"Good health is built on good conduct and any return to a wrong mode of life will build anew the prior illnesses." Dr. Shelton
EVERY disease is a protest - of Nature against an active or passive violation of her laws. But that protest follows rarely upon a first transgression, never upon trifles; and life-long sufferings - the effects of an incurable injury excepted - generally imply that the sufferer’s mode of life is habitually unnatural in more than one respect. * * * By observing the health laws of Nature, a sound constitution can be very easily preserved, but, if a violation of those laws has brought on a disease, all we can do by way of “curing” that disease is to remove the cause.
- Felix L. Oswald.

"EVERY disease is a protest
- of Nature against an active or passive violation of her laws "

DEDICATION

To those whose lives are torn by weakness and pain; to those whose days and nights are heavily laden with the dull despair of physical weakness and disease; to those who prefer a rational mode of care of the body to the superstition-based systems of spectacular palliation long in vogue; to those who discern the fundamental difference between constructive health building measures and the destructive “disease-curing” measures of the schools of physic; to those who have grown skeptical of the poisoning, blistering, carving, serum-squirting, electrocuting methods of the present; to those who can see in wrong life the cause of illth and in a corrected life the “cure” of the ills of the body and mind; and to all those who have “suffered many things of many physicians,” who have, through suffering and failure, had their eyes opened to the futilities of “modern medical science” with its “pink pills and patch-work,” this book is sympathetically dedicated by THE AUTHOR

BUT the laws of Nature cannot be outraged with impunity, and the aid of supernatural agencies has never yet protected our ghost-mongers from the consequences of their sins against the monitions of their physical conscience. The neglect of cleanliness avenges itself in diseases which no prayer can avert; during the most filthy and prayerful period of the Middle Ages, seven out of ten city-dwellers were subject to scrofula of that especially malignant form that attacks the glands and the arteries as well as the skin. Medical nostrums and clerical hocus-pocus of the ordinary sort were, indeed, so notoriously unavailing against that virulent affection that thousands of sufferers took long journeys to try the efficacy of a king’s touch, as recorded by the unanimous testimony of contemporary writers, as well as in the still current term of a sovereign remedy.

A long foot-journey, with its opportunities for physical exercise, out door camps, and changes of diet, often really effected the desired result; but, on their return to their reeking hovels, the convalescents experienced a speedy relapse and had either to repeat the wearisome journey or resign themselves to the mysterious dispensation of a providence which obstinately refused to let miracles interfere with the normal operation of the physiological laws recorded in the protests of instinct. Stench, nausea, and sick-headaches might, indeed, have enforced those protests upon the attention of the sufferers; but the disciples of Antinaturalism had been taught to mistrust the promptings of their natural desires, and to accept discomforts as signs of divine favor, or, in extreme cases, to trust their abatement to the intercession of the saints, rather than to the profane interference of secular science.
- Felix Oswald.
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INTRODUCTION

When the church put out the light of classic learning, there followed a barren interregnum, a period of intellectual darkness and stagnation, which lasted for more than twelve centuries, and which acted as an insuperable barrier to the world’s intellectual progress.

RENAISSANCE

Fortunately, towards the end of the fifteenth century there came an intellectual a wakening, a new birth of the spirit of progress and learning. The long, dark winter was over and the first gentle breathing of a larger intellectual springtime was wafted over the earth, thawing out the minds of men and bidding them awake from their long season of intellectual lethargy. A spirit of inquiry began to take possession of the more advanced minds, which resulted in unlocking the buried treasures of wisdom and knowledge contained in the literature of Greece and Rome.

The increasing power of the ascending sun of the new intellectual day started a thaw in the intellectual world; the snows upon the mountains were melted and the ice-bound streams of knowledge unlocked, so that once more their waters could flow in their regular channels and water the earth.

It was inevitable that, as the River of Knowledge, swelled by the mountain torrents and by the rains of the new Spring, rushed on impetuously, sweeping away the barriers which had so long stayed its progress, the time should come when the superstitions of medicine should be washed away in the flood.

Although there were fore-runners, the real medical awakening came in the early part of the nineteenth century. A new spirit of inquiry took possession of men. They went to Nature to learn the ways of life. This questioning of medical dogmas and practices was more or less world wide; but we are here interested chiefly in what took place in America.

In Europe, medical reform took two general directions. Under the leadership of Hahnemann, there was a move towards decreased dosage; under the leadership of Priessnitz there was a movement to substitute physical measures for drugs.

In America, medical reform also took two general directions. Under the leadership of Samuel Thompson, there was a movement away from heroic dosage and the lancet and virulent poisons and a tendency to return to herb remedies; under the leadership of Trall, Jennings and Graham there was a tendency to discard all drugs and the lancet and rely wholly upon hygiene. The American and European movements intermingled so that the Hygienic movement became corrupted with the admixture of hydrotherapy, massage, and manual adjustments, with a resulting great loss in vitality and effectiveness.

On September 15th, 1851, T. L. Nichols, M. D., and Mrs. Mary S. Gove, who later became his wife, opened the American Hydropathic Institute in New York City. This was a “medical school * * * for the instruction of qualified persons of both sexes, in all branches of a thorough medical education, including the principles and practices of Water Cure, in acute or chronic disease, surgery and obstetrics.” This was the first such school in America and probably the first in the world - the world’s first school of drugless medicine. In 1856, A. Kalm, M.D., a Priessnitzian from Germany, opened the New York Hydropathic Medical College on 60th St., in New York City. The Civil (?) War compelled the closing of this school.

Hydropathy was an effort at medical reform, rather than a medical revolution. Mere reform does not go beyond Allopathy; therefore it cannot live beyond Allopathy, unless supported and saved by the principle of...
Orthopathy. The principle of Orthopathy is the sole bulwark of reform in the world today. Only a radical change, a change at the roots of things, will be a real change. Hydropathy was soon absorbed by Allopathy and under the term hydrotherapy, is employed in every “regular” medical hospital and taught in every “regular” medical college in the world today. Orthopathy alone has driving and staying power sufficient to survive and evolve in the midst of present medical chaos; all else eventually reverts to Allopathy.

MOVEMENT

In the Hygieo-orthopathic movement a new river arose to mingle its waters with the mighty river of truth, and from that time it has continued to flow steadily onward, its vivifying waters nourishing the thirsty earth. All the many attempts to stay its beneficient progress have been utterly in vain. At various times efforts have been made to erect new barriers against the progress of this mighty river of Health Truth, but in every case these have been swept away. Nor shall anything on earth stay its onward rush, until, at last, all medical error shall have been completely swept away and the truth about health shall stand revealed in all her resplendent glory.

The seventh chapter of the. Rev. O. B. Frothingham’s Life of Theodore Parker (Boston, 1874) opens with these words: “It was a remarkable agitation of mind that went on in Massachusetts thirty years ago. All institutions and all ideas went into the furnace of reason, and were tried by fire. Church and state were put to the proof; and the wood, hay, stubble - everything combustible - were consumed. The process of proving was not confined to Boston; the whole state took part in it. It did not proceed from Boston centre: it began simultaneously in different parts of the commonwealth. It did not, seem to be communicated, or spread by contagion, but was rather an intellectual experience produced by some latent causes, which were active in the air. No special class of people were responsible for it, or affected by it. * * * It was a time of meetings and conventions and reforms of every description.”

Rev. Frothingham does not specifically mention medical institutions and medical ideas; but the fact is that these were also thrown into the furnace of reason and tried by fire; and all combustible portions were consumed. Let me add that the remarkable agitation of mind of which he speaks was not confined to Massachusetts, but involved the whole of New England. In fact, it was not confined to New England, for there was a similar awakening in France, England, and Germany.

The temperance movement, religious reform, abolition, clothing reform, the woman’s rights, political reform, prison reform, and medical reform movements all arose in New England simultaneously and were all inter-related and connected.

1830

We are not interested here in the new religions that arose, nor in the changes the old ones underwent; nor in the experiments in socialism that were tried; but it may not be amiss to record that in 1830, three years before the first National Temperance Convention was held in this country, Graham was lecturing on temperance; that the Millerites, now known as Adventists, who arose out of the religious reform efforts of the time, accepted the “Graham System” and hydropathy or the Water Cure; that Graham converted the Mormons to vegetarianism; that the Oneida community, which was an experiment in utopian socialism, “gave up with an effort almost equivalent to a moral scruple, the use of Graham bread as a staple and orthodox article of diet,” only a few years prior to 1830; that there was an effort to amalgamate Fourierism, which reached its height in New England about 1843, and “Grahamism”; that Bronson Alcott and his theosophists accepted the “Graham System” and helped to spread its principles; that Jennings, who took his medical degree in 1812, joined the Utopia at Oberlin, Ohio, where a “Graham Table” was set in the early days of the colony.
SOCIETIES

Physiological societies sprang up everywhere. On January 1, 1839, a Health Society was formed in Providence, R. I., as an auxiliary to the American Physiological Society. This succeeded the Graham Association, which was formed in Providence in 1834. A Physiological Society was also formed in Rochester, N. Y. In June, 1839, the Physiological Society of Wesleyan University was formed with the approval of the acting president of the university. The Oberlin (Ohio) Physiological Society had the enviable distinction of having Dr. Jennings among its officers. Graham Clubs were formed in localities where but few “Grahamites” lived. It is interesting to note that Horace Greeley met his wife in a Graham Hotel, where they both lived.

The American Physiological Society united with the New York Physiological Society to hold a second Health Convention in Boston, in May, 1839. Delegates from the other Health Societies were present. Indeed, delegates were present from Virginia, Kentucky, Ohio, and as far away as the West Indies. The new movement was spreading rapidly. Audiences numbering as many as two thousand persons heard Graham’s lectures.

DOCTORS

Graham pioneered in adult education in general, but especially he endeavored to carry a knowledge of physiology to adults. He was also the first to lecture to negroes on diet.

Among Graham’s works are *Health from Diet and Exercise; A Lecture to Young Men on Chastity*, prior to 1839; *Nature’s Own Book; Cholera*, 1833; *a Treatise on Bread Making; The Esculapian Tablets*; and he edited an edition of *Cornaro on Health*. His *Philosophy of Sacred History* was edited by Mr. Clubb and published after Graham’s death. It should be added that John Burdell published the Graham Journal in New York City. Graham had planned to publish a magazine of his own. His untimely death prevented this.

A valuable work of Trall’s not previously mentioned is *Hygienic Practice*, 1864. In 1873 his *The Bath - Its History and Uses* was published. His death, September 23, 1877 was attributed to “remittent fever,” a diagnosis which, as usual, leaves cause out of consideration. A few years before his death Trall moved the Hygeio-Therapeutic College to Florence Heights, N. J., where his Hygeian Home was located. He also had a Hygeian Home in Wernersville, Pennsylvania.

At his place in Florence, Dr. Trall was assisted by Dr. Mary Walker, the physician who shocked her generation by wearing man’s clothes.

Some idea of the size of Dr. Trall’s clientele may be gained from a statement in the Newark News, November 21, 1925, on Florence, New Jersey. It tells us that his purchase of the big boarding house and the removal of his Hygeian Home and Hygeio-Therapeutic College from New York to Florence “brought a revival of prosperity to Florence. * * * After his death and the destruction of his healing institution, Florence lapsed into coma and only recently has shown signs of life.”

The career of Jennings is a noteworthy one. He worked on his father’s farm until he was twenty; but he had long had a great ambition to be a doctor and at this age he had an opportunity to enter a doctor’s office and “read medicine,” as was the custom of the time.
He soon found he needed a knowledge of Latin and Greek, and having no money to go to school, arranged with his pastor, who later became president of Amherst College, to tutor him in these languages. The pastor lent him a Latin grammar and set a time for his first recitation. When young Jennings presented himself for his first lesson the tutor was astonished to find him prepared for the whole book.

With this kind of energy, enthusiasm and ambition, he went on with his self-education until he received a medical diploma from Hartford and entered practice. Yale University later conferred an honorary degree in medicine upon him in recognition of his remarkable success in practice. ‘He had a large practice among the prominent citizens in Connecticut.

As a result of his experiences in practice, he came to the conclusion that drugs had no value and discontinued to use them, giving instead, bread pills and water. Prof. James Monroe used to describe how Jennings would dispense a box of bread” pills with explicit directions as to when and how they should be taken, at the same time giving much good advice as to diet and hygiene. His success was unheard of before.

Finally, his conscience got the better of him and he confessed that he had no faith in drugs and would no longer make any pretense of giving them. This cost him much of his practice and after a few years he visited the perfectionist colony (1837) at Oberlin, Ohio, and moved there in 1839, traveling up the Hudson to Albany, through the Erie Canal to Buffalo, and thence to Oberlin overland. He was made trustee of Oberlin College and also served the city once as Mayor. His drugless practice did not meet with great response from the people of Oberlin, and several years before his death he retired from practice.

The Herald of Health, Aug. 1874, says of him, “‘Dr. Jennings was genial and kind, respected by all. One of the most striking things about his character was his patience and charity, never showing any signs of sourness, or fanaticism, as is the case with too many reformers whose opinions are not generally accepted at once.’”

William A. Alcott, M.D., cousin of Bronson Alcott, was born in Wolcott, Conn., August 6th, 1798. His early life was spent on the farm; at the age of eighteen he began a career as a school teacher. “A strong desire to improve and elevate the schools led him to overtask himself.” Mr. Bernard’s Journal of Education states that he exerted himself so severely in this work and practiced self denial to such an extent that he brought on “a most violent attack of erysipelas, from the effects of which, though he escaped with his life, he never entirely recovered.” About this time he began the study of medicine and in the winter of 1825-26 attended medical lectures in New Haven.

He entered upon the study of medicine “not so much with the design of making it a profession, as with the hope that it might prove an aid in fitting him to become a more thorough teacher.” In March 1826, he received a license to practice medicine and surgery, but soon thereafter “found an opportunity to engage in teaching again, and embraced it eagerly.”

His health rapidly failed and “severe cough and great emaciation,” “followed by hectic fever, and the most exhausting and discouraging perspirations”, compelled him ‘to give up teaching and endeavor to regain his health. The “soundest medical advice” failing him, ‘he abandoned medicine, adopted for a time the ‘starvation system,’ or nearly that, and threw himself, by such aids as he could obtain, into the fields and woods, and wandered among the hills and mountains.’” Largely regaining his health, he returned to teaching, though his struggles with ill health continued until his death Tuesday, March 28, 1859.
His work in the Hygienic Movement, as president of the Physiological Society, president of the Vegetarian Society, editor of the *Journal of Health* and editor of the *Library of Health*, was told in the preceding volume. Alcott wrote a hundred books of which about sixty were on health and diet. It remains only to be said that he traveled over the States for a period of fifteen years and lectured on health. Among his chief works are *Tea and coffee*, 1839; *Vegetable Diet*, 1849; *Life and Health* or *The Laws and Means of Physical Culture*, 1858; *The Young Mother*; *The Young Housekeeper*; and *The House I Live In*.

James Caleb Jackson, M. D., was born March 28, 1811, in Manlius, N. Y. He received his degree in medicine from Syracuse College. While only a youth he entered ardently into politics and was a staunch advocate of abolition. He was made secretary of the American Anti-Slavery Society, and in 1842, was made editor of the Madison County *Abolitionist*. Later he purchased the *Albany Patriot*, then the leading anti-slavery journal. His health broke down and he sold his paper and became the patient of Dr. S. O. Gleason, a hydro-hygienist of Cuba, N. Y. This was in 1847. After four months under Dr. Gleason’s care be entered into partnership with Dr. Gleason and Miss Theodosia Gilbert. These partners established a Hygienic Institute, at the head of the Skanateles Lake, which ‘became widely known as the “Glen Haven Water Cure.” Gleason sold his interest to his two partners in 1849 and these continued to conduct the Institute until 1858 when Jackson left for Dansville, N. Y., where he opened “Our Home Hygienic Institute.” The name was changed in 1890 to the “Jackson Sanitarium.” This Home was once the largest Hygienic Institution in the world.

