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CURING DISEASES OF
HEART AND ARTERIES

"The Alsaker Way"



R. L. ALSAKER, M. D.



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CURING DISEASES of HEART AND ARTERIES

Being a Treatise Regarding the Cause and
the Natural Cure of Heart Disease,
Arteriosclerosis, Apoplexy, etc.

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R. L. ALSAKER, M.D.

AUTHOR OF "EATING FOR HEALTH AND EFFICIENCY,"
"MAINTAINING HEALTH," "CONQUERING CONSUMPTION,"
"HOW TO LIVE ON 3 MEALS A DAY," ETC.



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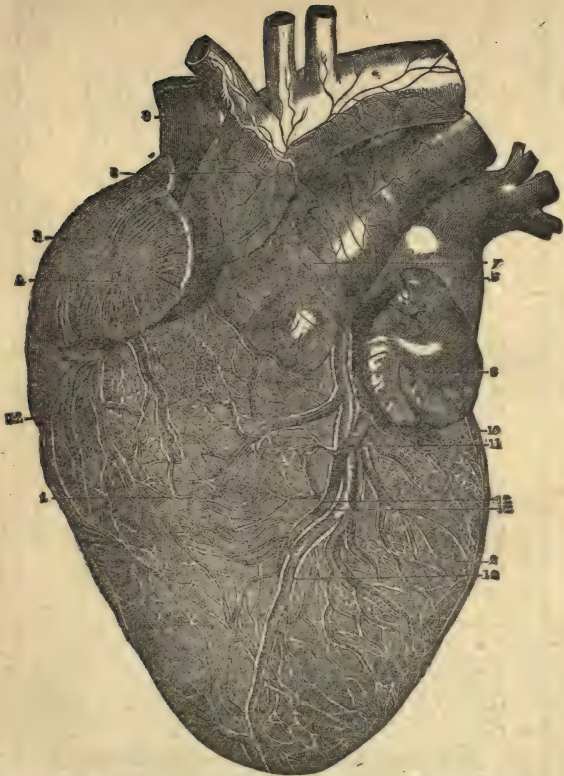
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Heart, Anterior View. (Bonamy and Beau.) 1, right ventricle; 2, left ventricle; 3, 4, right auricle; 5, 6, left auricle; 7, pulmonary artery; 8, aorta; 9, superior vena cava; 10, anterior coronary artery; 11, branch of the coronary vein; 12, lymphatic vessels.

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CURING DISEASES OF HEART AND ARTERIES

PART ONE

HEALTH AND CIRCULATION OF THE BLOOD

Not one individual in 300 lives out his life. Nearly all die prematurely. It is very exceptional for a person to live to advanced age—90 years or more. Many perish in infancy and childhood because of poor care. Those who reach the adult state almost invariably destroy themselves; that is, they live so that they must become ill, and disease is followed by premature death.

Curing Diseases of Heart and Arteries

Most of the disorders of the heart and the arteries are what we may call diseases of chronic degeneration. The body becomes too acid, or clogged with waste. The result is that the vital processes weaken, there is a loss of physical tone, and the body is no longer able to resist disease influences—all because we live as we ought not to live.

We can live so as to be free from disease.

We can also correct nearly all diseases after they have established themselves in the system.

It is generally believed that arteriosclerosis, high blood pressure, apoplexy and chronic heart disease must be endured because they can not be cured. This is far from the truth. Almost all who suffer from these dis-

Curing Diseases of Heart and Arteries

eases can be made safe, and many of them can completely recover, even after they have been given up as incurable.

The continuous and free circulation of the blood is absolutely necessary for physical well-being. The circulation can not remain normal unless the heart is in good condition. The results of heart disease are many and serious. At first the symptoms may be so mild and vague that they are attributed to other factors, but in time the heart condition will be unmistakable.

When the circulation of the blood is impeded the body fails to get sufficient oxygen and nourishment. It also fails to rid itself of the harmful waste which is produced every minute of life. Then physical degeneration soon ensues. This degeneration may be either slow

or rapid. Sometimes it is manifested at first in a slowly progressive weariness, loss of ambition and loss of power, with no other pronounced symptoms. At other times it is more distressing and rapid. Dizziness, headache, shortness of breath, queer head noises and visual disturbances are some of the most common and annoying manifestations. All of these signs and symptoms show that the nutrition and the elimination are disturbed.

No matter how good the food and drink, how fresh the air, or how correct the bodily care may be, if the heart is below par, the health will be poor.

During early life the heart and the arteries are seldom diseased, unless the trouble is secondary to some other acute trouble.

Curing Diseases of Heart and Arteries

Heart and arterial diseases are almost always due to other forms of physical degeneration. They come mostly in middle age or beyond, because numerous mistakes are made in the manner of living. In some families there is a tendency toward early arterial degeneration. This tendency is sometimes present in children born of old parents. Those who live carelessly easily develop circulatory ills, when the tendency is present. Those who live well can prevent heart and arterial diseases.

Diseases of the heart and arteries are generally based upon conditions that are easy to prevent, such as excessive use of tobacco and alcohol, indigestion, hyperacidity or severe infections.

Arterial diseases and heart troubles in adults are increasing in frequency.

Curing Diseases of Heart and Arteries

More and more persons are dying from them every year. They are diseases of chronic physical degeneration, which proves that the sufferers live as they should not live.

Using the best statistics available, a modest estimate of the number of deaths due to these diseases each year in the United States is 175,000. Those who perish from these ills are individuals who have acquired the wisdom that comes only through experience, but have failed to master the art of living. It is a great waste of life.

I have seen many cases of heart disease where physicians had passed sentence of speedy death; but when these individuals ceased taking drugs and learned how to give themselves correct care they improved vastly and most of them were able to lead comfortable,

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useful lives. Hardened arteries can usually be softened and the blood pressure can generally be lowered to a point of safety.

In this book we shall not attempt to be technical. The object is to make the book helpful, not to attempt to display great erudition. Simple, natural knowledge is worth far more than scientific pretentions. We shall even eliminate technical names as much as possible.

Heart diseases are at times difficult to diagnose. Those without special training and experience will almost surely fail to learn what the exact trouble is. So we shall not go into great detail regarding technical matters, but shall pay special attention to the more valuable essentials, the chief of which are: 1, the real causes of

Curing Diseases of Heart and Arteries

these ills; 2, the significance of the various forms of circulatory diseases; 3, how to overcome them; 4, their prevention.

We shall speak only enough of symptoms to help in correcting the diseases. The mention made of the conventional treatment is for the purpose of pointing out the errors so that they can be avoided.

This point is so important that it deserves emphasis: It is usually easy to avoid diseases of the heart and arteries. When these ills are acquired, the individuals can in most instances live so that they become comfortable and able to do their work. Nature often rewards those who give themselves proper care with a complete cure.

The fact that an individual has

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undergone much "medical" treatment without benefit is no proof that a disease is incurable. There is nothing curative about medicines. Drugs only conceal pain and change the symptoms. The true healing forces are the vital powers inherent in the body, and they work for us when we give them a fair opportunity. Drugs are no part of nature's plan. They are artificial preparations which man uses to his detriment, and often to his ruin. Laxatives are the only remedies for which there is an excuse.

True health building is dependent on such natural means as physical activity, rest, sleep, thought, air, water and food. These are the elements that build body and mind; and these are the elements that build health, when properly used.

Curing Diseases of Heart and Arteries

Keep the body in good condition, and the heart and arteries will take care of themselves.

The Circulatory System

There is an old saying that "a man is as old as his arteries." This is true, for when the arteries deteriorate, the body does the same; if the important arteries give way, the body dies.

The blood stream is the transportation system of the body. It brings food, water and oxygen to every part, from the scalp to the toes. It carries away the waste from all parts of the body, and delivers it to the skin, lungs, kidneys and bowels to be excreted. If the blood supply in any part of the system fails, that part dies. If a large enough part in a

vital organ degenerates, the whole body dies.

Practically everything that goes into the making of the body has to enter the blood stream before it can be made a part of the body. The blood absorbs water and food and oxygen—the constituents from which the body is built—and distributes them wherever they are needed. So long as this distribution is balanced, and the waste is removed, there is perfect health.

One of the essentials of health is an effective circulatory system, well supplied with highly vitalized, pure blood. The arteries and veins must be in good condition or the blood can not freely circulate. Back of the arteries and the veins there must be a strong, steady, effective heart; and back of the heart there must be a

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sound digestive apparatus furnished with food and drink of good quality.

The vast majority are born with a good circulatory system, and it is easy to keep it in good condition. Through abuse diseases of the heart and arteries develop. Before considering the diseases of the heart and arteries, let us briefly view the healthy circulatory system.

This system is composed of the heart, the arteries, the capillaries and the veins.

The heart is the great pump of the body. It is a hollow organ made principally of very strong muscular fibers. It is surrounded by a double membranous sac, the pericardium. The heart is divided into the right and left compartments, which are again

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divided by a transverse partition, giving the heart four chambers.

The right side contains the right auricle, which is at the base of the heart and receives the blood from the great veins of the body; it also contains the right ventricle, which is at the apex of the heart and pumps the venous (impure) blood to the lungs. Between the right auricle and the right ventricle there is an opening for the onward passage of the blood; this opening is guarded by a three-leafed valve, called the tricuspid valve. The pulmonary artery, which carries venous blood to the lungs for purification, arises from the right ventricle.

The left side of the heart is similarly arranged into left auricle and left ventricle, the aperture between these chambers being guarded by a two-

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leafed valve, called the bicuspid valve. The left auricle receives the blood that has been to the lungs for purification, passes it into the left ventricle, which forces the blood to all parts of the body.

The heart muscle has a private blood supply—the coronary arteries. If these are degenerated or their lumen decreased in size the heart is improperly nourished, and the result is frequently an oppressive pain, accompanied by fear. This trouble is called angina pectoris. If the coronary arteries are plugged, the heart starves and death ensues.

The function of the heart is to contract and relax regularly, at all times. We call it the beating of the heart because a thump is produced every time there is a contraction. The

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pulse is based on the heart beat, and records the coming of a new wave of blood.

There is no standard pulse rate. With moderate activity the pulse in healthy adults will generally range between 60 and 85 beats per minute.

The arteries are the tubes that carry the blood away from the heart. In health they are strong and elastic. They are called arteries because the ancients believed them to be air tubes.

The arteries are made of three coats. The inner coat is quite smooth and largely composed of elastic tissue. The middle coat is principally muscular and elastic. The outer coat is fibrous and elastic. The elasticity aids the circulation of the blood. The further the arteries are from the heart the more they branch and the

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smaller they become. They end in minute vessels called arterioles, and these end in tiny, thin tubes, so small that the unaided eye cannot see them—the capillaries.

The capillaries empty their blood into minute veins. The veins grow larger and larger as they approach the heart, receiving tributaries from all sides, just as the Mississippi River increases in size on its way from Minnesota to the Gulf of Mexico.

