The true radical in the field of health-disease is the man who would abolish the false systems of *cure* and substitute for them a system of mind-body care based on the laws of life; the *medical* reformer would abolish the worst evils of the older systems and make them less deadly. He would abandon some of the more destructive drugs, lessen the size of the dose of others, give the drug less often, and otherwise make the evil more tolerable. These reformers seek merely to make old-school *medicine* feel more comfortable than it now feels.

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Mistakes of Hygienists

CHAPTER LV

We have previously pointed out that a series of individuals, perhaps even of ages, are required for the full development and culmination of a great thought. Each individual and each age provides further light and truth, while man labors through indefinite time for the perfection of a science. Each event is the term of a series; the present is the summation of the past, which is still to be added to in the future. It was inescapable that at its origin (or rather, its revival) in the last century, *Hygiene* should have had many imperfections. It is certainly true that at its present stage of evolution it shall have imperfections still.

This fact was recognized by the early *Hygienists,* who not only held to different views and carried on different practices, but strove to improve both their understanding and their practices. Trall stated that the greatest room in the world was (or is) the room for improvement. To his classes he emphasized that the most the pioneers of *Hygiene* could do was to lay foundations and establish broad outlines, but that future *Hygienists* would have to fill in the details. Nobody thought that *Hygiene* had burst forth in full flower with no errors to be corrected and no further developments to be made.

Every basic and positive truth that is discovered adds to the approximation of the perfect system that belongs to the future. It not only adds to our understanding of truth, but enables us to correct past errors and to eliminate practices that are not based on truth. If we adhere to the original proposition of *Hygienists,* in laboring for the perfection of the science and art of *Hygiene*--that its true principles are to be drawn from physiology alone--and continue to work and harmonize its various parts, we will not waste time and energy seeking for *Hygienic* developments in all the fields of human investigation.

What was, perhaps, the basic error of the early *Hygienists* (all save Jennings and Graham), at least insofar as their application of *Hygiene* to the care of the sick is concerned, was their assumption that the remedial efforts of the body had to be regulated and directed. In pursuing the effort to regulate and direct these remedial efforts, they resorted to a wide variety of extra-*Hygienic* means and measures, the most important of these being hydropathy.

Water applications, massage, changes in atmospheric pressure (an elaborate apparatus was used for this purpose), electricity and hypnotism (by some *Hygienists*) were chief among the means employed with which to control and direct the body's remedial actions. Some of them enthusiastically adopted the Turkish bath, although this was denounced by Trall. Indeed, his opposition to this bath caused a serious breach in the ranks of *Hygienists,* leading to efforts to repress Trall and to lawsuits. It was but dimly recognized that their efforts to direct and control the remedial efforts of life by adventitious and extraneous means were suppressive.

All truly successful art is established upon scientific principles. The experimental art always presupposes error and disaster. No man can learn independently of general principles, except through frequent failure. The sad and disastrous experiences of life teach man wisdom quite as much as do his successes. Nowhere, perhaps, has this been more true than in the care of the sick. The healing art, as it is called, has been a long series of failures and disasters and, because of the lack of a single valid general principle, has taught only negatively.

The early *Hygienists* built upon sound principles. In saying this, we do not commit ourselves to all of the opinions, principles and practices which they promoted. Fundamentally, they were right and this was enough of a foundation to build upon.

Napoleon's famous remark--"Get your principles right and the rest is a matter of detail"--expresses an important truth; but he who thinks that when the principles are right the details automatically and

instantaneously fall into their proper places, that they arrange themselves in their proper orders, sequences and relationships, with no effort on our part or that no mistakes are made in our work of ordering them, is naive. A true science is only slowly and laborously built up, even after the acquisition of correct principles.

The early *Hygienists* correctly insisted that "all healing power is inherent in the living system" and that "there is no curative 'virtue' in medicines nor in anything outside of the vital organism," and then established a lengthy catalogue of "true remedial agents and materials." They employed *water cures, movement cures, sweat cures* and various and sundry other *cures.* They neither emancipated themselves from the nomenclature of the medical system nor from the *curing* concept. They are not to be unduly censured for this failure, for understanding comes slowly.

They said that "disease is not, as is commonly supposed, an entity at war with the vital powers, but a remedial effort-a process of purification and reparation. It is not a thing to be destroyed, subdued or suppressed, but an action to be regulated and directed." This was the crux of their error. The true character of disease was recognized, but it was thought that it had to be regulated and directed. This effort to regulate and direct the processes of nature let down the bars to the influx of *regulators* and *directors* and led them to say that the *Hygienic System* "adopts all the remedial appliances in existence, with the single exception of poisons." This enabled one prominent *Hygienist* to advertise his place not only as a *Hygieian Home,* but also as the largest water cure in America. The bars down, the *cures* and gadgets multiplied like rats in the corn crib.

Declaring that "diseases should not be 'cured,' " and that "disease itself is a remedial process," and that "disease is an action of the vital system and ought not to be stopped, but only regulated," they insisted on treating disease "according to its nature and not by its name," and asserted that *Hygiene* "cures sick people by removing the causes of sickness" and that it "removes disease by removing the necessity for it."

They correctly defined "truly remedial agents" as "materials and influences which have normal relations to the vital organism," and pointed out that the preservation of health and its restoration are intrinsically the same, for "who knows how to get well knows how to keep well, and who knows how to keep well has learned the first and chiefest lesson in the art of getting well." They, nevertheless, employed numerous "remedial appliances" freely and often which had no normal relation to the vital organism and often, it would seem, neglected due attention to the means that are employed in preserving health, although declaring that they are precisely the same as those that should be employed in getting well.