The Livingston Co., Business Directory for 1868 tells us that Dr. Jackson had treated 20,000 patients by what he was pleased to call the psycho-hygienic method in the preceding 20 years, and without giving any medicine.

A few years before the death of Dr. Jennings, Dr. Jackson’s son had pneumonia. Jackson treated him with heroic hydropathy. This treatment brought a severe reprimand from Jennings. The boy never fully recovered and subsequently developed tuberculosis from which he died in a few years. This experience and the scolding he received from Jennings opened Jackson’s eyes to the evils of Hydropathy, as he had practiced it for years, and resulted in a great improvement in both his theory and practice. Jackson was well liked by everyone and was the idol of his townsmen. His Institution is now owned by the Macfadden Foundation and is known as the Physical Culture Hotel.

He was editor and publisher of the *Laws of Life* and *Journal of Health* for over thirty years. Among the purposes, of the *Laws of Life*, were (1) “To teach ‘the people how to live without sickness;’“ and (2) If sick, how to get well without drugs and medicine.”

Dr. Jackson died in 1895 of cancer of the nose. Among his larger works are *The Training of Children; How to Treat the Sick Without Drugs; Consumpiton; Diphtheria, Its Causes, Treatment, and Cure; The Curse Lifted, or Maternity Made Easy*, 1863, *Hygienic Medication or Science Versus Speculation*, 1879; *Nature’s Method of Curing the Sick*. 1879 *Rest, Not Stimulation the True Restorative from Fatigue*, 1879 and *American Womanhood* He was the author of numerous small tracts and contributed regularly to the health journals of his time.

Dr. George Henry Taylor was born in 1821 and died in 1896. He specialized in the Ling System, or the Movement Cure, as it was called, which he, with another Dr. Taylor, his brother, introduced into America; and in extending its development discovered that hernia, visceroptosis, and similar conditions may be corrected by exercise. His excellent work on *Paralysis and Other Affections of the Nerves*, is the application of movement to these
conditions. In 1856 he published An Exposition of the Swedish Movement Cure, and at a later date a work on Massage.

Dr. Charles E. Page was born in Norridgewalk, Me., February 23, 1840. He entered upon the study of medicine before the Civil (?) War, but his studies were cut short by his entry into the Army. In 1879 he entered the Eclectic Medical College in New York City. He did not long remain an eclectic, for almost immediately after graduation we find him in the ranks of the Hygienists where he remained throughout an active and busy practice. He practiced in the city of Boston for more than thirty years and retired from active practice a few years before his death, at the age of 85, at 20 Pearl St., Melrose Highlands, Mass., November 24, 1925. His many contributions to the Medical Journals of New England helped to educate the physicians of that section, while his great number of contributions to Physical Culture, The Stuffed Club, and various other health magazines and anti-vaccination periodicals have exerted great influence.

“There must be a way to live exactly right, which, if a man does, he will grow into health,” said a young school teacher to himself a half century or more ago. He was beginning to despair of life because every doctor to whom he went diagnosed his condition differently and proceeded to make him much worse than ever. Then began a long series of experiments upon his own body, and years of study of the subjects that relate to health and impaired health.

This young man, Robert Walter by name, later became one of the most outstanding leaders in the Hygienic movement. He was born February 14, 1841, and died October 26, 1921. Like Graham, Trall, Tilden and many others, who have turned to hygiene, he was forced to study the matter himself, because physicians are interested in “disease,” not in health. I am informed that his degree in medicine was obtained at the Hygieo-Therapeutic College founded and administered by Trall. To Trall, Jackson and Jennings he gives most credit for his own work.

His hygienic institution at Wernersville, Pa., was a large institution and was famed throughout the world for the excellence of results obtained there in the care of all forms of impaired health including the so-called incurable conditions. He was a man of brilliant mind; a keen thinker and careful logician. Someday he, along with Jennings, Graham, Trall, Taylor, and Tilden will take their justly deserved places in America’s Hall of Geniuses. Besides the books mentioned in Volume I of this series, Dr. Walter is the author of several small treatises, as, for instance, his The Nutritive Cure, 1881 Hygienic Hydropathy, in which he tried to get away from the harsher forms of water application; Philosophy of Health Reform; Hygienic Treatment What is it?; How Sick People are Cured; A Defense of Hygienic Treatment; Drug Medicines as Causes of Disease; Alcohol, as a Cause of Disease; one on Diphtheria and others. He was also editor of The Laws of Health.

Dr. Felix Oswald came to this country from Belgium, where he was born in 1845. He graduated from the University of Brussels in 1865. He had traveled, extensively and was widely acquainted with the world’s literature. Though trained in medicine, he became a hygienist of the first rank. His life was cut short by a train in Syracuse, N. Y., September 29, 1906. Besides his previously mentioned books, he is the author of The Bible of Nature; The Secret of the East; Zoological Sketches Summerland Sketches or Rambles In Mexico; Days and Nights in the Tropics, 1888; Body and Mind, 1901. During his years in America he contributed often to Physical Culture
No presentation of the high points in the history and development of the **Hygienic System** would be complete without due credit to one, yet living (1941), who has contributed much to the system and to the progress of the movement. Dr John H Tilden was born in 1851 in Van Burens burg Ill., and was reared in that State.

He tells us that it was at the cook stove that he learned how a sick kitten clings to heat. It was in caring for these animals too, that he learned that a sick animal will not eat. These two lessons were later to bear fruit in his practice.

Although his father was a "regular of the regulars," among physicians and did not look favorably upon the "irregulars" of his time, in 1870, young John entered the Eclectic Medical Institute, now the Eclectic Medical College, of Cincinnati, Ohio, where he graduated May 11, 1872. In 1874 the dean of Bellevue Medical College refused him graduation because he had received his degree in medicine from an “irregular” medical college. In that year’ he asked Bellevue Medical College how many terms of lectures would be required of him to graduate from that institution. Austin Flint, Jr., M.D., replied: “You may attend as many terms of lectures as you wish by paying the required fee, but under no circumstances will we issue a diploma to anyone who has accepted a degree from an irregular medical school.” This may serve to show the bitter animosity of the self-styled regular school, the most irregular of them all, for the other schools of that time.

Tilden practiced his first seven years at Nokomio, Ill.; then two years in St. Louis; taught anatomy and physiology in the American Medical College, now defunct; then moved to Litchfield, Ill, in 1881. From Litchfield he moved to Wichita, Kans., in August 1886. From Wichita he moved to Denver, Colo., where, he has remained since. He served on the Colorado State Board of Medical Examiners the first year and a half, resigned, was reappointed by the governor, but declined to serve. He tells us that when he first opened his office and expressed fear to his father about getting practice, his father replied: “Don’t fear! The fools are not all dead yet.”

He practiced medicine and surgery for twenty-five years and tells us that during this period he “took the practice of medicine seriously, and thought that, unless I was after the enemy - disease - with a good-sized arsenal, I was certainly derelict.” He adds that due to the fact that his memory occasionally lapsed, when visiting the sick, he would sometimes forget his armament and get miles into the country to see a very sick patient without a weapon.

“I invariably found my patients better on my return visits” and “these experiences were so frequent, and the results were so perfectly ideal, that I could never explain them away by coincidence. The truth was that the improvement was more satisfactory when I forgot my dope than when I gave it; and at last I loaded my gun with blank cartridges - sugar tablets - and gave these placebo remedies, until I mentally evolved to the truth that even sugar pills were injurious, in that the make-believe medication educated my patients into believing that their improvement was due to the supposed drug they were taking. This is the harm in doing for sick people anything labeled curative.”
It seems that few medical men ever get away from drugging without going through the bread-pill and colored water stage. It is unfortunate that many of them remain in this stage and never learn that any form of make-believe treatment receives credit for recovery, and this prevents the patient and family from really learning the truth about, “disease” and cure. Many drugless men never learn this truth and treat their patients with drugless methods which they privately acknowledge have no value, because, otherwise, they are unable to keep their patients on the hygienic part of the program long enough to get well. They fail to educate their patients properly and thus their patients credit their recoveries to their ineffective treatments and never learn the truth.

Tilden says: “Twenty-five years of medicating and extirpating disease, and twenty-five years of successful practice without carrying a remedy, have established a precedent making drugless methods easy. There are very few physicians, who can make a professional call on a patient without drugs, or without giving manipulative treatment, and give satisfaction; for the demand is that something must, be done - the people insist upon it. The superstition that a cure must be made is ingrained.”

Dr. Tilden claims to have discovered that toxemia is the universal basic cause of all disease. By toxemia, he means, as we saw in Volume VI, poisoning by retained metabolic end-products, and not the toxemias medical men talk about. He resents the charge that he derived his ideas from Nature Cure sources, but claims them as his own. On the other hand, in October 1924, Philosophy of Health, he says his “faddish ideas” have been gleaned from good, old, ‘regular’ scientific literature. However this may be, the elements of his theory are found in the works of Graham, Jennings, Trall, Taylor, Walter, Dewey, Densmore, Page, and other of his predecessors, from which sources he undoubtedly drew sustenance. Are we denying him due credit, if we say that his genius manifested itself in doing what his predecessors had been unable to do? - He took these elements and refined, coordinated and synthesized them and gave us a systematic and coherent theory of cause.

It may not be amiss at this place to point out that the doctor has devoted himself so wholeheartedly and so nearly exclusively to the development of this one subject, that it seems at times to have obscured his vision. The subject has become bigger than it really is. From being the universal basal cause of all disease, toxemia became the only disease. Such statements as the following are to the point: “There is no disease except Toxemia” (Philosophy of Health, May 1924); “There is but one disease, and this is Toxemia,” (Philosophy of Health, June, 1924); “Toxemia is the one and only disease,” (Philosophy of Health, June, 1924). He frequently speaks of the “Toxemia System,” and the ‘Philosophy of Toxemia.” Toxemia is spelled with a capital T, and tends to become the name of a system of care of the body, rather than the cause of suffering.

Dr. Arthur Vos, one of his co-workers, speaks of a “Law of Toxemia,” while another co-worker, Dr. George Weger, speaks of “the doctrine of Toxemia”; while, Dr. Tilden, himself says the use of side adjuvants, in treatment, “prevents a successful application of the Principles of Toxemia,” (Philosophy of Health, April, 1924).

Although, at first Dr. Tilden used the term autotoxemia, he later discarded it, and, when in the October 1923 issue of Philosophy of Health, he reviewed Froude’s book, Right Food the Right Remedy, he says: “he (Froude) refers eleven times in his index to auto-toxemia and not once to toxemia. This studious avoidance of an explanation of toxemia can mean but one of two things: either his information concerning the sources of toxin poisoning is sadly lacking, or he seeks to damn with faint praise by leaving out Dr. Tilden’s epoch-making fundamental: ‘Toxemia, the basal cause of all disease.’ Auto-toxemia means the generation of poison in the alimentary canal from an intake of more food than can be digested, and decomposition and infection take place. Ptomaine poisoning comes from the ingestion of food in a state of decomposition, the toxins of which poison the body. Toxemia means the retention of the waste products of metabolism.”

Yet, Dr. Tilden’s own original announcement was that “auto-toxemia is the universal basal cause of disease,” and he defined auto-toxemia thus: “Auto-toxemia means, poisoned by one’s own secretions, and it is brought
about by inefficient elimination, and faulty elimination is caused by enervation.” It is obvious to the analyst that poisoning by retained metabolic products is a true self-poisoning; while, poisoning from intestinal decomposition is a poisoning from without. However, this is a battle over terminology and need not longer detain us here.

The author is disposed to support Dr. Tilden in his vigorous and enthusiastic defense of toxemia as he presents the theory. He says “much criticism has been made of me recently because I object to junk.peddlers pretending they are using my methods in practice.” Of these, he says, “the junk-mongers, who pretend to cure and carry a full line of all kinds of cures, know nothing about Toxemia; for, if they did, they would not need the assistance of every two-by-four system.” “I want them to be advocates of Toxemia - not mongrels blowing hot and cold just for what is in it.” For, “all so-called cures in the end become causes - all varieties of palliation in the last analysis become causes. That is why I protest when some one is pretending to cure the Tilden way; for Tilden has no way of curing. The Toxemia System removes causes.” He adds, “a system that is universal in its application needs no side adjuvants; and, what is more, the use of them prevents a successful application of the Principles of Toxemia.”

While we do not believe that it is necessary to exalt toxemia to a universal system of therapeutics in order to preserve it pure from those who would use it to exploit their cures, we do feel that it must be preserved, from the defiling touch of those who have cures to sell. Dr. Tilden has said that “the Philosophy of Toxemia is an attempt to bring order out of the medley of mixing modern science with ancient mythologies. But it is hard to poise addled minds. One of the worst mix-ups is that of preventing disease; the cause of which is unknown, and unknowable, to medical science, as taught and practiced today.” Obviously order cannot be brought out of the existing chaos by allowing it to become inextricably mixed with the theory of toxemia.

However, let us keep the term toxemia as a term to designate a blood and flesh condition that is the fundamental cause of all so-called “diseases,” and not exalt it into a system of philosophy or of therapeutics. Toxemia is the cause of pathology - it is the Hygienic System that removes causes, that educates the patient, that is a universal system. Dr. Tilden is a “lone wolf” - he has never identified himself with the Hygienic practitioners, but has sought at all times to be known as a medical man. Perhaps this accounts for his failure to use the more comprehensive term Hygienic System, though, for the most part, his work is hygienic.

Discussing his discovery of toxemia, he says: “When this truth began first to force itself upon me, I was not sure but that there was something the matter with my mind. I saw that if I worked it out to its legitimate ends, it would bring me in opposition to every established medical belief. I held back, and argued with myself - I was afraid that I was developing a self-destructive egomania. I fought to suppress giving open utterance to a belief that would, in all probability, cause me to be hissed at - subject me to the jeers and gibes of the better class of people, both lay and professional. Why I discovered it I cannot tell, unless it was that I had been forced from one theory to another in my endeavor to find a rational excuse for the universal uncertainty, that all thinking minds must have experienced in trying to account for the apparent eccentric character of disease.”

Replying to his critics he said: “A doctor who has not investigated my practice should keep his mouth shut; he has no right to declare it fakery; besides that, other derogatory remarks should not be made before investigating what I stand for.” It is, however, doubtful that Tilden ever expected his principles and practices to be investigated. He knew human nature too well to expect anything more than to have to pass through the fires lighted by ignorance and bigotry while self-interest piled the fagots ever higher. He was too well acquainted with the narrowness and rascality of the medical bund to expect anything more than calumny and vituperation from that quarter.

In May 1900, Dr. Tilden published the first issue of his magazine, The Stuffed Club. In May 1915 the name of the magazine was changed to The Philosophy of Health. In 1925, the magazine was sold and its publication
continued for a few years thereafter by Dr. Arthur Vos, and, then, discontinued. In January 1926, Dr. Tilden re-entered the magazine field with his **Dr. Tilden’s Health Review and Critique** which he still publishes each month.

In January 1913, he opened his **Health School** and in a few years thereafter, people were journeying there from all parts of the world to be taught how to live to grow out of their suffering. At first small, the Health School grew and grew, until by 1923 it was a large institution, with a staff of nurses and doctors. Among its staff were George R. Weger, M.D., George E. Brown, M.D., Victor P. Fleming, M.B., Mortimer Fleming, M.B., G. R. Werich, M.D., Max Raabe, D.D.S., and Ida L. Vaniman, physical director. In 1925 the Health School was acquired by Dr. Arthur Vos, of Cincinnati, and Dr. Tilden temporarily retired from Health School work. He did not long remain inactive, however, and soon we find him busy at the head of another Health School, which he continued to conduct until early in 1939, when he retired from active practice to devote his time to the magazine and to the work of writing a few books he had long planned.

It may interest the reader to learn that when it was first issued, **Who’s Who** published Dr. Tilden’s pedigree, but thereafter dropped him from its list of worthwhile citizens. To compensate for this, however, Morris Fishbein, official mouthpiece of the American Murder Association, included him in his **Blue Book** of quacks and quackeries. Fishbein has also influenced public libraries to refuse to put Tilden’s books on their lending lists. Fishbein is a petty mountebank who spends much of his time hunting medical heretics.

