

# Health Science

Official Journal of the American Natural Hygiene

Society, Inc.

VOLUME 1  
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Bad Air: More Dangerous  
than You Think

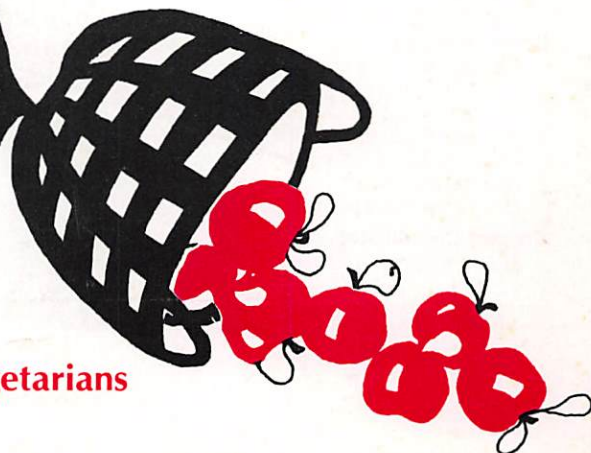


Our two children taught Us a  
Valuable Lesson about Breastfeeding

Teaching Hygiene to  
Youngsters



Some mistakes of Vegetarians







# The American Natural Hygiene Society, Inc.

"Dedicated to Natural Hygiene...the Science of Health"

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## President's Message Harvest Time

In most farming areas of our country, this is the time to reap the fruits of one's labor from the soil.

It is a time of glory in the bounty that highlights the cycle and chain of life.

The farmer knows, of course, that there can be no harvest without first tilling the soil and sowing the seed.

We are all "farmers" of sorts.

In recent years, The American Natural Hygiene Society has cultivated new areas of influence and growth among consumers everywhere and in our own ranks in particular.

During the past six months alone, we planted such seeds of progress as a dynamic new image and an exciting and valuable official membership journal with a dramatic format under the apt title of *Health Science*.

More recently, we blueprinted a bold, but practical restructure of our Society clarifying the status of chapter affiliates and their relationship to our national organization.

These historic reformulations were officially established with the unanimous adoption of new bylaws at our ANHS thirtieth anniversary convention in July at State University College, Buffalo, New York.

We are reaping an early and bountiful harvest. In this brief period of reorganization, we have dramatically increased our national membership, a membership which was almost stagnated for a decade.

We have also established sound budgetary and administrative procedures that insure fiscal and legal stability and security.

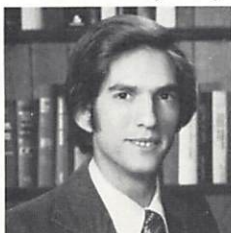
More ground will be cultivated as new ANHS chapters are formed and old chapters are reactivated.

More soil will be tilled and new seeds will be planted as *Health Science* and the publications of our Natural Hygiene Press reach thousands of new health seekers.

Thousands? There are *millions* who need us and we shall seek to reach them all.

For the members of The American Natural Hygiene Society, every season is suitable for tilling the soil and planting the seeds of knowledge, hope and an open door to optimum and enduring health.

And every day is harvest time.



Yours in truth and service,

MARK A. HUBERMAN,  
ANHS PRESIDENT



# Health Science

## Contents



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### WHAT IS NATURAL HYGIENE?

Hygiene is the science of health. *Natural Hygiene* is the system which helps people to live in harmony with the physiological needs of the human organism, thereby maximizing health. By supplying the body with the basic requirements of nature—natural vegetarian diet, unpolluted air, exercise, rest, sleep, mental and emotional poise, wholesome environment, and productive activity—health is assured, the natural immunity against illness is most fully manifested, and the self-healing powers resident within the body are given full reign.

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There is a saying, "hold your breath and you'll lose your life. Let go and you keep on living." It is quite correct. If you don't believe it, please hold your breath. The need for fresh air is imperative. There is another saying: breath is life and life is movement.

According to the physiologist Brubaker, if the oxygen in the air is reduced to four fifths of its normal proportions, or greatly increased above its normal proportions, human life becomes impossible.

What is the composition of air? The air which we breathe—and I'm talking of normal air, not New York or Los Angeles air—equals 20.96 percent oxygen, 79 percent nitrogen, .04 percent carbon dioxide and very minute quantities of a rare gas called argon. Now this is just the normal composition of air.

Tests of people like traffic wardens in cities show that their blood contains as much as 20 percent of carbon dioxide, whereas 33 percent is fatal. So you can see how near their occupation has brought them to fatality. As little as two parts of carbon dioxide in 10,000 parts of air can cause symptoms of headache and fatigue.

In New York alone, 10,000 deaths per year are attributable to air pollution—among both the young and the old.

Now, how do we pollute the air? We pollute it by cars, by planes, by industry, by fires, by smoking and so on. Also, when we destroy forests, we ruin the air. Many of us do not realize that by cutting down trees, though we make land for people to live, at the same time we deprive the earth of a great amount of oxygen. It is the plants which give out oxygen into the air.

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**"It is impossible to have the best of health, or even have good health, without making sure that we get fresh air every moment of every day."**

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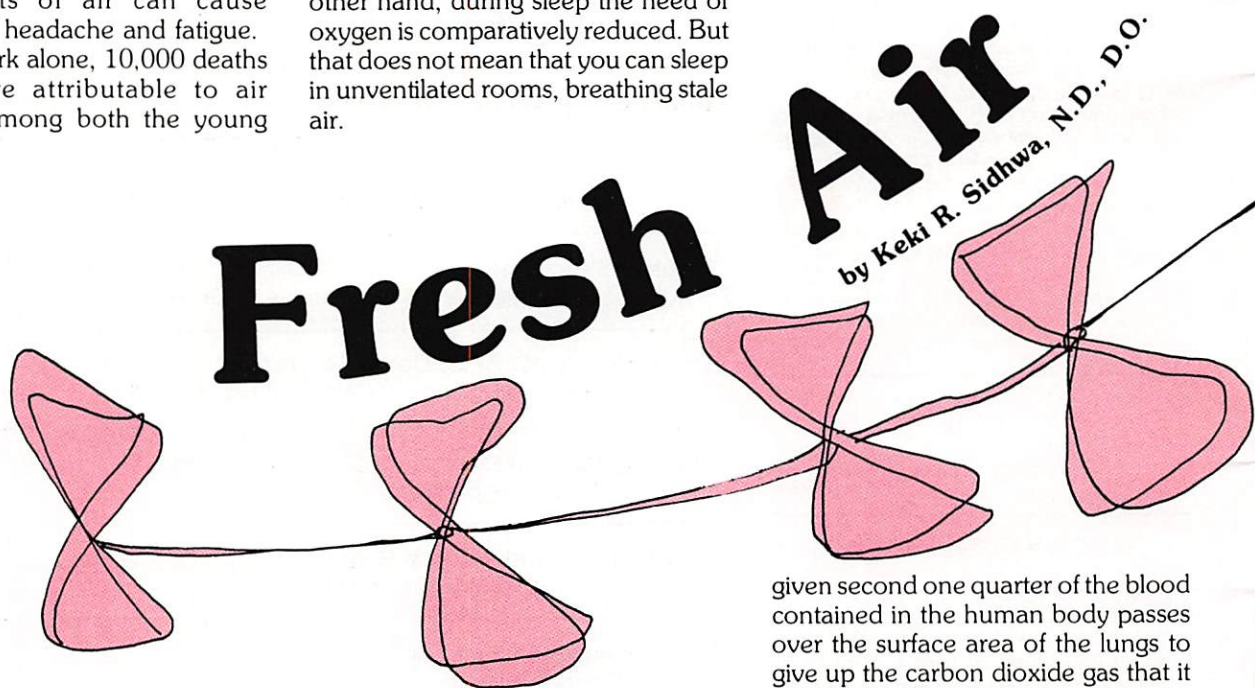
Now, why is air so very important? First of all, oxygen is necessary for the performance of all functions. It is essential to all changes in the tissues and all vital actions. For physical vigor and mental well-being we must have fresh air.

Free access to fresh air indoors and exercise out-of-doors helps us to secure the full amount of oxygen that we need. During activity we need more oxygen than during rest. On the other hand, during sleep the need of oxygen is comparatively reduced. But that does not mean that you can sleep in unventilated rooms, breathing stale air.

The third reason for the importance of air is to maintain and improve circulation. Respiratory movement constitutes an important factor in the life of our circulation. It is not sufficient to have just five minutes of deep breathing a day, in spite of what various other people say. Five minutes of deep breathing is not going to give you adequate oxygenation.

Now, let us see very briefly the structure of our body in relationship to the need for oxygen and air. As an example of how important oxygen is to the cell of the body, let us consider the transportation system set up to carry this element to our body cells. We will consider first of all the lungs. These organs have about 750 millions air sacs or cells through which the oxygen passes to get into the blood stream. If we could stretch these tiny air sacs from one pair of average lungs out on a plane surface, they would cover an area of 455 square feet. This is about one third the size of a big tennis court.

The average individual carries about six quarts of blood. At any



It has also been noticed that there is a decline in the growth rate, vital capacity and general health of children who are brought up in the city compared to the country. In America, the first breath of air for a child born in a city is loaded with lead and sulfur.

The second reason air is important is that it provides body heat. Increased temperature is essential to greater action of muscle fiber. Hence the wisdom of warming up before strenuous activities.

given second one quarter of the blood contained in the human body passes over the surface area of the lungs to give up the carbon dioxide gas that it is carrying. The blood then takes the oxygen from the air that we breathe for the return circuit back to the cells.

The cells that have the actual job of transporting this oxygen through the body are the red blood cells of which there are about 250 million for every



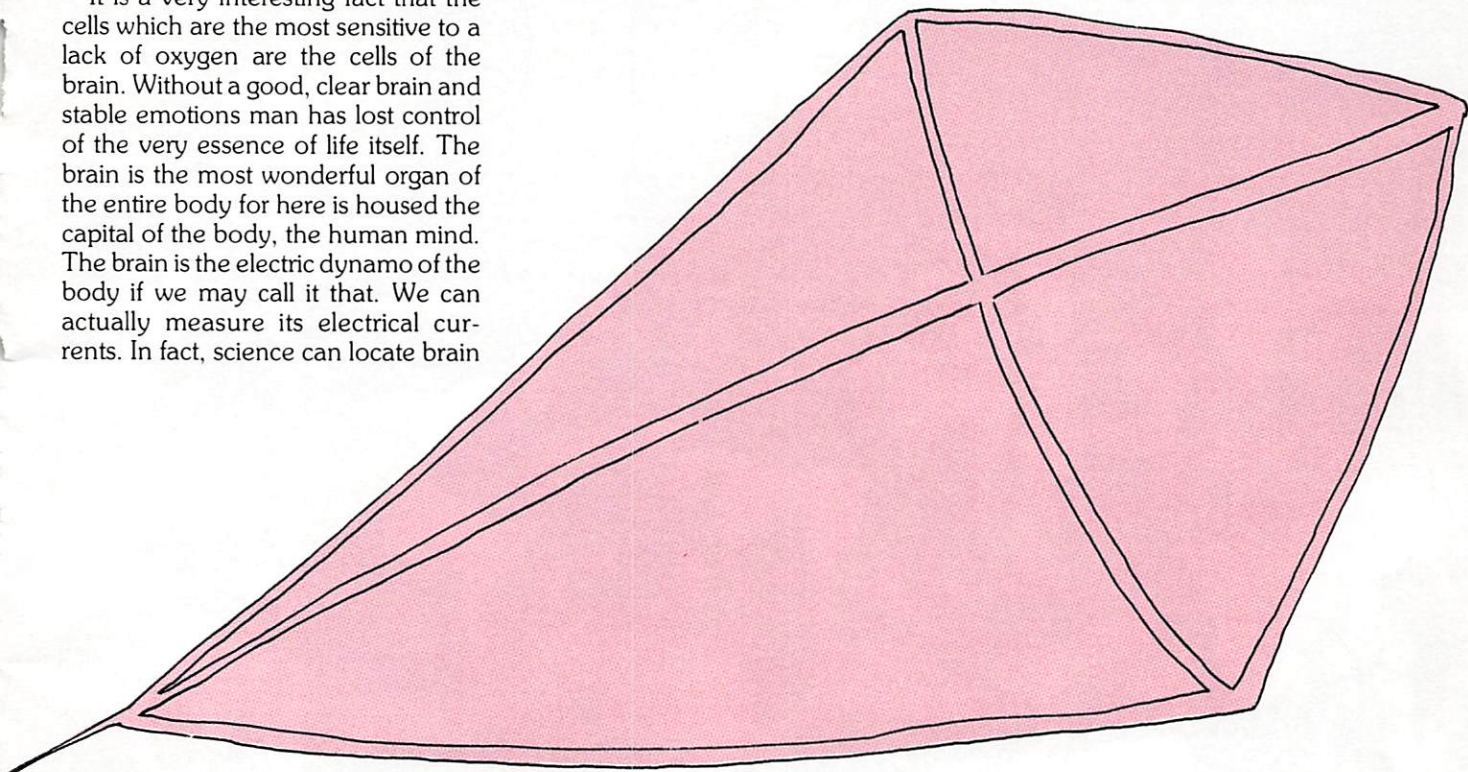
drop of blood. So strenuous is the work performed by these cells that each cell lives only about 120 days. This means that four million cells must be produced every second of every day just to provide oxygen to the millions upon millions of cells throughout the human body. Just imagine. There are 60 billion cells in the human body left.

It is a very interesting fact that the cells which are the most sensitive to a lack of oxygen are the cells of the brain. Without a good, clear brain and stable emotions man has lost control of the very essence of life itself. The brain is the most wonderful organ of the entire body for here is housed the capital of the body, the human mind. The brain is the electric dynamo of the body if we may call it that. We can actually measure its electrical currents. In fact, science can locate brain

and the senses become dulled without the person being subjectively aware of what has happened." He further states that the individual may be extremely quarrelsome. So now you know. When you feel quarrelsome what you want is a gulp of fresh air.