"There is not in nature," they said, "any law of reversion. Results are produced only by appropriate means and effects always correspond to causes. Good cannot be accomplished by evil agencies, nor evil result from good when properly applied." They declared that if a thing is not needful or beneficial in health, it is not needful or beneficial in disease. This was all good, but it was all too often ignored. There were too many r*emedial appliances* that have no place in health. They failed to eliminate the *cures* from *Hygiene.*

These contradictions of precept and practice can be explained only by assuming that the early *Hygienists* were so close to the old practices which they had abandoned that they failed to see clearly the full import of the principles which they discovered and promulgated. That these principles and precepts were more clearly seen by some than by others is clear to the student of the early days of *Hygiene.* But that it was not clearly seen by all seems to be largely responsible for the fact that *Hygiene* was soon buried beneath an avalanche of gadgets and modalities.

We are faced with a similar situation today. Every newcomer to *Hygiene,* whether layman or professional, seeks to bring along with him a lot of baggage from the *curing* systems to which he had previously paid allegiance. Which of my old loves may I keep, he is sure to ask himself. To which of my little gutta percha gods may I erect a new altar? To which of my former idols may I continue to cling? Is it not true that there is good in all systems? May I not select the good and reject the bad? The tendency to hang onto old delusions, while trying to shift one's thinking into new channels, is great.

It should be quite obvious that when one resorts to the various therapeutic modalities that exist, he

deserts *Hygiene.* The man who trusts the *Hygienic System* only when there is no danger and, when danger appears, deserts it for whatever fancy or caprice may dictate without any fixed principles to guide him is a poor *Hygienist.* To the degree that the practitioner relies upon either drug poisons or drugless modalities will he fail to employ to their fullest extent the resources of *Hygiene.* Let the man who has full confidence in the power of *Hygienic* means to preserve health have the care of the sick individual and he will bring the full resources of *Hygiene* into requisition to supply the physiologic needs of the sick organism, with full confidence in their fitness to fulfill these needs in sickness as they do in health.

Such a man knows that healing is a biological process which he can neither imitate nor duplicate, that healing is as much a process of the living organism as respiration, digestion, circulation, assimilation and excretion. Relying, then, upon the powers of life and the means which these employ to heal and with full confidence in them, the *Hygienist* will not seek for *cures.* He will not haunt the out-of-the-way places of earth for rare, exotic and adventitious substances and processes with which to do that which only the living organism, obeying its own laws, is capable of doing.

He will not employ the resources of *Hygiene* as cures, but as a means of supplying the ordinary and indispensable means of life. The *Hygienic System* is simply the intelligent and lawful application of all the life requirements brought to bear upon the living organism in due proportion according to need. These means maintain the body in health when properly used--they are adequate to the needs (and nothing else is) of the body in sickness. *Hygiene* does not recognize any radical change in the organism in disease so that it needs when sick that which it cannot use when well. Health is to be restored by the processes of life under the benign influence of the normal things of life and not by heaping abuses upon the body by drugging it and subjecting it to treatments.

Hygiene stresses the principle that there must always be a normal relation between the living organism, whether well or sick, and the material things and conditions that contribute more or less perfectly to sustain physiological phenomena. Only those things that have a normal relation to the structures and functions of the organism are usable, whether in health or in sickness. Only those who envisage disease as an entity, a positive and organized force, that has attacked the body and is seeking to destroy it, can find any theoretical justification for the employment of hurtful treatments.

The extra-*Hygienic* means and measures that secured the adherence of so many *Hygienists* in varying degrees may be grouped under the following heads: hydropathy, electro-therapy, mechano-therapy, magnetism and spiritual healing. Although not all *Hygienists* employed all of these means of treating the sick, almost all of them did use water-cure appliances. We may say with Dr. G. H. Taylor, that "a blind adherence to any medical faith is unworthy intelligent beings." The *Hygienic* practice grew out of an observation of the plainest truths and so far as it is a system, is founded in the reason and nature of things; yet it suffered and will continue to, from the inaccurate apprehension of some of its most ardent advocates. Antiquated medical notions were often provokingly mingled with the truths received, especially if one had been much sick and drugged.

Dr. Taylor tells us that it would be almost amusing to list the different notions people had of *curing* by water. "Some appear to think," he said, "it to be essentially a *cleansing* process, each successive bathing affecting the system more profoundly, till the filth of the disease is quite washed away, as soiled garments are restored to pristine qualities and favor."

Although disease was understood to be a remedial process, it was thought that there was danger in this process in proportion to the extent to which the remedial efforts were concentrated wholly or nearly so in a single organ--hence the necessity for *regulation* and *direction.* It was feared that "the vital action may become concentrated upon the lungs" or other "internal organs or tissues," and this was supposed to constitute a danger which could be obviated by resort to "counter-irritation" to diffuse the remedial effort. It was held that "the more important the organ in the vital machinery upon which the disease is concentrated, the more suspicious is the intelligent physician of the consequences. And the further the disease is removed from important organs, the less, of course, is he concerned with the results . . ."

It was thought that the true principle of care of the sick "consists in the modification of the efforts of nature to exalt, depress or diffuse, as circumstances demand, knowing that the real danger consists in the

intensity and concentration of disease in particular parts."

To reduce this assumed danger, they sought to regulate the vital struggle so that the circulation was kept nearly balanced. It was thought to be necessary to maintain the balance of circulation in order that the body "can perform its remedial work successfully." They sought to balance the circulation largely by means of hot and cold water applications and by passive movements or massage. The water cure was regarded as essentially valuable in febrile states; the movement cure was regarded as essentially a mode of care in chronic disease. In fevers they sought to "increase the action of the skin" by water applications, thinking that the eliminative work of the skin was most important. In point of fact, it was a process of suppression and was not remedial.

"The leading features in the management of such irregularities being those measures which are most naturally adapted to reduce the too great intensity of vital action, and at the same time preserve the capabilities of the vital powers . . ." well sums up the attitude of many *Hygienists* of the period. This principle actually led to the acceptance of the old medical notion of the value of "counter-irritation" and to practices based on it. It was admitted that by drawing the vital energies away from "the work of destruction" by means of "counter-irritation," the "cause of the disease has not been removed; but art has interposed her magic cunning and restrained the energetic powers of nature, causing her to work more consistent with the enduring capacity of material fibers."