So here we have the circulation in brief: The heart is the great central power or pumping station. The left side of the heart forces the blood into the arteries and the arteries distribute it to every part of the body; in its journey the blood gives away good food and oxygen; when it is deprived of its life-giving substances the blood

is gathered up by tiny vessels which conduct it to the veins; the veins take it to the right side of the heart, which pumps the blood to the lungs, where it gives off poisonous gases and receives oxygen in return. Now it is again pure arterial blood and is returned to the left side of the heart. There the circuit just described begins all over again.

If the heart stops beating for a few minutes it is difficult to start it again. Complete blood stagnation means death, for the blood carries the necessities of life to all parts of the body, and removes the poisonous wastes.

CAUSE OF HEART AND ARTERIAL DISEASE

Outside of accident, there is only one cause of disease, and it is living

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contrary to the laws of nature. It is natural and normal to be healthy. We become ill because of our errors of life. The general rule is that those have health who deserve it, and those have disease who have earned it.

This statement differs radically from the generally accepted beliefs. The majority think that disease is caused by external agents. Medical history shows that all kinds of theories have been advanced to account for disease, from magic and evil spirits of the ancients to the germs of the present day.

Let us face the truth.

We are the products of heredity, environment, and our own conduct. A very few are born so unhealthy that they must either live in poor health or die young; this condition is

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due to the sins of the parents. But inherited diseases are rare. Nearly all individuals have the inherent ability to live in health, so it is best to stop blaming our parents and begin to assume personal responsibility for our ills. Those who are healthy in youth can always remain healthy. The persons who develop diseases of the heart and the arteries after attaining full growth can blame themselves alone.

Anything that causes deterioration of the body may cause disease of the organs of circulation. I shall enumerate some of them, and this will immediately remove heart disease from the realms of mystery and place it where it belongs—a disorder easy to understand.

Shocks of any kind, if frequently

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repeated, will affect the heart. The shocks may be physical or mental. Plunging into very cold water, when the body is warm, is one form of shock.

Heart disease is rarely primary. It is usually based on some other disease. Rheumatism and syphilis are given as frequent causes, but these diseases are not the original causes; they are only links in the chain of causation. It is true that heart disease often follows rheumatism. At present the medical profession has syphilis on the brain, and gives it as the cause of almost all diseases. Heart disease often follows the diseases of childhood; this is partly due to the disease and partly to incorrect treatment.

Obesity or fatness predisposes to

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heart disease, for the excessive amount of fat forces the heart to overwork. The fat also occupies so much space around the heart that this organ does not have enough room. The fat chokes the heart.

Unbridled passions and appetites often produce heart disease. This includes all the passions, from anger to sex. Hate is no worse than extreme love.

Constipation is a predisposing cause of heart and arterial diseases. The constipated individual retains within his body waste matters and poisonous products which should be promptly cast out. When they are retained in the bowel, the liquid parts are reabsorbed and they poison the body. Some of these poisons help to harden the arteries, and they all make the

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body unclean. An unclean body degenerates, and the heart and arteries are included in the process.

Mental depression, fear, worry, anger, spite, hatred, jealousy, and all other negative emotions tense the heart and arteries, and poison the whole body. They also cause indigestion, which is one of the chief factors in the production of circulatory diseases.

Inactive skin may not seem to have anything to do with heart disease, but it has. When the skin functioning is below par some of the waste matters are retained in the body. So long as the system is sweet and clean heart disease is impossible.

Coffee, tea, tobacco and other drugs, arsenic, for instance, are prominent causes of heart disease. All of

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these articles are poisonous. There are tobacco hearts, and coffee hearts, and fatty hearts due to dosing with arsenic. Many of the coal-tar drugs (especially the headache remedies) cause heart disease.

Alcohol helps to produce almost any kind of disease, when freely taken, and it is responsible for many cases of heart and arterial degeneration.

Underexercise and overexercise both cause heart disease. Underexercise is not an active agent, but it causes sluggish circulation; sluggish circulation produces partial oxygen starvation; then the whole body fills up with impurities and in many cases the result is heart disease. Overexercise often produces heart strain and enlarged heart.

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Shallow breathing usually goes with underexercise. It is a cause of disease, heart disease included, because it results in partial oxygen starvation, with subsequent poisoning of the whole body.

If the drinking water is too hard, it will cause mineral deposits to form in the body. This is very bad, for some of the deposits almost surely form in the arteries, and then we get arteriosclerosis. After the body attains full growth it would be a good thing to drink either cistern water, distilled water, or some water that contains very little mineral matter.

Excessive salt eating is a contributing cause of all kinds of hardening, and it affects the circulatory organs. We use salt to pickle dead flesh. Because we are alive we can not pickle

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our own bodies to the same degree, for the skin and the kidneys overwork in order to rid the body of the excessive salt intake, but much salt helps to produce early hardening of the tissues of the body and premature old age. Hardened tissues are weakened tissues, for the blood can not circulate freely in them. Hence they easily yield to disease.

Improper eating is the principal cause of heart and arterial disease. It is more important than all the rest of the causes added together, and it is mentioned last for the sake of emphasis.

Undermasticating, too rapid eating, overeating, mixing too many foods in the same meal, and poor cooking are at the source of nearly all cases of degenerated heart and arteries.

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These mistakes cause indigestion. Indigestion produces abnormal acids, gases and poisons in the digestive tract. These products are absorbed by the blood. They make the body too acid and poison it. Then we have autointoxication, and toxemia—that is, poisoning of the entire body, the blood included. After this state has existed for a while, some kind of disease must come. It is according to natural law that a poisoned body must show signs of disease. It is not always heart disease or arterial trouble, but frequently this is the form that the disorder takes.

Another serious mistake is to live so exclusively on the refined staples as we have been doing. White flour products, refined white sugar, salted meats, and potatoes that are peeled

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before cooking are nourishing, but they have hardly any health value. Their health-producing natural salts have been largely removed.

Many other factors could be mentioned, but it is not necessary. The cause of all diseases of heart and arteries is living so that the body must degenerate. Our bad habits produce our diseases. Bad habits are simply mistakes. Smoking, overeating, eating fried potatoes, drinking coffee and worrying are some of the common bad habits to which America is addicted.

What causes apoplexy in one may produce Bright's disease, or rheumatism, or chronic bronchitis, or eczema, or any other disease in some other individual. We do not know exactly why this is true, but true it is.

Doubtless each person has some vulnerable spot, and disease tends to settle there if too many errors are made in the manner of living.

Diseases of the heart and of the arteries, and of every other part of the body, are caused by errors of mortal mind and mortal body. When we come to the treatment, you will find that it consists in avoiding the mistakes and doing the right thing.

COMMON FORMS OF HEART DISEASE

As a rule it is easy to detect the presence of heart disease, but it is sometimes difficult to tell the exact form of the trouble. Correct diagnosing requires special training. I shall not attempt to go deeply into diagnosis, but merely sketch an outline

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of the various common forms of heart disease.

In diagnosing we make use of various procedures. In examining the heart we get most information from auscultation, that is, listening. We can use the unaided ear, but we get clearer details through the employment of an instrument called the stethoscope. By carefully listening we can tell if there is roughness within the heart cavities, or if the valves are defective. Roughness and leaking heart valves give rise to queer sounds.

Percussion means tapping. We tap on the chest wall with the fingers to learn the size of the heart.

Systole is contraction of the heart to force the blood onward.

Diastole is relaxation of the heart,

or the period in which it fills with blood.

Remembering the meaning of these four words—auscultation, percussion, systole, and diastole—it is rather easy to understand the diseases of the heart.

Simple acute endocarditis.—This is an acute inflammation of the lining membrane of the heart. It is not an organic disease at first, but it often degenerates into chronic endocarditis, which causes changes in the structure of the heart. An organic disease is one in which there is an abnormal structural change of some organ or organs.

This disease often follows articular rheumatism. It is very severe in children, the rheumatism sometimes producing such extreme pain and ten-

derness that they can with difficulty be handled. Pneumonia, tuberculosis and scarlet fever, as well as other febrile conditions, are often followed by acute endocarditis. Various kinds of bacteria are frequently present, but the bacteria are the effect of the bodily degeneration, not the cause.

One of the symptoms is pain in the region of the heart, but this is not always present. The valves of the heart and the lining membrane of the heart chambers are roughened. This causes systolic murmurs. Fibrinous growths form on the membrane lining the heart chambers. If these break away and lodge in the lungs, brain or heart, the result will be great inconvenience and sometimes death.

The ordinary treatment is a generous diet of liquid food, and various

drugs are used to stimulate the heart. The most popular drug is digitalis. Rest in bed is prescribed.

The rest is correct treatment, but the medicating and generous feeding are mistakes, as we shall see when we take up the treatment.

Ulcerative endocarditis or septic endocarditis is a serious and frequently fatal malady. It occurs in other severe diseases where there is extensive physical degeneration; generally in fevers, such as pneumonia and puerperal sepsis.

The valves of the heart are most affected. There is ulceration, and the waste and poison are washed into the blood stream. The poisoned blood often sets up a new point of irritation and degeneration in some other part of the body. The particles of waste

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may be large enough to block some important blood vessel (embolism). If this vessel happens to be in the brain or in the heart muscle itself, it is a grave condition.

The symptoms are frequently obscure, so much so that the heart complication may not be suspected. The other troubles are so severe that the heart receives little or no attention.

The temperature flutters up and down, as it always does when pus gets into the blood. The other symptoms depend on the condition of the body, that is, the condition on which the septic endocarditis is based. Prostration, headache, delirium, anemia, emaciation and Bright's disease are some of the signs and symptoms frequently present.

To call septic endocarditis a sepa-

rate disease is a mistake. It is one of the results of a general bodily degeneration so severe that not a single organ escapes contamination. Septic endocarditis never occurs in a healthy body.

This disease sometimes results in excavations in the heart walls. Sometimes it thins the valves. Again it may cause perforation of one or more valves—a serious condition. It always injures the lining membrane of the heart.

The usual treatment is liquid food, heart stimulants and rest in bed. The rest is the only correct part of the treatment. No matter how treated, the mortality is great, for the condition indicates advanced systemic degeneration.

Chronic endocarditis is an inflam-

mation of the internal lining membrane of the heart, of long standing. It may be the continuation of acute endocarditis or it may start as a mild inflammation or degeneration that is not noticed until it has assumed chronic form. It may affect the whole heart or be localized to one side or to one chamber. It generally has its seat in one or more of the heart valves. The favorite location is the mitral valve (between the left auricle and the left ventricle). The left side of the heart has the hardest labor to perform, and this is doubtless the reason why this side is most frequently diseased.

Chronic inflammation results in the formation of fibrous tissue (scar tissue). This contracts and distorts the valves. Sometimes the edges of the

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heart valves curl up, and then they are unable to close completely. Sometimes the cords which control the valves are shortened, and then the valves are unable to close. Sometimes, instead of being free and mobile, the valves form a funnel, the small end pointing in the direction of the blood current.

All these abnormal conditions have the same results. They lessen the efficiency of the valves of the heart, which are unable to close completely. When these valves can not close as they should, the blood, instead of rushing onward, partly regurgitates, that is, flows back. This reduces the arterial pressure and the amount of oxygen taken into the body. It causes stagnation of venous blood. Even the arterial stream becomes

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sluggish. There are swellings in various parts of the body, due to the excessive amount of serum escaping from the blood vessels. This we call dropsy. A favorite seat for dropsies is the lower extremities, showing at first about the ankles. This damming back of the blood may cause piles, enlarged spleen and enlarged liver, or it may fill the lungs so full of blood that the breathing is labored. It may even cause cardiac asthma.