Dr. Joseph Bancroft of Cambridge University made similar observations.

You can literally get tipsy on the rich ozone-laden air from the sea. That's why people in olden days taken up on the top of mountains recovered much quicker than people who were down in the valley. A gentle breeze of fresh air can be soothing and relaxing as well as reviving and stimulating, depending upon the circumstances. Air playing over the sur-



tumors and scar tissue by detecting disturbances in the electrical flow of the brain. Where does this electricity come from? How does the brain keep up its supply? One source is from the air that we breathe. Pure oxygen breathed into our lungs and circulated into the blood stream electrifies the entire system.

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**"By cutting down trees . . . we deprive the earth of a great amount of oxygen."**

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Human experiments have shown what happens when the oxygen in the air we breathe is reduced. The higher centers of the brain are affected first. Reasoning, will power, judgement, all these are impaired when oxygen is lacking. Here is what Dr. Samson Wright has to say about what happens when the oxygen supply to the body is gradually reduced: "The intellect

He noticed a tendency to impatience and irritability when the amount of oxygen to the brain was insufficient.

Dr. John Halden of Oxford University discovered that judgement and memory were impaired when the oxygen fed to the brain was not sufficient. He found that even ordinary questions were answered very stupidly. Yet, the individual at that time was most confident that he was in full possession of all his faculties.

In other words, you cannot have a smooth-running nervous system—in fact you cannot have a good functioning brain—nor can you have a full control of your emotions, unless you maintain high electrical energy of the brain cells by getting plenty of fresh air. Let us remember, therefore, that it is impossible to have the best of health, or even have good health, without making sure that we get fresh air every moment of every day.

face of the body, when you have an air bath, may actually increase metabolism 50 percent in ten minutes, whereas it takes one year of thyroid extracts to have the same result. Isn't it more comfortable and less destructive to just rip off your shirt and sit in the fresh air than to take thyroid extracts?

Unfortunately, many of us do not know what really fresh air is.

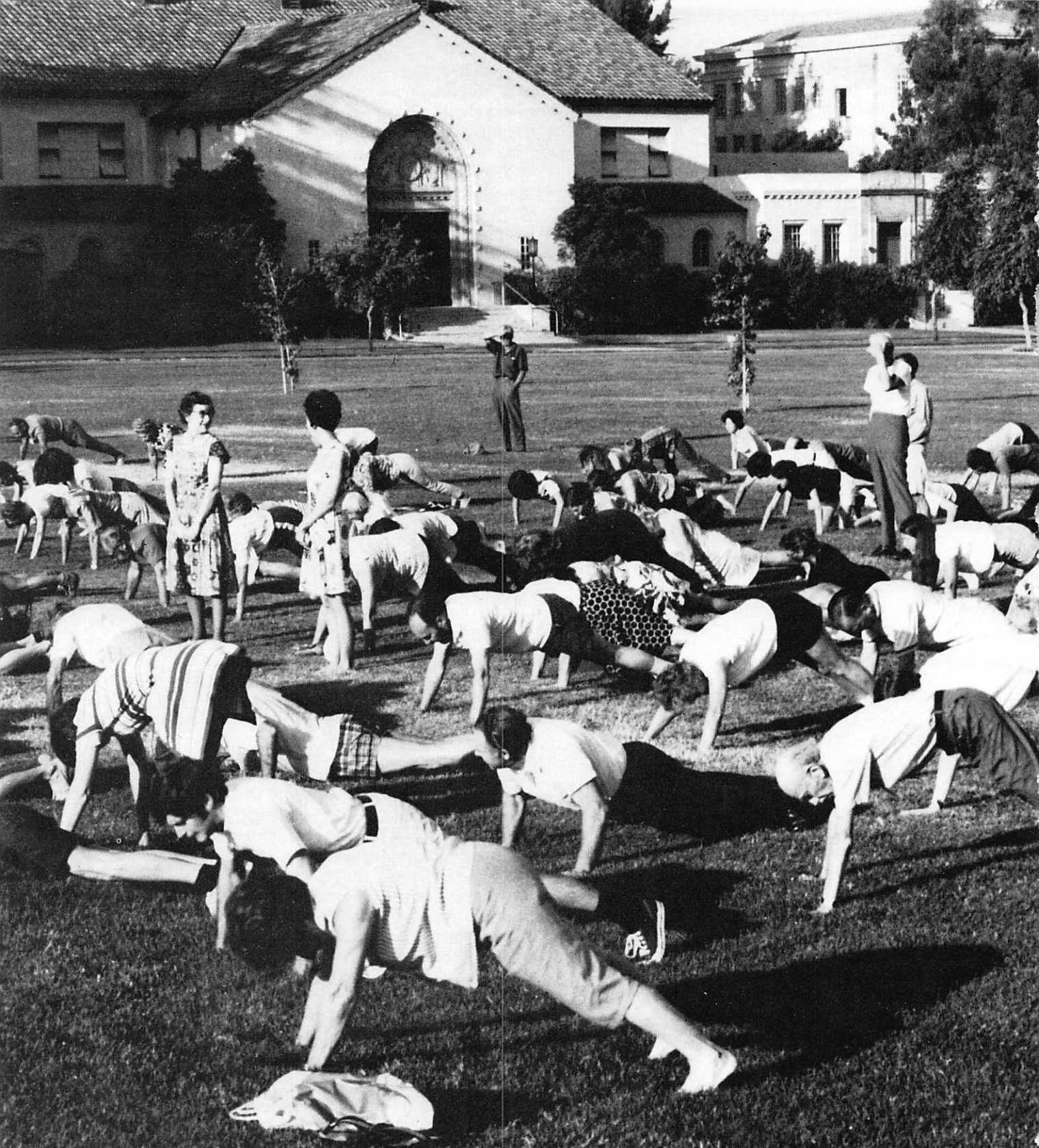
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**"A gentle breeze of fresh air can be soothing and relaxing."**

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Professor of Biological Science at Sidney University Burt Jellis said that by the year 2039 man will be contributing 220 metric tons to the particle pollution of the stratosphere annually. I hope he is wrong because breathing fresh air is an essential part of the hygienic way of life. ☀





A Positive Look at Aging



"How old are you?" is the wrong question. Chronology is truly not where it's at.

There are many ways of evaluating the length of time a person has lived. Subconsciously we know this and perhaps that is why we are filled with varying degrees of anxiety when we are asked this "innocent" question.

Would you stop the flow of a river at a given point in time and ask: "Hey, how old are you?" It really doesn't matter when you were born, but the anxiety the question evokes is real and often filled with terror. The age question and all its connotations has become a weapon of discrimination, social ostracism, economic discrimination, sexual disqualification and even oppression, particularly for a woman.

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### **"Chronology is truly not where it's at."**

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Human mortality has caused dread anxiety in all of us. The flow and movement of life has never been deeply understood in our culture. The veneration of youth in our society has deepened our anxiety and made everyone aware of the "numbers" game.

Youth is no longer an age. It has become a symbol of buying power. It is exploited for economics. Aging has become a social pathology. The aged are shunned, segregated, tucked away and forgotten.

We live in an imperfect society. It creates imperfect people. Natural Hygiene is fast becoming the science of living that can best meet the challenges of this society. Hopefully it will help people to mature rapidly so they can alter those areas of society to more closely meet the needs of all the people.

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### **"Maturity should be welcomed."**

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As we reach the mid years, there are a number of unpleasant physical and mental changes that take place. The very thought of these can drive us up a wall. This is one of the reasons for the anxiety we have as we face the advancing years. Instead of enjoying

these less stressful years, when the drive to accumulate material things abates and when the wisdom we have gained should be shared, all we think of is the horror of the diseases we face.

Some of these "diseases" are: obesity; flabby muscles; loss of balance, flexibility, agility and endurance; lack of respiratory reserves; high blood pressure; osteoporosis and a myriad of other "symptoms" all associated with "growing old." These symptoms are symptoms of a polluted, enervated body that has violated the laws of nature—a body that has created the conditions for these symptoms. But they are also "societal symptoms." People who accept these symptoms because they are "growing old" are willing to accept the societal stereotype of decrepit old age. The truth is that they have been eating junk food and probably have not exercised since they were in their teens.

*"Health and Long Life are usually blessings of the poor, not of the rich; and the fruits of temperance, rather than of luxury and excess. And, indeed, if a rich man does not, in many things, live like a poor, he will certainly be the worse for his riches: if he does not use exercise, which is but voluntary labor; if he does not restrain appetite by choice, as the other does by necessity; if he does not practice sometimes even abstinence and fasting, which is the last extreme of want and poverty. If his cares and his troubles increase with his riches, or his passions with his pleasures, he will certainly impair in health, whilst he improves his fortunes, and lose more than he gains by the bargain; since health is the best of all human possessions, and without which the rest are not relished or kindly enjoyed."*

Sir William Temple

The symptoms of aging are usually the result of disuse of the body—the sedentary life, eating junk food in front of the boob tube night after night, and so forth.

Exercise is one secret in reversing the societal symptoms of aging. Exercise revitalizes the body and builds endurance so you won't get tired. If we change our diet or change our pattern of eating so as to reduce weight, this is a very significant achievement, but it will not save us from the aging symptoms. With the understanding and practice of the other laws of nature, exercise will help to reverse all symptoms of disease.

Work is not exercise. We must be sure to make this distinction. Work is exhausting, not invigorating. When one works there is a loss of physical energy. To replace this energy, the best, fastest and safest way is to apply the laws of nature, all of them—natural food, vigorous exercise, sound, restful, energizing sleep, fresh air and the full spectrum of sunshine. There may be times when you must make a choice between rest and exercise. Listen to your inner intelligence and trust your body.

The three basic types of exercise are stretching, ventilating and resistance. When we fail to stretch, our long muscles are affected—arms and legs thicken and we lose agility, flexibility, fast reaction time, and balance. You see the so-called aging process taking place as those muscles contract. Aches and pains set in the joints and muscles. Toxins accumulate and inflammation starts. All this is preventable through exercise which gives the muscles the opportunity to stretch and flex, bringing blood to these areas.

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### **"Exercise is one secret in reversing the societal symptoms of aging."**

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Ventilating exercises, such as jogging, swimming, running, and walking, force the body to work overtime, filling the lungs with more than the "usual" amount of oxygen. Muscles fatigue more easily when the dead cells accumulate in the organs, when the arteries fill up with cholesterol and debris, and when the walls of the blood vessels thicken leaving a narrower passage for the blood flow. To continue circulation under these circumstances, the blood must push

*continued on next page*



with greater force and we have the consequent high blood pressure. Agility, flexibility and fast reaction time, all signs of a youthful body, are maintained with vigorous exercise.

Resistance exercise, pitting your body against immovable objects, forces blood into the bones. This is important in avoiding the dread osteoporosis or demineralization of the bones in the older people.



The case for walking is well known. It is one of the best tension relievers. It stimulates the endocrine system as well as the lymph system. One gains a vibrant sense of well being because it is an all inclusive exercise.

Shall we mourn for the passage of time, or celebrate a fulfilled, exalted and well lived life?

Maturity should be welcomed; it comes only with life's experiences. *Love yourself. You are beautiful!* ☀



# Making Exercise Fun

by Bruce Meservey

## Exercise for Fun and Fitness

### UNFIT AMERICA

In my last article I gave Dr. Thomas Cureton's very serious warning that our country today is critically unfit. "The average young man in this country," he said, "has a middle-aged body. He can't run the length of one city block, he can't swim a hundred yards, he can't climb one flight of stairs without getting out of breath . . . The average middle-aged man in this country is close to death. He is only one emotional shock or one sudden exertion away from a serious heart attack—this nation's leading cause of death" (p.21).

I agree. We have indeed become a nation of spectators and sitters. We sit commuting to and from our jobs, at our jobs, and at home. Sitting and watching others perform, and using laborsaving devices, has become a way of life.

**Slumped energy.** As I've said previously, due to all this inactivity, tests show that the blood circulation deep down in our tissues gradually drops over the years. And our energy drops with it. Tests show our energy is proportional to this tissue circulation. If we are typically inactive, by age 25 our energy has dropped 40 per cent; actually we are middle aged. At age 35 it is down to almost 60 per cent. At that age, and older, we have less than half of the energy we had in our youth. Those kids running around the playground have *twice* the energy (and tissue circulation) we have because they are still very *active*. Some day they'll start sitting at school desks all day, then at work desks, and on soft furniture at home. As they conform to society's sedentary habits, their energy will gradually drop.

**Physical problems.** With this energy slump, even if we are on the Natural Hygiene diet, physical problems can slowly emerge, sometimes serious. Nature requires adequate energy to do her work. Without this necessary energy our bodies can't function properly and we suffer for it. This slump comes on so gradually we don't realize it. We take our fatigue for granted. It's insidious. This is the tragedy today in our mechanized society. Fatigue is a way of life. People seek stimulating and harmful food, drink, pleasures, and drugs to counter it. And this, of course, causes more problems—more toxemia, more sickness.

**The solution.** We must turn ourselves all around. How do we do it? Regular and vigorous exercise will restore much of this energy—especially if we are on the Natural Hygiene diet. The two go nicely and naturally together. Just three hours of exercise—"going uphill"—can make the other 100 hours of the week—"downhill"—truly enjoyable. This is Nature's *super* bargain. Put together an exercise program now. Exercise can and should be fun.

### HOW TO ENJOY EXERCISING

There are many books on exercising. The ones I've read tell you many valuable things, but not how to enjoy yourself while exercising.

Many people do enjoy their exercising. This is very natural. Unless we have physical problems, our bodies desire, need and welcome physical activity to maintain good health.

Exercising should be enjoyable. But too many do it as an unpleasant chore with little or no enjoyment.



They often have to psyche themselves up for workouts. *The reason for this is attitude.*

Our unfit society downgrades most physical action, letting our many machines do it all for us. We have simply been brainwashed—mentally conditioned—to resist physical activity, keeping it to a minimum. This unnatural block to enjoying movement and action should be overcome, as any unnatural habit should be. However, our conscious mind resists it.