His most important works are **Criticisms of the Practice of Medicine** (two volumes), 1909; **Appendicitis**, 1909; **Typhoid Fever**, 1909; **Gonorrhea and Syphilis**, 1912; **Diseases of Women and Easy Childbirth**, 1914; **Food** (two volumes), 1916; **Care of Children**, 1916; **Impaired Health** (two volumes), 1917; **Venereal Diseases**, 1920; **Constipation**, 1923; **Toxemia Explained**, 1926; **Children, Their Health and Happiness**, 1928. In addition to these there are **What to Eat when Traveling**; the **Pocket Dietitian**, and the **Tilden Cookbook**.

**A NEW TRUTH**

"It is fortunate for humanity that courageous souls are not afraid of the condemnation of the powers that be."

The Hygienic System belongs to the people and no gang of professionals should ever be permitted to corner it and claim it as their private property. If we allow the key of knowledge to be filched away from us, then, surely, we surrender “beauty for ashes, the oil of joy for mourning, the garment of praise for the spirit of heaviness.” If the public permits the reformers to be brow-beaten and common sense to be flouted, then surely will the keys of knowledge be purloined by the professionals who have a vested interest in sickness and are made paupers by health.

“Everything, therefore,” wrote Graham in the Graham Journal, October 10, 1837, “in the structure and operations of society, tends to confine the practicing physician to the department of therapeutics, and makes him a mere curer of disease; and the consequence is, that excepting the few who are particularly favored by their situation as public teachers, the medical fraternity, even of the present day, have little inducement or opportunity to apply themselves to the study of the science of human life, with that devotedness, and zeal, and perseverance, which the profoundness and intricacy of the subject require; while, on the other hand, almost everything by which men can be corrupted is continually presented to induce them to become the mere panderers of human ignorance, and depravity, and lust and if they do not sink their noble profession to the level of the vilest empiricism, it is owing to their own moral sensibility, and philanthropy, and love of virtue, and
magnanimity, rather than to the discriminating encouragement which they receive from society to pursue an elevated scientific professional career.”

Mr. Reinheimer well says: “Nature-Cure and Food-Reform are laymens’ sciences” and “the naturers, and food-reformers alike had to fight for life against the nefarious and dastardly schemings of the school-men. They had ever to beware against evil-minded beasts, lying in wait for them at every turn.”

In an editorial in the Graham Journal, September 19, 1837, Mr. Cambell says: “Whoever departs from any of the customs of society must expect to encounter its sneers or its scorn or, still worse, its pity. *** Perhaps no class of reformers are called to endure more general abuse than we who are popularly termed Grahamites. We are misunderstood, and then charged with, and held accountable for, doctrines which we abhor.”

"It seldom happens that the reformer reaps the benefits of the reform he introduces. Men are slow to understand and still slower to act."

One critic, writing in the New York Review under the title, “Dietetic Charlatanry, or the new Ethics of Eating,” paints a miserable caricature of the fare served at a “Graham table” and voided the following feculent egesta: “Unless checked, this wild fanaticism will sweep through the land, overthrowing every social comfort, every physical enjoyment, every pleasure that springs from sense, and refers to sense. Indulgence in the common luxuries of air and water will be soon set down in the Index Expurgatorial as a crime; and punishment and penalties be attached to every gradation of bodily comfort. To feel the pulse throb with joy, the cheek glow with delight, or the heart beat under the genial influence of spring time and autumn; in fine, to yield in any way to the generous and universal emotions of humanity, will next be deemed a damnable heresy and perversion of our moral faculties. The adventurous champions of this dietetical quixotism would ride through the country, armed cap-a-pie with argument and denunciation, and, like the moss troopers of the Scottish border, snatch from the peasant’s pot his haunch of mutton or round of beef, and force him to live on kale and cold water.”

It was not then new for the opponents of a new movement to distort and misrepresent it in order to discredit it; the practice, is by no means dead. Anyone who will take the trouble to read medical criticisms of the Hygienic System and who will then investigate the system for himself, will quickly discover that they are seldom honest in their presentation of the matter.

For ages doctors have behaved as though they think they alone have charge of the world. As a natural consequence, they run into many of the excesses of fanaticism. They have ridiculed and persecuted those outside the ranks of the regular profession who have attempted to aid their suffering fellowmen, even though they may later have been forced to accept their principles and practices.

So prone are men and women to regard their own ingrained prejudices as established first principles that it is difficult to attack and expose old errors without offending those who hold to these; for, men usually regard an attack upon their inherited beliefs and prepossessions as an attack upon their persons. Tradition blinded, convention bound, hibernators in antiquity, as was expected, rejected the orthopathic principle and the hygienic practice. The bigotry and malignity of the profession is evidenced by the persecution, which they heap upon all outsiders and all dissenters within their own ranks.

"Both dissent and opposition should be raised against all who would teach error and suppress and vilify truth and right."

Some one has said: “So limited is the human capacity, that the most exalted genius, and the deepest powers of investigation, have not been able to raise their possessors above the errors and prejudices of their age, on subjects which have not been made the peculiar object of their reflection.” The great and learned in other fields
of human endeavor have been, for the most part, unable to rise above the popular medical fallacies, prejudices and traditions of their time. For this reason the movement for living reform has progressed slowly and met with much unintelligent opposition, but it has progressed. Opposition is naturally expected from those whose livelihood is derived from exploiting the sick and suffering; but from those who derive no benefit from the suffering of others, we have a right to expect an intelligent and open-minded hearing.

It is fortunate for humanity that courageous souls are not afraid of the condemnation of the powers that be; that rejection of error, and refusal to do mischief does not stain a man with dishonor. Rather, dishonor attaches to him, who, well knowing that his practices are laid in error and are damaging to his patients, adheres to them and scatters its curses broadcast over the community in the form of shattered constitutions and shortened life. Dishonor attaches to that profession, which, while recognizing the futility and destructiveness of its practices and the incorrectness of, its principles, continues its practices. He who labors to discover the laws of Nature and who makes these the basis of his art and science should not be asked to harmonize with the reckless and selfish demagogue who is either too shallow pated to discern the distinctions between truth and error, or else, too dishonest to choose the former and reject the latter. Both dissent and opposition should be raised against all who would teach error and suppress and vilify truth and right.

"The reformer must pay a price, often a big one, for the privilege of awakening his fellowmen to a realization of their errors"

It seldom happens that the reformer reaps the benefits of the reform he introduces. Men are slow to understand and still slower to act. But this does not deter the man or woman who possesses a genuine love of his fellowman and whose desire for the betterment of the race is no mere sentimental pseudo-religiosity. Rather he bravely faces the disappointments he is sure to experience and with courage and determination advances the cause, which, as he sees it, stands for the liberation and enlightenment of his fellows.

The reformer must pay a price, often a big one, for the privilege, the greatest of all privileges, of awakening his fellowmen to a realization of their errors, and educating them to an awareness of a better and nobler life than that which they have formerly known. Men who cast aside the conventional prejudices of their age and country, and who dare to proclaim and live up to the truths which they perceive, seldom receive the esteem and respect they deserve. If they are sincere and courageous, they care naught for the personal discomfort, which the announcement of their message brings upon them, but carve out a way for themselves.

The greatest things in the world have seemed impossible to men and women when first they were made acquainted with them. If the new has threatened or even only appeared to threaten the old order, it has been met with violent opposition; often by those who stood to profit most by the acceptance of the new.

What if a new truth does smash all of our venerated traditions; it still is the truth. We should not be interested so much in upholding traditions, however hoary and universal these may be, as in discovering the truth. Truth has a habit of getting itself accepted sooner or later, even though it may be forced to run the unsympathetic gauntlet of incredulity and unbelief.

Dr. Oswald says: “The mere announcement of a new truth has thus more than once led to its general recognition. It was in vain to legislate against the spread of the Copernican theory; the heavens refused to ratify the veto of the Inquisition. Newton’s principles and the doctrines of evolution could dispense with the favor of critics. They prevailed by solving many riddles, nature, logic, and experience, conspired to insure their triumph; in their theorems friend and foe found the solution of mysteries which other keys failed to unlock. The gospel of Natural Hygiene, too, can appeal to the evidence of that crucial test.” - Nature’s Household Remedies, p., 1-2.
Our real object is to bring self-knowledge to the people and teach them to guide themselves. The student cannot learn these if he is taught the current conceptions of sickness (microbes, exposure, etc.), and the current conceptions of cure obtained through a purely symptomatic fight with the exclusive assistance of drugs, serums, knives. A knowledge of habits and their influences is of far more value than any amount of knowledge of physics, chemistry, pharmacology and materia medica.

"Our real object is to bring self-knowledge to the people and teach them to guide themselves."

A Grahamite writing in the September 26, 1837 issue of the Graham Journal says: “Let us rest assured that whenever there is any derangement of the healthy functions, it is owing to something wrong somewhere within the region of our voluntary habits, and that this wrong ought to be at once corrected, and, in future, avoided. We must not be ashamed to attend to ‘little things,’ in relation to our health, keep a constant watch on our habits and feelings, and whenever there is a symptom of the slightest illness, it is our interest, as wise, and our duty as accountable beings, to inquire what has caused it, and avoid its repetition. No reasonable man will allow injury to accumulate upon injury until the compensating economy of the system is exhausted, and the constitution is entirely prostrated. If we reflect that every violation of the laws of health inflicts an injury really irreparable, the system never recovering the full vigor which it would have possessed, if those laws had been obeyed, we shall not neglect any one of those trifling things, the aggregate of which constitutes health and happiness.”

To those who have eyes to see, it is manifest that a new day has begun to dawn upon the earth and this is rapidly rendering old beliefs and old practices obsolete. A continuous disintegration of the old beliefs, together with the systems based thereon, is, in progress. That this has given rise to a large number of hostile and divergent sects is unfortunate, but this state of inchoate confusion will be evanescent. The mountain tops are already tinged with the golden glow which speaks the near approach of the joyous morning.

“The dawn is at hand,” as Oswald remarked; the number of hygienic practitioners is increasing. Some of these are recruited from the ranks of materia medica, others from the various drugless schools for, no man can study the Hygienic System, even with hostile intent, without having the truth of its principles and the worth of its practices forced upon him. It was inevitable that the deep-flowing popular current that is flowing towards Natural Methods should sooner or later splash over the sides into these systems.

However, we must not expect much in the way of reform from medicine. It is eaten up by the dry-rot of a soulless commercialism. Medical practitioners are all but lost in the mephitic vapors which ascend out of the stygian pool of the profit system; hence a profession which should have lighted the way for the world, is so filled with stygian darkness that it is quite unable to afford any light or leading to a sick world that is earnestly desirous of knowing the truth.

"It is impossible for the informed man, to hold the old beliefs and conform to the old practices, and still retain his self-respect."

Medicine does not progress. The forms may wax old and pass away, but the spirit which dwelt therein is given a new, often a more showy, embodiment and goes on making the same old mistakes in the same old ways. They tell us by implication, if not in so many words, that after many millions of years of trial and error, and of evolution, we have little better than unregulated chaos, and a life waiting for the knife and serum. This cannot be accepted.

It is impossible for the informed man, who makes use of his reasoning faculties, to hold the old beliefs and conform to the old practices, and still retain his self-respect. Hygiene, therefore, is the open and declared enemy of Medicine and the annihilation of this vast structure of fallacy is one of the most important tasks of contemporary civilization.
In the case of the man who desires to preserve his intellectual rectitude, it is an absolute necessity that he should endeavor to find some reasonable justification for the principles according to which he attempts to order his life. When such a man finds that the current beliefs do not harmonize with true principles, it obviously becomes necessary to his moral and intellectual well-being that such false beliefs be discarded forthwith.

When doubt is thrown upon the old medical beliefs and practices, and when these begin to lose their credibility, it becomes imperative that the honest man, desirous or preserving his intellectual rectitude, strive earnestly to discover principles and methods of living that harmonize with the nature of things.

"Medicine does not progress. The forms may wax old and pass away, but the spirit goes on making the same old mistakes in the same old ways."
Fallacy of Cure

Chapter I

"As soon as people learn that suffering is a consequence drawn upon themselves, they will learn to avoid the causes of suffering."

“Quod Medicamenta non curat ferrun curat, quod non curat ferrun ignis curat”, - “what drugs (poison) won’t cure, must be cured with iron (the lancet); if that fails, resort to fire.” The whole of medical practice through the ages, has been based on the delusive assumption that “disease” is something to be attacked, subdued, suppressed, combatted, driven out, or, in some other way, defeated by violent means. Hence medical practice has been a war, the shot and shell of which fell, not upon the fictional entity called “disease,” but upon the body itself.

“In the tragedy of errors, called the history of the human race,” wrote Dr. Oswald, “ignorance has often done as much mischief as sin.” In the treatment of human ills, ignorance and short-sightedness have done far more mischief than sin. No greater tragedy of errors is conceivable than that presented by Medical Practice and Theory and by Medical History. A radical error in all medical systems is their proposal to improve health on theories and measures incompatible with life. An agent which causes “disease,” whether a bad one in its nature, or a good one misapplied, is not the proper agent with which to cure “disease.” We laugh at physicians of the past who were obliged to let blood after Stahl; to vomit after Hoffman, to purge after Kampf; and exhaust deep alembics after prescriptions a yard long, full of every stench of the old world and the new; we laugh at the homeopathic days when hemorrhage was stopped by blood-letting, diarrhea by physic, and salivation by mercury; but we tend to close our eyes to the powerful drugs and liquid damnation we pour down the throats or squirt into the bodies of the sick today. Old Father Time hung up his scythe in the days of the bloody lancet and heroic dosage and left it there to rust. He has not had occasion to remove it since. Scalpel and poison still hustle men and women into the henceforth long before Father Time would cut them down.

Primitive man’s reaction to sickness was essentially one of intense fear and dread. He did not understand it. He did not know its causes nor its ends. He only knew that he was uncomfortable and that he suffered, even died. He quite naturally regarded “disease” as an enemy, bent upon torturing and destroying him. He early developed the idea that “disease” was an evil spirit or demon, an invisible, intangible enemy, that came out of the unknown and settled within his body to torture and destroy. “Diseases” were anthropomorphic shadows, that sought to injure and destroy man.

With this idea of disease as a premise, primitive man built up his methods of combatting “disease.” He attempted to drive away the unseen and voracious monster that was eating at his vitals. If “disease” settled in his arm he mutilated the arm in an effort to destroy the “disease.” If the “disease” took up its abode in the interior’ of the trunk he filled himself with vile, bitter, nauseous and poisonous witch-broths and concoctions to drive out the evil spirit. His idea was that if by any weapon - poison, fire, violence, force, etc., - he could make things unpleasant for the “disease”, it would depart.

This was the origin of the belief in cure. All the ideas and theories of cure that have come into existence since, and all the therapeutic practices which have had, or do now have their vogue, have been and are built upon this strange misconception of the nature, cause and purpose of disease.” Primitive man, unable to comprehend or explain the phenomena of “disease,” built up for the race, an inheritance of fear and misunderstanding which has been a foundation of much suffering and evil. Not only has modern science failed to dispel this fear and misunderstanding, but much of what is now called science is actually based upon it. It is really difficult to
overestimate the importance of this “fear reaction” and “cure complex” in our daily habits and in our intellectual life.

Oswald says: “For, rightly understood, the external symptoms of disease constitute a restorative process that cannot be brought to a satisfactory issue till the cause of the evil is removed.” The popular method of “breaking up a sickness,” he said, is, “In reality, only an interruption of it, a temporary interruption of the symptoms.” He declared of such cures, “we might as well cure the sleepiness, of a weary child by pinching its eyelids, or the hunger of a whining dog by compressing its throat.” By silencing the whining, the symptoms of hunger, we do not cure its cause, the need for food. Again, “In sickness, stimulants cannot further the actual recovery by a single hour. There is a strong progressive tendency in our physical constitution; Nature needs no prompter; as soon as the remedial process is finished, the normal functions of the organism will resume their work as spontaneously as the current of a stream resumes its course after the removal of an obstruction.” - Physical Education.