Admitting the legitimacy of the principle and practice of *counter-irritation,* they, nevertheless, decried the medical use of *counter-irritants,* saying that the great fallacy of medical theory and practice "may be considered to consist in the abuse of the principle of *counter-irritation.* Their *alternative* effects are more to be deprecated than the disease itself. Their remedial agents are so positively anti-vital as to often produce an untimely and almost immediate dissolution! The patient is made to react until he is often 'so far and so fatally drained of his living principle, that there is no longer any rallying or reactive power remaining, and gives up the ghost in a few hours, to the treatment instead of the disease.' " Thus D. A. Gorton, M.D., in the *Journal,* April 1859, quotes *Good's Study of Medicine.*

Today it is quite obvious that had more attention been given to the *orthopathic* principle so fully developed by Jennings and also suggested in the writings of Graham and less attention to medical fallacies, *Hygienists* would not have fallen into the error of supposing that the danger in disease is in proportion to the intensity of the remedial action and they would not have thought it necessary to employ means to direct, control and regulate the remedial process. They would have recognized that the remedial process is regulated, directed and controlled by the laws of nature and these are more certain and accurate in their work than any man can be.

Treatments directed to the control and regulation of remedial processes are strongly in opposition to the regulations of physiology and can lay no just claim to scientific merit. This fact, together with the ill successes with which such treatment meets, should consign it to the general repository of things that are past.

In an article published in the *Journal,* August 1857, Dr. James C. Jackson said: "I have become so entirely convinced of the soundness of the philosophy of treating human diseases by water as a remedial agent, and of the splendid success that awaits the true water-cure physician, that I fear not in the least the most searching inquiry . . ." He referred to the "water-cure and its adjuncts," thus relegating all *Hygienic* means to the rank of mere adjuncts of hydropathy. Although calling their practices *Hygienic,* many *Hygienists* gave elaborate instructions for the use of the various forms of water applications and only a few general instructions about correcting the mode of living. Theoretically, but not practically, they had divorced themselves from the *cure* superstition.

It was stressed by Taylor and others that water applications were merely means of applying varying degrees of temperature to the body. They saw in the so-called water-cure a *thermo-therapy.* Writing in the *Journal,* December 1855, Taylor said: "By temperature applied from external sources we have a most potent means of modifying and controlling the physiology of the system." "Water applications," he added, "are common and convenient modes of adding heat to or taking it from the body."

In the beginning, this thermic meddling with the functions of life was thought to be of value in the care of the sick, but it finally came to be realized that it was a program of suppression and it was recognized by those *Hygienists* who continued to employ water "therapeutically" that its *therapeutic* use was distinct from its *Hygienic* use.

Temperature is certainly a normal excitant of organic functions, as is seen in everyday life; but it is certain that when the influences of temperature are out of all proportion to the capacities of the organism to constructively use them, the body does and must suffer. There will be both an irregularity and even an abatement of function. The unnatural supply or application of a normal agent will produce effects not very dissimilar from those of an unnatural agent or drug. A bread crumb in the bronchioles will occasion irritation, a flow of mucus, discomfort and violent coughing; in the nostril, a bread crumb will occasion irritation, discomfort, a flow of mucus and violent sneezing to expel it; resting on the chest it will occasion irritation and a movement of the hand to wipe it away; taken into the stomach, it will serve as food. The use of bread as food is *Hygienic;* its introduction into the air passages is non-*Hygienic.*

Writing on hydropathy in the *Journal* 1856, Dr. G. H. Taylor said that it "furnishes a direct means for the suppression of most of the sudden pathological straits into which the system may be thrown," thus giving voice to a recognition that water treatment was suppressive. Although looking upon cold as a "physiological stimulant," he said that "if the cold be continued too long and the body cooled too much, the physiological capabilities are lessened and the response exhibited in increased production of heat is reduced." He recognized that the use of fomentations and compresses was merely palliative. On the other hand, the water-cure advice given was often of the most harmless character, such as "a tepid ablution" each day or a tepid ablution in the morning and a sitz bath of 75° in the afternoon.

Electricity was regarded, in the words of Dr. Taylor, as "a principle or actuating cause that abounds in nature and is probably silently and mysteriously working in all her operations . . ." An electrical apparatus was thought of as "a means of focalizing" this all-pervading energy of nature. In considering the elements of *Hygiene,* D. A. Gorton, M.D., said: "Electricity and Magnetism are generally classed among the hygienic agents and perhaps justly so, but they cannot be considered primitive agents." She wrote this while an associate of Trall and probably presented his view as well as her own when she discounted the greater part of the claims made for *electro-therapy.*

Trall thought of electricity as a means of controlling and directing the remedial activities of the body. He said: "It is capable of exciting motion or action in muscular fibers and of determining vital action in particular points, circumstances which, to a greater or lesser extent, are useful in many morbid conditions." Thus, as will readily be seen, we are back to the primary mistake of the early *Hygienists*--that the body's remedial efforts require to be directed and controlled. More attention to Graham and Jennings would have dispelled this illusion.

Among the electrical appliances that achieved popularity among *Hygienists* and hydropaths was the electro-chemical bath, which was supposed to work wonders in removing metallic substances from the body. Not all the *Hygienic* and hydropathic practitioners adopted the electro-chemical bath; indeed, some of them denounced it as a humbug. It enjoyed considerable vogue for a time and then ceased to be used. Dr. Gorton said of this bath that "the merits of this celebrated bath may have been overestimated by some. There are those, however, who discard its use altogether; while by others it has been, and is now, lauded to the skies. I regard it as efficacious in some particular complaints."