Chronic endocarditis usually begins before the age of thirty, and the effects remain for life.

Rheumatism is the most frequent precursor. Do not call rheumatism the cause, for the real cause of the trouble is the same as the cause of the rheumatism, that is, a mode of living that causes an accumulation

of waste in the body. Chronic endocarditis often follows other febrile conditions.

Another factor is physical overstrain, either in work or in play. Frequent occurrence of violent emotional disturbances also injures the heart. Shocks are another cause. Anything that lowers the tone of the system may cause chronic endocarditis.

Aortic regurgitation.—The great artery, the aorta, arises from the left ventricle. At the origin of the aorta we find the semilunar valves; their function is to prevent a back-flow (regurgitation) of blood from the aorta into the heart. In aortic regurgitation the valves fail to perform their duty. Instead of coursing onward, a part of the blood returns into

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the left side of the heart. The effect is a damming back of the blood, the effects of which we discussed under chronic endocarditis.

The heart has to do extra work, and the result is an enlarged heart. The heart always enlarges. Sometimes it merely dilates, which it is forced to do because the blood surges into the chambers of the heart both from the outlet and from the inlet. This puts the heart on tension and it yields, one or more of the chambers enlarging.

Nature tries to remedy this by thickening the heart walls. This thickening is called compensatory, and for a while after it takes place the heart is strong and performs its work well in spite of defective valves.

The heart of a normal adult weighs

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about eight or nine ounces. Sometimes it is enlarged so that it weighs from thirty to fifty ounces, and is then called ox heart (*cor bovinum*). The wall of the left ventricle is the part most frequently affected.

After a while there is generally further dilatation with more thickening of the heart walls, and sooner or later some part gives away.

The chief sources of this trouble are: Diseases of other parts of the body, other forms of heart disease, violent emotions, overstraining in excessively hard work or violent exercise, repeated shocks, such as frequent plunging into very cold water, the use of drugs and chemicals, or anything that produces irritation and raises the blood pressure. Alcoholic and sexual overindulgences are prom-

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inent factors. Accordingly we find the male sex most subject to this disease.

Competitive athletics early in life are to be condemned if they are so severe and prolonged that they cause overstrain. Boys do not stand prolonged strain well. They are too tender and unformed. Sometimes one race, or one match in which they put forth a supreme effort, ruins a life. Marathon races for boys should not be allowed. What possible good can it do them to trot on mile after mile until they are so exhausted that they collapse at the tape, sometimes vomiting, sometimes bleeding from mouth and nose? Children should be active, but healthy boys are so energetic that they lack balance. It is the place of

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the parents to supply a little common sense.

College athletes are notoriously short-lived. One of the reasons is that they overtrain and overstrain in severe competitions. Then after leaving college they give themselves no special care.

The symptoms of aortic regurgitation are often vague and indefinite, in the beginning. Difficulty in breathing after exercise, headache, dizziness, ringing in the ears and flashes of light before the eyes are quite common. Pain in the region of the heart, radiating to the shoulder, may also be present.

Later the breathing becomes very labored, especially at night. Some of the patients can not lie down. If they do, the blood has a tendency to

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remain in the lungs and there is a sensation of suffocating. At this stage the symptoms are those that naturally come from a partial blocking of the circulation. The legs become dropsical, likewise the abdomen. The excessive amount of blood in the lungs causes cough and often bloody expectoration.

This condition causes depression, nervousness and fear. The pain is troublesome.

On physical examination we find enlargement of the heart, a foreign murmur while the heart is expanding (diastolic murmur), and a peculiarly sharp, collapsible pulse. The blood pressure varies greatly in systole and diastole.

Mitral regurgitation.—The mitral valve (bicuspid valve) is on the left

side of the heart, between the left ventricle and the left auricle. The blood should not return from the ventricle to the auricle, but in mitral regurgitation the valve is unable to prevent the blood from rushing back.

The results are similar to the effects of aortic regurgitation. The blood flows backwards and becomes quite stagnant. The heart enlarges. The symptoms are about the same as in aortic regurgitation.

Mitral regurgitation is the most common of all chronic heart diseases. The causes are the same as those of aortic regurgitation. The most common immediate cause is endocarditis.

The outcome depends largely on the conduct of the patient. If he is prudent he can usually live for many years in very fair health and comfort,

and sometimes there are recoveries when the patients seem beyond all hope of health.

If the patient is very imprudent, the end generally comes soon. However, many have heart disease for years. Some develop heart trouble in childhood, yet live long. They are careful.

Let us illustrate: About two years ago a friend of mine asked me to examine a gentleman who was suffering from a pronounced case of mitral regurgitation. His physician was giving him medicines, but never told him anything about his diet. So I felt that I was not interfering when I gave him this advice: "Be moderate in your eating and drinking, and never eat one morsel of food if you are not hungry." About a week

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thereafter he had no desire for food, so he called up his physician and told him that he was not hungry and he thought it best not to eat. The physician was shocked at this sensible talk and said: "Of course you must eat. You have to eat to keep up your strength and nourish your heart. Always eat a hearty meal in the evening."

The gentleman ate a big meal of beef, potatoes, bread and butter and other food—and was dead within fifteen minutes. He left several small children and a wife, and that was all. He could have lived for years. This I know because individuals in his condition who follow my instructions do live in comfort for years. More of this when we come to the treatment.

The symptoms of mitral regurgita-

tion are very pronounced. The arterial blood is not forced onward and the result is a partial obstruction of the venous flow. The patient becomes blue physically and depressed mentally. There are signs of internal stoppage of venous blood, such as enlarged liver, enlarged spleen, oppressive coughing and difficult breathing. The ankles become drop-sical; the dropsy travels upwards and finally the abdomen fills with water.

The left side of the heart enlarges (hypertrophies). There is a systolic murmur which is transmitted to the armpit and to the shoulder blade. The pulse is rapid, irregular and lacking in volume.

In severe cases it is impossible to lie down, for the blood has a tendency

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to remain in the lungs and then the patient can not breathe.

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Digitalis, strychnin, caffeine, nitroglycerin and the salts of ammonia are the favorite drugs. They are not curative.

The right side of the heart does not work hard. Hence this side is rarely diseased. When the right side is affected, the left side is usually much worse. The results are about the same, so it is not necessary to discuss diseases of the right side of the heart.

Stenosis is a reduction in size of one of the passages. As applied to the heart, it is the reduction in size of one of the apertures guarded by valves. When stenosis occurs it requires more than normal force to send the blood onward. Consequently the heart enlarges or dilates.

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The small aperture partly blocks the onward passage of the blood, and we have the same damming back of blood as in regurgitation. The symptoms are the same as in any case of blocking of the blood stream at the center of circulation.

The immediate cause of stenosis is endocarditis; the real cause is the condition that causes the endocarditis.

Hypertrophy of the heart is an increase in the size of the heart structure, with increased weight. Hypertrophy means overgrowth. This is due to anything that causes cardiac overwork. Hence regurgitation of the blood, stenosis, overwork and overexcitement help to bring about this condition. Overeating and overdrinking are the chief basic causes of heart hypertrophy.

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It may produce no special symptoms at first, but there is a limit to the size any organ can reach above normal. When overdevelopment goes beyond that limit the next step is degeneration. An oversized heart will in time show weakness.

The left ventricle usually suffers most, but the right ventricle and the two auricles are not exempt.

In the beginning the symptoms are not pronounced. The excessive blood pressure causes dizziness and headache, and sometimes the heart palpitates. The condition can be diagnosed by percussion and auscultation (that is, tapping the chest wall and listening). The heart impulse is too powerful, and the apex beat is abnormally low. The dull sound elicited by tapping over the heart

covers too great an area, showing that the heart is too large.

Dilatation of the heart is an abnormal increase in the size of one or more of the chambers and is due to the same causes as hypertrophy, excessive burdens placed on the heart. It is the stage of abnormality that follows hypertrophy. The heart weakens as it dilates and the blood stream stagnates. Insufficient oxygen is carried into the blood and soon the entire body is filled with waste. Weariness and physical let-down follow. In time the heart gives up the struggle.

A prominent symptom of dilatation is heart palpitation. The pulse is generally small and irregular, showing waning heart power. The apex beat (located in the left lower

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anterior part of the chest) lacks power. The brain is poorly supplied with blood, the result being dizziness, headache, sometimes collapse, and even insanity.

Because the blood is dammed back, coughing and difficult breathing are common. The blood stagnation favors catarrh of the various abdominal organs.

The heart seldom ruptures, but when this occurs it is nearly always a fatal accident. Ruptured heart comes only in cases of extreme degeneration or indiscretion, or both.

Cardiac thrombosis is a condition in which foreign bodies form within the heart chambers. These bodies vary much in size. So long as they remain within the heart they do no special harm, unless they are very

large. Their tendency is to break away and escape into the general circulation. This is very serious. One of these bodies, sometimes many of them, may block the circulation in the heart, brain, lungs or some other part of the body, cutting it off from its nourishment.

The condition is due to severe systemic diseases, and it never begins to manifest in healthy individuals. It is almost impossible to diagnose it. It is generally discovered after death.

The prevention is to live so as to have health.

Fatty heart comes under the head of obesity (fatness) and fatty degeneration of the heart muscle itself.

In obesity the heart muscle remains intact, but the organ is covered with an excess of fat, and there is

much fat deposited between the muscle fibers. This is due to corpulency of the entire body. The cure is easy, and will be complete if the treatment is faithfully carried out. Live properly, quit overeating in general, and overeating of the fat-forming foods (starches, sugars, oils and fats) in particular; then the body weight returns to normal, and the heart is included in the process.

Those who have fatty hearts are short of breath. All the cavities of the body are crowded and choked by the excessive amount of fat. Not only the lungs pant for more oxygen, but the whole body does likewise.

In fatty degeneration of the heart, there is an actual degeneration of the heart muscle, fat taking the place of the muscle fibers. Ordinary heart

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muscle is quite free from fat, but in fatty degeneration the fat gets into the heart walls, and many of the muscle bundles are turned into fat. This is the real fatty degeneration.

When true fatty degeneration takes place, the destroyed muscle fibers are lost. Muscles turned to fat never regenerate. Muscles are a high-grade bodily tissue; fat is a low-grade tissue. The rule is that the high-grade tissues can turn into low-grade tissue, but the process can not be reversed, at least not on a large scale. The higher the form of the animal, the less the regenerative ability.

Two drugs are prone to produce fatty degeneration—arsenic and phosphorus. Other diseases in which there is progressive degeneration of

the whole body, such as cancer and tuberculosis, cause this trouble. It generally comes in advanced years. It is a disease that frequently follows toxic troubles. Alcohol is often a factor.