When the essential nature and purpose, the rationale, of biogony is fully understood, it will no longer be treated. Its symptoms will no longer be suppressed, subdued, changed, or combatted. Jennings says: “The vital economy has but one great and absorbing object before it and in the prosecution of that object, it is not easily diverted to the right hand or to the left hand. When difficulties thicken in its pathway, its forces are all put in requisition, disposed and used to the best advantage for surmounting the difficulties, and it is instructive as well as astonishing to witness the amount of obstacles that human nature will often overcome and still hold on her way, even under apparently, an almost exhausted state of the vital energies.” - Philosophy of Human Life, p. 219.

Every biogony and every symptom of biogony is beneficial in its action and represents vital effort in self-defense. Every method of treatment that is aimed at the removal or suppression of symptoms, and not at the correction and removal of cause, is evil and destructive. It is a combat against the body and the powers of life. It does not cure, but kills. Unfortunately the eye sees only the dim spectre of illusion and change beating its vampire wings in the void. This is the reason every therapeutic fallacy, whether still in use, or long since forgotten, has found thousands to bear witness to its efficacy.

The error that “abnormal” vital actions are evil in themselves - are “disease” - has deprived all who accept it of the power to learn anything about the value of their methods of treatment. It causes allopaths to declare of their drugs, “whether as causes of disease or as remedies, their action is fraught with the highest degree of uncertainty.” The assumption that what they, call “disease” is the foe of life that must be suppressed or subdued before it destroys the life of the patient, is the fundamental error that has vitiated all of the theories and practices of all the “schools of healing.”

Burning with white-hot irons, poisoning with deadly drugs, amputations and other surgical atrocities, electrocutings, maulings, “adjustments,” the beating of tom-toms, use of charms and incantations, and resort to prayer, have all been based on the delusion that “disease” is the foe of life and, must be destroyed. The medical professions are at war - fighting a fictional entity.

Historically and psychologically, cure is identical with the effort of the savage to save the sun in an eclipse. The Choctaws believed an eclipse was caused by a little black squirrel trying to devour the sun. They could save old Sol only by making a loud noise and threatening the squirrel, with their tomahawks and thus scaring him away. Cushman says be was, more than once, an eye-witness to these performances and that he could testify, from experience, as to the efficacy of the procedure, and adds: “At least the sun came out all right.” The Indians were fighting a fictional entity and their experience proved that their curative method worked. They mistook a mere coincidence for cause and erected their system of cure upon an apparent fact, just as systems of curing the sick body have all been erected on mere appearances - coincidences.
The doctors have not known any more about the nature of disease than the Choctaws knew of the nature, of an eclipse. Whatever “remedy” they administered coincident with recovery - subsidence of symptoms - received credit for the cure; although the supposed remedy had no more to do with the “cure” than the noise of the Choctaws had to do with the ending of the eclipse.

I cannot too strongly impress upon the mind of the reader the importance of grasping the fact that “disease” is not something to be cured, but that it is the process of cure. This fact is of fundamental importance in this discussion and must lie at the root of all further considerations of our subject. Keep in mind that in treating the visible parts of “disease” the physician is treating the curative process and not touching the causes of the “disease.” The whole effort to cure is based upon the assumption that “disease” is something to be attacked, subdued, suppressed, driven out, or, in other ways, defeated by the treatment.

Truly did Jennings declare: “Spontaneous or natural cures - and there are and can be none other - have to stand vouchers for all sorts and sires of medical doctrines, whether they emanate from M.D.’s of loftiest standing, or are the spawn of charlatanical cogitation. Whatever notion is entertained respecting the nature of disease, whether it be that of wrong action, altered state of the vital properties, bad blood, or general depravation of fluids, or anything of a heteropathic nature, the final appeal for vouchers to the correctness of their doctrines is to cures, which have been performed by them respectively.” - Tree of Life, p. 180. He again declares in this same work (p. 170), “Providential Nature is not careful to distinguish in her cures, between those attended by learned doctors and those prescribed by the vilest quacks.”

One of the best attested facts of medical history is that the human organism has the ability to overcome morbid influences in spite of treatment and conditions that are positively obstructive; yes, even murderous! Imagine a patient suffering from typhoid fever being kept in an almost hermetically sealed room, smothered in blankets, allowed no water to drink, stuffed with milk and brandy, drugged with calomel, blue mass and antimony and bled regularly. Was any treatment ever devised more destructive, more murderous? Yet within the lifetime of many now living this was the approved allopathic treatment of fever. Not a thing was done that could have been of any advantage to the patient in recovery; but, on the contrary, every single measure mentioned above was calculated to shorten the patient’s life. In spite of it all, a majority of such patients recovered.

There is an unfailing tendency on the part of the living organism towards health. The inherent effort of the system to preserve its structural and functional integrity and its never ceasing efforts to resist, overcome and throw off any and all morbid influences which may be brought to bear upon it, assures us that a system that is properly organized and possessed of sound functions, will be able to promptly and completely, and unaided by any external influences whatsoever, overcome and throw off all morbid influences unless these are so virulent or in such overwhelming quantity that they destroy life at once. Health is maintained and the injurious action of pathogenic influences overcome by the silent, unconscious but ever active powers of defense and self-preservation of the body. Pathogenic influences, when sufficient to cause pathology, are thrown off and normal health reestablished by the same silent forces, even in the face of crucifying treatment.

In all ages, recovery from “disease” under any form of treatment, has been regarded as proof of the curative virtue of, that form of treatment. Patients and physicians were deceived by appearances. Mere coincidences were mistaken for causes and effects. Cures that were accomplished in spite of “remedies” were attributed to the “remedies,” because men did not know and did not understand the essential nature of “disease” and its essentially evanescent character. “An examination” says Dr. Emmet Densmore, p. 9, “of the methods of operation of orthodox old school medicine shows that these physicians, although able, learned, earnest and scientific, have been utterly misled as to the nature of disease. They have considered disease an organized enemy and positive force, which has taken up a position within the body and is carrying on a warfare with the vital powers; and the legion of heroic remedies (so-called) which orthodox physicians have prescribed and are
prescribing for suffering invalids are the shot and shell hurled at the invisible enemy, in the hope of dislodging
and expelling it. Not understanding the law of cure - that there is always coincident with life a tendency toward
health - these well-meaning physicians have accepted a recovery made in spite of their medicines as the result
of their (so-called) remedies.” Again, pages, 11 and 12; “And this failure, alike on the part of the physician and
patient, to understand that all illness and pain is only an effort on the part of nature to rid the system of disease,
and that a tendency toward recovery and health is an inseparable part of life, explains why it is that for
generations and for, ages there has been a constant change in methods of doctoring coincident with an undying
faith in the efficacy of the doctor and his methods. A patient is taken ill, a doctor is called, and in a great
majority of cases the patient recovers; superficially the sending for the doctor seems to have been wise. Upon
reflection it will be seen that fetishism has the same justification for existence. Some wooden God is cringingly
approached by the friends of a sick man or the services of the ‘medicine man’ secured on his behalf, and as
these methods are often merely ceremonial, and appeal rather to the imagination than to the stomach, and so
give the system time for curative action, wonderful cures are of course the result. Only a few score of years ago
bleeding was the orthodox fetish” - How Nature Cures.

Medicine has been a ceaseless round of changing theories and practices throughout the ages. Many thousands of
different materials and means of cure have been employed by physicians. Every generation has developed new
drugs and discarded or “improved” old ones. Many thousands of these are still listed in the official list of drugs.
It is, however, generally admitted by medical authorities that there are only about a dozen “valuable drugs.” It is
a strange thing that the “useful” drugs are about the most deadly they possess - mercury, arsenic, quinine,
opium, and a few others.

For thousands of years, bleeding was almost a panacea. The rivers of the world ran with blood spilled by the
physicians. They spilled more blood than war and wild beast. It was an ingenuous practice. The practitioner had
to know just where to bleed for each “disease.” He had to know on what days to bleed and not to bleed. The
phases of the moon, positions of the stars, and many other elements of astrology had to be considered. The
practice was much like the system of acupuncture which has “cured” millions in China during the past three to
four thousand years. This is a system of sticking needles into the body to chase out the demons of “disease.”
The acupuncturer must know at just what point on the body to insert his needle for each “disease.”

That the sick recover goes without saying. Under all forms of treatment and with no treatment at all, people get
well; that is, the symptoms subside, to return again as another “disease,” to disappear again. This periodicity or
alternating of periods of health and “disease” - this coming and going of biogony - has given rise to the general
belief in cures. Most “attacks” of every so-called “disease” get well - are self-limited - and this permits the
practitioners of all schools to claim great success for their methods. The faces of the most absurd theories and
cures have been saved because of this ebb and flow of health. Those so-called systems of cure that least hinder
vital operations apparently produce the most cures, and the priests of the systems are called successful doctors.
The only merit these “more successful” methods have is the negative one of not curing more but killing fewer.

It is impossible to reconcile the theories and practices of the antagonistic systems of medicine. If the large,
heroic doses of poisons of Allopathy have any reason or truth on their side, then the highly attenuated and
diluted doses of Homeopathy are worse than a fraud and delusion. If Homeopathy succeeds as well as or better
than Allopathy, this success would prove that the damaging and dangerous poisons of Allopathy are
unnecessary and should be abandoned. If the theory of health, disease and cure we are advocating in these pages
is correct, there is no value in either of these systems and they are both attributing cures to their respective
remedies that were accomplished by the unaided powers of the body. Both schools are deluded. If we are
correct, Homeopathy should be the most successful system because it is the least harmful.

If the drugs of Allopathy and Homeopathy have any truth on their side all patients cared for by mental scientists
and Christian Scientists should die. But if the success of the latter is as great as or greater than that of the
former, the drugs of neither are needed. If either of these systems are correct the Chiropractors are wrong, whereas, if Chiropractic is correct, all the others are wrong and are murdering their patients. Thus we might go through the whole list of modern and ancient medical cults and find the same thing.

Crude experience is often very deceiving in this particular, and nothing is more disgusting in this connection than the pomposity with which some persons appeal to their individual “experience,” when it is patent to all that such experience is at direct variance with the past and current experience of all the remainder of mankind.

If cures follow the most absurd treatment - follow “remedies” that act in diametrically opposite manners - the reason for this paradox should be of great value to the truth-seeker. Under all methods of treatment the forces of life are at work - silently, it is true. What if these forces have secretly been counteracting the wrong doing in the modes of treatment and putting the treatment seemingly on a level with right methods? People get better in spite of all cures, as is always proved after time has demonstrated their fallacy.

“It is strange,” says Tilden, “that the average individual, cannot see the ridiculousness of a continual advertising of new cures, when the world is so full of other cures. Why go looking for cures when there have been enough cures discovered in the last fifty (sixty) years to satisfy anybody? Why is this? Because there has not been one single cure discovered for anything, and there is not one single cure today in the whole catalogue of scientific therapeutics.” None of the “stupendous” new cures produce more benefit than Christian Science, suggestive therapeutics, or Coue’s “every day in every way.”

If we give a “remedy” to a sick man and he recovers, how is it to be shown that the “remedy” cured him? It may well be that the organic forces and processes cured him in spite of the supposed remedy. If he dies, his death may be the result of the “remedy,” or the result of the causes of pathology, or both acting together - how shall we know which? The Homeopaths declare that “remedies” should be tested on the healthy subject, that only thus may their “actions” on the system be determined. But what do their “tests” show? Simply this: that their “remedies” produce “disease” in the healthy. They, then, administer them to produce “disease” in the sick.

Take, as an instance, the absurd notion of Hahnemann, that when the “cure” of a “specific disease” in a hundred different cases, follows the administration of a hundred different drugs, of as many different specific qualities, properties and capabilities, the cure in each case was effected on the ‘principle of the “law of similars.” Even he should have recognized that when remedies were administered according to the allopathic “law of antipathy,” the “cure” was not the result of the outworking of the “law of similars.”

If a hundred different cases of typhoid or pneumonia are treated with as many different “remedies” and they all recover, the most thoughtless observer should recognize that the recoveries are not due to the fact that all of these different “remedies” are curative and of nearly equal value in these “diseases,” but that the recovery in all cases is due to something other than the supposed remedies. When recovery follows the use of such a heterogeneous group of “remedies,” it is not because each drug acts upon the body or the cause of pathology, but because cure is the work of the biogony.

The supposition of the medical world that their pathogenic agencies (“medicines”) are good or bad according to the quantity employed, and the conditions under which they are administered - that one grain of the poison kills, but one-half a grain cures; that it kills the well man, but cures the sick man - is based on the illusion of drug-induced recovery. The idea that an agent acts differently in health from what it does in “disease,” is a direct outgrowth of the old dogma of entitative “disease,” and is still clung to fondly by the drug schools. Even admitting their list of cures, it still remains that their cures could’ have been effected by wiser methods and without the inculcation and perpetuation of age-old errors, which are certain to confuse the mind and leave the way open for the development of other troubles.
The antagonizing precepts taught by the various schools are, however, seen to neutralize each other in theory, while the results in practice are quite identical, so as hardly to indicate a preference except that we would choose the comparatively harmless methods of the drugless schools, rather than the more harmful drug methods. None of these methods is, however, quite satisfactory to the thinking community. They are destined to pass away and be forgotten.

The human organism has wonderful recuperative abilities and has generally had to contend both against the “remedy” and the cause of the “disease.” Morbid states are recovered from through the exercise of the recuperative tendency inherent in the living organism. The body lives through a period of drugging by virtue of the wonderful resistive and recuperative power it possesses. Some poet said:

“Dame Nature lends a helping hand
To ev’ry pathy in the land;
All kinds of doctors have success,
Whether by science or by guess.
The Chinaman gets well, we see,
On lizard soup and ginseng tea;
Doctored right or doctored wrong
Mankind will live about so long.”

The doctor tries first one, then another “remedy” until his patient either dies or recovers; and concludes, if the patient recovers, that the last “remedy” was the right one; if the patient dies, he died “in spite of all that science could, do.” If the patient recovers, the doctor cured him; if he dies, the “Lord took him.”

The average physician reasons that the methods employed are responsible for the results - that if a patient is treated in such and such a manner and recovers, the treatment cured him. Results prove it. The logic in the reverse direction is equally as good. If a patient is treated by these same methods and dies, the treatment killed him. Results prove it. One position is as logical as the other and the latter one is in strict accord with the facts.

The Heteropathic babel of medicine, including its theories and practices, is stamped with the seal of delusion. Such uniformity of results seemingly proceeding from such diversity of means and methods is only explicable on the Orthopathic principle. If the Heteropathic doctrine were correct the human race would long ago have perished. The present universally chaotic state of medicine, in connection with the irrationality and monstrous absurdity of its various theories of disease and the great manifest incongruity of medical practice, its use of positively poisonous substances and damaging measures and violent disorganizing processes, used with a view to “help nature” all conspire to place a stamp of delusion upon therapeutics and corroborate the theory of Orthopathy.

This miscalled science has been fully organized and elaborately equipped for several centuries. It has absorbed such an enormous share of the total wealth of the world that no believable estimate can be made of this. It has been more lavishly encouraged by governments, communities and philanthropic individuals, than any and all other arts and sciences. A greater number of the bright minds of earth have devoted themselves to its problems, and more time has been given to the solution of these problems, than to all other problems with which scientists and artists contend.

And, with what result? Only this - they succeeded for a time in deluding themselves and the race and in estranging man from nature, until the universal dupe seemed to consider himself helpless and utterly at the mercy of the arrogant, intolerant and all-grasping schools and confederations of schools. But they have not succeeded in finding one real cure for a single form of “disease,” and all of them have been forced to admit their failure. At present the fact is beginning to dawn upon the minds of a few that nature is not to be coerced or
cajoled by the administration of poisons or by the application of drugless methods, but that she does her own repairing in her own way and has provided simply and adequately for this.