With biting sarcasm, Dr. Kittredge describes the views of many with respect to this miracle bath. He said: "Be you lame, halt, or blind, stiff in the joints as a ten years foundered horse, or as twenty years enlargement of the heads of the bones can make you, you have only to step into an acidulated bath, and have a streak of lightning run through you! and 'presto, or given to change,' and you are well again, rather, better than new, if anything."

If unable to afford the expense of one of these modern miracle-working gadgets (electro-chemical baths), one had only to go to a clairvoyant and he--though stupid as a dolt when awake--would, asleep, tell him all the ills he suffered with and how to *cure* them. What a convenience! The most highly educated are as prone as the ignorant to patronize the popular *cure* craze, be it a new "wonder drug" or a skilled

mountebank who has magic in his hands.

Aye! By the mere laying on of hands you may be *cured* in a trice of disease you have been years in building and all this may be done without removing or correcting a single etiological factor that has contributed to the building of your extensive and long-standing pathology. Not only is there not the slightest need to disturb the causes, it is not even necessary to know cause from effect. Like the infallible "specifics" of the medical profession that *immunize* you against causes that are daily parts of your life, these marvelous magnetic procedures work their wonders independently of the laws of being.

How inconsistent to believe that a man can be made whole in a few minutes or in a few days by the simple laying on of hands by some pretender, while rejecting with horror the belief that this same man can obtain absolution of his sins from a priest! With what alacrity they believe in the absurd dogmas and damaging practices of the drugging school which, like the magnetic healer, also believes that it is not necessary to remove causes, but simply to violate the laws of life still more by taking poisons!

In discussing the electro-chemical bath and a few other crazes, Dr. Kittredge said: "I don't believe in the possibility of anything or anybody, or any combination of things or any number of bodies making a man well in three-quarters of an hour, or three hours, or three weeks, or three months, that has been twenty or thirty years getting sick; simply because, we know, it is impossible. Nothing short of a miracle could do it, and I am free to confess, I don't believe that God would subvert the wisest laws He ever made in order that some ignorant pretender might make a noise in the world."

That an animal magnetism of one man can be made to operate upon another to radically and permanently *cure* disease without the cause of the disease being removed, is a proposition as absurd and irrational as that drugs can do so. Yet, many *Hygienists* adopted magnetism and employed it in their practice. In spite of the opposition to which it was subjected and its condemnation as the rankest kind of charlatanism by the learned men of the day, *Hygienists* were inclined to accord animal magnetism an integral place in the *Hygienic System.* In Europe the subject received far more favorable attention from medical men than it did in this country, so that in espousing its cause, *Hygienists* were almost alone on this side of the Atlantic.

At that time there was much excitement over the cures reported to have been effected by the spirits of the dead--spiritualism was enjoying a revival. People were hearing strange noises and feeling queer sensations--raps, taps, knocks, thumps, bumps, pinchings, squeezings, rattlings, chatterings, rollings, poundings, tippings, tumblings, scratchings, scorchings, freezings. A desk, a table or a chair would rise up without visible means of lifting it; a chair would reverse position; a man's pen would be wrong end up but would write quite as well; nevertheless, everything behaved contrary to all known laws. The victims of the delusion would see a phosphorescent face staring down at them, appearing to be constituted of fog and electricity. It would develop into a human form--head, trunk and limbs--so demi-ethereal and semi-transparent that one could think only of gas and magnetism.

New fangled notions were few and just emerging, but they attained great popularity in a short time. Many *Hygienists* became converts to spiritualism. Among those who adopted spiritualism, magnetism and hypnotism were Mary Gove and Dr. Thomas Low Nichols. The most difficult obstacle *Hygiene* had to hurtle then, as now, is its simple naturalness. Few people are content with nature or with simplicity. They prefer the mysterious, the incomprehensible, the complex and the artificial.

Is it not strange that these departed spirits, who while "in the flesh" were farmers, mechanics, merchants, lawyers, etc., all become healers as soon as they "pass beyond the veil?" Dr. G. H. Taylor said of the spirit healing of his time: "I ought, perhaps, to add as an inference from sober inquiry, that the spirits of the departed dead are usually engaged in some higher pursuit than the attempt to interrupt the relations between transgression and its consequences; nor is the presence of hypothetical influences sufficiently plain to be reliable. There must always be a connection between life, whether in its normal or depressed manifestations, and the material things that contribute more or less perfectly to sustain physiological phenomena."

If our forerunners of 150 years ago could not boast of their mesmeric influences or table-turning or spirit-wrapping, they were the victims of a marvellous list of charlatans of other descriptions. It is very

unfortunate for the *Hygienic* cause that many of these popular fallacies found their way into *Hygienic* practices.

Religion still had a strong hold upon the imagination of the people and we should not be surprised to learn that many *Hygienists,* including Dr. Jackson, who was a minister, Dr. Nichols and Mary Gove, believed also in divine healing. These, with others, resorted to prayer in their care of the sick. The correct *Hygienic* attitude in this matter is that all things are rightly related to all things else and it is sheer folly to think that good can come from violating these relations or that God will, upon appeal from us, violate the eternal relations of nature. The intelligent man would expect an intelligent God to permit the lawful processess of nature to pursue uninterruptedly their lawful courses.

The brothers, George H. Taylor, M.D., and Charles F. Taylor, M.D., introduced the Ling System or what became known as the *movement cure* into America. This system, composed of active and passive movements and massage, possessed considerable value and Dr. George Taylor taught the system in the Hygeio-Therapeutic College. But, for reasons that should be obvious, the massage or the passive movement features of the system ultimately received most stress.

Dr. Walter's *Nutritive Cure* was composed of a series of measures by which he sought to influence and control nutrition in local parts. In the process he used water applications, manipulations, exercise, etc. Of these means, he considered massage the most effective and especially that form of massage that consisted in squeezing and pressing the soft tissues of the whole body. By this method he sought to squeeze the blood out of the tissues and to allow fresh blood to flow back into them as the pressure was released. In his later writings he seems to have abandoned this conception and this means of health restoration.