At first the symptoms are not very pronounced. After the disease is well established the heart often beats too rapidly, but the opposite may also be true. There is irregularity of the heart. The physical and mental powers are decreased. Difficult breathing, due to the slowing of the blood stream and weakening of the heart, is common. Angina pectoris and nervous storms are unpleasant symptoms. Sometimes sudden death occurs. If the trouble is not arrested in time the weakened heart is compelled to give up the struggle.

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Simple obesity of the heart is always curable. Fatty degeneration can almost always be arrested. Of course, if it is based on advanced tuberculosis or cancer, recovery can not be expected. If the causes are allowed to continue, the degeneration grows progressively worse. The treatment for simple obesity of the heart is to reduce the weight of the body. The treatment for real fatty degeneration is the same as in any case of chronic heart disease—to live so that the heart is not overstimulated and not compelled to do extra heavy work.

Chronic myocarditis is inflammation of the heart muscle itself. The inflammatory action causes toughening of the heart wall and loss of tone

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because fibrin is deposited. The heart function is impaired.

The symptoms are about the same as in fatty degeneration of the heart, except that the general rule is a slow pulse. The heart action is weak and often irregular. The weakening of the organ results in dilatation.

The causes are wrong living and serious disease. It rarely occurs before the age of forty.

The cure consists in removing the cause and keeping it removed. By getting the body into good condition the disease is checked, and if the trouble has not advanced very far the heart may be greatly strengthened with resultant improvement in function.

Pericarditis is inflammation of the membranous sac enveloping the heart.

It is practically always due to disease in other parts of the body or injury of the chest. There are different forms and the symptoms vary with the kind of pericarditis. The disease often becomes chronic. When there is but little exudate into the sac, it is called dry pericarditis. When there is much exudate, it is called purulent, hemorrhagic, or sero-fibrinous, depending upon the character of the exudate—pus, blood, serum or fibrin.

In dry pericarditis and in the beginning of all forms of the disease, there is much pain, due to the friction between the two surfaces of the pericardial sac. The pain is in the region of the heart. If the exudate is great it presses on the esophagus and the wind pipe, which interferes with respiration and swallowing.

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The exudate muffles the heart sounds, and may cause partial blocking of the blood through pressure. It also increases the area of heart dullness.

Acute pericarditis with pain and fever should be treated like any other acute fever—rest in bed, plenty of fresh air, pure water, no food, either liquid or solid, until the fever and pain leave, and good sensible care in general, not forgetting the importance of keeping the bowels clean.

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Other forms of heart disease could be mentioned, but the most important ones have been discussed. All heart disorders have about the same causation.

The treatment of all acute heart diseases is about the same.

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The treatment of all chronic heart disorders is about the same.

To treat the heart and do nothing else is useless.

In discussing the causation of heart troubles, other diseases have been given as causative factors. This is the usual medical way, but it is not correct. It is convenient. The truth is that rheumatism is not a basic cause of heart disease, but rheumatism (and various other disorders) is caused by the same bad habits that produce the heart disease. Other diseases are links in the chain. Rheumatism, for instance, is treated with much medicine, and this drugging abuse helps to produce heart disease. Sometimes the drugs are the only cause of heart disorders.

Children sometimes are born with

defective hearts. Outside of these cases and a few accidents there should and would be no heart disease if people lived properly and used no drugs. The heart is singularly resistant to disease, but the abuse (wrong mode of living) is often so great that this vigorous organ is brought into a state of degeneration.

THE OUTLOOK IN HEART DISEASE

What are we to expect in cases of heart disease? The prognosis depends on the severity of the disease, the condition of the patient and the treatment.

In acute heart disease correct treatment will generally save the individual's life.

Acute purulent endocarditis (acute inflammation of the lining of the

heart with pus formation) is fortunately a rare condition. When it does occur, no one can tell what the outcome will be, for when pus freely enters the blood it is an indication of very severe physical degeneration, and a fatal outcome is not a cause of surprise.

But the ordinary acute heart troubles should as a rule end in recovery; if the disease is very severe and the patient is weakened and the blood very impure, the heart may be permanently injured. That is, instead of ending in complete recovery, the acute disease runs into chronic form.

Chronic heart disease is more common than the acute form. The most common heart trouble is chronic endocarditis of the left side of the heart, generally manifesting in leakage of

the mitral valve (the valve between the auricle and the ventricle of the left side of the heart). When the mitral valve has leaked for a long time, it is generally believed that practically nothing can be done. Recovery is then thought to be out of the question. This is a mistake. It is true that drugs will not cure this condition, but in many instances correct treatment will be followed by complete recovery; that is, the heart will stop leaking and the patient will feel well and strong. If the patient is not in dying condition he can always be improved. The general rule is this: Nearly all patients with chronic heart trouble can be greatly improved, and many of them can entirely recover, even when they have

reached the stage that is considered incurable.

To show what correct treatment will do, after medical treatment has failed, I shall tell you about a few cases taken from my own practice, giving the condition of the patients, the verdicts of the physicians who preceded me—all medical doctors in good standing and of good repute—and the outcome when rational treatment was followed. I shall give the most unfavorable cases first:

1.—Mrs. A., aged fifty-five. Swollen tight with dropsy from feet to the region of the heart. Breathing with difficulty and unable to lie down. Very bad case of Bright's disease in addition to the heart disease. Pulse rate, 135 beats per minute. The valves on the left side

of the heart had completely given way, and it was evident that Mrs. A. could not recover. A noted heart specialist had said that she could not live to see another day. The husband was very anxious to have Mrs. A. live as long as possible, so I put her on a complete fast for three days, allowing her to sip all the water she wished, small quantities at a time. After that she was given a simple diet. At the end of three days she was quite easy and could recline—something that she had been unable to do for months. Her pulse rate went down to 105 beats per minute. She was able to walk about the house and even do a little work. After living in comparative ease for two months she died. Please remember that she was supposed to die within

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a few hours of the time the specialist last saw her.

2.—Mrs. B., aged twenty-nine. Dropsical condition and heart symptoms the same as described in Mrs. A.'s case. Mrs. B. had had heart trouble more than twelve years, and it dated from a severe attack of rheumatism. She was unable to walk across the floor, and it was believed that she could not possibly live two weeks. At the end of three weeks the dropsy had nearly vanished, and her heart action was greatly improved. But the valves were so extensively injured that complete recovery was out of the question. At the end of five weeks she was able to walk from six to ten blocks, and she could climb the stairs. She was under my care about seven weeks,

improving all the time. I told her that with care she could long live in comfort, but she felt that she was unable to pay my modest fees, though she was a rich woman, so she stopped taking advice before she knew enough to take good care of herself. She spent a whole summer in comfort, and then she grew careless and had a relapse. She did so well in the beginning that she would not continue to follow correct advice—and there are many like her. The lady is still living, though it is now eleven months since she was supposed to be unable to live longer.

3.—Mr. C., aged twenty-two. When twelve years old he had diphtheria, and this left him with a leaky heart. He had the usual treatment, and every physician that he consulted

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told him that he would retain the leak in the heart as long as he lived. He had used drugs, as prescribed, for ten years. He was chilly, weak and nervous. I put him on a simple but nourishing diet, and taught him how to care for himself in every way. At the end of three weeks there was no sign of leakage, and the young man felt well and strong. He came to me for examination, off and on, for several months, and the leakage did not reappear. He grew strong and cheerful, and his health and spirits were so improved that he seemed like a different individual. At the end of ten months I lost trace of him, but he had no trouble in that time. He made such a splendid recovery because his valves were not badly injured. He had been in the habit of eating about two

times as much as he needed, and he drank too much water and coffee. When we corrected these errors, which were causing his trouble, he recovered.

4.—Mr. D., aged forty-nine. Could walk only sixty or seventy feet without resting. Regurgitation of blood in left side of heart was extreme. Judging by the examination, the mitral valves seemed ruined. Three physicians had agreed that he had only a few days left on earth. This gentleman said that he would do anything to get well, and he meant it. He quit tea, coffee, alcohol—all his bad habits. He lived for a while on nothing but juicy fruit. He began to mend in a few days. At the end of four months he could walk as well as anybody, and took pleasure

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in tramping five or six miles without stopping. Even with the best instruments it was impossible to detect any heart leakage. He made a perfect recovery, and remained well all the time that I knew him thereafter, about a year. He knew how to live so as to remain well. He said that he felt better than at any previous time.

These instances show that much can be done when it is generally believed that nothing can be done. It is true that if a person with heart disease continues to live wrong, the trouble will grow worse and worse, and finally become incurable. But it is also true that with proper treatment most of the cases can be vastly improved, and many of the so-called incurable ones will recover.

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An enlarged and dilated heart will never return to the normal state, but one can live so that it will not cause great inconvenience, unless the heart is in an advanced stage of degeneration.

In fatty degeneration of the heart, the lost muscles are never replaced, and the heart is weakened. But right living will help to stop the process of degeneration. It will also keep the blood pressure at a low enough point to enable the heart to work without undue discomfort.

Give the body good care, and the prospect in the average case of heart disease is good. But drugs can not cure heart disease. They can make the beating slow or rapid, but the effect is temporary and often harm-

ful. Intelligent care of the body will often succeed where other means fail.

TREATMENT OF HEART DISEASE

Conventional treatment.—Rest is generally prescribed, and that is correct in severe cases.

Heart stimulants, the chief being digitalis, are also prescribed, and this is a serious error. In heart disease the organ is already too heavily burdened, and it is folly to add to the load. Think of prescribing rest and heart stimulants at the same time. If there is stimulation, there must be a following reaction of depression. The more stimulation the sooner the heart wears out.

Take no drugs whatever for the heart, unless you are anxious to hasten the end. It is true that we

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can give drugs that will mask the condition and thus relieve it temporarily. We can give drugs to relieve dropsy; we can give others that will relieve a headache; we can give remedies to overcome the oppression in the lungs and the cough; we can give drugs that appear to help nearly every symptom.

The seemingly beneficial effects of drugs are temporary. There is nothing permanent about their apparently beneficial action. While they seem to cure they are really causing further physical degeneration and lessening the chances of recovery. If there is no hope of recovery and drugs bring relief to body or mind, then there is no objection to their use, but so long as the patient has a chance to recover, drugs are a hindrance.

It is usual to feed heavily "to keep

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up the strength of the heart." This kind of treatment kills many persons every year. If the heart trouble is acute and accompanied with pain and fever, nothing should be given except water until the pain and the fever vanish. All forms of chronic heart disease call for moderate feeding. It is often a fatal error "to keep up the strength of the heart" through forced feeding. Overeating and overdrinking raise the blood pressure and compel the heart to work too hard. This increases the severity of the heart disease and hastens death.

If the patients are medicated and fed heavily in serious cases of heart disease, and this is the usual treatment, the chances of recovery are not good. The body has no opportunity to regain balance when it is burdened

with an excessive amount of food and with superfluous drugs, many of them very poisonous.

General principles of correct treatment.—In heart disease the object should be to relieve the overstrain on the heart until the organ can readjust itself. Then the individual should be taught to live so that the heart is not overworked.

Healthy persons can sometimes afford to rise to the heights in performing their duties, and pay for this by a temporary sinking below the usual level, which is the reaction. But those who have organic heart disease have to be careful about such things. They have to live rather calmly, both physically and mentally. Excitement of mind or excessive effort of body may prove fatal.