If a pneumonia patient is cared for hygienically and another is treated pathogenically (with poisons), and both recover, are we, therefore, to conclude that pathogenic agents are as beneficial as hygiene? Such a conclusion would be ridiculous. In all biogonies, Nature makes the proper efforts to remedy the trouble; consequently, whatever obstructs or impedes those efforts, hinders or prevents recovery.

Jennings quotes an excellent example of the opposite practices of medicine from an old work by one Dr. N. Smith, on the **Treatment of Typhus Fever**. He wrote: “The practitioners of medicine in New England have been divided on this subject and while one part have converts to the doctrine of blood-letting to a high degree in this affection, the other has condemned it in toto; and, as though opposition had produced a kind of reaction on their part, they have had recourse to the most powerful stimulants both internally and externally, such as opium, wine, alcohol, and the most acrid stimulants, as cayenne pepper, arsenic, etc. Indeed, individuals of this latter class have carried their prejudices to such an extent as even to boast of having made their patients swallow three pints of strong brandy, accompanied with large doses of laudanum, and cantharides. I have myself seen a prescription in which opium, wine, alcohol, cantharides, and arsenic, were all to be taken several times in the course of twenty-four hours.

“It is remarkable that, though the practice of these two sects for such they seem to be is as opposite as possible, each considering the other mode of treatment as highly deleterious, yet all boast of success, and enumerate various cases which have fallen under their care, with scarcely the loss of a single patient.

“There are but two ways of accounting for the equal success of these two opposite modes of cure, for as far as I can judge, there is not much difference in the success which attends them. Either the disease, is not so much under the control of blood-letting as they would have us believe, or these two extremes produce about an equal degree of mischief; for it is not conceded that if a patient does not require bleeding, he stands in need, of opium, arsenic, cantharides, or alcohol”

Dr. Smith was right; these two opposite practices did produce about an equal amount of mischief. Neither method had the “disease” under control. A news item published a few years later reads: “A Typhoid Fever epidemic has been ravaging the North-Western parts of South Carolina, which in numerous cases has proved fatal. It has been a fact noted in its progress, that the more, powerful the remedies employed, the more fatal the disease. Those only have recovered that have taken no medicine.” And why not?

Dr. Smith mentions a prescription he had seen, in which the unfortunate patient had been plied so bountifully with stimulants. This case occurred near Middletown, Conn., about ninety years since. It was called “sinking typhus.” Dr. Smith was called to see a gentleman thought to be dangerously ill. He found the strictest medical surveillance, with the stimulants mentioned to “rally his vital forces” whenever they should manifest a disposition to go to sleep on the job. After a careful examination, the doctor declared their alarmed apprehensions groundless and by a complete change in treatment, “which gave nature an opportunity to exhibit the true state of her affairs, the man was soon restored to his usual health.”

In this connection, Dr. Jennings relates an interesting story that serves well to illustrate the thought we are trying to convey to the reader. He says: “after this disease had been in progress a while, and, had extended somewhat beyond its original bounds, I inquired of Dr. Joseph Foot, of Northhaven, whose field of labor lay between me and the infected district, whether there had been any cases of ‘sinking typhus’ in Northhaven. ‘Not till quite recently,’ replied the doctor. ‘A sinking typhus’ physician moved into the place a few weeks ago, and since that I have heard that we were having some of the ‘sinking typhus.’ The thought was rather new to me at
the time, that the type of disease was fashioned somewhat by the doctors; but I became satisfied that there was no
some ground for such opinion."

Dr. Walter also emphasizes the fact that the prevailing types "disease" of in any period are determined largely by the medical theories and practices of the time. He says: "Opium, arsenic, digitalis all produce the very diseases they seem to remove. And history well proves that any class of diseases thrives and multiplies in close ratio to the practice that cures them. When bleeding and purging were the accepted methods of cure, blood and bowel diseases became correspondingly, frequent and alarming, but when the theory of cure changed, and physicians began the practice of sustaining the patient’s strength by nervines, tonics, stimulants, etc., nervous diseases, and especially nervous weakness, correspondingly increased. So, wherever a medicine produces sleep it does so by taking away the power of sleep. What cures a headache will invariably make a headache, of which coffee is a fine example."

Again: “But they (drugs) destroy and kill by appearing to save and cure. *** All the while drugs are giving the appearance of strength they are exhausting the patient. They arouse vital resistance and expend vital power, all the while they seem to give the power. They also change the symptoms of the disease and so relieve the patient’s fears, all the while he is being made weaker. Old symptoms are relieved but worse are taking their places. But, as they have not yet attracted attention, the patient is still deluded into the belief of improvement. By and by, when the new symptoms become established, and reported to the doctor, a new disease or complication is diagnosed, and new remedies prescribed. How long it takes to reach the end under such circumstances depends chiefly upon the constitutional capacities of the subject who is being tampered with. No greater paradox, therefore, exists in our day than that the treatment which seems to be curing is the treatment which is killing; the more faithful the physician the greater the danger, to the patient; the more nearly correct the diagnosis, the worse the result.” - Exact Science of Health, p. 180.

There is no disputing the fact that the supposed remedial effects of drugs are intimately connected with their capacity to produce abnormal effects. The consequences of their continued and prolonged use are very undesirable Trall’s words are to the point. He says ‘Drug medication, no matter in what disguise nor under what name it is prescribed, consists in employing, as remedies for disease, those things which produce disease in well persons. Its materia medica is simply a list of drugs, chemicals, dyestuff a in a word, poisons. They may be vegetable, animal or mineral, and may be called ‘apothecary -stuff’ or medicines; but they are, nevertheless, poisons. They may come to us in the shape of acids, alkalies, salts, oxides, earths, roots, barks, seeds, leaves, flowers, gums, resins, secretions, etc., but all are subversive of organic structures all are incompatible with vital functions, all are antagonistic to living matter; all produce disease when brought in contact in any manner with the living domain; all are poisons.

“On the contrary, Hygienic Medication consists in employing, as remedial agents for sick persons, the same materials and influences which preserve health in well persons. It rejects all poisons.

** * * * I would not poison a person because he is sick. No physician has ever yet given the world a reason that would bear the ordeal of a moment’s scientific examination, why a sick person should be poisoned more than a well person; and I do not believe the world will ever endure until he finds such a reason. The medical profession may prosecute this inquiry another three thousand years, and destroy other hundreds of millions of the human race in experiments with drugs and doses, but they will never arrive any nearer to a solution of the problem. They will never be able to give a satisfactory answer to the question, for none exists.” - True Healing Art.

The relation of drugs, serums, vaccines, etc., to the living tissues is one of antagonism. Take one of them separately and it is a poison. Give a patient a whole drug store and it is one mass of poison. Trall wrote: “Says Dr. Bigelow (Nature in Disease, p.17) ; ‘The effects of remedies are so mixed up with the phenomena of disease, that the mind has difficulty in separating them.’ Indeed it has. It never can separate them. The ‘effects of, remedies’ are the ‘phenomena of disease,’ and nothing else.
“And what are the remedies which God and Nature have provided? Drugs, poisons, chemicals, banes, of every name and kind! Banes, did I say? Has not every medical school its favorite bane? Allopathy regards arsenic - rat’s bane - as a very good tonic. Homeopathy prescribes nux vomica - dog’s bane - as an admirable nervine. Eclecticism selects hyoscamus - hen bane - as a proper sedative. And physio-Medicalism considers eryngero - flea bane - as an excellent febrifuge. Professor Pain is right. We do indeed ‘cure one disease by producing another.’

“But the provings; aye the provings! How do medical men prove that these medicines are remedies for sick folk? In precisely the same way that Toxicologists prove that they are poisons for well folks.

“When these poisons are given to well persons they produce more or less of nausea, vomiting, purging, pain, heat, swelling, gripping, vertigo, spasms, stupor, coma, delirium and death. When they are given to sick persons they produce the same manifestations of disease, modified, more or less, by the condition of the patient and the circumstances of the prior disease.

“Was there ever any reasoning in the world like unto medical reasoning? If the medical man with good intentions administers one of these drug poisons, or a hundred of them, and the patient dies, he dies because the medicine can’t save him. But if a malfactor with murderous disposition gives the same medicine to a fellow-being, and the fellow-being dies, he dies because the poison killed him! Does the motive of the one who administers the drug alter its relation to vitality?” - True Healing Art.

The statements of the experiences of invalids in the use of “remedies” always contain much unwitting deception. Such statements must always be taken with great caution. This is because there are two forces at work in their bodies when they recover - the remedial processes of vitality and the processes of the “remedy.” The invalid knows little or nothing of the curative powers of his own body, nothing of the nature of biogony and of the causes of pathology, and is not qualified to properly discriminate between the work of the “remedy” - and the work of his own body. For this reason, the greatest credit is customarily given where there is least, or no merit. Recoveries occurring despite considerable interference with the natural curative processes, are not to be credited to the supposed remedy. Every therapeutic fallacy, whether still in use or long since forgotten, has found thousands to bear witness to its efficacy.

Among all the many hundreds of theories and practices of medicine, drug and drugless, which have passed in view, and presented special claims to superior merit, there has not been one but that lived and acted on the assumption that all desirable ends in cases of “disease” are effected by therapeutics or treatment, and they have scarcely bestowed a modicum of reliance upon the inherent vital capacities. It has been assumed that those symptoms which we call “disease” are, necessarily and invariably, evidences of a destructive process which must be counteracted before they destroy the life of the patient.

Many substances that are known to be inimical to health and life were thought to be also antagonistic to “disease”; and that, on special occasions, they might even be special vivifying means, working upon local parts a curative act which is conceived to be different from the ordinary nutritive and reproductive processes. The modern Hygienic or Orthopathic practitioner regards these assumptions as utterly false and untenable. This school seeks to bring those liable to suffer from “disease” to a true knowledge of the causes of their miseries, and finds a cure for these in the discipline and correction of faulty and perverted voluntary habits of everyday life. We refuse to admit, because it is untrustworthy and ambiguous, the evidence offered in favor of the various therapeutic systems.

At present both physicians and patients are ever ignorant of the quality of the medical services rendered; a kind oblivion, except in case of the most obvious blunder, steps in and enshrouds from observation the interference.
Good nature, while her forces remain in the ascendency, is ever working to perpetuate organized existence in her best possible manner. She gradually overcomes those conditions that conflict with her aim, whether spontaneously or artificially induced, thus the sick as well as their advisors, constantly labor under the delusion that it is some potency of the prescription that effects the desired object; while in reality, its only merit is that of coincidence in time. A mere coincidence is mistaken for cause, hence arises the popular credulity in reference to medical means - a magnified importance having been for ages attached to measures which have no use or importance. Hence, also, the ever-readiness with which the public resign themselves to the, physicians. It is no matter whether he be stupid or clever - the grossest empiric or a philosopher - he generally soon discovers that his “bread and butter” come of qualifications quite different from this latter; and his inclinations take the direction of his interest.

All the importance that the matter of the management of health and “disease” by medicines and treatments obtains, comes from a non-recognition of these principles - from a mistake in regard to - the essential nature of the action induced in vital objects by medicines and therapeutic measures. It should be known that any benefit accruing to health must come through the ordinary physiological acts. Medicines and therapeutic measures possess no power to antagonize or neutralize the cause of “disease” or to assist the organism in its work - they cannot add power to the organism - but can only excite to a morbid extent the physiological functions; and it is by these in sickness that the blood is restored, as in health it is maintained in its pristine qualities.

In short, recuperation and restored health are never the effects of drug treatments, but of the organic force, and the conditions that usually maintain it. It is asserted that good effects sometimes, at least, follow the use of drugs and other methods of treatment, and we shall be called upon to show how this can never happen. The record of experience, which is appealed to, can substantiate nothing, for it takes no account of the vital force, or of the nature of “disease” itself, and assumes that the effect of the drug or treatment is additional to the work of the vital power, whereas, it only changes it.

Trall says of the record of experience: “The person who is ignorant of the first principle of astronomy could affirm most conscientiously that the sun rises in the east and sets in the west, and passes around the earth once in every twenty-four hours. Does he not see it with his own eyes? But with a knowledge of the law of gravitation, he would know that this appearance was illusory, and that the earth revolved on its axis, while the sun stood still.” - True Healing Art.

“I have asked many of the professors of the Drug Schools to explain to me how their remedies acted, and how their ‘Law of Cure’ operated - the why the wherefore the rationale but not one of them could ever tell me; yet each referred to his own experience to prove that his method of drug prescribing was the best one. None of them ever thought of the primary question, ‘Is any drug medical system right?’

“Experience! What is experience? It is merely the record of what has happened. It only tells what has been done, not what should be. I would not give a green cucumber for all the experience of all the medical men of all the earth in all the ages, unless predicated on some recognized law of nature, and interpreted by some demonstrable rule in philosophy. Medical men have been, curing (killing?) folks for three thousand years with drug medicines, and their experience has led them away from truth and nature continually. If a dozen persons are sick of a fever for one, two or three months, and the physician gives them half a dozen drugs half a dozen times a day while the fever lasts, and one half of them die and the other half recover, the question then arises, what had the drugs to do with the results? The drug doctor will of course assume that all, who survive owed their lives to the medication, while all who die, die in spite of the medication. But one who reasons from another standpoint, who reasons from the law of vitality instead of the false dogmas of medical schools, will conclude that those who die are killed by the medicine, while those who recover, recover in spite of it. Such is medical experience.” - True Healing Art.
“These facts are enough to show the utter fallacy of medical experience and the unsatisfactory nature of medical testimony, unless based upon some intelligible principle to which we can refer the phenomena they present.” - *Hydropathic Encyclopedia*, Vol. I, p. 35.

“Without some fixed and unalterable and demonstrable rule of judgment, all our reasoning may be in vain; facts may be misapplied; experience misinterpreted; observation deceptive; and logic perverted.

“Though an angel speak to us in the voices of the rolling thunders; though God send instruction in the red lightning’s flash; yet without a principle of interpretation, without the recognition of some law by which to explain the phenomena, we only know that it thunders, and that the sky is ablaze. But with the knowledge of the law which determines the results, we may rightly apply all the data of science and misapply none; we may use all things, and abuse nothing.” - *True Healing Art*.

The greatest trouble with experience is that it appears to point in all directions at the same time. Every school - “regular” medicine, homeopathy, eclecticism, physio-medicalism, osteopathy, chiropractic, physio-therapy, Christian Science - and every individual who has a pet remedy, even though it be nothing more than carrying a horse chestnut in the pocket, or going to the cross roads and repeating:

“Stye, Stye, leave my eye,
And go to the next one passing by,”

appeals to the record of experience to prove the value of his system or method. Such experience either proves all methods to be good, or it proves them all to be fallacies. Interpretations may vary and fall to the ground but the facts cannot perish. All great cures pass. All systems are forever changing their principles and their methods. True principles are perfect and unchangeable and so must be any practice correctly based upon them.

How true are the following words of Jennings: “Notwithstanding the medical profession have failed’ to define the general and. special nature of disease - a true knowledge of which is essential to the establishment of a correct system of therapeutics - yet it is obvious from the general tenor of their instructions and practice, that they regard .the difficulty as consisting essentially in a defect in Nature’s balance-wheel, or self-controlling principle and power; a defect, too, that may be remedied to a greater or less extent by artificial force of various kinds and degrees, with various modes of application. Accordingly, in practical medicine, the object to be effected is to ascertain where nature fails to perform her accustomed duty and apply the necessary admonitory correctors. If there is too much action in any portion of the machinery, give her to understand, through the influence of some potent depletory, counter.irritant or revulsive process, that she must restrain or restrict her forces in that direction. If there is too little action, spur her up to greater vigilance and activity in the supply of efficient forces.

“Every Heteropathic system of medicine is underlaid with a deep conviction, that in an impaired or diseased state of the human system, its capabilities will not be realized to their fullest extent, without the intervention of some compulsory means of an impulsive or restraining character; and that the necessity of such interference is enhanced in proportion to the increase or exaggeration of the disease.