For millions of years our ancestors lived in a luxurious tropical environment that required little thinking or planning to exist. We were mainly simple, *feeling* persons. But about a half million years ago we gradually migrated from this paradise and had to develop tools and weapons to exist. A conscious mind gradually evolved to do all this thinking and planning, overlaying—inhibiting—our unthinking subconscious mind (our feelings). Today we probably have to think almost too much to guide us through our complex society. As a result we often fail to “smell the roses” as we pass through life. We mentalize too many things—including our view towards exercise.

The need for physical activity is as natural as the needs for sleeping and eating. But, as I've said, our mental conditioning prevents us doing it regularly and enjoying it. We can displace this pernicious attitude by the following routine.

### ENJOYABLE RHYTHMIC ACTIVITY

Man has always enjoyed activity that is accompanied by rhythm and music. Through the ages, primitive tribes have danced enthusiastically to rhythmic chanting. Folk dancing and square dancing have long been forms of pleasant group activity. Most everyone enjoys marching to parade music.

Now, musical exercising is emerging. Dr. Vetrano says, “Doing exercises to music is pleasurable. It is doubly pleasurable when a group of people get together to do calisthenics” (p. 147).<sup>\*</sup> Bonnie Pruden, director of her Physical Fitness Institute in Stockbridge, Massachusetts has her classes exercise to music. Many enjoy “disco” dancing today, in

(almost) true tribal fashion, an activity that seems to be as good a form of exercise as it is a social recreation.

We have a common need to express ourselves in rhythmic action. As a fringe benefit, we release our many tensions. Exercise is quite a package: enjoyable, healthful and tension-releasing.

### HOW TO CREATE YOUR OWN “MUSIC” AND ENJOYMENT

Activity to formal music is fine, but sometimes the music is not in time with your own rhythm. In addition, you can't take it outdoors or to the gym. But, there is a very natural way you can make your own “music,” anywhere. With this do-it-yourself method you can set your own musical pace and add enjoyment to your exercise, the best reward of all. I have done this countless times over the past year. It's natural, and it really works.

**The magic words.** With any exercise regardless of what it is, you simply say certain words in *time* to the movements. As you swim, jog, do calisthenics, etc. you say these words: “go-go-go” or “push-push-push” or “fast-fast-fast.” Use whichever words seem suitable to the exercise at that point. Add words of your own.

This seems sort of elementary. But there are good reasons for doing this, especially if you need a prod and more enthusiasm for the exercise. Many of us do. The reasons: 1) This simple self expression, I've found, prevents us from the usual mindwandering and worrying about other matters. It concentrates our attention fully on truly *feeling* the movement itself and enjoying its wonderful exhilaration and stimulation. This is important in anything—putting our *full* attention on what we do and enjoying it. If you mindwander in any activity you fail to enjoy it. The words *hold* and *reinforce* our attention, gradually increasing our enjoyment and building it to a peak. 2) The words add a certain necessary rhythm that is absent when we exercise in pondering, often morbid, silence.

This self expression is a very natural age-old law of activity. And it does work! You turn off the “duty-work” attitude towards exercising—the block that our compulsive mentalizing

sets up to reject exercise. This negative mental conditioning that we've been subjected to by society is truly unhealthy. In its place you turn on a healthy, good feeling for exercise using the simple words I've suggested as a prod and inspiration.

With this new pleasant feeling towards activity, you will instinctively exercise at your own best pace, rather than with excess strain; you will also want to exercise longer; and you'll be anxious to get back to it again. You will be in better tune with your inner age-old *feelings* that are so reliable, rather than with the more superficial, and often misguided, conscious mind. That's the way it should be.

**Summary.** As you exercise, just say these words: “go,” or “push,” or “fast”—whatever suits the movement at that point. This tunes in and turns on our wise inner feelings and turns off the compulsive, restrictive mind. Then you hold and reinforce this healthy feeling by continuing the expressions, building *more* enthusiasm, till you complete the movement. This is your verbal “music,” your rhythm. It will take time and *persistence* to accustom yourself to this routine—old mental habits will cling. But it's all worth it. As you use the routine regularly and slowly establish this more natural approach you'll find yourself enjoying exercise a lot more. It is rewarding! Start doing it. It really works!

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### RECOMMENDED READING

Cureton, Dr. Thomas K. *Physical Fitness and Dynamic Health*. New York City: Dial Press, 1965.

Shelton, Dr. Herbert M. *Exercise!* Chicago: Natural Hygiene Press, 1971.

Sidhwa, Dr. Keki R. *Fit for Anything*. Wellingborough, Northamptonshire: Thorsons, 1974.

\*Vetrano, V. V. Let's exercise for fun and health. *Dr. Shelton's Hygienic Review* (March) 1977, 38(7) 147-149; 160.

*Exercise!* (\$1.95) and *Fit for Anything* (\$1.75), both paperbacks, are available from Natural Hygiene Press, 1920 Irving Park Road, Chicago, Ill. 60613.

*Physical Fitness and Dynamic Health* (\$7.95), hardback, is available from Dial Press, Box 2000, Pinebrook, N.J. 07058.

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# What about Water?

by Max Huberman

Hygienists are aware that pure water is vital to the great chain of life.

We know that 65% of our total body weight is water. The human brain is 75% water. So are the muscles. The blood is 85% water and the water composition of the kidneys is 82%. The average person loses more than three quarts daily in perspiration, urination, defecation and respiration.

It should also be noted that water controls body temperature and aids proper nerve function. Water is essential to all cellular functions and plays a central role in assimilation of nutrients and elimination of toxins.

I should also point out that water is the largest component of most of the foods we eat. Fruits for example, generally consist of about 90% water.

There is no dispute that the purity of water is as fundamental to optimum health as is natural food, sunshine, exercise, rest and mental tranquility.

But how *pure* is water?

A major challenge for concerned citizens, especially members of ANHS, is the need to protect public waters from the perils of pollution.

Perils? Indeed yes. Chlorides, fluorides, industrial wastes, nuclear thermal pollutants, sewage seepage, pesticide residues, oil spills, etc., all make their insidious contributions to

our streams, lakes, reservoirs, rivers and waterways from the tiniest stream to the mightiest ocean.

Two summers ago my wife Ruth and I enjoyed a boat trip up the beautiful Canadian coast and Alaskan shoreline with brief inland visits to unspoiled cities and towns not yet engulfed by the alleged blessings of modern civilization.

It was a spellbinding experience. The majestic blue-white glaciers, the sparkling waters cascading down from icecapped hills, the crystal lakes and rivers teeming with salmon and other life, all brought us contrasting visions of the poisoned waters back home. We also wondered how long it would be before this unblemished environment would also be debased and despoiled in the name of "progress."

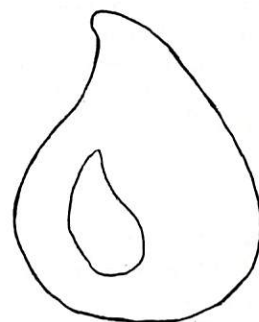
I recalled the recent campaign of the *National Wildlife Federation* to alert the public about the need to clean up the nation's waterways.

As our Society was planning its 30th Anniversary Convention, the Federation was marking its 40th Annual Observance of "National Wildlife Week" with the theme: "We All Need Clean Water," involving activities in all 50 states, Guam, Puerto Rico and the Virgin Islands. Observances were highlighted by circula-

tion of more than 700,000 posters depicting three Alaskan brown bears prospecting for salmon in a rushing stream, a scene reproduced on millions of stickers.

As I watched salmon lurching and leaping at many points during our Northern sojourn, I remembered those Wildlife posters and was also reminded that if those waters were not pure, the salmon could not survive. Salmon are not the only source of food for bears but if waters become poisonous for *salmon*, then the bears would also cease to exist and other wildlife would be devastated as well.

More vividly, I remembered the series of industrial assaults on America's waterways that was going on back home. For example, while coastal areas were trying to recover from oil spills from oceangoing tankers, newspaper headlines were shocking Americans with disclosures





about the hazards of *kepone*. It will be recalled that a Hopewell, Virginia company called Life Science Products was found to be making this pesticide, all of which was sold to Allied Chemical Corporation and which poisoned workers and polluted the James River. The plant was forced to close and Allied Chemical was fined \$13.2 million, mostly for the pollution. Over 70 persons were found to have suffered serious nerve damage from *kepone*.

Despite the lessons of this experience and similar debacles, there has been no significant abatement in the dumping of city sewage off the coast of New Jersey, Delaware and Maryland.

Also shocking was the 75 mile long oil spill involving tons of *carbon tetrachloride* discharged in West Virginia and which flowed down the Ohio River, contaminating water supplies as far south as Louisville, Kentucky. This poison, among other applications, is commonly used in dry cleaning and fire extinguishers. It causes cancer in laboratory animals and is so toxic that public officials in the polluted areas are urging people to boil all their drinking water.

But boiling water which has been contaminated by *carbon tetrachloride* could also be dangerous. In the course of my research I contacted the Biochemistry Department at Ohio State University. According to department chairman Dr. George Serif, it would be hazardous to even inhale the vapors emanating from the boiling water.

"The best thing probably would be to bring in an outside source of water," he declared.

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**"It is becoming increasingly difficult to find areas which insure a completely safe water supply."**

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It was not easy for me to dig out the truth despite my editorial position with trade and consumer publications and my journalist credentials. Area officials of the Environment Protection Agency at first refused to tell me who was responsible for the latest calamitous situation but did admit that *carbon tetrachloride* had been found

in three discharge pipes of the *FMC Corporation* chemical plant in South Charleston, West Virginia. I was also informed that the suspended company insisted its own officials "could not find evidence" linking it to the pollution.

The firm had initially refused to allow federal inspectors to make tests at the plant. However, after finally permitting EPA investigators to proceed, FMC did admit responsibility for what it described as "the unfortunate accidental spilling."

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**"Chlorine, universally used to remove alleged harmful bacteria from drinking water, can itself react with chemicals already in the water to produce suspected carcinogens."**

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It is becoming increasingly difficult to find areas which insure a completely safe water supply. For several years the residents of Boston's exclusive Beacon Hill section have been trying to reduce the excessive concentration of *lead* that their tap water picks up from the area's old plumbing.

In Duluth the drinking water has been found to contain asbestos fibers of a type known to contribute to at least four types of cancer if inhaled. The fibers find their way into Lake Superior, the source of Duluth's water, in tailings which had been dumped by the *Reserve Mining Company* iron ore plant in Silver Bay, Minnesota.

EPA officials in New Orleans disclosed that the city's drinking water contained traces of at least eight potentially carcinogenic compounds.

The *New York Times* recently reported that many of the New York area's rivers are seriously contaminated and concluded that the extent of the pollution is a distinct danger to civilization, "apparently far greater than had been thought." A two year study of the Hudson by environmental and consumer groups has determined that the river holds toxic and cancer causing chemicals which endanger 150,000 people upstate who drink the water. According to the *Times* investigators, the study also concluded that millions of dollars

spent to improve sewage treatment helped little because the programs "largely ignored the pollution caused by the discharge of chemical wastes by industry."

In New Jersey, the state's Department of Environmental Protection is reported to have tied the state's ultra-high cancer rate to chemical wastes.

Connecticut is also trying to eliminate the pollution of its rivers. The problem is so serious that it takes virtually no drinking water from its own rivers.

These are not "scare reports" by any means. In fact, the examples I have cited are just the tip of the iceberg. In recent years, federal inspectors have identified more than 160 toxic compounds in city water systems around the nation. The chemicals come mainly from petrochemical plants, other heavy industries and agricultural pesticide runoffs. Furthermore, reliable tests have shown that the *chlorine* universally used to remove alleged harmful bacteria from drinking water can itself react with chemicals already in the water to produce suspected carcinogens.

Cancer? Undoubtedly. Multiply the examples of the horrors I have cited by the thousands of companies daily spewing poisons into the environment and we begin to grasp the enormity of the perils facing our shrinking and polluted planet.

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**"Water is essential to all cellular functions and plays a central role in assimilation of nutrients and elimination of toxins."**

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What can we do about it? As Hygienists we must take the lead in demanding that EPA and other regulatory agencies enforce the laws against water pollution and strengthen existing statutes to protect our soils, fish, animal and bird life. An example of what can be accomplished by organized consumer action is the recent agreement between the U.S. and Canada on steps to eliminate toxic discharges into the Great Lakes.

*continued on next page*



## What About Water cont.

For the first time the two nations will seek to measure and set limits on radioactive water pollution from nuclear plants and to lower phosphate levels in the Great Lakes. The program is called the Great Lakes Water Quality Agreement of 1978, updating a weaker pack enacted in 1972. It is understood that this policy will also stiffen U.S. standards for permissible levels of pesticide pollutants.

The Carter administration assures us that most of the major industrial discharges will meet anti-pollution standards by 1979 but the EPA concedes that a "significant number" of U.S. municipalities will not meet the standards.

As indicated, industrial pollution is only part of the problem. Compulsory fluoridation threatens more communities. It violates basic rights. The surface runoffs of many chemicals from farms continue to create residues of "legal" pesticides in waters, residues that take as much as 200 years to dissipate.

How can we measure the importance of all this? Well, the EPA informs me that in 1977 alone, water pollution cost the nation more than \$11 billion in damages to wildlife, property and human health. Health of course can never be measured in dollars.

How can we best avoid the pitfalls of polluted and chemicalized water?

For reasons clear to Hygienists, fluoridated water should not be consumed.

If you utilize a "water softener" do not use the water for drinking or food preparation. Water softeners do not eliminate inorganic minerals but merely hold them in suspension in an ionized state. This is OK for making more soapsuds but hazardous to the intestinal tract.

If you have access to a well or running stream, your area Board of Health or county water commissioner will expedite a test on the safety and quality of the water. Do not rely just on your own taste. Ask for a report on the last test made on your tap water. You'll get it.