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The curative powers are within the body. They can not be supplied from without. Hence the fallacy of using drugs for curative purposes. The body cures itself if it is supplied with the right kind of food, drink, air, activity, hygiene and environment, providing a cure is still possible.

Those who live as they should, carrying a clean tongue, a clear eye, active bowels, and a pure blood stream do not acquire heart disease. Incorrect eating habits are the cause of most cases of heart trouble. Abuse of appetites and passions aids in building the trouble.

To avoid heart disease, be moderate in all things, be moderate physically and balanced mentally.

We should live so as to prevent

disease and degeneration. Every case of acquired heart disease is a serious mistake, a mistake that is due to living contrary to the laws of nature. Study the simple laws of nature as applied to the human being, observe them, and thus avoid heart troubles.

When the disease has been acquired, the cure that is safest and surest results from following the laws of nature.

Correct treatment of acute heart disease.—The treatment is very simple. The less treatment the better.

The first requisite is rest. Have the patient remain quiet in bed until the acute attack is over, without anything to eat. The drink is to be plain water, and the patient should not be urged to drink. Let him take

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what he desires to keep comfortable.

The object is to keep the blood pressure low enough so that the heart can regain tone. Also to allow the system to cleanse itself thoroughly of waste so that the blood will become pure. The purer the blood the sooner health will be restored. Nothing cleanses the blood so quickly as a complete fast.

If necessary, keep the patient quiet in bed, fasting for ten or fifteen days. During this time give an enema, daily at first, and after a week or ten days every other day. If there is any tendency to strain while the water is passing out of the bowel, use a rectal tube inserted about six inches. This is far different from a colonic tube, which is of no special value. The rectal tube is of large caliber and is

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used to allow the fluid contents of the lower bowel to flow out freely.

Be sure that the feet are kept warm. If they have a tendency to be cold, which they frequently have, supply artificial heat in the foot of the bed. Be careful not to burn the feet. In dropsical conditions, sores heal with great difficulty, and dropsy frequently accompanies heart disease.

If there is any tendency for bed sores to develop, change the patient's position often enough to avoid them, and apply a solution of half alcohol and half water to the threatening spots.

The entire body, from neck to feet, should be rubbed daily, at least two times. This increases the surface circulation and thus takes some of the load off the heart. It also improves

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the condition of the skin, which helps to purify the blood. Those who are not accustomed to rubbing sometimes do it so vigorously that they remove patches of skin. Be more moderate.

If the body is so sore that rubbing causes pain, omit it. Torturing treatment is not justified. Use good sense.

If heart trouble is severe, give no tub baths, but sponge with tepid water in a warm room. Follow with friction. A sponge bath may be given daily.

In short, the proper treatment for acute cases where pain and fever are present is: No food until the acute manifestations have subsided, water in moderation, cleanliness of skin and bowels, rest, comfort, proper amount

of heat, fresh air and cheerful surroundings.

The last mentioned is very important. Heart disease is a cause of great anxiety to the sufferer. If the family and attendants, including the physician, become long-faced and doleful, the sadness reacts on the patient. Panics in the sick room are very harmful in all diseases, and especially in heart disease, for they are a form of shock and raise the blood pressure. Nervous persons sometimes work themselves into such tension that there is danger of a fatal issue.

Food and drink increase the blood pressure, and this is the reason food is forbidden and drink is to be taken in moderate quantities.

When the acute manifestations are

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over, begin to feed on a light diet. For five or six days this should consist of such articles as the following: Broths, milk, buttermilk, juicy fruits, and succulent vegetables either cooked or raw. Then add toast, eggs, and the lighter forms of meats, such as lamb and chicken.

Concentrated starchy foods should be taken but once each day in the beginning. (For a list of starchy foods, and all other kinds of foods, see Food Classification in the back of this book.)

Gradually increase the feeding until the patient is living on balanced rations, which will be mentioned in greater detail when we discuss the treatment of chronic heart disease.

All the conventional drugs, including tea, coffee, tobacco and alcohol,

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are to be avoided. All of them help to cause the heart disease, and their use after the disease is established tends to make it worse.

Let us summarize the correct treatment of acute heart troubles:

1.—No food, liquid or solid, until the pain and the fever have disappeared.

2.—Give what water is desired, either warm or cold.

3.—If the patient is not too sore and sensitive, give two or three dry rubs daily.

4.—Give a sponge bath every day. If there is much fever, sponge the body with an alcohol solution, half alcohol and half water.

5.—Keep the bowels open with either enemas or mild cathartics.

6.—Make the patient comfortable,

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and let there be plenty of fresh air, but keep the feet warm.

7.—Complete rest in bed is indicated. It is better to rest a few days more than necessary than to have the acute heart disease turn into the chronic form through premature exertion.

8.—Let the people who come in contact with the patient be cheerful.

9.—After the pain and the fever have vanished feed the simplest and lightest kinds of foods for a few days, as already outlined. Then gradually increase the feeding.

After all, the treatment of acute heart disease is merely good sense applied. It is neither difficult nor complicated. It can be summed up in: Rest, warmth, comfort, water, clean-

liness without and within, and fresh air, mixed with cheerfulness.

Correct treatment of chronic heart disease.—When certain changes take place in the heart there is no possibility of a return to normal. A fibrous condition of the heart can not be remedied, though further progress in that direction can generally be checked. The same is true of most cases of real fatty degeneration. Muscles can degenerate into fatty substance, but fat can not turn into muscle.

The problem is to stop the degeneration, to stop the progress of the disease. Treat the patient so that the narrowed passages of the heart, the injured walls and valves, and the roughened lining membrane will not grow worse. Treat him so

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that the blood pressure is kept within bounds.

This means that the patient must be educated into health. True, a badly damaged heart will never be what it used to be, but it can do its work comfortably and efficiently, so efficiently that the patient will not know that he has a heart, so long as he is prudent.

The eating should be such that the blood stream remains pure. This necessitates the use of either fresh raw fruit or fresh raw vegetables, or both, every day. These patients must eat all concentrated foods, such as meats, breadstuffs and potatoes in moderation. The meats, which are both food and stimulant, are also disease-producers when eaten to excess. The starch intake must be moderate, for

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if starches are eaten to excess there is indigestion with formation of much gas and acid; this increases the severity of the disease.

Every morsel of food should be thoroughly masticated. Starchy foods must be given special mouth attention, otherwise they ferment and form gas. This causes upward pressure, disturbing and distressing the heart.

The routine eating should be as follows: One fruit meal a day; one starchy meal a day; and one meal containing concentrated protein each day. We shall give definite menus later. The smaller the variety of food at each meal and the better the food is masticated, the better the patient will fare.

All stimulants must be avoided.

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Excitement is also to be avoided. It may raise the blood pressure to a dangerous point. Those who have heart disease have to rule their appetites and passions instead of being ruled by them. It is necessary to cultivate equanimity.

To exercise violently is folly. Exercise in moderation. Also work in moderation. Walk and take passive exercises, but avoid overstrain and violence, both physically and mentally.

Keep the bowels open. Straining at stool may raise the blood pressure to a point that will rupture an artery. Instead of straining at stool, use enemas or some form of mild cathartic. Correct feeding generally regulates the bowels.

The fluid intake is to be moderate.

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Those who avoid overeating and do not use too highly spiced and seasoned foods do not desire an excessive amount of fluid. Use very little salt. Drink slowly what water is desired. Through slow drinking the thirst is satisfied with less fluid than if the drinking is rapid. It is not necessary to deny one's self water, but it is wrong to drink any kind of fluid to excess.

Keep the surface circulation active. By so doing the burden on the heart is lessened and the general health is improved. Sponge bathing and shower bathing, followed with dry rubbing, will accomplish this. The dry rubbing without bathing will also do it. If the heart lesion is bad, avoid long, severe baths. Take no

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baths that are cold enough to produce shocks.

By all means keep the feet warm. Friction to the lower limbs will produce a circulation active enough to keep the feet warm, in many cases. Sometimes artificial heat is required.

The best treatment is to get the body as nearly as possible into balance, and this can be accomplished through correct dietetic, hygienic and mental care. Correct care will bring cures to many who have been given up as incurable.

To medicate is folly.

We have given the general plan of treating the average case of heart disease. Let us summarize it so that it is easily grasped, and let us go into detail about the feeding.

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1.—Keep the mind serene, avoiding mental excitement.

2.—Also avoid all physical violence.

3.—Walk and take other exercise in moderation. Increase the exercise as you grow in strength.

4.—Give the surface of the body one or two dry rubs every day.

5.—Shower and sponge baths are best. Avoid baths that are so cold that they shock, and do not remain long in the bath tub, if you take tub baths.

6.—Give the skin of the entire body, from neck to the soles of the feet, one or two dry rubbings each day.

7.—Do not use coffee, tea, tobacco, alcohol or other poisons. Water is the best drink.

8.—Keep the bowels open, using

injections (enemas) or mild cathartics, if necessary.

9.—Quit worrying. Of course you can. Worry never helps but it always harms.

10.—Have plenty of fresh air, and breathe deeply. Air is still free.

11.—Eat slowly and moderately and masticate well. Eat plain foods in simple combinations.

12.—The most important point is the feeding. It is impossible in a book of this kind to discuss in detail the feeding of all cases and conditions, so I shall outline one plan of feeding that will fit the average case of chronic heart disease, that is, it will fit the patient who is up and still doing some work. It will help to bring a cure in many cases and where cure is out of the question it

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will prolong the life, and give the individual more comfort and strength.

It is very important to cook and dress the foods correctly. This subject would in itself require about 50 pages of space, so it can not be given in this volume. You will find it detailed in chapters 8, 9 and 10 of "Eating for Health and Efficiency."

The general outline is: One fruit meal; one starch meal; and one protein meal each day. In the back of this book you will find the foods classified. If you find it inconvenient to get the exact foods prescribed in these menus, substitute food of the same class. For instance, if the menu calls for stewed onions and these are not to be had, you may substitute cooked turnips or any other succulent vegetable; if it calls for

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corn bread, you may substitute whole wheat bread, or graham muffins, or cooked rice, or any other starch; if it calls for fresh meat, you may substitute eggs, or fish, or nut meats. But be sure that you substitute foods from the same class as the foods called for in the menus, if you do any substituting. If you make many errors you can not expect to get good results.

Breakfast

Figs or stewed prunes.

Oranges or berries.

Glass of milk, if desired.

Lunch

Corn bread or stale rye bread with butter.

String beans or stewed carrots.

Raw sliced cabbage or celery.

Dinner

Fresh meat or nut meats.

Parsnips or green peas.

Stewed onions or spinach.

Baked apples or sliced peaches.

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Breakfast

Ripe bananas or raisins.

Apples, raw, or stewed or baked.

Cottage cheese or glass of butter-milk, if desired.

Lunch

Vegetable soup.

Baked potato with butter, or cooked rice.

Green peas or okra.

Dinner

Fresh fish or eggs.

Spinach or other cooked greens.

Cooked cauliflower or carrots.

Raw vegetable salad.