“The belief has been quite general if not universal, that in most diseases of any magnitude to which man’s physical nature is liable, the cases would be more protracted and severe and much oftener fatal, if left to the unaided and unrestrained powers of life, with the best possible regimen, than they would be under the direction and influence of even ordinary medical skill and means. The quantity of artificial remedial force supposed to be requisite to secure the speediest and best cures, have varied much, under different systems of medicine, and different states of society.
But there probably never was a period in the world’s history since medicine began to be practiced as a science and an art, when the quantity of medicine, or compulsory interference with the natural vital operations in disease, which the public sentiment, medical and non medical, would fix upon as that which was best calculated to secure the happiest results, was less than it is at the present time. Yet many schools, teachers and practitioners of medicine still inculcate, theoretically and practically, the importance of taking disease by storm when practicable and giving it no quarter till it is exterminated; and the most moderate of them think it best to give ‘Nature a little jog’.

“Just here is the broad line of demarcation between Heteropathy and Orthopathy. Orthopathists discard this doctrine of armed intervention as opposed to the law of the animal economy and unphilosophical and they reject it as much in its minimum as in its maximum.” - Philosophy of Human Life, p. 214-15.

The vital energies never have to be reminded of their duties; but, on the contrary, they must of necessity, at all times, and under all conditions, act according to law and always for the best advantage of the body. As well to think that gravitation requires to be reminded of its “duty” in bringing the stone, that has been thrown upward, back to earth again as to think that the forces of the vital economy do not constantly and ceaselessly obey the laws that control them. Every move of the forces of life, in ‘health or in “disease” is lawful and orderly and, in the very nature of things, cannot be otherwise. For this reason, if a given evil has occasioned a certain course of action in the body, an equal or greater evil will be required to suppress that course of action, although, a lesser evil may modify it.

The instruments of motion, action, function, are the same in “disease” as in ‘health. The motive or vital power which animates, controls and operates the organism or vital machinery in health, is not altered in either its nature or quality in “disease.” The laws of life have undergone no change in “disease.” Indeed, they are not susceptible of change. They are always present to the last flickering of life - there in full, force and are fully capable of controlling with perfect ease, any amount of forces that may be present. No organic power or property can possibly escape from under the control of the animal economy and become lawless or reckless in its course of action. It must operate in a lawful or correct manner and work, to the fullest extent of its ability, for the highest welfare of the organism. Life cannot repudiate itself. It is always upright and correct in its action and processes.

Nature makes no mistakes and violates no laws. She is uniformly governed by fixed principles and all her actions harmonize with the laws that govern these actions. She always does the best she can under existing circumstances. Nothing could be more preposterous than the idea that the vital machinery is capable of wrong action. We might as well contend for wrong action in any other department of fixed law. It is like claiming that gravitation may become bewildered and inverted in its action, and cast stones upward and cause streams of water to run up hill. As well expect cohesive attraction to split rocks, or magnetism to arrange needles parallel to the equator.

The Right Action theory must be right. And if it is correct, what are the results that we should naturally expect to appear to flow from the practices of the, different schools and cults of medicine and from the varying forms of domestic practice? If the tendency of all remaining vital activity is unalteringly in the right direction - toward the restoration of normal health - if nature, with but one aim, moves majestically onward in her recuperative and reparative work, and accomplishes this work as rapidly and effectually as she can, under existing circumstances, should not the results be just what we find them to be?

Dr. Jennings answers this question in the following words, “In the cases where the perturbing treatment is the strongest, the natural order of the renovating process is the most disturbed, irregular and protracted, and the event rendered proportionately doubtful. In cases where the hostile treatment is moderate, the general course of the recuperative work is not much disturbed in its progress or materially lengthened or hazarded in its issue.
And where the treatment is truly hygienic, fulfilling the natural indications and conditions of impaired, feeble life, there is great regularity in the curative process, the period of duration the shortest, probability of final recovery the greatest, and recovered health the most firmly established.

And what would most likely be the course and ending of diseases under the different kinds of treatment which they would get by regular and irregular practitioners, if disease was an antagonism to health, in its nature and tendency subversive of life, justly represented by a house being on fire, or a ‘certain noxious something to be destroyed by medicine, as an acid by an alkali?’ In this case the result would be, that physicians who had great depth of penetration and research, who had acquired extensive and accurate diagnostic knowledge and skill, had obtained, a thorough and familiar acquaintance with means adapted to counteract disease, and an easy art of applying them would make rapid and sure work of demolishing the enemy and restoring health.

“Under the treatment of physicians who possessed but indifferent qualifications- for ‘discerning, distinguishing, preventing and curing disease,’ the chance of recovery would be small in most disorders. And if physicians were to make: a mistake in the selection and use of remedies, administer coinciding instead of counteracting means; throw-spirits of turpentine on the fire instead of water, disease would soon put an end to life, the building would burn down rapidly. And in cases where disease had got well established in the system and there was nothing done to check its progress, death would be inevitable. Now everybody knows that nothing like such results follow in the train of different kinds of practice. On the contrary, it would puzzle a lawyer to tell what practice was, apparently attended with greatest success if in a populous place he were to pass in review the multitudinous treatment of the sick.

There is a difference, a great difference in the resulting effects between good and bad treatment of depressed feeble human life, manifest, too, to those who are competent to judge of such matters; but the populace do not discern it, and they are ready to accept and employ every description of pretenders to skill in curing diseases. And in a large majority of cases, Nature manages to restore her damaged machinery and revitalize it in spite of the most oppressive and cruel treatment. This state of things is only, reconcilable with the idea of right action in disease. It can be rationally accounted for on no other principle. And the doctrine of right action can now be sustained beyond doubt or cavil by incontestable evidence of both a negative and positive character.” - Tree of Life, pp. 208-9.

Professional men are molded by the educational system through which they acquire their training. If the teachings of their system are fundamentally wrong, as is the case with medical teachings, the victims of such education find it hard to step out of the matrix in which they were forced to crystalize, into another world of thought. The doctor who has been taught that “disease” is an evil that must be fought against, that he must treat and suppress symptoms, as these arise, instead of correcting and removing causes, finds it exceedingly difficult to get away from these teachings, especially so, since they have been ground into him from childhood.

Instead of making a study of the laws, conditions and requirements of life and complying with these, the human race has for ages sought for some magic power, some occult and incomprehensible principle, some hitherto inoperative law or force, that will set aside the known laws of life and enable man to destroy law and order with impunity. For this is what the idea of cure amounts to. “Curing” is an effort to dose away or treat away the results or consequences of violated law, without stopping the violations. The whole idea of “cure” and “immunization” is fundamentally false.

Undoubtedly this idea of the value of medical specifics has operated very disastrously, indirectly inviting the cause of “disease” by the promise of immunity it holds out in the ideas of medical absolution. The causes of “disease” are disregarded so long as people think they can dodge the result under the shield of medicine, and just in proportion as freedom from peril is offered is the inducement to sever the lines of law whereby organic existence is bounded.
As soon as people learn that suffering is a consequence drawn upon themselves, they will learn to avoid the causes of suffering. So long as they believe they can harbor causes and side-step the necessary consequences, by some pills in the bag or prayers in the book, they will attempt to do so. For this reason, all systems that hold out to man the false hope of cure and immunization - that pretend to cure him of or make him immune to the effects of violation of life’s laws, while he continues to violate them - are evil and demoralizing. Such systems actually encourage law-breaking.

“Cure of disease!” exclaimed Trall. “What a world of delusion in that expression! It has always been the fundamental error of the medical profession. It forever misleads the public mind. The phrase is founded on a false conception of the nature of disease. Instead of trying to cure diseases, we should seek to remove their causes. Diseases never can be and never should be cured while their causes exist. It is on the fallacy of curing disease that the doctors are drugging the world to death.” - The Hygienic System.

Tilden truly says: “From time immemorial, man has looked for a Saviour; and, when not looking for a Saviour, he is looking for a cure. He believes in paternalism. He is looking to get something for nothing, not knowing that the highest price we ever pay for anything is to have it given to us.

“Instead of accepting salvation, It is better to deserve it. Instead of buying, begging or stealing a cure, it is better to stop building disease. Disease is of man’s own building, and one worse thing than the stupidity of buying a cure is to remain so ignorant as to believe in cures.

“The false theories of salvation and cures have built man into a mental mendicant, when he should be arbiter of his own salvation, and certainly his own doctor, instead of being a slave to a profession that has neither worked out its own salvation from disease nor discovered a single cure in all the age-long periods of man’s existence on earth.” - Toxemia Explained.

Again: “The treatment I advocate cannot be accepted so long as the profession clings to the delusive idea that disease can be cured. It is as reasonable to believe that a remedy can be given to overcome the effects of a knock-down blow over the head. It is as reasonable to believe that a remedy can be given to cure the tire following work or exercise, or to cure the effects of inebriety while the drinking is continued, or that a serum can be used to restore potency to those practicing sensuality.” - Autotoxemia is The Universal Basal Cause of All Disease.
Basic Knowledge Needed

Chapter II

"Only an experienced expert in a broad range of fields can accomplish the selection and synthesis of methods that spell health-restoration."

The Hygienic System maintains the somewhat unique principle that the first condition of successful restoration of health is a philosophical comprehension by the sick person, of the cause of his suffering. It is essential that the sick man learn to distinguish between causes and effects to prevent him from wasting time, energy and the potentials of recovery and perhaps irreparably injuring his health, even to prevent him from killing himself, trying to suppress effects by measures that do not remove or correct their antecedents.

Every city is full of sick people who have been cured and re-cured until they have acquired the habit of being cured. But the cures do not remove cause; so they remain sick. Every man, of high or low degree, who claims to be able to cure, or who offers to cure the sick, should be recognized for what he is - a charlatan.

In order to render the sufferer anything more than the most superficial and temporary relief, his or her active cooperation is absolutely essential. The apathy of patients, even those who suffer most, to the causes of their sufferings, is inexplicable; while their willingness to resign themselves to the care of physicians or others for the treatment of affections that are more easily avoided than remedied; and their unwillingness to study the legitimate means of remedying their difficulties, are beyond understanding.

Dr. Taylor well expressed this principle in 1885 when he wrote:

“Morbid phenomena, especially those usually designated chronic disease, are regarded in one of two general ways. As these modes of estimating often lead to, differing, even to opposing remedies for what is essentially the same, morbid condition, it becomes important that the proper distinctions between these modes should be made.

“One way of estimating disease is that adopted by the patient and by sympathizing friends, and doubtless influences the physician to a large extent. This estimate is based upon subjective facts - what the patient feels, sees, and experiences. It includes his consciousness of defect of power and excess of sensibility, and the accompanying exterior manifestations.

“Remedies are therefore sought in accordance with these conceptions, and include prominently whatever means may be capable of mitigating, or even abolishing, disagreeable sensations, or at least the consciousness thereof, often with little reference to the source from which those feelings spring.

“The invalid, unfortunately, for his own true interests, is disinclined to discriminate between the two distinct ideas of suffering and disease. He blends the two as one. This leads to the radical mistake of trying to cure the one by causing suspension of the other. He seems to think that pain is causing him injury, instead of referring it to the morbid action from which the pain is derived. It is not the pain - which is doubtless on the whole advantageous - but its causes, which demand correction.

“It is therefore with difficulty that the invalid learns that while this and other subjective manifestations are undoubted verities, they alone are untrustworthy indications as to remedies because incomplete indications of disease. The facts of pathology are far more extended, and all, not a part, are required as a basis for any proper remedial prescription. Too close reliance on sensory, indications inevitably leads to therapeutic difficulties. These consist in the mistake of trying to remedy mere effects in place of removing their causes.
“Another consequence of undue regard to the subjective indications of disease, is the premature arrest of diagnostic inquiry. Further investigation, as the tracing of effects to their causes, is discouraged; the idea of philosophical relationships of seen and unseen facts is repressed, and the advantages to therapeutics of such inquiries become unavailable. The physician is guided by only a limited number of subordinate facts, which, being isolated from their true connection, are untrustworthy.

“A still further difficulty, usually indirectly expressed, arising from the above stated sources of misconception, is the tendency in the popular mind to associate, in idea, defects of the vital organism with those of non-vital objects. Diseased manifestations, are thought to be like something broken, requiring local repair by trained and dexterous hands. The remedy must accord with the immediate, patent, and obtrusive difficulty, as a broken implement is mended. Medical science is limited to the, record of experience in correcting local faults of the organism and insufficiently, correlates with science in its wider aspect ***

“The other mode of estimating chronic disease in reference to remedies, regards its ordinary manifestations as, only symptoms, products and evidences of antecedent causes, without which, such manifestations would be impossible. It, therefore, assumes that however distant and obscure these causes, they are the primary objects of medical interest, and of remedial attention. The actual departure from health is a process rather than a product. The objective phenomena are a cumulative record of transitional defects and errors. The physician points out and corrects these, and the consequences, however manifested, cease perforce. Nothing exists, not even local disease, after ‘the withdrawal or cessation of the processes whereby it exists.

“This is the physiological method. This method regards health and disease as flowing from essentially identical sources, the difference consisting solely in the degrees of perfection attained by the inchoate activities at the ultimate sources of vital power. Remedies are therefore concerned in the control of processes, rather than in obscuring the effects and products of these processes ***.

*** The distinction should always be made between the effects, consequences, and products of imperfect physiological processes, and the processes from which these evidences proceed. It is the former of which we are chiefly cognizant, because more exposed to observation; they are exterior and objective, and often present a cumulative mass. The latter are interior, elusive, and known by comparison and by the reasoning faculties.

‘These considerations unmistakably imply a wide distinction between the inward, invisible and intangible form of disease, irrespective of the sensation, and the consequences thereof as exhibited in objective phenomena. The one continuously contributing by the changes occurring in successive particles of substance, to produce and maintain the other; the relation of cause and effect being precisely the same as that recognized as resulting in health ***. It is therefore a profound mistake to merge together as an undistinguishable whole two considerations so radically distinct as cause and effect, antecedent and consequent, process and product, in pathology; and such confusion of separate and different things inevitably introduces into practical therapeutics the gravest inconsistencies and mistakes.

“The adequate comprehension of disease therefore considers it in the two aspects above presented. These for convenience may be styled the antecedent and the resultant factors, meaning the defective processes, and the cumulative products.

“The susceptibility of the two distinct parts of pathological phenomena to separate consideration arises from the nature of vital processes, of which disease is but a form. These processes are progressive, and never concluded as long as life lasts. It probably extends throughout all the forms and variations of these processes, which receive distinct names, according to subordinate peculiarities. The evidence of this statement is derived from a variety of sources.
“Prophylactics, or the means of prevention of disease, emphatically recognizes an antecedent principle and antecedent action. The malarial infections, zymotic and incubative affections generally, are confessed demonstrations of the same principle; and the same is legitimately inferred of acute affections having obscure sources though no less positive manifestations, but whose processes and products are so blended as regards time, that the distinction has less practical therapeutic value.

“The failure to recognize the distinction above pointed out as to antecedent and resultant parts or factors of diseases, opens the way for the perversion of therapeutics from its greater to its lesser uses. Remedies addressed to the resultant, or consequent object, are necessarily only palliative, and in general can have no effect on the contributive factors. The abatement of pain, one of the consequences of the morbied, or unperfected process, easily becomes the primary, instead of an incidental purpose. The sufferer is countenanced in his delusion that pain is something synonymous with disease, and that the latter disappears with it. Besides, a practical error of still more serious import is committed. The advantages of pain as a pathological guide are lost. Another and very disadvantageous consequence arises from medicating the sources of sensibility, which should not be the therapeutic purpose. These sensory powers are inevitably perverted by the constant use of remedies adapted to diminish pain, without paying attention to its causes. The nervous system is therefore liable ultimately to become an overwhelming factor, additional to the primary ones.