Kinesipathy was a term employed to designate a "mechanical or motor system" of treating disease. It pretended to *cure* disease by "specific active and passive movements." It was but a re-christening of the Ling System. *Motorpathy, kinesipathy, statumination* and other fancy terms were employed to designate a plan of treating disease with various manipulations, directed as much as possible to exercising weakened muscles. It was more particularly employed in displacements of organs. Writing in December 1853, Trall said: "Motorpathy means literally *motion-disease,* as hydropathy is literally rendered *water-disease,* 'atmopathy' *air-disease,* 'orthopathy' *nature-disease,* &c. But all of these terms are used in exactly the opposite sense, as motor, or motion-cure, water-cure, air-cure, nature-cure, &c."

He was correct in all of these instances except in defining the term *orthopathy,* which means literally, correct affection, and was coined by Dr. Jennings to express his conception of disease as right action--this as opposed to the medical view of the time that it is wrong action, a conception which Jennings coined the term *heteropathy* to express. We can find no instance in the writings of Jennings where he employed the term *orthopathy* to mean nature cure. Like Trall, Jennings did not believe that diseases should be or could be *cured.*

Another form of massage is that described by Dr. Charles F. Taylor in an article in the *Journal* of May 1857, which he called medicopneumatics. He said: "I am induced to give the following description for the benefit of all who are desirous of increasing the number of natural and rational appliances that can be used by the medical man, thus affording a choice of means at his command in any given exigency." The method may be described as one of dry cupping and was intended to control circulation locally. Believing that everything in the universe that is not poisonous can be used remedially, the *Hygienist* could employ the vacuum cup in his rational care of his patient, but he should have realized that such things have no relation to *Hygiene.*

The multiple system created by the adoption of the principle that all non-poisonous things may be used remedially soon led to the adoption of more and more gadgets and the burial of Hygiene beneath an avalanche of these. Vacuum machines, electrical gadgets, massage rollers, vaginal syringes, means of giving enemas, means of washing out the stomach and other gadgets multiplied. These were not heresies generated within the *Hygienic System,* but were, in fact, alien practices and theories that crept into it as the result of fortuitous contacts and made acceptable by the false idea that any non-poisonous thing can be used remedially.

It was unfortunate that very frequently *Hygienists* continued to attempt to express *Hygiene* in the old medical terms--a practice that was like that of putting new wine into old bottles. Dr. Jackson, for example, continued to speak of *attacks* of disease. He spoke of rheumatism attacking vital organs. He also continued to use the terms *cure* and *curability.* He was not alone in this mistaken use of old medical terms. It is an unfortunate fact that when new concepts are expressed in old terms, they will be understood in the old terms and this means that they will not be correctly understood at all. New concepts require new terms in order to properly express them.

The early *Hygienists* were *medical* men, trained in *medical* colleges, steeped to the eyebrows in *medical* terminology and habituated to expressing themselves in this terminology. From the outset, they attempted to express the new conceptions and new principles in the old and familiar terms. They wrote of hygienic medication; they talked of *cures* and therapies, even of *pathies.* Only little by little was it recognized that the old terms expressed the older ideas and that they were trying to put new wine into old bottles. New concepts require new terms; new principles need new modes of expression. It is contrary to the doctrine of chance that a group of would-be thinkers, wandering in a mist and without any principle to guide them, could be fellow travellers with those who seek to maintain a truly scientific course.

Every department of human knowledge requires its own special terminology. It is impossible to convey the meanings of physiology in the language of the farmer or the mechanic. But in *medical* parlance we have remnants of ancient words galvanized into a ghastly semblance of their original meaning and employed to bewilder, befuddle and confuse the hapless student. Many of the words and phrases from ancient languages are used for no better purpose than that of clothing the nakedness of modern thought, that is, to hide its emptiness. They may be thought to adorn and elucidate the forms and meanings of young and growing sciences, but they really serve to cover up a vacuum.

As an example, suppose we take the word *paraplegia.* When the old Greeks observed a man who had been *smitten* with a *stroke,* and the *blow* appeared to be full and disabling, so that he fell senseless under it, they called him *apoplektos,* that is, "struck asunder or completely"--hence the term *apoplexy.* If it appeared that only one side was *smitten,* that is, the imagined weapon glanced either to the right or to the left side, so that the *victim* was but half-struck, they called it *hemiplex*--hence our word *hemiplegia,* "half-struck." Or, if the hostile intent of the *striker* seemed to fail and he dealt a careless *blow,* which fell short of of its purpose, but caught the *victim* in the lower extremeties, so that he was partly *smitten,* he was *paraplex*--hence our word *paraplegia.* In like manner, many of our words (scientific terminology) are expressive of the ancient conception of disease as an attack upon the body by unseen foes.

This example will provide the reader with a faint idea of the absurdity of trying to express the principles of a great scientific method of mind-body care that is founded in nature and, therefore, intimately connected with true physiology and biology, in the terms of an old and fallacious system that seems to be able to do nothing so well as it propagates disease and death. The old system plays all manners of wicked tricks--poisoning, cutting, slashing, peppering, burning, blistering and electrocuting.

Why should we try to express *Hygienic* views in the inaccurate and confused terms of *medicine?* We can agree with them only if we make the same errors and mistakes that they make. If we express our principles in the same terms in which they express their mistakes, we will be understood in the same language. In making use of an established idiomatic thought and speech in which to convey new concepts and new discernings, we are severely handicapped. If we express our new thoughts in conventional ways, they will be understood in conventional ways and this means that they will either not be understood at all or will be but faultily understood.