Breakfast

Raisins or figs, cooked or raw.
Peaches or a dish of berries.

Lunch

Whole wheat toast or muffins with
butter.

Egg custard.

One cooked succulent vegetable.

Dinner

Nut meats or some kind of fresh
meat.

Summer squash or cooked greens.

Green peas or string beans.

Lettuce and apple salad.

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Breakfast

Bananas, baked or raw.
Apples, stewed, baked or raw.
Glass of milk if desired.

Lunch

Corn bread or whole wheat biscuit.
Summer squash or beets.
Sliced cucumbers or raw cabbage.

Dinner

Fresh fish or fresh eggs.
Baked potato.
Brussels sprouts or kale.
Plate of lettuce, or a lettuce and
berry salad.

Breakfast

All the melon of any kind desired, and nothing else. (This is for summer.)

Lunch

Baked potato or baked Hubbard squash with butter.

Celery root or asparagus cooked.

Raw celery or endive or romaine.

Dinner

Roast mutton or mutton chops or nut meats.

Carrots or turnips.

Kale or spinach.

Dish of berries or a raw fruit salad.

Breakfast

Bananas or figs.

Berries or other fresh fruit.

Glass of milk or buttermilk.

Lunch

Vegetable soup.

Stale rye bread toast or corn bread
with butter.

Egg plant or string beans.

Dinner

Macaroni and cheese.

Beet tops or other boiled greens.

Cauliflower or cabbage.

Salad of raw vegetables.

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It is the common, simple things that count. Those who have heart disease have to be somewhat strict in order to regain health. There is no sacrifice in following these directions. Fruits and vegetables, the best of foods, are prominent in the menus because they are rich in health-building elements.

Remember, you are not to eat bread unless it is included in the menus.

The feeding is by far the most important part. The principles given in "Eating for Health and Efficiency," regarding the manner of selecting, preparing, combining and dressing foods always apply in these cases. After getting into good condition, follow the feeding instructions in that book.

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I am often called to see patients suffering from severe heart disease, where conditions are as follows: The heart beats fast, weakly and irregularly; the patient has difficulty in breathing and often is unable to lie down; the legs and abdomen are filled with dropsical fluid; the kidneys are impaired and generally show signs of advanced Bright's disease; the liver and spleen are swollen.

The rule is that in these cases, all concerned, doctors included, have given up hope. My experience is that some completely recover; others get into fair condition and live comfortably and usefully, but not in full health; some are in such bad condition that they can live only a short time. I have been called to see many who had been given twenty-four

hours, at the most, to live. Not one of them has died within six weeks and some of them have made a complete recovery. In every instance the attending physicians had been making the mistake of "feeding to keep up the strength of the heart." What is the use of doing that if it kills the patient?

Even in these conditions a simple, sane, sensible treatment works wonders. I shall outline the correct treatment for such cases. It is correct, for it gives results where all other means fail.

1.—Allow the patient to assume the most comfortable position.

2.—Keep the feet warm, using artificial heat if necessary.

3.—Have good ventilation at all times.

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4.—Be cheerful in the sick room. Keep those out who carry with them a killing solemnity, and it does not matter if they happen to be nurses, doctors, friends, relatives or members of the immediate family. If your doctor is of the long-faced, mournful, head-shaking type, discharge him right away and hang out the not-welcome sign for him.

5.—If the dropsy is so bad that it oppresses the heart and the lungs—indicated by very rapid heart beats and labored breathing—put the patient on a complete fast for a period varying from one day to one week. This brings ease in nearly every instance.

6.—Keep the bowels open. If necessary use salts, mineral water,

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castor oil or any favorite cathartic that is not too severe.

7.—Recommendations 5 and 6 usually relieve the dropsical pressure. If they do not, give doses of salts or mineral water large enough to cause a watery discharge from the bowels. Tapping the abdomen to allow the dropsical fluids to escape will give temporary relief, but it is only temporary.

8.—At least once a day give the entire body a good rubbing. Better still, give two or three rubbings daily. If the skin is very dry, use a small amount of olive oil.

9.—If the patient fasts, feed the simplest kinds of foods afterwards. If it is not necessary to fast, resort to plain feeding anyway, giving one or two or three varieties of food at each

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meal. Pepper is absolutely taboo, and salt should be used very sparingly or not at all.

I shall list some simple meals for you, so that you will know what to select and how to combine. Each sentence is a complete meal.

Milk or buttermilk and nothing else.

Baked apples or raw apples.

Apples, cooked or raw, with milk or buttermilk.

Ripe bananas, well masticated, and nothing else.

Egg custard, with or without one kind of fruit.

Toast and a cup of custard.

Baked potato, butter, lettuce.

Toast and a glass of milk.

Eggs, green peas, lettuce.

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Rice and raisins, with or without milk.

Fresh fish, spinach, with celery or lettuce.

Fresh meat, cooked cauliflower, sliced cucumbers.

Nut meats, apples, celery.

One kind of melon, nothing else.

Never urge the patient to eat. After he improves, he can eat as recommended for the average patient.

Do not look for mysterious cures in heart disease or any other disorder. The only lasting and permanent cures come through following the simple laws of nature and that means to eat, drink, work, rest, relax, exercise, breathe and think properly—in other words, health comes through giving the body and mind sensible care.

You have fresh air and sunshine,

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food and drink, and time and space before you. Learn how to use them and enjoy health. If you have the fear of germs in your heart, eradicate that foolish feeling, for the germ has not yet been invented that can harm you if you give yourself correct care. If you have made so many mistakes in the past that you have acquired incurable heart disease, that is very unfortunate, but if your trouble is but the average heart disease, you can live long and live well.

Remember that sane, sensible living will cure many cases and conditions when the popular drug and serum treatments fail.

Also remember that all who suffer from chronic ills have to cure themselves. No doctor or drug will cure you. All that an outsider can do is

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to give you the right knowledge—as I have done in this book. You have to apply it yourself. No one can live your life for you.

PART TWO

ARTERIOSCLEROSIS AND HIGH BLOOD PRESSURE

Arterial troubles are growing more frequent. They are the immediate cause of an increasing number of deaths each year. They are due to general physical degeneration. They are practically never primary. The general cause of arterial ills is the same as the cause of heart disease—living contrary to the laws of nature.

We shall mention the most common arterial diseases but shall discuss in detail only the two important ones, arteriosclerosis with high blood pressure and apoplexy.

Acute arterial inflammation occurs, but not very frequently.

Inflammation of the veins (phlebitis) is rather infrequent. *Milkleg* is inflammation of the great veins of the legs.

Aneurysm is an abnormally enlarged blood vessel, the enlargement being localized and containing blood.

Atheroma is a localized hardening of the walls of a blood vessel. It generally starts with abnormal deposits in the internal and middle coats of the artery. At first the arterial coats are thickened. Then the nutrition becomes poor and degeneration takes place. At first the deposits are soft, but afterwards there is hardening. This often takes the form of overgrowth of fibrous material. At other times calcification

(lime deposit) results. The extent of the calcification varies. If much lime is deposited the arteries become rigid. Sometimes a blood vessel becomes one rigid piece of mineral matter.

Arteriosclerosis (hardening of the arteries) is atheroma on a large scale. Instead of affecting only a small part of the arterial system, practically all the arteries are involved. As the name indicates, in arteriosclerosis the walls of the arteries grow hard. The medical profession is not a unit regarding these names. Some of the ultrascientific physicians think that the use of the word "arteriosclerosis" is a sign of ignorance, but that does not matter so long as we understand each other.

Arteriosclerosis is hardening of the

arteries, and as we have no better word we shall use this term.

A surprising thing about these afflictions is that the average doctor does not recognize that they are developing. The patient is in tolerable health, as a rule full-blooded and overweight. This is not always true, for some of the sufferers are quite thin. They go about their work and are able to keep up in a world that hardly knows what physical efficiency and real health are. They are usually short of breath, and the breath is often offensive. The tongue is coated. There is frequently a trace of albumin in the urine. They take cold easily and can not stand exposure to the inclement elements. They are troubled a little with indigestion, but not enough to give it

special attention. They think that the belching and the excess of gas in the bowels are a part of normal life. Often the face is too florid, and the whites of the eyes are discolored. Even a superficial examination reveals these conditions that point to chronic degeneration. High facial coloring (I am not talking of the coloring purchased at the drug stores) in individuals of middle age is not a sign of health—it is a sign of disease. A purplish flush is a danger signal.

Frequently these persons are so stimulated that they feel fine. With the artificial stimulation obtained from an excess of food and drink, and sometimes from drugs, they are so buoyed up that they do not weary easily. This is always another danger signal. They feel full of energy and

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vim. Their eyes are bright and they are cheerful. Most individuals think that such persons are exceptionally healthy, and are very much surprised to learn of a sudden break-down or death in these cases.

Please remember this picture: The individual is forty years old or more; he is overweight; he says that he is feeling fine; he is full of energy, in fact too energetic; his face is highly colored and his eyes often flash.

You think that he is healthy, when in truth he is intoxicated with poisons that are leading him to an early death.

Most physicians are deceived. They pass them in examining these overstimulated persons for life insurance, unless the blood pressure is very high or albumin is found in the urine, and they may die within a few weeks

or months of receiving their life insurance policies.

The blood pressure is too high. If the pressure in an adult goes above 145 millimeters of mercury in systole (heart contraction) it is a sign that something is wrong. It is generally believed that the blood pressure should progressively increase from decade to decade. This is a fallacy. A man at forty-five should have about the same arterial tension that he had at thirty-five, and he should carry about the same weight, that is, if he was normal at thirty-five.

The general medical belief is that the blood pressure should be 100 plus the age. According to this theory a man of sixty should have a blood pressure of 160. The theory is totally wrong. The blood pressure should

be highest when a man is in his physical prime, say between twenty-five and fifty, and after that the blood pressure should recede somewhat—it should not rise. The blood pressure rises because the body is allowed to fill with waste. Normal living prevents this. As the physical activities grow less, with advancing years, the blood pressure will normally go down. This truth is very little known. I have never seen it in print, so I shall emphasize it:

A baby starts with low blood pressure. As the child grows the blood pressure increases and this continues until full physical maturity is reached. During the years of full physical activity the blood pressure should average between 120 and 140. It should not go beyond this, but as the body

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grows less active with the advancing years the blood pressure should gradually recede. At the age of sixty the blood pressure should be 130 or less. Increasing blood pressure after passing middle age is not normal; it is a sign of degeneration and disease.

This truth is contrary to popular teachings. When it dawns upon the medical profession and the general public it will save many lives and prevent much suffering.

High blood pressure is a burden. It overworks the heart and it puts a strain on the arteries. It is a load that normal individuals do not have to carry in advancing years.

There is no fixed standard for blood pressure. In normal adults it will vary between 100 and 140. If it goes much below 100 it indicates sub-

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normal physical condition. It habitually ranges above 140 it indicates physical degeneration.

If the blood pressure rises above 250 sudden death should occasion no surprise.

Causes of arteriosclerosis and high blood pressure.—This disease is a form of chronic degeneration of the body and is due to unnatural modes of living. Improper eating and drinking are by far the most important factors.