Bottled water may be purchased commercially but the FDA has set no limit on pesticides in the water, a

dangerous "oversight." Also, one can never be certain if a bottler is employing the most sanitary procedures.

Water filters may have some value in removing undesirable particles and turbidity from drinking water but Consumers Union refuses to recommend any of them as totally reliable.

Rain water is pure, naturally distilled water but becomes contaminated due to environmental conditions.

If you cannot easily obtain pure water, a wise investment would be your own private water distiller in your home. Check your local telephone directory and the Better Business Bureau or contact your area health food stores regarding various models.

Meanwhile, as informed and aroused citizens and consumers we need no dry statistics to remind us of our responsibilities.

As ANHS members and dedicated proponents of the health science known as Natural Hygiene, we shall continue to crusade for pure water and an unpolluted environment.

We are motivated not for our benefit alone but for our neighbors, for the entire human family and for generations yet unborn.

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## RECOMMENDED READINGS

"The Water You Drink:  
How Safe Is It?" \$.25

"Safe Drinking Water for All:  
What You Can Do" \$.25

Both published by the League of  
Women Voters' Education Fund, 1730  
M Street, N.W., Washington D.C.  
20036

"Manual for Evaluating Public Drinking  
Water Supplies" Available free from  
Water Supply Division, Environmental  
Protection Agency, Washington D.C.  
20460

## HOW YOU MIGHT BE A HEALTH PHILANTHROPIST

Who are the people who make large bequests to the American Natural Hygiene Society, Inc.? Not necessarily the kind of folks you would think.

The most recent bequest on June 26 for \$10,000 came from California member James Dobreff, a gardener. His only communications with us since becoming a member in 1960 were the payment of the basic membership dues and small contributions when appeals were made. After his death we learned he had made a will in 1964, which stated in part: "I am a hygienist by conviction. Therefore, I declare that I bequeath fifty per cent of my assets in the form of real estate property and savings to the American Natural Hygiene Society. My desire is the money to be used for the advancement of Natural Hygiene principles."

In April we were notified of a bequest to us for \$1,000 from Indiana member George Hoyer, a factory worker before his retirement. He had been a Regular Member since 1962.

A few years ago A. M. Andrews of Oregon, also a rather anonymous member, bequeathed to us over a quarter of a million dollars in holdings. Beside the patent to a lawn sprinkler which he invented, he left property, stocks, bonds, cash, and personal goods including a valuable watch and coin collection. He had been a member for only four years. His gift was in large part responsible for making *Health Science* possible.

These people were modest beings, strongly believing in humanitarian causes who by their benevolence have gone far toward ensuring that their goals will be perpetuated.

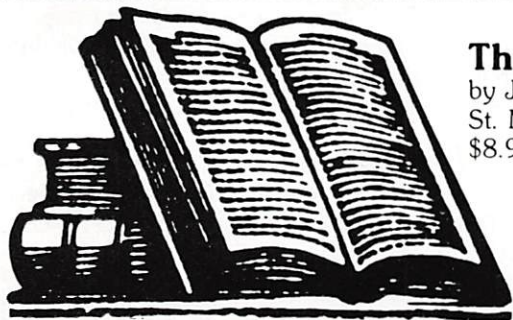
Even if you are not in a position to contribute as much as you would like during your lifetime, your estate may be larger than you might imagine. Your health commitment can endure beyond your own life through a sentence like this in your will:

*I give, devise and bequeath to the American Natural Hygiene Society, Inc., a non-profit corporation, incorporated under the laws of the State of Illinois the sum of \_\_\_\_\_ (\$\_\_\_\_) and/or property herein described for its discretionary use in carrying out its general aims and purposes.*

For more information about deferred giving, ask (without obligation) for our folder "The Benefits of Deferred Giving." Write The American Natural Hygiene Society, Inc., 1920 Irving Park Road, Chicago, Illinois 60613.



# BOOK REVIEW



## The People's Pharmacy

by Joe Graedon  
St. Martin's Press, New York, NY  
\$8.95

## Medical Drugs on Trial? Verdict "Guilty!"

by Keki R. Sidhwa, N.D., D.O.  
Natural Hygiene Press, Chicago, IL  
\$2.25

Reviewed by Jack Dunn Trop

Let's talk about Joe Graedon's book first. Graedon holds an advanced degree in pharmacology which according to the Funk and Wagnalls Dictionary is "the science of the actions of medicines, their nature, preparation, administration, and effects." His book should be read by all

**"Though a drug may appear to be perfectly safe, it is impossible to predict with any kind of assurance what the long-range effects may be."**

who want to really know what basic medical treatment is all about. It is a significant contribution to the literature. But, it is also frustrating, irritating, almost incomprehensible, and—at the same time—very valuable.

Let's take these designations one at a time.

### **"Frustrating and irritating?"**

Yes. The author's index lists about a thousand drugs, and he says distinctly, and scientifically, that many of

them are terribly dangerous. He names the most popular over the counter heavily advertised products and pulls no punches about the damage that they will cause *but he still advocates their use.*

**"Incomprehensible?"** Yes. It boggles the mind to read the four hundred and one pages of this well researched work, and to find it loaded with unimpeachable testimony that drugs can be the cause of frightful illness and death, and yet, what Graedon is mostly concerned with is how you can find drugs and combinations of chemicals which will be the least threatening to your well being. How is it conceivable that a highly educated individual can know all about these enemies to life and still recommend them?

**"Valuable?"** Yes, extremely, because here we have someone from the "establishment" side verifying what we in the Hygienic field have been saying for about one hundred seventy years.

Listen to what he has to say about the interaction between several anticoagulants (blood-thinning drugs), "Coumadin, Dicumarol, Miradon, Panwarfin, Sintrom" and "analgesic pain-relievers, including many arthritis preparations," such as, "Ascriptin, Aspirin, Aspirin products,

Bufferin, Butazolidin, Empirin Compound, Indocin, Phenaphen, Ponstel, Tandearil, Vanquish, etcetera."

*This is a good way to die unexpectedly. For starters, many arthritis medications enhance the blood thinning response of anticoagulants. Secondly, antiarthritics tend to irritate the stomach and may lead the way to an ulcer. Put these two effects together, and your chances of a fatal hemorrhage have increased substantially (p. 127).*

Please note that Graedon names famous drugs on which untold millions are spent in advertising to tell you how marvelous they are. He says unequivocally that they can kill you.

**"There is no such thing as a safe drug."**

He has this to say: "Watch out! Dilantin can soup up the horsepower of your anticoagulant. You might start to bleed internally." We Hygienists have pointed out that drugs don't act; it is the body which acts on the drug. We have also warned about the fearful consequences of specific drugs. But Graedon is on the other side of the fence. He is a friend of drugs, an unquestioned authority in this area. He

*continued on next page*



### Book Review Cont.

is a member of the inner sanctum of the worshipers of drugs, yet he can and does say, "If your doctor is foolish enough to prescribe these diabetic medicines (Diabinese, Dymelor, Orinase, Tolinase) in the first place, do not make matters worse by taking aspirin too. This interaction could lead to too drastic a decrease in blood sugar (hypoglycemia)."

The temptation to list the hundreds of indictments of drugs which Graedon documents is powerful, but I believe I have almost made my point. It is that while he shows how drugs cause serious disease and even death, nowhere in his book did I find the word "iatrogenic." Readers should know that this means diseases caused by "treatment." The book fairly screams that when you are in the presence of drugs and have been tempted, urged, or induced to take them, you may be in great danger.

However, one chapter he entitles, "What Your Doctor Does Not Know or Will Not Tell You" and in his chapter "Drug Safety" he does refer to drugs as a "Double Edged Sword." He also discusses "drug induced illness," "side effects and adverse reactions," and "what you should know about the dangers of common drugs." Then he goes on to condemn many drugs the names of which are practically household words. His answer to

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**"What distinguishes our modern-day practitioners from their medical ancestors is not so much the great quantity of new agents at their disposal, but rather their almost total reliance upon this form of treatment."**

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his own question "Are they worth the risk?" is "there is evidence that under certain circumstances the benefits of (certain) drugs might not be worth the risks." This is the classic mumbo jumbo answer of all those who do not accept that there is an alternative to taking poisons.

Let me conclude with this final quotation which indicates how hopeless is the maze in which the drug

advocates and the drug users find themselves,

*The potential risk of any given drug must be weighed against its benefits, and your physician must allow you to make that decision.*

I rest my case. The alternative to using drugs is to turn to Natural Hygiene.



What a relief it is to open to such a straightforward unconfused book as Dr. Sidhwa's *Medical Drugs on Trial? Verdict "Guilty!"* It is the antithesis of Graedon's double talking. It has the answers that we are looking for. It is the simple Natural Hygienic response, namely, that there is another way, the natural way, which recognizes that it is the doctor's province to *care* and not to cure, and by so doing to give the body a chance to heal itself and to maintain its integrity.

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**"The energy of the patient should be used in getting well and should not be wasted in fighting drugs."**

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Integrity is the key word. There is no quibbling or shilly shallying here. Dr. Sidhwa states and proves over and over again that there is not a single drug that does not have side effects. It is merely a matter of degree; some drugs cause minor irritations and "diseases," and numerous others are deadly.

This book may be opened at random to any page, and it will be found to contain valuable, indeed, life saving information. As the introduction promises, the sources of "proof" are mostly from doctors of medicine. In other words, drugs are "hoist by their own petard." Representatives of the profession which prescribes them, condemn them.

In the very first chapter, "The Hue And Cry About The Pill," Dr. Sidhwa cites the words and statements of scores of M.D.'s, who inveigh against the dangers of "the Pill." It is interesting to note that the original research experiments, which resulted in the

sensational news that a contraceptive pill was now a reality, had been conducted in Australia; and some of the most incisive and most devastating criticism of its use also come from the land down under.

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**"No amount of testing drugs on animals can make them safe for humans."**

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And what are some of these dangerous possibilities of using the Pill? Here is a partial list: nausea, irritability, cramps, weariness, vaginal discharge, and enlargement of the breasts. Heart disease and cancer are two of the major end results. Also, the Pill may aggravate such ailments as asthma, eczema, vasomotor rhinitis, migraine, varicose veins, liver disease, thrombo-embolism of the lung, diseases of the pituitary gland, diabetes, epilepsy, cancer of the breast and uterus . . . There is more, much more.

Bear in mind that these "side effects" are only from the first chapter. In other hard hitting chapters, such as, "The Effects of Drug Taking," "Some Drug Induced Diseases," and other sections which deal specifically with the nervous system, the circulatory system, the liver and alimentary canal, the proof, warnings, and certified statements of the dangers are even more devastating.

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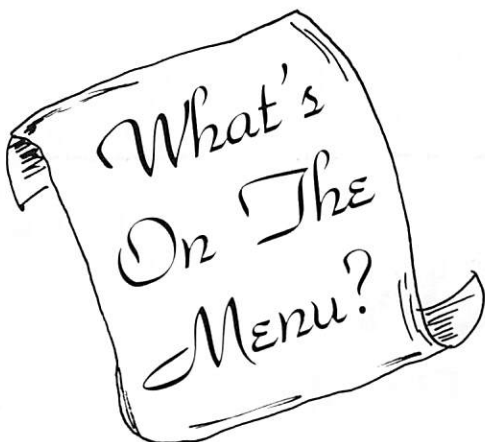
**"A poison is a poison qualitatively and not quantitatively."**

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I would be remiss in my duties as a reviewer if I did not close with some quote from this excellent book. Dr. Sidhwa writes: "It is indeed no small task to undertake to eradicate from the human mind the accumulated fallacies of 3000 years, to convince people, the brain-washed public, of the fallacy of the popular idea of taking drugs for their ills, and build up a new, a different, a truer way of caring for the sick."







## Creative Ideas From Readers

This month's recipes were contributed by Frances Cheatham, Managing Director of the Shangri-la Natural Hygiene Institute in Bonita Springs, Florida. Explaining Shangri-La's dietary policy, Mrs. Cheatham says,

*The selection and preparation of our foods is based upon the conclusion that Mother Nature has provided us with the very best foods for our nutrition, and that these foods should be used just as she provides them. The more these natural foods are processed and denatured, the less valuable they are for nutrition. For these reasons we try to keep our food program as simple as possible. Once in a while, we must compromise to please our guests and hence the attached recipes.*

Health Science invites readers to share their favorite recipes with other members. Of course, all ingredients and combinations should be in basic accordance with sound Hygienic science and practice. We recognize, however, that those who become vegetarians before fully accepting a complete Hygienic program are in a "transitional," stage and do not always immediately dispense with cooked foods. We, therefore, accept some recipes that involve a minimum of cooking, but, reiterate that raw foods in their natural state are the Hygienic ideal.

Send your recipes to:

What's on the Menu?  
c/o Health Science  
1920 Irving Park Road  
Chicago, IL 60613

### AVOCADO DRESSING\*

- ½ medium avocado
- 1 medium tomato
- 1 teaspoon Safflower Oil
- 2 teaspoons of your favorite dried vegetable seasoning (without salt)

Peel tomato, place in blender, add oil, seasoning and blend well. Then add avocado. This should be about the same consistency as mayonnaise or whip cream. Pour over chopped salad and toss. Note: Substitute cucumber for the tomato if starches are being served at the same meal.

### CUCUMBER CASHEW DRESSING\*

- 6 oz. Cashews
- 1 medium cucumber
- 1 teaspoon Safflower Oil
- 2 teaspoons of your favorite dried vegetable seasoning (without salt)

Peel cucumber, place in blender, add oil, seasoning and blend well. Then add cashews and blend to about the same consistency as mayonnaise or whip cream. Pour over chopped salad and toss. Note: This dressing should not be served with a starch meal.

\*In Natural Hygiene, we do not approve of salad dressing. We feel that the natural flavor of the food is adequate and cannot be improved upon. At the same time, we recognize that some people are "addicted" to stimulating foods and will insist on some type of dressing at least during the transition period. For this reason, we offer the above dressings, which while they are not recommended, they are acceptable during the transition period.