Medicine's is a conceptual world that belongs to the remote past. If we attempt to use the older terms in the hope that they will be read by others with the same meanings for these that they have for us, we gravely err. Inasmuch as their conceptual world is radically different from ours, they read these words with the old meanings. The older terms convey to the reader the older thought forms and not those that may be in the mind of the writer. In our writing and speaking, we must always take into account the differences between the intellectual world of those who have been reared in the ancient traditions and who have not emancipated themselves from these, and the intellectual world in which we live. Without any reference to which of us is right, the difference exists and must be reckoned with. We may appropriate the

older terms and change them to suit our purposes, but they will still be understood by others in the traditional sense. If we draw them to *Hygiene* and attempt to mold and adapt them so that they become integral to a different system, they will be so understood only by those of us who are drenched in the different system.

It has been urged: let us not cavil about words. Ideas are what we want--principles, not phrases. But this objection overlooks the fact that ideas are expressed in words and if we choose the wrong words, we express wrong ideas.

On most subjects we desire to communicate ideas and, hence, we use plain and understandable language; but if we have no ideas to communicate, or our ideas are false and, consequently, it is not desirable for them to be understood, we employ language that enables us to conceal the weak points and discourage close examination. Whoever investigates *medicine* will find mystery! Mystery! Mystery! He will find no principles at the bottom of the system, except such as are at variance with all the known principles of life and are, consequently, false--hence the necessity of profound study and of specialty of language. *Medical* reasoning is an anomaly. There is nothing like it in the heavens above, or in the earth beneath, or in the waters under the earth. The show of words without rational meaning and the greater show of technicalities thrown in as a cover for ignorance, are perfectly marvelous, but exceedingly useful. They overawe the ordinary reader, causing him to retire into reverent silence. There is nothing like a few Latin and Greek terms with which to silence annoying questions without answering them.

Much of the dietetic care of the sick was of a character that we could hardly endorse today. Recounting his care of a woman patient, Dr. Jackson says: "So I kept her under the same simple diet of bread or pudding or gems or porridge and milk, with an addition of stewed dried apples . . ." He says that he allowed her nothing else, "not so much as a strawberry between meals." We think that it is quite evident that, good as were the results obtained by the early *Hygienists,* much better results could have been obtained had they not relied too heavily on cereals. Graham had not advocated a cereal diet, but too many *Hygienists* were so enthused about whole wheat that they permitted this to dominate their thinking in the realm of diet.

The seduction of *Hygienists* by an idealistic illusion of a tropical utopia is to be greatly deplored. The tropics, as they exist today under the prevailing earth conditions, are not the superior habitation for man that the earth as a whole must have been before the change of earth's climate. The excessive heat of the lower altitudes, the great humidity of some of its regions, the poverty of some of its soils, the prolonged dry seasons, the excessive rainfall of the wet seasons and the failure of many of man's finest foods to thrive under tropical conditions, are factors that render the tropics less fit for human habitation than the exploiters of tropical colonization schemes picture for us. It is not surprising, however, that many *Hygienists* have felt the lure of the tropics and while there is not room in the tropics for more than a third of earth's present population, they have urged us to "return" to what they fondly believe was man's original home.

Future of Hygiene

CHAPTER LVI

With a few bright passages of sunshine, the picture of the past of man has been a gloomy one. It is darkened all over with horrors. Poor, sick, ignorant, enslaved, crushed with bigotries, maddened with fanaticism--enduring a thousand forms of untold misery--the condition of man has been dark and damning. In his best condition--under the lowest as well as the highest civilization--he suffered multiplied miseries and far too often this bright world, gemmed all over with beauty and magnificence, has been only a vale of tears.

From the past history and present condition of man, we turn with hope and joy to the spectacle of a future destiny. It cannot be that the end of man's existence as a race is a never-ending condition of degradation and suffering. If the meager and ill-diffused intelligence that existed in the past and that now exists has accomplished so much, what may we not expect from general enlightenment? He has not rightly studied the past who permits himself to despair of the future. And to man's noble destiny many circumstances are contributing! Man is step by step gaining an understanding of the powers of nature.

If any one thing distinguishes our times from all past times more decidedly than anything else, it is that mind is advancing in all that can promise glory and happiness. With its many instruments of precision, it soars high into the realms of the material universe and unfolds the many wonders that have been hidden from peoples of the past. It pierces deep into the dark recesses of our little world; it is discovering matter and displaying the many marvelous properties of its component parts; it is rapidly subduing the long-established tyranny of the old elements and compelling them to yield their power subservient to the direction of man; slowly, sometimes it seems rapidly, mind is unraveling the mysteries of nature, supplying man with transcendent powers and slowly, painstakingly, unraveling the laws of nature in many fields of existence. Thousands of ancient errors have been dragged out into the light and shown in their true colors. We expect this progress to continue.

We look for no miraculous revelations of omnipotence--no ushering in of a millennium, with the pomp of angelic administration and sublime elemental phenomena. The sun will shine on in the heavens; the order and harmony of the universe will not be disturbed. The means by which humanity is to advance to a high condition of happiness are of a natural and simple character; we have only to look back upon the past to judge the future. Man is never satisfied with what he has. He is always striving to improve his condition. Out of this striving, blind though it is, comes his progress.

But with all of this great advance in many departments of science, we are still in the period of pre-history in our thinking about health, disease and healing. That men, trained in the sciences of chemistry, physics, biology, physiology, anatomy, etc., should resort to animistic thinking when they consider drugs and doses, is the paradox of paradoxes. We still have far to go in our thinking in this field before we can boast of our progress and enlightenment. But there is ground for hope. A tree grows slowly, little by little; but when it attains a certain size and development, you view it some fine morning and behold: it is covered with blossoms. A few more weeks pass and it is ladden with luscious fruit. So it will be with the development of the *Hygienic* movement.