“The relations of the antecedents to the resultants in pathology are necessarily those of equality, because effects must proceed from adequate and therefore an equal cause; but this fact does not imply interchangeability, but the contrary. The latter always depends on the former, and not the former on the latter. Remove the morbid processes by converting them into healthful processes; that is, into perfected morphological and chemical activities, and the morbied effects, however conspicuous, cease to exist. No radical curative effect is attainable, if therapeutic attention be limited to the resultant factors; such medication may be palliative, but is devoid of direct control of antecedent processes. However deftly the consequences be removed, nothing permanent is secured; the continuance of the producing factor is sure to reinstate the morbid result, however concealed, altered, or obscured to the senses.

“An intelligent appreciation of the distinctions above made, appears to be, necessary to prevent medical practice from degenerating, as it is manifestly inclined, into a fruitless routine, of palliative procedures. Methods of toying with the senses, and ways of disconnecting imperfect results from the elementary processes on which these results depend; devices in short for concealing these results mistakenly, regarded as the disease, whether the manifestation be interior in the form of pain, or exterior in some outward tangible indication, as in the pelvis, or at the hernial border, assume unwarranted importance. The antecedents and the consequences, which are entirely distinct considerations become inextricably mingled in therapeutics and remedies adapted to radical 'cure, in the sense of correcting the primary departure from true physiological action, become impossible.

“One of the leading obstacles to the recognition, and therefore the remedying of the primary factors of disease instead of the resultant factors, cannot be too strongly insisted upon; one that imperils and often negatives the value of medical science. This practice is based on the presumption that the fact of pain is actually diminished by this class of so called remedies. This is an assumption that is manifestly improbable; but, on the other hand there is much evidence showing that symptoms relating to the seat of consciousness may thus be easily deferred and possibly their location changed yet the amount of pain, taking time into consideration, is, actually often very greatly increased by the method invoked to stifle it. These statements are necessarily confined in their application to chronic affections; for it is readily conceded that in acute affections nature is at work, repairing defects, and gaining ground by intensifying compensative processes, in spite of the temporary interference of medicaments, when these have no relation whatever to reparation.” - Pelvic and Hernial Therapeutics.
Knowledge of pathology and symptomatology has almost reached perfection, but the causes upon which these states depend have been largely ignored. Therapeutics has been and is a complex system of palliating effects and not one of removing causes. Both the suffering public and the schools of physic have been content with, low aims in matters of health. Many physicians are content to give their patients questionable transient comfort; without sufficiently considering the ultimate results of such a course. Causes are permitted to remain unchecked while effects are experimented upon and the organism tampered with. The results of such practice are necessarily transient; the actual pathology persists while the symptoms fluctuate. For the physician, carefully observing the multitudinous aspects of pathology, fails to comprehend its essential nature as related to its causes.

Treatment, according to “scientific medicine,” is strictly palliative, and cannot be otherwise so long as cause is not understood. The whole fabric of cause and cure advocated and practiced today by the medical professions is grotesque and false. But the world is so fed-up on palliatives - cures that are effective without removing cause - that it has no mental digestion for causes and effects.

Medicine mistakes spectacular palliation for cure - for removal of the cause. A man passes a gall stone, or a kidney stone. The process is painful. As soon as the stone passes, the pain ceases, and he thinks he is cured. Not so. Cause has not been removed and another stone forms. When stones are removed from the gall bladder and the victim is dismissed as cured it is tantamount to saying the stones were the cause of the “disease.” Did the stone cause itself? If not, does its removal, remove the cause? If the cause is not removed is the patient cured? When a tumor is removed, does this remove cause? Is the tumor its own cause? If removing the tumor does not remove cause, is the patient cured?

The gall-bladder is opened and the stones are taken out, then the appendix is removed; then the ovaries; later the womb is taken out and, finally, part of the colon is removed. If the victim is still living, the doctor operates for a few adhesions, and interpolates serum treatments, gland treatments, sea voyages, and changes of climate, (never any change of habits) and, thus the patient passes from one “disease” to “another” and from one “cure” to “another” until cause and treatment kill her.

Hygienists say: do not treat enlarged tonsils and adenoids; remove the causes of the constitutional derangement that builds the enlargement. Do not treat fibroid tumor; remove the causes of the constitutional derangement that builds the neoplasm. Do not remove the thyroid in goitre; but, rather remove the causes of thyroid hypertrophy. Do not give thyroid extract in myxedema; remove the causes of thyroid failure. Stop treating pathology as cause. Cease holding the glands responsible for “disease” making.

The physician who confines himself to the automatic distribution of pharmaceutical preparations and who does not rise to the position of reformer and instructor of his patients, who does not educate the sick and show them their general and special mistakes in eating and living generally, that have caused their intoxication and culminated in sickness; who does not lead them back to health by teaching what errors they must avoid and mapping out for them a plan of general hygienic living; who does not make the patient realize that progress is up to himself, that he must exercise his own intelligence and cooperate with nature and that the return to health is a matter of individual reform and that no one can take the place of the patient and correct his living for him, no one else can deserve the desired progress, and that he cannot count exclusively upon the help of others, that health cannot be received from the hands of another; such a physician is a menace to his patients and to his community. Instead of trying to compel nature to conform to our petty ends, we should adapt ourselves to her larger purposes and greater ends.

There will be a wish for and expectation of cures so long as people are made to believe that some one or some thing outside of themselves can cure them. Just so long will they seek for and expect cures, instead of seeking knowledge of how to live to keep well and build and maintain the highest efficiency.
How can we reasonably hope for improvement so long as we constitute ourselves the merest parasites of the medical professions, expecting them to keep us in good health, despite their vested interest in suffering? So long as we default in our duty of self-help, the professional men, with their interest, not in our good, but in our evil, will continue to side-track the real issues of life and use their subtle wiles to secure our docile patronage. All we have reason to expect from medicine is frustration.

The goal is plain. It is the building of a more ideal and enduring state of health. To this end it is primarily essential to decide the fundamental matter of proper methods of care. All else is of minor importance. An integration of constructive methods, employed with the definite goal of the elimination of the causes of suffering, can alone insure success.

The next most important matter for consideration in such a program is that of the fitness of the practitioner to care for the patient in his or her condition. Only an experienced expert in a broad range of fields can accomplish the selection and synthesis of methods that spell health-restoration.

There remains the fundamental matter of the organization of a health program. It is a profound error to fail to embody in the health program the permanent correction of your mode of living and the elimination of the remote causes of trouble. To fail to do this is to lag behind in achieving the great end - permanent health.

The health program cannot always consist of magic machines, miracle lamps, sure-shot patent foods, and serums and vaccines. Whatever apparent good one may get out of these things is short-lived, but one cannot live with such things for the rest of his life.

This brings up the vitally important matter of the permanence of the results. It is not enough that we succeed in freeing ourselves, temporarily, of our present symptoms. It is also imperative that we go a step further and adopt adequate methods for the accomplishment of permanent results. This requires knowledge.

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❖ who does not rise to the position of reformer and instructor of his patients,

❖ who does not educate the sick and show them their general and special mistakes in eating and living generally, that have caused their intoxication and culminated in sickness;

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such a physician is a menace to his patients and to his community."
Criticisms

CHAPTER III

"The simplest "disease" is the complex effect of a number of correlated antecedents. Any attempt to meet it with one remedy, rests on a whimsical basis."

Many medical men and scientists who recognize the value of Hygienic methods object to what they call “their indiscriminate application to a great variety of diseases”. Our answer to this must of necessity take several forms.

First, we must condemn the indiscriminate use of Hygienic measures. Intelligence and discrimination must be exercised in their application in any and all cases.

We do not admit that there is anything wrong in their use in “a great variety of diseases”, for two reasons; as follow:

(1) Hygienic measures are applied not to “diseases”, but to the body. They are not “cures” of “disease”, but elemental necessities of the functions of life, whether health is vigorous or very feeble. The purpose of Hygienic methods is to (a) remove or correct the causes of the patient’s suffering, and (b) to supply the basic necessities of the functions of life in order that the body may restore the integrity of its tissues and functions. This is a program of building health and is accomplished by natural measures.

(2) The term "disease" is applied to a group of “abnormal” signs or symptoms, and, although these groups, or symptom-complexes, receive different names, they are not different “diseases.” The oneness of “disease” has already been made clear. There is no “great variety of diseases” for Hygienic methods to be applied to.

We would point out, on the other hand, that the medical profession is equally guilty of the charge they bring against us in this particular. Going back a ways in medical history, they resorted to bleeding in practically every one of the “great variety of diseases” from which man suffers. Coming to the present, do they not employ quinine in a “great variety of diseases”? Is not mercury given, in one form or another, in almost every “disease” catalogued in the medical nosology? Is not the one “remedial measure,” purging the bowels, employed to, a greater or less extent, in “diseases” of every variety, and every shade of variety - to “disease” of every form, color, shade and degree? Do they not employ morphine in hundreds of “diseases”? Is not removal of the tonsils, or removal of the gallbladder, or extraction of the teeth resorted to, indiscriminately, in “a great variety of diseases”?

This list could be extended almost indefinitely to cover other drugs, vaccines, serums, and operations, but this is hardly necessary for every physician can do this for himself. Medical men make the usual blunder of taking the final explosion - the crisis - as the “disease,” and ignoring all antecedent conditions that led up to the crisis. In true traditional style, they treat the “disease” instead of removing cause and giving the body itself proper care.

Healing is an internal physiological, or vital, or biological, process. It is not the result of treatment. It does not depend on treatment. It is a process of life and is the result of the orderly, progressive working of the forces and processes of the living organism. It is controlled by the laws of life, not by the treatments of the doctor.

There are no “natural therapeutics”; there are no “natural cures”; there are no “natural methods”. There is no art of healing. There is a science of healing and it is understood by twenty or thirty men in the world today. ‘The science of healing is the knowledge of the vital processes by which the living organism heals itself.
There is a science and art of Hygiene. These, too, are well understood by only a mere handful of men and women. When the science of healing is more generally understood, the science and art of Hygiene will supplant the miscalled science and art of healing.

A brief review of regular treatment of “disease” will make clear the inadequacy and futility, even the damage, of this system of spectacular palliation.

**Local Treatment**: This is a form of symptomatic treatment. It completely overlooks the patent fact, as emphasized in Vol. 6 of this series, that the patient’s present evils, which afflict him, are not isolated and unrelated evils, but are an aggregate of evil (a system) resting on the common basis of toxemia, and must be abolished collectively, by removing their cause, and not one at a time.

There can be no permanent cure of “disorders” that seem local only because the unpracticed eye is unable to detect the subtle connection of part with part and the dependence of each organ upon the vigor and integrity of the whole organism. The vitality and functional power of the separate parts depend on the integrity of the whole organism, from which each separate part derives its nutritive and nervous, and, therefore, functional existence. The mutual cooperation and interdependence ruling the organism makes it impossible that the local parts shall be independent pathologically and remediably, as local treatment seems to imply, for they are not independent physiologically.

A true remedy must include all the mutually dependent factors of the pathology or biogony. That which palliates a single symptom or local condition is far from adequate to meet the demands of the affection as a whole - indeed, it is likely to be detrimental.

Not the least injury flowing from this form of treatment is the false direction thus given to diagnostic inquiry. The attention both of the patient and his physician, becomes so preoccupied by the symptoms, that their causes are excluded. The immediate, visible and palpable, usurp the place of the essential and controlling, and stifle further inquiry. The potential affections, those standing close behind the symptoms, are quietly ignored. The “remedy” is but a practical evasion of the real problem of the case and its purpose ‘is other than remedial; for remedies, to be effectual, must have some relation to the cause that produces and maintains the trouble. Actual remedies do not imply perpetual repetition.

So-called “local diseases” are secondary affections. The support supplied the “local disease” by the general state of the body must always be considered. Except for such support there could be no “local disease.” Modern pathologists have carefully studied and differentiated the many “local diseases” until, today, pathology is a bewildering jungle in which the student is unable to see the forest for the trees. The knowledge of these distinctions is evidence of the searching nature of modern inquiry, but too close an observance of special and minute distinctions has the effects of:

1. Circumscribing the physician’s inquiries to a local point.
2. Limiting the remedial means to such as may be locally applied.
3. Ignoring the existence of causes upon which the local symptoms depend.
4. Leading to the presumption that the effects of topical “remedies” are confined to the point of application.

The secondary and remote effects of their supposed remedies should be made a special object of investigation; for their immediate effects are but a portion and but a small portion of their total effects or consequences.
Medical practice often finds itself in a peculiar predicament. It has abundant “remedies” for all these secondary affections. To cure (suppress) them would be easy, were it not for the primary affection (toxemia), which their remedies do not cure. The boasted value of such remedies is shown to be a fiction by the persistent obstinacy of the primary affection and this leads naturally to the inference that the cause is still untouched. The “remedies” are aimed primarily at symptoms, which will subside with their cause, without treatment.

Pathology is not self-sustaining, but will entirely disappear with its causes. Correct practice should aim at the discovery and removal of these, and no time should be lost in doing so. There will always be plenty of time to treat local effects, where these may need special care, after cause has been corrected.

Mere palliatives are incompetent to bring about a radical cure. While causes are ignored there is constant reproduction of the effect, whatever new form it may assume. This is the explanation, of the need of frequent repetition of such applications in order to maintain the relief first experienced. Frequent application of local treatment is necessary because the causative process is constant and is not abative to such treatment. The restorative process must be equally constant. When the etiology of any local pathology is not understood, its “treatment” must always be inefficient. A plan of treatment which is aimed at removal of local states leaves the systemic impairment practically unchanged. To prefer local applications is to act as though the cause of the trouble exists in the local part independent of systemic conditions. The transient removal of local states, by whatever means other than removal of cause, however flattering its immediate effect, cannot be of the least permanent service, because it is neither automatic nor continued.

Local “remedies” produce their effects to a very limited and imperfect extent. The obvious reason why local remedies fail is that particular parts of the body are dependent upon other parts and the general system, and are not self-sustained, as the practice of local remedies implies. True enough, many cures are reported, and doubtless occur, even when local treatment alone is employed. These occur under all forms of local treatment and under no treatment at all. It is not correct to bestow on such treatment all the credit for recovery, for nature, unaided, is always working to this end and often succeeds despite obstructive treatment.

Local applications cannot fulfill the radical indications. The support afforded to every supposed local “disease” by the systemic toxemia is indispensable to its continued existence. But for this support, there could be no local affection to treat. To remove this support is to remedy the local pathology. Local treatment is therefore useless and even harmful.

The body is a whole, and the recovery of parts that have become impaired can be secured only by invigoration and renewal of the whole body. No safe departure can be made from this inflexible condition of the recovery of health and vigor. No real and permanent cure of conditions, which seem local only because the practitioner fails to recognize the subtle connection of part with part and the dependence of each organ upon the entire organism, can occur without complete compliance with this condition.

The local part would not suffer if the general system were in complete order and if the supplies received from the general system were up to the healthy standard. We must put our physiological house in order, not by myriads of local treatments, as physicians with a financial interest in our suffering are bent upon doing; but by duly adjusting ourselves to the ordered harmony of Nature, upon which every organ and function in our body depends. We cannot expect Nature to alter herself and accommodate herself to our morbid appetencies and selfish ends.

**Symptomatic Treatment:** Symptomatic treatment (the treat-merit of “disease” by symptoms), on the other hand, is an equally grave mistake. How simple it all seems when we read the advice: “Adapt your remedies to
the removal of the symptoms that are present, and when these subside the disease is gone,” but we know only too well the disastrous results of this kind of practice.

Symptoms are such only and not cause. They are dependent on the existence of conditions and antecedents that constitute the real trouble. It is very illogical and wrong to direct your energies and “remedies” against a sequence rather than against its antecedent. The symptom is a vital and defensive or reparative or conservative reaction and should not be combatted or interfered with.

Not for one moment can it be denied that these adaptive modifications of structure and function are evidences of pathology, or that their existence and continuance are very undesirable, or that their cessation is both desirable and necessary; yet these concessions do not justify the employment of means for subduing and suppressing them. Such a conclusion ignores the purposive modification evidenced in the vital struggle against pathogen, and proposes to strike down the only means at the disposal of life for restoring health.