### STUFFED PEPPERS SHANGRI-LA

(Serves three persons)

- 1 Cup long grain brown rice
- ½ Cup bell pepper, chopped fine, ¼ inch
- ½ Cup plus 6 tablespoons carrots, ground fine in Saladmaster or similar grinder
- ½ Cup celery, chopped fine, ¼ inch
- 2 Cups distilled water
- 3 Large bell peppers (whole, with stem, center, and seeds removed)
- 2 Tablespoons dried vegetable seasoning, if desired
- 3 Tablespoons cold pressed safflower oil

Steam whole peppers for 5 minutes. Place all other ingredients, except oil, in stainless steel or similar pan and bring to boil. Simmer for 10 minutes. Stuff peppers with mixture; cover with 2 tablespoons carrots each. Put in covered baking dish and cook for one hour. Spoon one tablespoon of oil over each pepper after removing from oven.

Serve after large salad course with steamed, non-starchy green vegetable.

### CARROTS & CELERY SHANGRI-LA

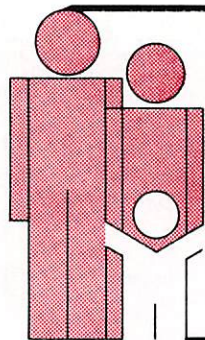
(Serves three persons)

- 2 Cups carrots, sliced ⅛" to ¼"
- 2 Cups celery, sliced diagonally, ⅛" to ¼"
- 1 Level tablespoon dried vegetable seasoning, if desired
- ¼ Cup cold pressed safflower seed oil

Combine all ingredients, except oil, and place in large bowl. Place on Shangri-La Steaming Trivet in pan which has a tight-fitting lid, with enough water so that the surface of the Trivet is above water. Bring water to boil, then reduce heat to point low enough to keep steaming until tender but not mushy, about one hour, depending upon your taste and preference. Add oil just before serving.

Serve after large finger salad. It may be served with one of the starch casserole dishes, such as potato. If another vegetable is served, it should be one of the steamed greens, such as broccoli or turnip greens. This is a mildly starchy dish, so proteins or tomatoes should not be served at the same meal.





# FAMILY EDUCATION

## SUCCESSFUL INFANT FEEDING

by Marsha & Dennis Bressack

I consider that I have been very fortunate to have been able to breastfeed both of my children. Nursing has been a very pleasurable and fulfilling experience for me and my family.

**"Breastmilk is the easiest substance for the infant to digest and is the most nutritional food a child can receive."**

With our first child, Blue, it was necessary for me to overcome many obstacles due to our lack of experience and the wealth of misinformation I received on the subject. With the knowledge that I have since accumulated, I have been able to breastfeed my second child, Dovee, with absolutely no problems. I want to share both of these experiences with you in the hopes that other families will also be able to secure the bonding and other benefits of the nursing experience.

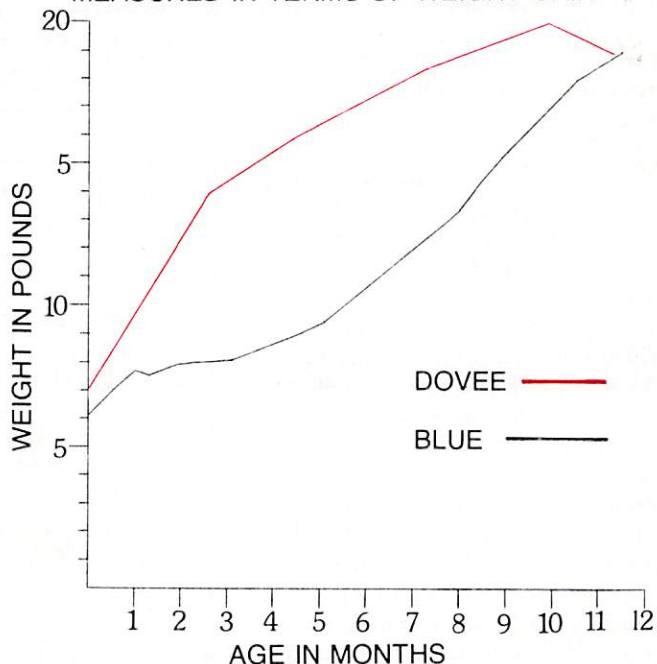
Before Blue was born, as Natural Hygienists, we had strong convictions as to how our children would be brought into the world and raised. We hoped to have a healthy baby, at home, to breastfeed for at least two years, and to raise him "Hygienically" on a vegetarian diet. We planned to breastfeed 3 or 4 times per day and to avoid night feedings. We did not want to raise an "overweight," "gluttonous" or "sickly" child.

**"Nursing has been a very pleasurable and fulfilling experience for me and my family."**

Blue was born September 13, 1973 in a hospital after 39 hours of labor at home. During the first couple of days, he was frequently crying and fussing. At first, we assumed this was common. Sometimes we walked him, or we held him, or we let him cry. We did not rock him because we had read that rocking is pernicious. We were afraid to overindulge our child and did not hold him as much as our instincts told us we should. I would not breastfeed him more than 3 to 4 times per day.

Within the first four days, my breasts became extremely engorged (swollen with milk). They were twice their nor-

GROWTH RECORD OF OUR TWO CHILDREN  
MEASURED IN TERMS OF WEIGHT GAIN



mal size and hard as a rock. Fever and severe pain accompanied this condition. Fortunately, I was encouraged to continue breastfeeding my baby in order to empty the breasts and relieve the engorgement. In the following two months, my milk supply greatly diminished. Blue was gaining weight very slowly and was very thin. However, I still continued to nurse three to four times per day.

**"Breastfeeding is a simple supply and demand system."**

We contacted several practitioners regarding our situation. Their suggestions were to try to continue to nurse and supplement with raw goat's or cow's milk or fruit and



vegetable juices or nutmilk. We began to follow this advice. In addition to nursing 3 to 4 times per day, when he was three months old we started supplementing with raw cow's milk. This did not agree with him and within a week we terminated the diet.

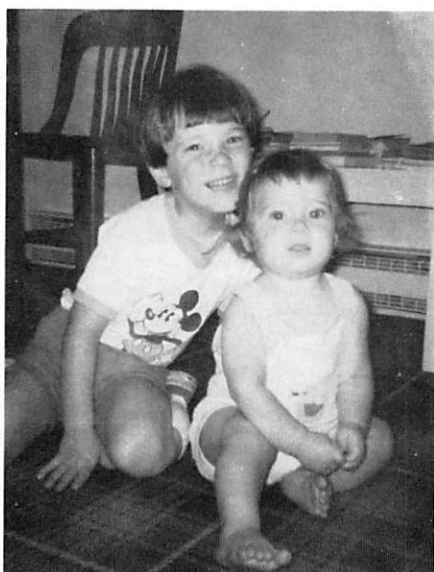
At 4 months old, we started squeezing and straining fresh orange, apple and celery juice and preparing nutmilk. At 5 months old, we began to supplement with raw goat's milk which appeared to agree with him better than the cow's milk. However, my milk supply continued to diminish and Blue continued his slow weight gain. In 5 months, he gained 3 lbs.

At this time, I contacted a "Hygienic" mother who referred me to the La Leche League, an organization of breastfeeding mothers. At their suggestion, I began night feedings and nursed more frequently but still had to sup-

I nursed the baby first and then attached the Lact-Aid. This allowed the breasts to be emptied, and yet the baby would still continue to suck and stimulate the breast because he was receiving the supplement. The Lact-Aid lets just the right trickle of supplemental milk come through the tube to keep the infant nursing—unlike the heavy flow of liquid they receive through a rubber nipple which makes babies lazy and disinterested in the breast.

After a month of using the Lact-Aid, I regained my milk supply and I have been continuously lactating for the past 5 years. I also gained confidence in my ability to nourish and care for my baby. At 7 months old, Blue was nursing unsupplemented and on demand. When he was 11 months old, we began to introduce other foods.

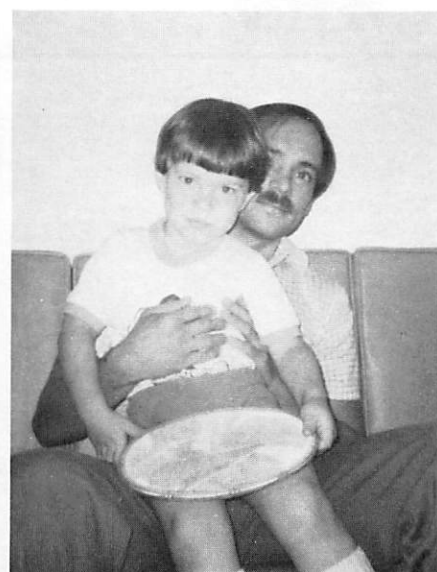
Our second child, Dovee, was born on August 7, 1977. She has received all of the benefits of what our experience



"Blue was born in a hospital. Dovee was born at home. She has received all the benefits our experience with Blue taught us."



"Dovee has been nursing on demand her whole life."



"With our first child, Blue, it was necessary for me to overcome many obstacles."

plement with raw goat's milk from a bottle. They explained that breastfeeding is a simple supply and demand system. The more the baby nurses, the more milk is produced. When the baby is allowed to nurse freely on demand, the milk supply will regulate to meet his growth needs.

However, it is not easy to get a baby to nurse on an empty breast. It is hard work to draw milk through the human nipple. If there is no milk, the baby will usually not suck. In order to build up my milk supply, it was necessary to increase the stimulation to the breasts by increased suckling.

When Blue was six months old, I began using a Lact-Aid which is a device that allows you to stimulate the milk supply and feed the baby a supplement without using a bottle. It is a sterile plastic bag which can hold 4 ounces of supplemental milk and is placed in the cleavage. A small flexible tube from the bag is taped to the breast near the nipple. The Lact-Aid has enabled women who have never had a pregnancy to breastfeed adopted babies.

with Blue taught us. Dovee was born at home and was put to the breast *immediately*. She has been nursing on demand for her whole life, and unsupplemented for the first nine and a half months when other foods were introduced very gradually. I have not had any difficulty whatsoever, and Dovee has gained weight steadily and grown beautifully. She has never had digestive difficulties of any kind. She has been held, rocked, and nursed and is an extremely happy, healthy and contented baby.

Because we believe that breastmilk is the most important food, she is nursed before we offer her anything else. Breastmilk is the easiest substance for the infant to digest and is the most nutritious food a child can receive. Breastfeeding your baby is in total harmony with the laws of nature and the tenets of Natural Hygiene.

Our experience and the experiences of many other mothers, including Natural Hygienists have indicated that successful unsupplemented breastfeeding of infants depends upon frequent stimulation of the breasts. ☀



Helen Barnard Densmore, the daughter of a physician in Adrian, Michigan, was born about 1833. Though educated in medical school, both she and her husband, Emmet Densmore, M.D., worked together promulgating and practicing Hygiene. A tireless reformer whose—in the words of her husband—"enthusiastic interest in all movements looking to the betterment of our race is unsurpassed," she was also the mother of two sons and one daughter. She died on November 26, 1904.



# TIMELESS TEACHINGS

**Some Mistakes of Vegetarians** by Dr. Helen Densmore

*Health is man's birthright. It is as natural to be well as to be born. All pathological conditions, all diseases and all tendencies to disease, are the result of the transgression of hygienic and physiologic law. This is the science of health in a nut-shell.*

But man has traveled far from his first estate. Through the devious ways of civilization he has forgotten, if he ever knew, the higher law of physical life, and has become effete, diseased, and prematurely decrepit. It is also true that he is not at all aware that his physical troubles all come from such disobedience; does not know that he has a right to health, that he need no more be ill when he understands this, than to get drunk or to steal. And this is the gospel that the food reform propaganda is destined to give to the world.

But in reading the literature, and listening to the speeches at vegetarian meetings, I often regret the roseate picture that is painted by its enthusiastic agitators of the benefits which they say are sure to come easily and quickly with the change from the present diet of civilization to a plain, non-flesh diet, advocated by this new dispensation. No warnings are sounded that there may be quicksands ahead; no danger signals are given that there may be troubled waters before reaching port in safety, and no lights to show the way safely out of the shoals.

There is ignorance on all sides regarding the curative action that is

likely to be set up in the system when this change is first made, and this accounts for so many well-intentioned experimenters trying it for a time and deciding against it after trial, because it did not seem to agree with them.

When a man who has been addicted to the use of stimulating drinks desires to reform, and stops the use of such drinks, taking water instead, he is quite apt to feel ill at first. He often loses his appetite, grows thin, and finds himself in a less vigorous state physically; but he knows well enough that, if he resumes his accustomed

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**"The results of injurious diet is cumulative, and has its effect in ten, twenty, forty or more years."**

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drams, he will soon brace up, and for the time feel better. Similar experience is likely to follow the breaking off of any poison habit. Indeed, it is the opinion of eminent medical authorities that, after the habit of arsenic eating has been followed for many years, it is impossible to wholly discontinue it without fatal results. This condition is well understood in regard to leaving off tobacco, morphine, chloral, etc., and when lassitude, and loss of strength follow, no apprehension is felt.

The truth is, that errors in diet become a fixed habit to which the system will cling, notwithstanding injurious results; tea and coffee are un-



natural stimulants, and when one has used them for thirty, forty or fifty years, the habit is fixed, and nature, true to her purpose of preserving life at all hazards, proceeds to adjust the system to the intruder in the most favourable manner. Physiologists explain that a dose of poison strong enough to kill instantly may be divided into small doses, and taken at intervals, and the effect not be noticeable at the time, but that it becomes cumulative in effect; and though it takes much longer, it does its full work in time. So the results of injurious diet is cumulative, and has its effect in ten, twenty, forty or more years, in rheumatism, gout, kidney affections, cancer, pulmonary consumption, and so on to the end of the chapter; and when the system is released from this cause of trouble, when the habit is changed from the diet of civilization to a more natural one, relieved of the necessity of standing guard at the digestive tube to dispose of the poisonous elements daily taken into the stomach to the best possible advantage, nature at once proceeds to set up a curative action—the elimination of accumulated disease germs; and this action is quite likely to create some of the same symptoms seen in the case of the reformed drunkard, viz., lassitude, loss of appetite, dyspeptic symptoms, etc. If, at this juncture, a wise food-reformer, himself acquainted with this truth, explains this manifestation, exciting the “expectant attention” of the patient, who patiently waits for the promised results, then will follow all the joys—and they can hardly be overdrawn—that are painted by the most enthusiastic devotee of a natural diet.