In many respects the *medical* profession has every advantage. They have the advantage of large government supported and endowed institutions in which learned professors teach their principles and methods; they have the advantage of long established public confidence; they have the advantage of great age; they lay the foundation for another disease in treating one. But the *medical* profession has the disadvantage of the weakness that inheres in all systems that are basically false and that require a process of ceaseless change, both of theories and practices, if they are to continue to exist.

Hygiene's advantages actually so far outweight those possessed by medicine that, in time, *Hygiene* will prevail. Our advantages are of four kinds:

1. Our principles are true, hence enduring.
2. Our means are compatible with the needs of life, hence constructive rather than destructive.
3. Our principles are comprehensible to the common understanding, hence by way of compensation, are certain to be accepted.
4. Another and great advantage of ours is that we control the habits of our patrons--this, indeed, being an essential part of our plan of care--and this assures us a success medical men do not even dream of.

The more rapidly our patients evolve into vigorous health and the more peace, harmony and agreement there exists between us as professional brethren of one great and truthful movement, the more will people flock to the ranks of *Hygiene.* One young woman restored, and taught how she may keep the roses blooming in her cheeks and how to preserve the sparkling luster of her eyes should be sufficient to reconcile the whole neighborhood to the new way of life.

It cannot be over-emphasized that the *Hygienic* movement is an educational movement. It is by education alone, and not by law or coercion, that *Hygienists* can be made. But we have in our ranks great numbers of impatient individuals who, while conceding the vital importance of *Hygienic* education, despair of the people ever becoming sufficiently enlightened to emancipate themselves from the drug superstition. These think that *Hygienic* education always proceeds at a slow and plodding pace. That this is not so is crystal clear to everyone who is fully acquainted with the rapid progress it made in the days of its origin. (We speak of its origin when, in reality, we should speak of its revival. *Hygiene* is not a discovery, but a recovery.)

There has, indeed, been a lengthy period during which *Hygienic* education has reached only a few intent readers and careful students. But there will come a time and I am convinced that we are now upon the threshold of that time when, as a result of the failures of the schools of so-called healing and particularly of the dominant school of *medicine,* the people in general will manifest a serious desire to discover and understand something that will prove to be successful. Then the educational work of a century may be crowded into a decade. The growing recognition of the failure of the "miracle drugs" and the inability of the *medical* profession to find something with which to supplant them must serve to awaken the intelligence of our somnolent people and start them in search of truths that have long been denied them.

When this time arrives, we must have educators to do the educating work. We must have men and women who know *Hygiene;* we must have lecturers, writers and practitioners who thoroughly understand the principles and practices of *Natural Hygiene* and who are capable of both caring for the sick and educating the well. Without such a trained and educated group of educators, the efforts of the people to find the truth about life and living, about health, disease and healing, can only prove abortive and end in a tragic explosion. The brighter the light of *Hygiene,* the further it can be seen. The higher we hold it, the greater the distance from which the lost can see its guiding beams.

We cannot look to the leaders and practitioners of the newer schools of so-called healing to lead the people into truth and health--they do not know the truth themselves. They are opportunists, frauds, and fakers who seek to use every awakening on the part of the people, not as an opportunity to present them with more truth, but as an opportunity for more exploitation. The self-professed *liberals* among us are not our friends. We must learn to observe the rule that who is not for us is against us. The half-devil, half-angel kind of mongrel is not a *Hygienist.* Those who go in for Dianetics, hypnotism, chiropractic, herbalism and other non-*Hygienic* methods and systems, however well meaning they may be, are foes of truth.

The system of *Natural Hygiene,* as taught and practiced in all the *Hygienic* institutions in America, is either founded in nature and is true or it is not. If true, it ought to be adopted at once as such, to the exclusion of all opposing theories and practices, with however much zeal these other systems are propogated, because truth knows no compromise. If *Hygiene* is not founded in nature and is not true, then it should be rejected as promptly and no man should engage in it. There can be no middle ground.

Co-existence is sold to us as the very quiescence of progress. How absurdly fantastic is the whole idea! Either *Hygiene* is true or it is false. If it is false, it could not co-exist. If it is true, then the systems that oppose it and that are based on principles that are necessarily false, should not co-exist.

The *Hygienic System* has its principles in the laws of nature themselves. It repudiates all the teachings of all the *medical* schools in the world, so far as principles and practices are concerned. Indeed, if there were not a drug-*medical* school, nor a drug-physician nor an apothecary shop in the world, and if there were not a cure-monger and treatment peddler of the non-drug schools of *medicine* in the world, it would be much easier to educate the people in a true science of life and health and it could be done in much less time than now, with all these stumbling blocks in the way. Every system, every method that misleads and confuses the people stands in the way of the advance of truth.

The future of *Hygiene* is assured because it rests upon a foundation of bed-rock truth. However slow or rapid may be its progress among the people, its ultimate acceptance by them is as certain as the rising of tomorrow's sun. Every new truth that is discovered, every new and valid principle that is developed, will but add to its lustre and its strength and render its application more effective. Perhaps there is already in the world all the knowledge needed to perfect the science and art of *Hygiene,* if it could be brought together and synthesized; perhaps there yet remains much to be discovered. The future progress of *Hygiene* must rest in increasing knowledge of the normal elements of life. As we learn more of biology and physiology, of food and sunshine, of exercise and rest, of the emotions and environmental stresses, our work will become more precise and will be applied with greater understanding.

The unity of nature means nothing if it does not also mean the unity of truth. Every discovery of new truth helps us to a fuller and better understanding and application of old truth. The accumulation of truth helps us to a better interpretation and application of it. For this reason, the discovery of new truths will result in the advance of *Hygiene. Hygiene* will be promoted and purified by every advance in physiological, nutritional and bionomic science. Our grandchildren will have a better knowledge of *Hygiene* and be better able to apply it than we of today. We are justified in regretting our own ignorance; we should never fear the advances that will provide for greater knowledge for the future.