The rule is that the sufferer overeats of protein and starch. Heavy meat eating is common. Years of this abuse lead to arterial trouble. The use of alcohol is another important factor. Too much food and too much drink raise the arterial tension. When the pressure is too high,

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the arteries are put on a strain and this helps to produce degeneration. Excessive intake of food and fluid also overburdens the excretory organs to such an extent that much waste remains in the body, and this causes degeneration.

Excessive eating of starch produces fully as many cases of arterial disease as overeating of protein. Overeating of starch causes hardening of the entire body, premature stiffening of the joints, parchment skin, deep wrinkles, etc.

It is well to remember that the most prominent cause is overeating of protein and starch—the meat, bread and potato plan of eating.

Extraordinary physical efforts have a tendency to produce this disease, for they cause overstrain, and any-

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thing that does this may cause arterial disease.

Fretting, worrying, anger and jealousy, and the rest of the depressing emotions, are important causative factors. Worry is the most common.

Various drugs, such as alcohol and lead salts, are among the causes. Syphilis is often blamed, but more stress should be placed on the treatment than on the disease, for the mercurial treatment of syphilis causes arterial degeneration, as well as other forms of physical degeneration. Other diseases are also given as causes, but they are only a part of the degenerative process, not the original causes.

It is really a mistake to call these conditions arterial diseases solely. They are states of chronic degenera-

tion of the entire body, and the arteries are affected with the rest of the system. The heart, liver, lungs, kidneys, and brain are always affected.

Hardening of the arteries causes heart disease, and heart disease causes hardening of the arteries.

The real cause is abnormal, unnatural modes of living.

Symptoms of arteriosclerosis with high blood pressure.—The symptoms vary greatly. In the beginning they are not pronounced. The individuals are looked upon as healthy.

There is a gradual loss of physical and mental tone. Body and mind lose effectiveness. The edge is gone. The individual is never well, though at times he is so stimulated that he

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feels not only well but superbly fit. This is like drug stimulation.

The arteries are too resistant. They do not easily compress. The normal wrist pulse can be stopped by moderate pressure with one finger. In arteriosclerosis it may take two or three fingers to stop the pulsations. The pulse feels queer, being hard and bounding. It should be lively, elastic and yielding.

The breathing is usually somewhat labored after slight exertion. Enlargement of the left side of the heart and mild symptoms of heart disease are common. The second sound of the heart is usually too snappy. Albumin is frequently found in the urine.

Oppression in the region of the

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heart and headaches are often annoying, growing progressively worse.

If arteriosclerosis is not properly handled there will be a progressive degeneration and weakening, until the body gives up the fight. Sudden death is common.

It is easy to diagnose the condition. A trained finger will detect the abnormally hardened artery and the high tension. The instrument (sphygmomanometer) confirms the diagnosis and shows exactly how high the blood pressure is.

Prognosis of arteriosclerosis.—This generally depends a little on the patient's condition and very much on the treatment. Physicians who rely on medicine confess that they can do little or nothing in these cases, *because it is a progressive disease which per-*

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sons develop even in good health!
This is not an attempt to be humorous, it is the claim of medical men in good standing, men of prominence. It is impossible for healthy individuals to develop disease, but medical logic is queer.

Arteriosclerosis can be checked nearly every time. It is said to be incurable, but it is generally curable in reasonable time. The majority can recover very good health. The correct treatment of this condition has been a pleasure to me because nature has demonstrated how kind she is to those who give her an opportunity. Even persons past sixty and seventy get good results. It is common to find lowered arterial tension within a week and decided improvement within two weeks.

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If the blood vessels are completely calcified, they will remain that way, but when the hardening is only partial the vessels regain a large part of their tone and elasticity under correct treatment. The blood pressure is so reduced when the patient lives right that the danger of breakage of an artery becomes very remote.

I shall summarize three cases from my practice, to illustrate what can be done. These gentlemen had been under the care of competent physicians before coming to me, and they had been growing worse.

Mr. A., aged thirty-eight, suffered from arteriosclerosis and blood pressure of 225, and he had a very pronounced case of Bright's disease. His habits were those of the average popular young business man in a large

city. He had used tobacco and alcoholic drinks quite freely. His condition was unusual for one so young.

In the beginning he followed directions carefully, and within two months the Bright's disease had disappeared and the blood pressure was reduced 55 points. He was on the way to complete recovery. His headaches had vanished.

Then he decided that he did not need to be careful. He began to indulge in his bad habits again. As a result his blood pressure crept back to 200, in a period of four months. He could have recovered, but he was not in earnest about it, and I lost interest in him.

Mr. B., aged fifty-five, suffered from headaches, rheumatic pains and stiffness of the joints, hardening of

the arteries and a blood pressure of 230; also Bright's disease. He followed directions carefully. During the first month the Bright's disease vanished; at the end of six weeks his blood pressure was down to 174, and his rheumatic pains had decreased to a marked degree. He continued to live according to instructions and was rewarded with complete recovery.

Mr. C., aged 62. His symptoms were like those of Mr. B., with the exception that they were worse. He walked with great difficulty. He had been floor manager in a large store, but had been compelled to give up his work. The family physician told the wife that Mr. C. could live only a few months, at the most.

Six weeks after beginning rational treatment he returned to work. He

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walked well, was free from headaches, and his blood pressure had been lowered more than 60 points—it was below 170. He continued to treat himself fairly and squarely and he steadily gained in health. Now he is sixty-seven years old, well and active.

Correct knowledge plus the will power to practice this knowledge will cure nearly every case of arteriosclerosis. If the condition has been allowed to continue until the heart is ruined, then we can't expect such good results.

Correct treatment of arteriosclerosis.—The conventional treatment is merely a form of marking time. Physicians ought to know that drugs are worthless in these conditions.

The correct treatment is simple, easy and satisfactory. The physician

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has only one thing to furnish—correct knowledge. The patient has to do the treating. If he refuses to give himself the proper care, nothing can be done. The aim of the treatment is to reduce the blood pressure so as to remove all danger of ruptured blood vessels, and then have the individual live so that the body can regenerate.

The average sufferer is up and about and able to attend to his work. He is to be put on a low diet at first. One meal may be juicy fruit, and nothing else; another may be succulent vegetables, cooked and raw, or all cooked vegetables, or all raw vegetables. The third may be a glass or two of milk or buttermilk.

Tea, coffee, alcohol and tobacco,

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and all other drugs, are to be discontinued.

The more closely the patient is confined to juicy fruit, succulent vegetables and milk, the sooner he will improve. Moderate eating is the short cut to improvement. Water is to be the only drink.

Those who are in very dangerous condition, or very anxious for a quick start, can fast a few days; this is the quickest method to reduce the pressure.

It is best to give distilled water, or soft water, such as good cistern water. Those who partake freely of raw fruits and raw succulent vegetables do not need the minerals that are present in ordinary drinking water.

All foods are to be simply cooked and dressed as directed in my book on

“Eating for Health and Efficiency.”
This renders them easy to digest.

When the arterial tension has been relieved the patient may take an egg or two, or fresh fish, or nuts, or some meat once a day.

And then he may add starchy food once a day. His feeding should be according to this outline: One meal, fruit and milk, or nothing but fruit; another meal, some form of protein with cooked and raw succulent vegetables; another meal, one kind of starchy food with butter or oil, and with this some of the succulent vegetables.

As the individual improves he should begin to exercise. Gradually increase the exercise. Also give the body surface one or two dry rubbings daily.

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Those who are in very serious condition may have to go to bed and take a short fast, as a starter.

This is simple treatment, but it is effective. It is remarkable how people will grow young under such treatment. They must stay away from their old manner of living, otherwise they run great risk of having the old trouble return.

In all arterial diseases it is necessary to keep the colon clean. The bowels should be kept open and severe straining at stool prevented, for the straining raises the arterial tension.

Cultivate a cheerful, even disposition. Violent emotions and passions may produce a fatal strain.

All hygienic measures are to be practiced.

In other words, if the blood pres-

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sure is dangerously high, the patient should follow the same directions as those who are suffering from heart disease with serious dropsy. (See pages 112-118.)

If the blood pressure is below 180, the patient should have the same care as prescribed for the average individual with heart disease. (See pages 92-112.)

Repetition.—Nearly all who have hardening of the arteries with high blood pressure can recover.

PART THREE

APOPLEXY OR CEREBRAL HEMORRHAGE

The brain is well supplied with blood, and this is necessary for the normal activity of this organ. Thinking is the most arduous of all work.

In cerebral hemorrhage there is a breakage in one or more of the arteries. This allows the blood to flow into the brain substance itself, often with such force that the brain tissues are torn. If the artery that breaks is badly damaged, a cone-shaped piece of brain substance may be deprived of blood.

Cerebral hemorrhage is usually called apoplexy. This word may

mean hemorrhage into any tissue in the body, but in this book we shall limit the meaning of the word apoplexy to hemorrhage into the brain substance.

Apoplexy is causing the death of more than 72,000 persons in the United States annually, and the fatalities are increasing in number. It is a disease of individuals past middle age, and is a measure of their wrong living. Strictly speaking, it is not a disease, but a symptom, or an effect, or a culmination of extreme physical degeneration. The real disease has existed in the system for years before the blood vessel ruptures. The break is the inevitable consequence of the increased blood pressure in arteries that have grown hard and weak and unyielding.

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The causes of apoplexy are the same as the causes of arteriosclerosis and heart disease.

Overeating, overdrinking, mental excitement and physical overstrain are the factors that usually precipitate an attack.

The symptoms of apoplexy vary a great deal. Occasionally the attack comes on gradually, the patient slowly sinking into unconsciousness. Depression and headache may be precursors.

Usually there is sudden loss of consciousness. The face is flushed. The breathing is stertorous. The pulse varies, but the blood pressure is generally low in the beginning, and then the pulse becomes full and bounding. The arterial tension in-

creases. In other forms of hemorrhage the tension decreases.

The temperature varies greatly. Sometimes it remains about normal. At other times the affected side is several degrees warmer than the other one. In serious cases the temperature may be very high.

There is loss of sensation for varying periods, rarely more than a day.

Paralysis is one of the constant symptoms. This also varies greatly. Sometimes the entire side is paralyzed, the face usually not completely. Sometimes one side of the face and the other side of the body are affected. The unilateral paralysis is due to the fact that the hemorrhage is on one side of the brain. Sometimes the paralysis is insignificant.

The fever may last several days.

In severe cases there may be delirium. The symptoms gradually subside, leaving more or less permanent physical and mental effects.

The diagnosis of apoplexy is not very difficult in the home, but in general practice one may have to differentiate it from drunken stupor, opium or other drug poisoning, uremic coma, diabetic coma, sunstroke and injury.

This is sometimes difficult, for the symptoms of apoplexy are not very distinctive. In the ordinary cases the patient has been in usual health, often feeling exceptionally well. Then there is the sudden loss of consciousness, paralysis of one side, loss of sensation, and a flushed face. When this occurs where injury, drugs and chronic diseases causing coma can be excluded, it is almost surely apoplexy.

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Alcohol leaves its marks on the system, odor among them; poisoning by opiates results in pin-point pupils; in coma following chronic disease there is the disease history; in diabetes, the peculiar odor, etc. The increased arterial tension in apoplexy is also a helpful point.