In a personal experience and medical practice of years devoted to hygienic and dietetic methods, Dr. Densmore and I have proved the correctness of this in hundreds of cases. But such is the nature of prejudice, and the tendency to cling to old schools and forms, that when these manifestations appear, even when warned, and so somewhat prepared for them, more fall through the fear born of this ignorance of the curative action than continue the food-reform life; and if it is difficult when warned, how much more difficult when totally ignorant of the real cause of the trou-

ble, and what wonder is it that so many succumb?

If it were true that, after so many years of abuse, we could stop the wrong course of living, and all the blessings of health follow immediately, it would be proof that this disobedience is not so bad after all. When we consider the wonderful mechanism of the human organism, the certainty with which all of its organs perform their allotted work, the inevitable penalty that has to be paid for every physiological sin that is committed, and then consider the transgressions committed for so many years, before the bills of credit began to mature, we ought not to be surprised that it takes a few years to repair the damage done in a life-time; and, instead of complaining at the discomfort entailed, we should rather be thankful that it is not too late; that our accounts are not closed, and we found to be totally bankrupt in health.

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**“If it were true that after so many years of abuse, we could stop the wrong course of living, and all the blessings of health follow immediately, it would be proof that this disobedience is not so bad after all.”**

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It is true that some do make this change with very little or no discomfort. Such persons are favoured with strong constitutional powers that have enabled them to resist the inroads of disease and the development of hereditary tendencies, or are free from such tendencies. Others, having strong digestive powers, are enabled to digest and assimilate unaccustomed food from the first, and so get on comparatively well; being well nourished, the craving for the stimulating foods abandoned is not so great, and improvement in the physical condition begins to be felt immediately. This would happen generally with the young at once. But by far the larger number meet the curative action sooner or later, and it may not come for some time.

With the drunkard the curative action is recognized at once; all know that it is not the water that is making

him ill, but the alcoholic poison which he had been before accustomed to. So mother, sister, sweetheart, and friends with one accord appeal to him to keep up his courage, notwithstanding his apparently bad symptoms. How differently is the poor dyspeptic treated when he attempts to reform in diet! With one accord his friends try to prevail upon him to abandon it; assure him that he

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**“All pathological conditions, all diseases and all tendencies to disease, are the result of the transgression of hygienic and physiological law.”**

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is killing himself; read him tomes of medical authorities to show that he is impoverishing his blood by this “low diet;” and when he returns to the old injurious diet, just as with the dram of spirits in the case of the drunkard, the effect is to stop the curative action; he feels braced up, and this is taken as proof that he was all wrong, and the accumulation of disease commences again.

Another mistake of food-reformers is in painting a too roseate picture of the change, from a failure to recognize the price demanded of the devotee in the divorcement which a strictly hygienic life, conscientiously carried forward, causes from one's accustomed social life. Eating is made so much a feature of every form of social communion, that to refuse to enter into its artificial pleasures is looked upon by hosts and guests alike as an impoliteness. It is somewhat like a total abstainer giving a midnight revel and refusing to drink wine. This is one of the difficulties to be admitted and met, when the *pros* and *cons* of this new reform in food are being discussed.

It is well known, when one has become accustomed to the poison habit of opium, alcohol, or tobacco, that it is a slavery difficult to overthrow. It will be found that the habit of eating improper food, when once formed, is also difficult to be overcome, and if to this there has been added the baneful habit of tea and coffee drinking, the inconvenience is increased. The difficulty of overcoming these pernicious

*continued on next page*



*Timeless Teachings cont.*

habits is made still greater when the attitude of one's companions, friends, and society is taken into account.

But after all these difficulties are fully acknowledged and appreciated, and due weight allowed for all the drawbacks it is possible to discover, there is quite enough of blessedness and compensation to charm any earnest soul who has an ambition to take his birthright—Health. It is just this ambition for health that is sadly lacking in the modern mind. There was a glimpse of sanity in the old Spartan practice of putting to death the weak, sickly, and deformed children at birth. It was a dim perception of the truth

that to be ill is a monstrosity. And when we learn that illness is always the result of disobedience to law; when we come to know that it need never be,—that it comes only with the violation of plainly written laws of health, we shall see an entirely different attitude towards illness, in whatever form it makes its appearance. And, moreover, when we learn that the pleasures of life, judged from the sensuous standpoint alone, are much greater when following this simple diet,—that we enjoy more physical, delight in the newness and fullness of increased vitality, clearer brains, stronger powers in every direction, and no illness, lassitude, or fear of

these,—surely this will be motive strong enough, when once conviction is secured, to induce all men and women, whatever their station in life, to adopt it. From the royal family to the most humble of her Majesty's subjects, dietetic reform is the most important material truth of this wonderful age, and means the restoration of the ill to health, and the possibility of making health a permanent condition.

Excerpted from Dr. Densmore's article which appeared in the book written by her husband, Emmet Densmore, M.D., *How Nature Cures*. London: Swan Sonnenschein, 1892, pp. 172-176. 

*Dear Children Everywhere:*

*This is the first of a series of lessons telling all normal boys and girls eight years of age and older how to have clear smooth skin, shiny hair, sparkling, cavity-free teeth, all kinds of zip to do things and never a day's sickness. Thousands of kids follow these lessons. They're exciting and different. Why not join them?*

by Donald R. Crichton

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## THE JUNIOR HYGIENIST

### Natural Hygiene: Our Wheel of Good Health

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**First comes EATING.** When man first set foot on earth he had no choice but to eat what he could find around him that grew on the ground or in it, on the bushes and up in the trees. He just helped himself to what he liked and what he could chew.

In many ways he was a most fortunate fellow because without even having to think about it, his foods were the ripe fruits and nuts and berries and all the wild vegetables which were in season. These happened to be the very best foods for him because they were always at their peak of tastiness and nourishment.

Ancient man, not knowing anything about fire or how to use it, did not cook anything. Cooking tends to "break down" or partly destroy the nourishing things in our food. We do this today if we find something too tough to eat in its raw or natural state. For him however, anything too hard to chew just wasn't food as far as he was concerned (like meat for instance); so he left it alone and satisfied himself on the sweet and tender things that grew all around him.

Natural Hygienists believe that ancient man never had any stomach aches or headaches or any of the zillion things that bother us today. Of course he may have eaten something accidentally which disagreed with him—like a poison mushroom or something—but this would be an exception.



We believe that our stomachs are exactly the same today as they were in those ancient times and that if we eat only the simple natural foods that are in season, as soon as possible after they have been picked off the plant, and without cooking them, we will always be well. We know, of course, that we cannot always do this because we have winters to live through when food is hard to get. But just the same, the closer we can copy the eating habits of ancient man, the healthier we must be.

**Next Comes PLAYING.** Using our ancient man again (let's call him Oz) we will have to guess at how their families lived and grew up together. This should give us some ideas about the importance of playing. We don't think that Oz and his children had much time for playing really, at least as we understand it. They had nothing much of what we would call a home. Perhaps just a cave or something like that.

And they must have been spending most of their time and energy (playtime to us!) hunting for food. This means that they were probably *nomads*. They had no gardens or orchards or vegetable patches, so they had to keep roaming all over the place looking for food to eat.

For instance, one morning they might find themselves in an area where there were a lot of different fruit trees. They would climb the trees and eat their fill and move on. Later in the day they might come to an open space where vegetables were growing and they would stop and eat these until they were satisfied. And so on.

Today, we don't have Oz's food problems. But we have others. Since our food is brought to us—set right on the table before us—and since (as we believe in Natural Hygiene) our bodies are still exactly the same as old Oz and his kids, we will have to *play* and exercise everyday, everyday, everyday to make up for their search for food, and stay in tip top shape.



**Last comes RESTING.** Last but not least! When

Oz and his family searched and searched until they found food, they ate their fill, then lay down and took a nap. They didn't have a job to rush off to or school classes to go (reluctantly!) back into.

They probably searched and ate and rested like this as often as they were able to find food and eat it, all the day long, until night came. Once it became dark they did the only natural thing which people who can't see in the dark do. They settled down and slept until it was light again.

Nowadays with the high pressure of schooling and working and, yes athletic activities of all kinds, more than ever we need to rest and to sleep.

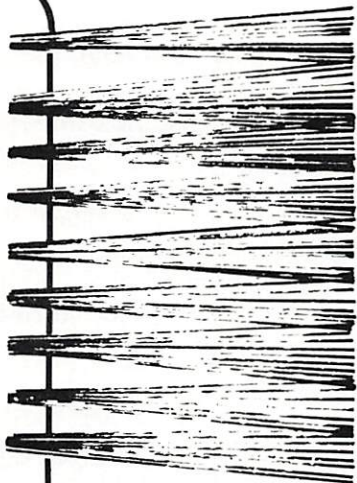
It's tough trying to get to bed early at night when we have electric lights, television, books, homework and everything. Oz's family were really lucky from a health point of view. When it got dark after a day's exercise looking and climbing for food they had nothing else to do but get all the rest they needed to stay always in the very best of condition.

The little naps which Oz and his children took during the day after eating were most important too.

We should all try to catch even a few minutes now and then, stretched out, to get our bodies relaxed and tuned up, ready for action again.

So now you have a very good idea of what our Wheel of Good Health is all about. Other lessons in this series will help to explain it more and will tell you how to make Natural Hygiene work for all of us in today's busy world—not old Oz's!





# QUESTIONS ABOUT DENTAL HEALTH

by Dennis Bressack, D.D.S.

*I read a newspaper article on the possibility of a tooth decay vaccine. Hallelujah! Does that mean that I don't have to play games with that silly brush and floss anymore?*

One of the major negative effects of any vaccination program is to render the participants complacent by evoking a false security blanket. As long as they are protected by the vaccine, they believe they can continue the same destructive living, eating, and cleaning habits that would normally lead to the disease without suffering the consequences.

Most tooth decay is naturally preventable. Particularly important preventive factors are proper habitual oral cleanliness, maintenance of a hygienic diet (consisting mainly of raw fruits, vegetables, and nuts), and removal of refined, denatured, devitalized, destructive foodstuffs. So, why introduce a toxin with unknown future effects into the system as a substitute for internal and external cleanliness? This, my friends, is really playing games.

Consider two more facts: 1) Seventy-five percent of tooth loss results from periodontal (gum and bone) disease, 2) There is no clinically effective tooth decay vaccine at present and it is questionable that a safe vaccine can ever be developed.

Imagine the irony and criminality of adding a tooth decay vaccine to the drinking water, or to the host of other compulsive vaccines deemed necessary to visit foreign countries and to send our children to public school. For those who feel the need, let them take the risk. However, for those who understand the cause and effect relationship between living habits and disease, a tooth decay vaccine is unnecessary.

So don't throw away that silly brush and floss just yet; there is no substitute for cleanliness and other Hygienic habits.

## *What are wisdom teeth? Is it necessary to remove them?*

Wisdom teeth, also known as third molars, are the last permanent teeth to erupt into the dental arch. This usually occurs between the ages of 17 and 25. Should they erupt normally and naturally, in correct position for function and maintenance of cleanliness it is not necessary to remove them.



When there is inadequate space, the third molars may erupt incompletely (tissue or gingival impaction) or not erupt at all (bone impaction). If the above situations are symptom free, then it is most assuredly wiser to carefully observe the tooth than to remove it immediately. X-rays are usually necessary to confirm impaction and continue observation. If, however, there are symptoms of irritation, inflammation, infection, or abscess (discomfort, pressure, swelling, bleeding, pus formation, etc.) then treatment may be indicated. Depending upon severity, the treatment may vary from flushing the area with sterile distilled water, to removing the flap of gingival tissue over the tooth and flushing with water, to surgically removing the tooth from the underlying bone.

Many dentists will prescribe analgesics (pain pills) and antibiotics depending upon the severity of the situation. The patient then has the choice of accepting or rejecting the medication. Cleanliness is essential and may be the only therapy that is indicated. Distilled water fasting or juice diet is recommended and many times may even be forced during the height of the crisis.

***Does lengthy fasting loosen fillings? I noticed a root canal filling dropped out after a fast. How long do silver fillings last? How long will root canal work last?***

Silver fillings can last for from five to twenty years or more. They are certainly imperfect materials which may chip or break under any circumstances at any time. I am just not sure that there is a significant correlation between fasting and the loosening of fillings. More than likely, it was a matter of chance that the filling fell out after your fast.

Endodontics (root canal treatment) is the removal of the vital organs within the tooth (i.e. the blood and nerve supply). By rendering the tooth non-vital, it may cause it to discolor and become brittle or less resilient. If it is not properly restored (preferably with a crown or cap), it may fracture, or its fillings may loosen more easily. But, when properly cared for and restored to normal function, preferably with a post and a crown, it should last as long as any other vital tooth in the mouth.

The following factors may contribute to the length of time that an endodontically treated tooth or a silver filling will remain in the mouth:

- The condition of the remaining teeth and the tissues of the oral cavity.
- The initial condition of the tooth.
- The method and materials used to restore the tooth.
- The extent of the decay and the amount of tooth structure remaining.
- The occlusion (bite).
- Oral cleanliness habits.
- Dietary habits.
- Non-functional oral habits (e.g., gum chewing and nail biting).