What have we to fear from the findings of science? What have we to fear from the discovery of truth? These questions may seem like hollow mockery since the making of nuclear bombs. We note that the findings of science may constitute a menace to the future of the race. Actually, everything science has ever discovered has been a potential menace to the race, not, however, because truth is essentially a menace, but due to the fact that the real menace is ever present, ready to pervert and misuse every discovery that is made. The predatory forces that rule, exploit and ruin human society, not the truths that are uncovered by the searchings of scientists, constitute the real menace to the future of mankind. Altogether too many scientists, unfortunately, are in the employ of these forces and are their willing tools. For this reason, scientists have many crimes to answer for.

Of all the people in the world, *Hygienists* should desire and welcome the discovery of new truths, in the firm faith that every new truth that is discovered will support and render more meaningful the truths we already possess. We have less to fear and more to hope for in the discovery of truth than any other group.

Let us, then, have no fears of the bearings of any of the discoveries of science upon *Hygiene.* Every step of progress into the arcana of nature will prove a triumph for *Hygiene.* There is not a shadow of reason to fear any other result. *Hygiene* is true, whatever else is true, and we ought never to permit any doubts of its truth to arise because of some new discovery or alleged discovery. Scientists may disclose new truths galore, but they will not make anything untrue that was true before. The discovery of a new truth does not destroy an old truth. Whatever is true will forever remain true, whatever else may be found to be true. If there seems to arise a conflict between a new truth and an old one, it will be found to be only in appearance, if they are both really true. New truths can only throw more light on old truths--every truth fortifies every other truth.

The vital truths of *Natural Hygiene* will be accepted as certainly as was the truth that the earth is round and not flat and that the earth turns on its axis and that the sun does not go around the earth. The principles of *Hygiene* are perhaps as representative of our modern era as the theories of Copernicus and Gallelio

were of their own time. The blind fumblings towards the solutions of problems that have challenged man throughout the historic period and the many mistakes that were made and are being made by the old systems are representative of mistakes in astronomy that prevailed before Copernicus. We need not be discouraged, although we may be excused our impatience with the slowness of progress.

While all the many schools of *healing* and of *prophylaxis* have been operating in modern society, disease and the drug industry have been increasing. It is evident that we shall have to look to some other source for a remedy for these evils. That source is *Natural Hygiene.* It proposes and makes its one object the removal of disease and the disease trades from the earth. The time has certainly come to tear away the veil of mystery with which the so-called healing art has so long been shrouded. It has been left to the advocates of the *Hygienic System* to teach the people a genuine science of life, the genuine ways of health, the real causes of disease and the genuine means of restoring health. Whatever may be the ultimate destiny of *Hygiene,* its present mission is to enlighten the world upon these most vital subjects, to popularize the science of life and to spread everywhere a knowledge of the laws of life. It is a glorious mission--let us labor earnestly for its full accomplishment.

Strong, naked, honest facts are what the public wants to satisfy them of the virtues of *Natural Hygiene.* It is not enough to enunciate principles--we must explain their practical operations and show the results of their applications. We must not only show how the sick ought to get well, but how they do get well. When the public mind has been duly enlightened on these matters, the difficulties that we have to contend with today will no longer be present. Disease will be understood as a restoring operation and will no longer be regarded as a destroying process or even a destroying entity.

Not secretly, but almost unobserved because generally ignored, there lives all over the world thousands of people who have accepted and act upon the principles of *Natural Hygiene* and upon these must we depend to erect the beautiful structure of a glorious future that will follow the inevitable collapse of the present evil and man-destroying system. But those who teach and those who practice, as well as those who support them, must recollect that the strongholds of error, walled in by blind reverence for ancient notions, consecrated by the first impressions of childhood and strengthened through life by constant association and habit, are not easily uprooted. The forces of *Hygiene* must be expanded and better fitted for the task before them. Whoever has truly immersed himself in the great truths of *Hygiene* and has really learned to understand and appreciate them should put forth every effort to extend its truth among the people around him. Well might we exclaim with the inspired poet:

> "How beauteous are their feet,
> Who tread on *Hygeia's* hill!"

No mere reform program will suffice. As reformers ignore the basic causes of evils and concentrate upon ameliorating some of the symptoms, they tangle themselves in absurdities and contradictions. One of the salient features of reform is that, however it expresses itself, it becomes pinched in its own cleft stick. This is a consequence of predicating its reasoning upon sentimentality rather than upon basic principles. If we content ourselves with scratching the surface instead of looking for causes, we are sure to become mere reformers. Reform is a mere palliative which fosters the very evils it seeks to relieve and causes it to blossom into some fresh evils.

The *Hygienic* movement cannot be all things to all men. It can be only one thing and all mankind must accept it in its purity and integrity or suffer for its lack of intelligent application of the only saving force in existence. Only the *Hygienic* movement, guided by its unswerving adherence to the valid principles of life and its deep sense of responsibility to the peoples of earth gives to the struggle for health freedom the importance it deserves. Only the *Hygienic* movement truly reveals the inner workings of the *medical* system.

Alcott gave it as his opinion that all systems of medicine were leading us "to one grand issue." He said: "Within a short time--it may be five hundred years, for that in history is a short time, but it may be in 50--all sensible and truly learned medical men, as a general rule, will give no medicine at all." By *medicine,* in this instance, he meant drugs. But he was mistaken in thinking that the drugging systems can lead mankind into true practices and into a knowledge of the truth about life and living.

Although at present *Hygienists* represent a small minority group in our country and in the world, we are the only group with a program that represents the genuine welfare of the people. Though our times are temporarily dark and troublesome, we can hear the guardian genius, *Hygiene,* proclaiming as with a voice of thunder, "All will be well."

Lo! I see strong virile races,
When these drugging days are done,
Running, leaping with great vigor,
Gleeful in the morning sun.