Prognosis.—Many die within twenty-four hours of the stroke. If the patient lives two or three days the general rule is that the life can be saved, but this is not an invariable rule. It depends largely on the treatment. If the fever is very high and the paralysis complete and extensive, the outlook is not very favorable.

Elderly persons in a degenerated physical condition are prone to have bed sores when they become para-

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lyzed. When these sores become gangrenous or infected there is always danger.

If the brain substance has been severely lacerated the chances are that there will be incomplete recovery, physically and mentally. Many survive with great loss of physical and mental power.

The paralysis usually improves, though it is common to have quite perceptible signs of it left. The leg paralysis disappears more quickly and more completely than the arm affection.

When the treatment is wrong and the patient lives unnaturally recurrence is common. Those who recover from one stroke should be able to ward off future ones. I have never seen a recurrence among those who

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have lived correctly, but most of the patients get careless, and often pay with their lives. Those who learn how to take care of themselves and put their knowledge into practice can usually live in health after having had a stroke. They can generally attain better health than they had previous to the attack. Nature is very kind and indulgent to those who are guided by her laws.

Treatment of apoplexy.—The usual treatment is to raise the head and apply ice; to give the indicated drugs and liquid nourishment. Alcohol in some form is often given.

Raising the head and applying cold locally are correct measures, for they diminish the supply of blood to the head. The drugs and nourishment are a mistake. There are no indi-

cated drugs. They do no good, and often prove harmful. The feeding is even worse than the medicating. For years and years the body has been overfed until the blood pressure has become so great that an artery breaks. The system is protesting against this abuse and asking for a rest. Still the feeding continues. The more one feeds in the circumstances, the more easily the patient dies. Perhaps one feeding may increase the blood pressure enough to produce another hemorrhage, which may prove fatal. Food and drink are the chief producers of excessive blood pressure.

Any one who thinks can understand that no food should be given in the circumstances.

The more an apoplectic is fed the

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slower and less complete is the recovery.

The correct treatment is simple. Place the patient in recumbent position with the head elevated. Use cold applications on the head and on the back and sides of the neck. Ice may be used. If ice is not to be had, use the cold pack, changing at intervals of about thirty minutes.

Keep the feet warm. If necessary use artificial heat.

Have free ventilation.

Keep the room quiet and allow no excited persons therein.

Wash the bowels out daily; if necessary use a rectal tube to allow the water to escape from the bowels. Straining should be prevented. If the patient is very low, do not bother

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with the bowels. Then let the patient alone as much as possible.

Give no food of any kind, liquid or solid, during the acute manifestations.

Give water in small quantities to satisfy the thirst, but do not encourage or force water drinking.

Keep the patient as quiet as possible until the acute symptoms have disappeared. He should rest in bed at least a week, even if the attack is light, and he should go without food for at least a week, even after a very light attack. Going without food for one or two or three weeks will give the body a chance to absorb the blood that has been spilled into the brain tissue, forming a clot there. The more quickly and completely this is absorbed the more quickly and com-

pletely will the patient recover. The fast also allows the ruptured artery to heal.

Many fear to fast two or three weeks, but the fear is groundless. A physician who knows his business and has a conscience will insist on a complete fast of at least a week in cerebral hemorrhage.

While the acute manifestations exist, do no manipulating, but as soon as they disappear begin to massage the paralyzed parts. Also massage downward on both sides of the spinal column, beginning at the base of the skull and ending at the sacrum.

With correct feeding and massage, the limbs usually recover almost completely.

Electricity may or may not be used. It is not of great importance, though

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it seems helpful at times. Massage and vibratory treatment in the direction of the nerves of the affected limbs are useful.

After the fast the eating is to be very simple and moderate. Overfeeding prevents absorption of the exuded blood and the clot in the brain. It is very good for these patients to lose from ten to thirty pounds temporarily, and if they are overweight they should permanently lose the surplus.

The diet is to be bland and all stimulants and narcotics are to be avoided.

After the fast begin to feed on milk, juicy fruits, and succulent vegetables, selecting one article for each meal. Milk may be given for one meal, fruit for another, and a vege-

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table, cooked or raw, for the third. The less mixing the better.

Meat and starchy foods are to be taken in moderation when the patient is well on the road to recovery.

The overeating must cease, to prevent a recurrence. A second attack is worse than a first one. The third attack is generally the last.

Those who have apoplexy are usually past forty, and are suffering from arteriosclerosis and heart disease. They need less food than formerly, and much less than they have been consuming. Be moderate in all things.

To recapitulate: While the acute attack lasts, the patient is to have head raised, feet warm, plenty of fresh air, quiet, what water is desired and no food.

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After the acute symptoms have subsided: Eat simply and moderately, so that the weight will not remain above normal, and partake of enough fresh fruits and vegetables to keep the blood pure and alkaline; live hygienically; avoid all stimulants and narcotics; lead a moderately quiet life; massage the affected parts of the body.

After beginning to eat, live about fourteen days on such meals as recommended for those suffering from severe heart disease with dropsy. (See pages 112-118.)

Then begin to live according to the plan given for those suffering with average heart disease. (See pages 92-112.)

This treatment is simple, reason-

able and effective. It prevents recurrences and enables most of the patients to live safely in comfort and health.

.

The disorders discussed in this book are practically one. Hence the treatment is almost identical. It is so effective that it has time and again brought health to those who were looked upon as incurable.

Half following directions will do no good. It is useless to *almost* do a thing. What is to be done should be wholeheartedly done. Knowledge does not avail unless it is put into practice. It is necessary to lose weight in these conditions.

There is no royal road to health in cases of chronic degeneration—all of

these ills belong in that class. But the cheering truth is that those who are willing to make the effort can almost always attain health again.

FOOD CLASSIFICATION

PROTEINS

The principal sources of protein are:

1. Meats of all kinds (the lean part), such as beef, veal, mutton, lean pork, chicken, turkey, duck, goose, game, both feathered and furred, in fact, all lean flesh from animals and birds.
2. Fish of all kinds, such as trout, salmon, herring, pickerel, pike, cod, halibut, mackerel, sturgeon, and shad. Also shellfish, like oysters (which are mostly water), clams, crabs and lobsters.
3. Legumes, the chief of which are all kinds of dried beans, dried peas, lentils and peanuts. Also green peas, and both the green and the dried lima beans.
4. Dairy products, including sweet milk, clabbered milk, buttermilk, cottage cheese and all other kinds of cheese. Cream contains but little protein, and butter practically none.
5. Nuts, especially almonds, Brazil nuts, filberts, hickory nuts, pecans, English walnuts, butter-nuts, pistachios and pignolias. (Peanuts are legumes, not real nuts. Chestnuts contain much starch and only a little protein.)

STARCHES

The chief sources of our starchy foods are:

1. Cereals, the most important being wheats of all

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kinds, Indian corn, rice, rye, barley, oats. No matter in what form we eat them—in bread, cakes, mushes, flaked or puffed cereals—they are starchy.

2. Tubers, the most important being Irish potatoes, sweet potatoes and Jerusalem artichoke. The dasheen is also a tuber, which resembles the Irish potato in consistency, and has an agreeable flavor.
3. Legumes, especially when they are ripe. The ripe limas, navy beans and other kinds of ripe beans, peas, lentils and peanuts are starchy. Green limas and young peas contain more starch than the other vegetables usually classified as succulent.
4. Nuts, but only a few varieties. Acorns, dried chestnuts and cocoanuts are rich in starch.

Hubbard squash contains about the same proportion of starch as the Irish potato.

Parsnips are rich in starch.

Green bananas are about as starchy as Irish potatoes, but ripe bananas contain only a trace of starch, for it has been turned to sugar.

Pumpkins are of watery consistency, and can be classed with the succulent vegetables.

Tapioca and sago are very starchy.

Corn starch is the starchy essence of the corn.

Spaghetti and macaroni are cereals, hence starchy.

SUGARS

The principal sources of sugars are:

1. Sweet fruits, the most important of which are ripe bananas, currants, sweet grapes, raisins,

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- sweet prunes, figs, dates and persimmons. All ripe fruits contain some sugar and the dried fruits are rich in this food element.
2. Sugar cane and sugar beets, from which nearly all of the refined white sugar is made.
 3. Honey.
 4. Sap of the sugar maple.

FATS AND OILS

The chief sources of our fats are:

1. Dairy products—cream, butter and some rich cheeses.
2. Flesh of dead animals, especially pork, mutton and beef, that have been fattened.
3. Fat fish, such as herring, shad and salmon trout.
4. Legumes. Some kinds of peanuts are very oily, and so are soy beans.
5. Nuts of nearly every kind. Almonds, Brazil nuts, filberts, hickory nuts, pecans, English walnuts, butternuts, cocoanuts, pistachios and acorns are rich in oil.

SUCCULENT VEGETABLES

The principal succulent vegetables are:

Asparagus, beets, cabbage, carrots, turnips, parsnips, cauliflower, cucumber, egg plant, lettuce, okra (gumbo), onions, radish, summer squash, tomatoes, spinach, kohlrabi, kale, Brussels sprouts, cone artichoke, chard, string beans, celery, turnip tops, lotus, endive, dandelion, oyster plant, rutabaga and garlic. Though corn is really a cereal, corn in the milk, either on the cob or canned, and green peas may

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also be classed with the succulent vegetables. Also the pumpkin.

Mushroom is a fungus. Those who are fond of it may partake occasionally, but fungous growths cannot be recommended as a steady diet.

Young lima beans are quite starchy, as much so as Irish potatoes. Parsnips are also quite rich in starch.

Radishes are delicious peeled and cooked.

Macaroni and spaghetti are *not* vegetables. They are made from wheat and are very starchy. They are cereal foods.

RAW SALAD VEGETABLES

These are also succulent vegetables.

The principal salad vegetables are:

Lettuce, celery, endive, romaine, chicory, tomatoes, cucumbers, cabbage, celery cabbage, parsley, field lettuce, cress. All leaves that are relished may be used for salad purposes.

Raw onions in moderation may be used for flavoring, and garlic likewise. Those who are fond of raw root vegetables and have good digestive power may occasionally eat some raw carrots or turnips, but they should masticate these foods very well. Grated carrot tastes well in salads.

FRUITS

The term "acid fruit" means fruit that is quite sour, like sour apples, pineapples and lemons.

"Subacid fruit" is a mild fruit, containing only a

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little acid, such as mild pears, sweet apples and good blueberries.

Some of the most common *juicy fruits* are:

Apples, lemons, oranges, peaches, pears, strawberries, apricots, avocados, blackberries, cherries, cranberries, currants, gooseberries, grapes, huckleberries, blueberries, mulberries, nectarines, olives, pineapples, plums, raspberries and whortleberries.

The melons (watermelon, muskmelon, cantaloupe, casaba, honey dew, etc.), rhubarb stalk and tomatoes are so like fruit that for practical purposes we can call them so.

The most important *sweet fruits* are:

Ripe bananas, sweet prunes, sweet grapes, raisins, dried currants, figs, dates and persimmons.

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