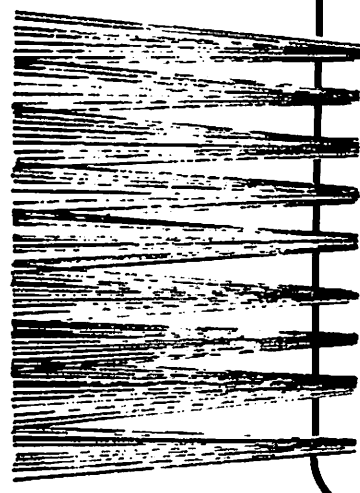
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Dr. Bressack welcomes reader's questions. Unfortunately, due to the volume of mail he cannot answer them individually. However, he will address representative questions.

**Send them to:**

Dr. Dennis Bressack, c/o Health Science, 1920 Irving Park Road, Chicago, IL 60613.

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# FOOTNOTES

## QUESTIONS FROM READERS

by Jack Goldstein, D.P.M.

***What causes large white areas to appear in the large toenail, and the nail to lift away from the flesh?***

There are numerous causes for this common occurrence. Many times it is harmless, causes no problems, and can be disregarded, especially when it is a developmental anomaly. An injury or blow or stubbing of the nail bed or matrix (root) can result in white areas to appear, which usually grow out as the nail grows.

White areas can also be due to nutritional problems such as poor assimilation of protein. I've seen this more frequently in children, but mainly in hygienically-raised children who have difficulty in handling nuts and seeds. I have found that these children (who are also usually very thin and smaller in stature) respond nicely if the nuts and/or seeds are soaked overnight in a little juice or distilled water, which makes them more easily assimilable.

Psoriasis can cause white areas in the toenails as can circulatory deficiency of the lower extremities, bacterial and fungal infections of the nails, diabetes, and other severe debilitating diseases. Fungal infections also have a tendency to cause a yellowish discoloration. It is these problems that can also cause the nail to lift away from the flesh; however, fungal infection is probably the most common cause of separation of the nail from its bed.

The Hygienic life-style is the only way to prevent these problems by allowing the body to maintain a superior cellular health along with a high resistance and immunity.

***Can diet or fasting heal foot problems? Pressure while walking and standing has been painful for many years even though I am not overweight.***

No! Diet or fasting cannot heal foot problems! Let's try to understand some of the basic principles involved. Food merely gives the body all the essential nutritive elements it needs so that the body can utilize to the optimum its innate healing powers. Fasting gives the body the opportunity to heal itself—physiologic rest.

You don't say where the pressure or pain is that you experience, therefore it is quite futile to give you an answer. Based on my experience, this type of pain could occur from varicose veins due to the backpressure of blood. Standing on imbalanced metatarsal heads (the bones that make up the ball of the foot) can cause pain due to the bones being inflamed because of excessive pressure. The calluses which form from these imbalances also cause pain. Arch problems (covered in another part of this column) can cause much pain. Overweight (though not in your case) can cause pain due to excess stress placed on parts not meant to be burdened beyond its physiological (functional) limitations. Diabetes, circulatory deficiency, anemia, etc. are potential sources of pain.

I feel that fasting and a hygienic diet are essential for all body healing including foot problems; but where there is deformity or structural imbalance we may have to resort to surgical correction and/or the use of

prosthetic appliances to restore or create as close to normal function as possible.

***What are bunions and is there any hygienic help for them?***

Books have been written about bunions; but let's be brief. A bunion is an enlargement of bone (with or without accompanying bursitis) at the side of the big toe joint. When the problem progresses so that the big toe angles toward the other toes, then it is called a hallux valgus.

The causative factors are many, but to cite a few: hereditary tendency, congenital tendency (usually from an abnormal position in the uterus), flat-feet, short socks and shoes, narrow shoes, elongated big toe (longer than the second toe), high-heeled shoes, pointed-toe shoes, arthritis, etc.

As far as hygienic help is concerned, the best preventive approach is the elimination of the causative factors and the use of a hygienic diet for the pregnant woman and newborn infant. In early cases (infants and children) various splints can be worn accompanied by exercises to derotate the toe if there is a hallux valgus.

Basically, if we have a simple bunion, then there is just bone enlargement. This is usually only caused by friction and pressure from a shoe. The bone reacts to this constant irritation by enlarging. Once bone enlargement (hypertrophy) is present it becomes a surgical problem; or if the deviation or angulation of the big toe (hallux valgus) can't be reduced conservatively, then surgery again is the only answer.



### **What can be done to improve congenital fallen arches? Supports have been worn to no avail.**

There are three basic types of "fallen arches" (otherwise known as pronated feet, flatfeet, pes planus, pes valgoplanus, flaccid flatfeet, etc.): congenital, hereditary, and acquired. In the hereditary type the tendency for permanent deformity is so strong that corrective treatment is almost futile. This could be why your results are nil. In the congenital type (that present at birth but not necessarily hereditary) the chances are greater for correction if diagnosed early. The acquired type seems to stand the best chance for correction. Again, the key is early diagnosis.

However, there are certain factors to consider. For one thing, the height of the arch is *relative*. What may be normal for one person may not be normal for another. The person who has hereditary flatfeet usually has a better base of support than the individual with the so-called normal arch. The problem usually arises when a doctor (with or without pressure from parents) tries to use some type of appliance in the shoe to force an arch to develop in a foot which will never develop one. Many structural and postural imbalances occur as a result of this "meddling." It is as important to know *when* to leave a foot alone as it is to know *when* to do something.

Another important point to consider is the fact that nearly all newborn infants have the appearance of flatfeet. The arches have not had a chance to develop yet and the embryonic fat pad fills in any concavity in the arches. This fat pad gives the appearance of flatfeet. This fat pad is usually absorbed anywhere from two to four years of age. It is generally through lack of knowledge and experience that treatment is instituted where in fact it may cause more harm than good.

In the limited space of this column, it is impossible to adequately discuss the many variables involved in your question on congenital "fallen arches." Discovering the means for improving this condition requires individualized analysis and consideration of such factors as age, weight,

bone structure, muscular size, joint flexibility, etc. However, I will say that many times when certain types of appliances are worn for long periods (just like braces on teeth) the arches may re-form. But, this will occur in children—not adults. In the adult these appliances are strictly supportive. They are constructed so as to balance the feet and keep them asymptomatic (free of symptoms).

### **Please comment on swollen ankles and why the swelling is more acute after fasting. This has occurred after three long fasts.**

The swelling (edema) you describe is the exception rather than the rule; it is not common. There are a number of reasons for this problem.

In some cases, the protein displacement into the bloodstream which occurs during fasting can cause fluid to be retained because heart contraction is diminished and therefore there is less force to move it out of the lower extremity.

Other possible reasons are a mitral or tricuspid heart valve leakage, kidney impairment, a congested or diseased liver, pulmonary (lung) disease, and a severe malnutritional problem. The list could go on, but in any event, a detailed history and blood work-up, among other tests, would be necessary to determine exactly why this symptom occurs.

This edema suggests that fasting might not have been indicated. You should consult with your practitioner about alternative Hygienic procedures for improving the underlying problem. ☀

Dr. Goldstein welcomes questions from readers. While he cannot answer each letter personally, nor make diagnoses and prescribe treatment via this column, he will address questions of various categories that apply to a general audience. Send them to:

Dr. Jack Goldstein  
c/o Health Science  
1920 Irving Park Road,  
Chicago, IL 60613

## **BOOKS**

Health Science and the Natural Hygiene Press are attempting to establish a library for the preservation and use of literature bearing on the subject of hygiene. Very unfortunately, ANHS lacks most of the Hygienic classics, including many of Dr. Shelton's works. Donations in the form of books, old magazines, new subscriptions, or even archival material such as pamphlets, tapes, letters and photographs are welcome. Suggested sources for such material, storage equipment and money will also be greatly appreciated. Please contact us in advance of your contribution so as to avoid duplication. Address correspondence to the editor.

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# Understanding Fasting Planning Ahead

by Hannah Allen

## LIMITED POTENTIAL OF SHORT FASTS

Some determined individuals who embark on a Hygienic program may decide to start with a short fast. Short fasts without supervision may be undertaken by most individuals who are not on prescription drugs, have not had recent major surgery, and have no established serious disease or organic limitations (such as prior surgical removal of part of the stomach or intestines).

However, no one should fast much longer than three—at most, five—days without professional supervision, because certain developments and changes during a prolonged fast must be assessed regularly by a competent fasting supervisor. This cannot be too strongly emphasized.

Short unsupervised fasts, while useful instruments for health maintenance, are not usually considered effective therapeutic measures for serious health problems. Chronic ailments are much more likely to respond dramatically to a prolonged fasting period.

Prolonged fasts are best conducted at a Hygienic retreat, where a professional Hygienist is on call at all times and where the surroundings are conducive to properly conducting a fast.

Some individuals, in an effort to bypass a prolonged fast, resort to frequent short fasts, in the hope and belief that they will thus achieve the same dramatic results. But this may prove to be dangerous. Short fasts, *taken at too frequent intervals*, produce enervation and exhaustion, and create nutritional deficiencies. Serious problems cannot be corrected in this manner.

Much of the therapeutic value of a prolonged fast may be ascribed to the uninterrupted orderly succession of phenomena initiated by the organism

when deprived of external food sources. Both increased elimination of toxins and utilization of food reserves in the body begin during the first few days of fasting. As the fast progresses, elimination of toxins is accelerated and the body continues to explore its reserves for life-sustaining materials.

Food reserves in the digestive tract are usually available for about three days, after which a process called autolysis (self-digestion of tissue) is invoked. The body seeks out, breaks down and utilizes the least important stored materials (such as fat, calcium and various other deposits) and abnormal growths (most tumors and adhesions). The essential organs and tissues of the body, such as the heart, nervous system, lungs and other vital parts remain intact, and calcium is not robbed from the bones, teeth and nails.

Nutritional elements are salvaged and absorbed, with increasing economy and efficiency in the utilization of available supplies, and waste products are eliminated. The disintegration of expendable tissues and products is accomplished by the body's own enzymes. This process is a normal part of physiology, but is accelerated and enhanced as the fast progresses.

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**“After a prolonged fast, every cell that existed before will have been replaced by a smaller, younger and more vital cell.”**

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Although, in normal physiology, the cells have the ability, to a limited extent, to repair and heal themselves, they must replace themselves at certain intervals. The quality of tissue is determined by the condition of the cells which compose the tissue. The

condition of the existing cells determines the quality of the replacement cells, which may form good functioning tissue or scar tissue. If the cells are dying, they cannot replace themselves at all.

After a prolonged fast, every cell that existed before will have been replaced by a smaller, younger and more vital cell. This is the reverse of normal replacement where cells gradually age, and it explains the extraordinary rejuvenating effects of the fast.

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**“Most people find the weekly 36 hour fast convenient, agreeable, restful and beneficial.”**

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During the prolonged fast, continual physiological changes occur. The processes of elimination, autolysis, increased efficiency of assimilation, rejuvenescence and healing continue as long as reserves are available. The fasting supervisor must be alert for signs of dwindling reserves, so that fasts are broken before any danger point is reached.

Short fasts—fasts of less than seven days—cannot have these far-reaching effects. The first few days of any fasting period, when food reserves in the digestive tract are being utilized, have very limited “healing” potential. By the time the body has adjusted to the fasting state, the fast is broken, and adaptations must again be made as the processes of digestion are resumed. The organism has paid the price of two adaptations, with very little time between in which to reap the benefits.

Thus, when short fasts are spaced too close together, they may have negative effects—because the incidence of adaptations demanded of the organism are too frequent and the



end result can be enervation, exhaustion and the creation of nutritional deficiencies. Short fasts, therefore, are principally instruments for health maintenance, though they do also have some limited healing potential.

Some patients who are suffering from chronic ailments can recover without a prolonged fast if the causes of the problems are removed, through careful management of the diet and other living habits (taking less food, working less, resting more) combined with judicious and temperate use of short fasting periods in accordance with need and ability.

This method, however, is the long way around, and, to be successful, will require a much longer period of time (possibly years) and infinite patience. Furthermore, a successful outcome is not as certain as when the more direct approach of the prolonged fast is utilized.

### FREQUENCY AND LENGTH OF FASTS

How frequently should one fast? And how does one determine the length of the fast? These are questions which do not have firm answers which are applicable to all cases. Many factors must be considered, including the condition of the individual and the reasons or need for the fast.

We can only discuss and try to establish reasonable guidelines, but the ultimate application of such "rules" are highly individual. When contemplating prolonged fasting periods, decisions must be based on the existing state of health of the individual and consultation with a fasting supervisor.

Thirty-six hour fasts do not really entail enervating adaptations. The omission of three meals does not involve the same type of stress as may be experienced during a fast of several days. Experience has shown that most people profit from a weekly 36-hour fast. After a few experiences of this very brief fasting period, most people find the weekly 36-hour fast convenient, agreeable, restful and beneficial—and experience no debilitating after-effects.

A small percentage of individuals may find, after experimentation, that a weekly 36-hour fast might be too

frequent. If dizziness, light-headedness or weakness are still experienced after several such weekly fasts (especially between fasts), it may be advisable to switch to bi-weekly 36-hour fasts. However, dizziness, light-headedness or weakness experienced during longer fasting periods are not significant and disappear after the fasts are broken.

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**"Some patients who are suffering from chronic ailments can recover without a prolonged fast if the causes of the problems are removed."**

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Thirty-six hour fasts should not be relied upon to produce therapeutic effects—they are principally instruments for relieving the digestive system of its continuous burden, and affording the organism an opportunity for a "Sabbath." Still, people who avail themselves of a regular 36-hour fast will achieve some long-term health benefits.

Fasts of three to six days are valuable health maintenance tools, if spaced properly, and result in two very definite benefits—the major benefit being a significant increase in the elimination of toxins, the minor benefit being cumulative, though very limited, healing effects. These short fasts should be regarded as supplementary to the regular 36-hour "day of rest" fasts.

Proper spacing of fasts requires some individual judgment, with basic guidelines. Generally, three-day fasts may be undertaken perhaps every 60 to 90 days, if desired—depending upon individual programs and needs. Some people may find it possible, or even advisable, to fast three days every month—but certainly this should be the maximum frequency.

Some people may find that they don't need or want to fast three days regularly. These are purely personal decisions based on limitations, attitudes and goals.

Plan ahead for a three-day fast, so that you may withdraw from your usual activities and take a complete rest. You should not be dissipating your energy in activity, but should allow your body to utilize its energy to

repair tissue, restore function and "clean house."

Some people take a seven- to fourteen-day fast once or twice a year, in addition to regular 36-hour fasts, as part of their regular health maintenance programs. At least the first such fasts should be supervised. Fasts of twenty-one to thirty days, or longer, should generally not be taken oftener than once annually, though there may be some exceptions to this. Depending upon the condition of the individual, the Hygienic doctor may advise another long fast without waiting for a year to elapse.

In essence, the best program for each individual should be determined as a result of guarded experimentation combined with study and consultation with a knowledgeable fasting supervisor. The decisions made should be based on the limitations (physical, mental, emotional) of each individual plus the potential benefits or the relief of existing problems.

The actual length of a prolonged fast is not usually determined in advance, nor is it advisable to try to make this determination. Rather, the condition of the faster should be carefully assessed by the fasting supervisor daily, and the fast should progress on a day-to-day basis until manifestations occur which signal that it is time to break the fast.

Like snowflakes, every fast is different from all other fasts—even two fasts by the same person are different.

### RECOMMENDED READING

Allen, Hannah. *Fasting: Fastest way to superb health and rejuvenation (Your first fast—What to expect)*. Pearsall, TX: Healthway [1975]. \$1.50.

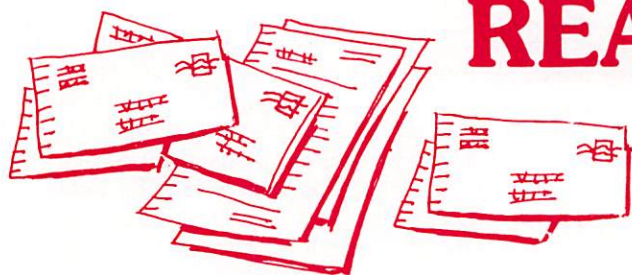
Devries, Arnold. *Therapeutic fasting*. Greene, IA: Chandler, 1963. \$2.50.

Shelton, Herbert M. *The science and fine art of fasting*. Chicago, IL: Natural Hygiene Press, 1978. \$6.95.

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# READER'S FORUM



In answer to Mrs. Katherine Werner's letter (Health Science, June 1978), I would like to ask her if she has ever fasted for any length of time.

It has been my experience with fasting patients that often foods that are unappetizing before the fast are found to be delicious after the body has been cleansed of toxins. The taste buds that are often more or less perverted by the highly seasoned foods return to normal and one appreciates the delicate, delicious flavors of the natural foods, unseasoned.

On one occasion when I took a tray to a lady soon after her fast, she looked at it and said, "Oh, I never eat greens. I just do not care for them." I said, "Please try a little of this steamed swiss chard." So she did and found that she liked it so well that she ate it all up, and asked for more. And that is not an unusual experience with people after a fast.

To Sid Kleiner (Health Science, June 1978), I would like to say that most of us in Hygiene have similar experiences in trying to interest John Q. Etc. in changing his way of living. We in the Greater Miami Chapter have found that no matter how interesting the topic or how eloquent the speaker, we get only perhaps seventy or eighty people out to hear a local speaker. And we have around three hundred thousand people in Miami. While, when we have an out of town lecturer we usually have almost twice that number—with seldom enough seating capacity.

We have found, too, that when we have a vegetarian Pot Luck Lunch we get people who do not attend our other meetings. Everyone brings some food for themselves with some to share, while the Chapter provides cutlery, paper plates, etc. and perhaps an apple or some grapes. For this and our advertising, etc. we charge one dollar. No one seems to mind the charge and all seem to enjoy themselves. It is something different. Of course we always have a lecture on Natural Hygiene first.

We distribute a thousand leaflets for every meeting, sending around five hundred to our mailing list, and posting the others in Health Food stores supermarkets, or wherever they are permitted. Sometimes even on drug store windows, believe it or not.

We also rented a booth at three health seminars, in the last two years, where we sold our books. One Health Expo was at the Miami Beach Auditorium and one at Dinner Key, where there were many very excellent speakers. We did not make a lot of money but we did distribute much literature and books on Hygiene. More recently we had a booth at a seminar in a Miami Hotel put on by the Fort Lauderdale chapter of IACVF where we did fairly well considering the number of booths selling books.

So, never become discouraged, Hygienic workers, because Hygiene and health improvement is more important than anything else in the world. It is encouraging that many medical doctors are becoming more interested in diet and more natural living generally. Progress seems slow, but TRUTH WILL WIN.

Myrtle E. Matera,  
Current Vice President and  
Past President of the  
Greater Miami Chapter of ANHS

I must tell you in response to the question of state laws concerning immunizations in the Readers' Forum (Health Science, June 1978), that my state, New Jersey, is terrible on the shots. They literally "force" parents to get their children immunized. Every six months in my community, the town nurse comes around and "checks in" on me and the baby. She delivers a little booklet on child care and I say no in as best fashion as I can and proceed to "defend" myself, armed with my exemption letters. Even with the letters, I may later need a lawyer when I register my son in school. My contention is that New Jersey is so "pro-immunization" because we have so many drug companies in the state. They literally "push" their poisons upon us—polluting our air here as well as our bodies.

Christine H. Pawlowicz  
New Jersey

Health Science welcomes letters to the editor, be they comments, suggestions or questions. We regret that because of the volume of mail received, we cannot acknowledge them. However, you can be assured that all letters are read, considered and appreciated.

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# VIEWPOINT

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## Don't Be Fooled by Vaccination Propoganda

Dear ANHS,

On May 3, Radio WBBM-AM aired an editorial by William C. O'Donnel urging parents to have their children immunized against the "possible" oncoming epidemic of childhood disease. I thought you may be interested in my reply.

Here is the editorial:

*The possibility of an epidemic of childhood disease is losing ground every day in Illinois thanks to the efforts of some school administrators. An alarm about low rates of student immunization against such diseases as diphtheria, German measles and polio was sounded last winter and thus far the response has been heartening.*

*At the state level, Dr. Joseph Cronin has swung into action with plans for further statewide immunization surveys to be taken next fall. Cook County School Superintendent Richard Martwick who raised the red flag in February, has urged legislation forcing schools to keep unimmunized children out of school and it appears the bill is in the offing. And in Chicago, School Superintendent Joseph Hannon has said that children who haven't received their shots by September can't start school. But to make sure they do get immunized, shots are being given in the schools now, and will be given throughout the city all*

*summer by the Department of Health.*

*It seems almost unthinkable that there could be a widespread outbreak of childhood disease in this day and age, when we have such fine health care[?] available, but there could be just such a thing, if parents continue to forget or neglect to have their children protected against the dread diseases. Thousands of parents have been negligent and the hard-nosed approach of expelling children from school will be needed until parents get the message that this is serious.*

*These efforts by school and health officials are to be commended but in a way it's too bad they have to be doing the job the parents should be doing themselves.*

My reply, addressed to WBBM-AM Radio, Editorial Department, follows:

To Whom It May Concern:

Regarding your editorial aired today, May 3, 1978, concerning vaccination: Here are three points for you to ponder before you again promote vaccination on the air.

I quote the first point from *Don't Get Stuck* (1976) by Hannah Allen (written in answer to President Ford's Swine Flu Fiasco), in her "Open Letter To Proponents Of Compulsory Vaccination:"

"If you want to be vaccinated and believe that it will protect you, that is

your privilege. If you believe that I may get polio or smallpox unless I am vaccinated, how do you figure that could hurt you, if you are protected? If you truly believe in that protection, why do you have to vaccinate me against my will?" (p. ix).

And that brings me to my second point: *freedom, freedom to choose the method of health maintenance of one's own body.*

Do you at WBBM believe in mass medication, regardless of the fact that all individuals react differently to serums, drugs, and chemicals of all kinds? I hope not! And, yet, that's what's happening right here in the United States of America—right here in our "free" country!

Third point: Vaccinations, inoculations, and immunizations of all kinds are, admittedly, introducing serums (pus), drugs (antibiotics), chemicals (formaldehyde, mercury), bacteria and viruses into our bodies in an unnatural way, without 100 percent efficacy, and with possible, and in many authorities opinion, probable, serious and sometimes long-lasting side effects.

Just several months ago Betty and Bob Sanders of WBBM interviewed a young pediatrician, Dr. Donald Vickary, who has written a book, *Taking Care of Your Child*, in conjunction with two other doctors. I quote Dr. Vickary: Immunization is not a

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**"Until everyone of you have researched it as I have, no one has the right to demand vaccination of one single child."**

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straight-forward thing. There are still significant questions about immunizations which each parent should answer for himself. He goes on to mention that rubella and whooping cough vaccination are now highly controversial, and that Great Britain has halted the whooping cough vaccine in the face of grave side effects (i.e. encephalitis).

In the April 1978 issue of the *People's Doctor*, a medical newsletter for consumers, Dr. Robert Mendelsohn states: "Whooping cough vaccine is hotly debated in many places in

*continued on next page*



## Viewpoint cont.

the world both because its effectiveness rate is only about 50 per cent and because it may cause high fevers and convulsions as well as a form of encephalopathy (brain damage)."

The Journal of the American Medical Association, January 23, 1978, reported that of the 18 cases of polio in 1977 only three cases occurred in persons "without known vaccine association."

In other words, the risk of polio is admittedly higher in the vaccinated than the unvaccinated. In fact, in a pamphlet circulated by the Department of Health, Education and Welfare in 1977, is the blatant warning that "one in every 4,000,000 persons who receives the oral polio vaccine or who comes in contact with someone who has recently been vaccinated develops permanent paralysis and may die."

## **"The questions, half-truths, exaggerated statistics, and inadequacies of the whole immunological system have caught up with it."**

Using U.S. statistics, this means that if our 52,000,000 children under the age of 15 are vaccinated with the oral polio vaccine, 13 will become paralyzed and may die—thirteen children whose chances of contracting polio without the vaccine are near zero—thirteen guaranteed cases of polio, to support the establishment's cry of "epidemic!" In my opinion, this would be a crime against humanity.

Yet, promoters of these vaccines continue to push—coerce—parents

into getting these vaccines for their children, all to the monetary delight of the drug companies, and, consequently, the A.M.A.

## **"The risk of polio is admittedly higher in the vaccinated than the unvaccinated."**

O'Donnel said in his editorial that it is too bad that teachers and school officials have to take over the responsibility from the parents in this matter. I would be willing to bet that not one school official or teacher has *cared enough*, or perhaps had the opportunity, to research the subject as I have, for over three years. I imagine that not one person in my child's school has the slightest inclination to doubt the word of the A.M.A., the drug cartel, or "scientific" history, as I have. Until everyone of them—until everyone of you—have researched it as I have, no one has the right to demand vaccination of one single child.

Millions of parents throughout the United States, and the World, have lost faith in the process of artificially immunizing their children with disease serums, chemicals, and drugs. The questions, half-truths, exaggerated statistics, and inadequacies of the whole immunological system have caught up with it, and we are finally *thinking for ourselves*, and thinking of our children.

We already know that the medical profession has over-drugged, over-x rayed, over-operated on, and over-treated us in many ways, for many years. As with the Swine Flu Fiasco of 1976, and the vaccine-induced polio epidemic of 1955, we will continue to be used as guinea pigs and as a means

of moneterial support for the drug companies and the medical "hierarchy," unless we open our eyes, open our minds, and do something for ourselves for a change.

If you have any doubts now as to whether or not you should continue your unresearched promotion of vaccination on your radio programming, then I have accomplished what I set out to do.

Please, let's take the responsibility for our health, and that of the future generations, out of the hands of those who stand to profit by it monetarily. We have no "conflict of interest" when it comes to our health and that of our children, except to lead vigorous, satisfying, long lives, free from disease or threat of disease.

Sincerely,

Jill Skripps

Wisconsin

Licensed Practical Nurse

Mother

## RECOMMENDED READINGS

Allen, Hannah. *Don't Get Stuck*. Pearsall, Tx: Healthway, 1975.

Dole, Lionel. *The Blood Poisoners*. Croydon, England: Gateway, 1965.

Honorof, Ida and McBean, E. *Vaccination, the Silent Killer*. Sherman Oaks, CA: Honor Publications, 1977.

McBean, Eleanora. *The Poisoned Needle*. Mokolume Hill, CA: Health Research, 1959.

McBean, Eleanora I. *Swine Flu Expose*. Los Angeles, CA: Better Life Research, 1977.

Mendelsohn, Robert S. The truth about immunizations. *The People's Doctor* (April) 1978, 2(4) 1-6.

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Articles should be well researched, carefully documented and written in an interesting style readable by lay-people. Manuscripts must be typed on 8½" x 11" paper (one side only), double spaced, with one-inch margins on all four sides. Manuscripts will not be returned. Send clear carbon or photocopy.

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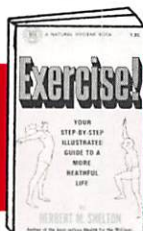
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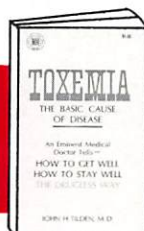
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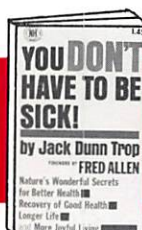
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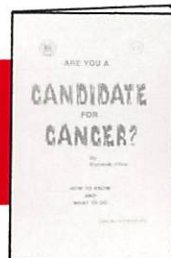
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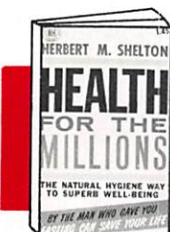
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