Treating symptoms leads to the absurdity of isolating the symptoms as so many separate entities and the illogical attempt to find a specific remedy for each class of symptoms, even for each particular variety and shade in that class. No so-called symptom stands unrelated to the rest; no so called “disease” stands unrelated to the rest.

No pathological condition can be so isolated as to give rise to but a single symptom. From the mutual interdependence of organs and the deft inter-relations that exist between them it is impossible for any structure to be impaired or deranged without involving associated and coordinated structures. This leads to symptoms, of which several are sure to be present in any “disease”. An effort to suppress each symptom with a separate agent or measure would result in a multiplication of agencies according to the number of correlations and associations and reflex connections of the part. This would be a foolish attempt to isolate conjoined parts and treat them as if each exists without the other.

Symptoms are often remote from the organ or tissue actually affected. Any agent, measure or remedy that affects the location of the pain, which is a mere reflex from some distant part, is powerless to aid in the removal of the real trouble. A headache, for instance, due to indigestion, should not be treated with an aspirin. Suffering down the thigh or at the knee, due to inflammation of the ovaries, cannot be remedied by local applications to the knee or thigh. An aching back consequent upon a prolapsed uterus, cannot be remedied by anodynes or local applications to the back.

Functional disturbances are always sequent to nervous or circulatory disturbances, toxic excitement, structural changes, etc., and these antecedent conditions are themselves sequents to more remote causes which require attention.

The same symptom may be present under quite diverse conditions. For instance, vomiting may arise as a result of shock, as the result of drugs, or it may be a symptom of acute gastric catarrh, gastric ulcer, gastric cancer, chronic gastritis, aneurism of the abdominal aorta, renal calculus, cystic-calculus, hysteria, acute meningitis, typhoid fever, etc. The practitioner who directs his treatment at the vomiting and ignores the causes and conditions back of it, may treat his patients according to the latest approved methods, but he certainly does not care for his patients rationally, or sensibly.

A headache may be the result of local congestion, sinus trouble, a “cold”, digestive derangements, anemia, cranial tumors, softening of the brain, uterine disease, various toxic states, nervous states, high blood pressure, over-exertion, and many other conditions, and the patient or practitioner who contents himself with “relieving” the headache, and who ignores the antecedent conditions and their causes, is acting the part of the fool.
The heart, by virtue of its vascular and nervous connections with every organ and tissue in the body, responds to their distressed conditions, usually with increased action to hurry the circulation. Thus increased heart action and general circulatory acceleration may be sequent to many different abnormal conditions, while the heart and arteries themselves are free of pathology. How futile and how void of comprehension of physiological correlations and relationships would be the treatment that is directed at the increased heart action, which proceeds to “lower” this action, and which completely ignores the antecedent conditions which have necessitated this vigorous response on the part of the vascular system.

Symptomatic treatments are methods and measures which interfere with vital activities and which attempt to suppress these, on the assumption that man is more capable than the laws and powers of life of regulating physiological functions under the varying conditions of life. They are efforts to control vital activities and not attempts to remove the causes of the pathological conditions. Rational measures will seek to remove the causes of the pathology and leave vitality to manage the life functions according to her own laws. All unreasonable and meddlesome interference with the processes of life may prove disastrous by enabling the impairing influences to gain the ascendancy over the powers of life and thus lend indirect encouragement to the destructive processes.

The persistence of annoying symptoms, after ordinary remedial treatment has been discontinued and the frequent reappearance of old symptoms after they were supposed to be permanently subdued, the frequent change of physicians and resort, to new supposed remedies are conclusive proofs of the insufficiency of the usual methods of treatment. They indicate that neither the causes, nor the effects, of the toxemia are reached by such treatment. This is the explanation of the need for frequent repetitions of such measures in order to maintain the relief first experienced.

Permanence of relief is the best criterion of the value of a remedial measure. The stimulants and depressants of the schools of “healing” suppress the symptoms of “disease,” but the supposed relief is but an interruption of a reconstructive process. The work of the physician should not be so much the control of the leading symptoms as the removal of their causes. The symptom is sure to succumb with its cause. Subsidence of discomfort is called cure; never was there a greater fallacy. If the schools get relief from a symptom it goes into the records as a cure. Our medical statistics are full of such cures.

Symptoms are such only and not cause. Back of the symptoms, there lies an efficient cause. Pathology is a summing up or consummation of a long series of physiological abuses and not a sudden development. The cause existed in the body before any symptoms appeared; a cause must precede effect. Before the symptoms appeared the patient was called healthy. Was he healthy? After the symptoms are suppressed he is again called healthy. Is he healthy?

Popularly and professionally, if a man appears well and feels well, this is enough; no matter if he is on the verge of collapse, the most vital organs impaired and so deficient in vital power that as soon as they begin to falter the whole system is broken up, and the spark of life goes out. If a person is sick, the anxious desire of all is to get rid of the symptoms, and at these the whole artillery of medical “science” (drug and drugless) is directed. When the symptoms are made to disappear, no one thinks to inquire whether the cause of the symptoms is removed or not. It is enough that a temporary simulation of health has been established.

“A change of symptoms,” says Dr. Walter, “is what is usually sought and generally obtained, whether the patient gets well or not. Medical treatment consists in doctoring symptoms. The physician hears little but a detail of symptoms. The patient talks of little else to the doctor; it is the one thing that the doctor is expected to remove. And most physicians become expert in doing it, even though hardly two will be found who will prescribe the same medicines unless, indeed, we may except the homeopath.” - Exact Science of Health, p. 177.
The schools of physic apparently become bewildered in their attempt to respond to the perpetual cry of symptoms and are too poor in resources to provide more than temporary and doubtful relief. Medical science has an abundance of “remedies” for all these secondary affections, and would find it easy to “cure” them, were it not for the primary affection and its causes. The value of such remedies is shown to be nil by the persistent obstinacy of the primary “disease” and the persistent reappearance of the secondary affections after these latter have been suppressed. These remedies do not affect the cause.

Our prescriptions and prescriptions should not be controlled so much by what appears to be the leading symptom, as by the cause of its manifestation. The first aim in the care of the sick is to relieve the organism from the continuance of the impairing influences responsible for the illness; and the second, or remedial care, is to supply those hygienic influences and agencies needed by the body in restoring the affected tissues to their normal conditions.

**Specialism**: Specialism totally misapprehends the relation between the whole and its parts. Superior importance is attached to special points of pathology, which, therefore, receive exclusive therapeutic attention. Specialization in diagnosis tends to unequal appreciation of the elements of the pathology so that those parts receive chief attention which assume chief, importance in the mind of the specialist and therefore have undue weight in the general estimate that is made of the condition. However much advantage the more acute discriminative study of local conditions may have, such investigations and differential diagnoses have not always served the best interests of the patient and physician. The attention of the inquirer becomes fixed upon that part of the patient’s troubles that is the subject of his specialty. The inquirer usually fails to extend his observations to the causative phenomena. The restriction of the investigation to salient and objective facts necessarily restricts any remedial program that may be undertaken.

The unit of organization is dominated by the system. The body is not made up of a collection of dissociated parts, even antagonistic factors; the organic units are dynamically interdependent. Organs do not accomplish their work by energy that has its source within them, but each organ is dependent on every other, and the power which the body puts forth in these organic efforts, as summated in a totality, is life. Every sort of physiological power is specialized out of general power and is localized with nerve connections; every sort of physiological cell is specialized out of general cells.

The body must go forward as a whole and not by piece-meal. By employing merely local treatment the essential systemic derangement and its causes are left neglected, untouched and even unsought. Symptoms only receive attention and these symptoms will certainly cease when their antecedents are corrected.

Nothing short of a general integrity, based on the established harmony between symbiotic partners, will avail. Surgical interference with the integrity of the organism upsets the nicety of physiological balance upon which the highest physiological efficiency depends. Integrity of behavior, on the other hand, is as essential as integrity of structure, if the maximal physical efficiency is to be maintained. We must rely upon the laws governing the interdependent operations of the organs, and not upon surgical, pharmaceutical and physical interference with the functions of the several organs.

**Specific Treatment**: Specific treatment and specific remedies are based upon the ancient notion that “diseases” are foreign forces; or enemies to the native forces. Each so-called “disease” has become a personal entity, possessing a destructive force peculiar to itself. It is, therefore, to be driven out by a “remedy” having a specific action on that specific monster. The practice had its origin at a time when “disease” was looked upon as a personal, although intangible, existence. The prescription was directed against the personal, but unseen, enemy.
The practice of prescribing for “disease” by name, instead of acquainting ourselves with natural principles and following them, is a relic of the Dark Ages. The present mad search for specifics against “isolated” maladies, of running after information as to what agents or recipes will cure this or that malady, grew out of the dogma that diseases are personal things. This fallacy pervades allopathy, homeopathy, eclecticism, physio-medicalism and, to a great extent, even the drugless schools.

As absurd as was the ancient doctrine of the nature of “disease,” it still exerts a strong bearing upon the opinions and practices of today, even though it is not openly recognized. The study of “disease” by name and the search - for and prescription of specifics against “disease,” have become so deeply engrained upon the schools of physic that it is not probable that they can be induced to discard the names, the classified nosologies, and the remedies.

We are presented with the strange fact that a large body of men claiming to be scientific, have, theoretically at least, discarded the old absurdity about the bodily character of “disease,” and are yet searching for specifics against “disease” In conformity with the discarded absurdity.

Physiology and pathology afford no basis for specific medication. The prevailing practices ignore the most essential, the most vital, point. They take no practical account of the causes of toxemia, out of which the various common forms of pathology must, of necessity, proceed. Failure to recognize these causes inevitably limits legitimate remedial resources and is equivalent to a contentment with temporary and inconsequential palliatives and expedients.

Only slight consideration of even the simplest “disease” of the nosology, will show that it is not and cannot be a state so isolated as to involve only one factor. In the very nature of the organism, various tissues and organs must be more or less involved when one of them is “diseased,” and the conditions of these tissues must change at different stages of the “disease,” so that, medically, variations in medication will be required at different stages, Any effort to meet such changes and diversities by a single remedy or agent must be based on mere. credulity and not upon sound science.

What is even more important, in the very nature of things, no pathological condition is the result of only one antecedent. The simplest “disease” is the complex effect of a number of correlated antecedents. The remedy must, therefore, contain as many factor elements as the cause. Any attempt to meet so many antecedents with one remedy, or agent, rests on a whimsical basis. It is impossible to have a specific remedy for a “disease” that depends upon many diverse elements, There can be no specific remedy anymore than there can be a specific cause.

**Relief:** The relief system is basically false. If we writhe in physical anguish as a consequence of gluttony, we demand immediate relief. First, because we want to be made comfortable; second, because we want to be able to partake of the next big feed which is already being planned or prepared and for which the mouth is already drooling in anticipation. A palliative will “relieve” our discomfort, but it will not break us of gluttony. Indeed, it encourages gluttony, for it leads us to believe, we can make gourmands of ourselves and escape the consequences. So, “there is a banquet on tonight and we don’t want to miss it. We will respect the law some other time, but this time usually comes too late.”

Gandhi says: “I overeat; I have indigestion. I go to a doctor; he gives me medicine. I am cured. I overeat again, and I take his pills again. Had I not taken the pills in the first instance, I would have suffered the punishment deserved me, and I would not have overeaten again. * * * A continuance of a course of medicine must, therefore, result in loss of control of the mind.”
Suffering tends to work out favorable results. The first impulse of the sufferer is to seek relief. Blind credulity causes the sufferer to subject himself to such other suffering or sacrifice as the physician, in whom he imposes his confidence, may prescribe. Failure to obtain relief in one direction causes him to seek elsewhere for it. Repeated failure brings a loss of faith in treatment and causes him to inquire why he suffers. What is the cause of his suffering? How may that cause be remedied? He soon comes to realize that a knowledge of cause and effect is attainable, and that if causes are removed effects tend to cease.

Recovering ideal health requires time, patience, perseverance, and compliance with the needs of recovery. Before the sufferer will make use of either of these elements, he must make up his mind that he really wants to get well. This often calls for considerable suffering for many will reform their living habits, or abstain from food, only when driven to it by suffering. These are constantly seeking “cures” through some short-cut method. In the long run, success smiles only upon those who scorn all short-cuts.

The fool cries for “relief” - he will have “relief” whatever the cost to his future state of health. Indeed he will have “relief” if he has to die to get it. The fool feels sorry for himself and cries out that he cannot stand his suffering. He must have “relief.” He lacks courage, he lacks intelligence, he lacks understanding, he lacks a sincere desire to get well. He is fully satisfied to go through life on “relief.” He is willing to take pills continuously, although there is no health and no recovery in such things.

Those who appreciate law and order do not clamor for relief - palliation - for they see the absurdity of relief. They are not so childish as to believe that cure can come to them while they still break life’s laws. They are not so ignorant as to believe that a drug can cure a bad habit. They do not look for relief or cure outside of their own efforts at correcting their lives. The wise man will seek for a correction of the cause of his suffering. He does not sandbag his nerves with dope.

Dr. Weger says: “We shed crocodile tears in profusion while we accept soothing ministrations. These are not tears of repentance. They are tears of self-pity - meaning nothing. Many, throughout their lives, thus deceive themselves into the false belief that they are putting something over on God - on the law. They little reckon that their sins are finding them out. There is no security in a cheaply purchased immunity. Forgiveness, pardon amid parole are effective only for those who ‘go and sin no more’.”

"There are no “natural therapeutics”; there are no “natural cures”; there are no “natural methods”. There is no art of healing. - There is a science of healing and it is understood by twenty or thirty men in the world today.

The science of healing is the knowledge of the vital processes by which the living organism heals itself."
"there is nothing against which to battle"

We are suffering from a frightful incubus of a so-called science that murders millions with its almost incredible ignorance. For “Medical Science” we have a “science” which is fighting nature with every resource at its command. Why all this combatting of symptoms? Because these are manifestations of “disease” and are therefore, of evil intent. They must be banished or subdued.

The so-called “disease” (biogony) exists potentially in its sources rather than in its symptoms. All biogony, wherever located, when reduced to its final analysis, is the consequence of toxemia. While it is always desirable that the functional modifications called “disease” cease and, while the subsequent normal performance of these functions evinces a return to health, no effort should be made to force these functions to simulate their healthy action so long as conditions exist which make the modifications necessary.

When the essential nature” and purpose, the rationale, of acute “disease” is fully understood, it will no longer be treated. Its symptoms will no longer be suppressed, subdued, changed or combatted. Jennings says: “The vital economy has but one great and absorbing, object before it and in the prosecution of that object, it is not easily diverted to the right hand or to the left. When difficulties thicken in its pathway, its forces are all put in requisition, disposed and used to the best advantage for surmounting the difficulties, and it is instructive as well as astonishing to witness the amount of: obstacles that human nature will often overcome and still hold on her way, even under, apparently, an almost exhaust state of the vital energies.” *Philosophy of Human Life*, p. 219.

The Orthopath is legitimately absolved from all warfare against “disease.” For in his view there is nothing against which to battle. For as Jennings declares: - “For the recovery of his charge he looks to the operation of internal vital machinery most perfectly adapted to the purpose *** and controlled by laws that need and admit of no improvement. While faithfully serving in the capacity of handmaid to nature, in the arrangement and constant adaptation of external circumstances, to the natural renovating, efforts, he expects occasionally to witness fearful and agonizing convulsions and disturbances of the motor portions of the vital mechanism, or great deviation of some kind from the natural state. But instead of regarding these changes and these irregular actions as subversive in their nature and tendency, he considers them as directly the opposite of this, and as truly essential to the reparation and replenishment of a damaged living body as thunder storms are for the purification of the atmosphere. Amid a principal source of his anxiety and vigilance is to guard the delicate nervous apparatus whose function is to transmit intelligence and power, and control motion - from the presence and action of anything that has a tendency to impair its perceptive faculty, agileness and force.

"In treating an acute disease, the first rule to learn is: Don’t do it. The disease is not to be treated, but permitted to run its natural course."

“It is immaterial, therefore, to the Orthopathist, so far as his direct interference is concerned, in what shape disease makes its appearance, and with what severity; or what changes it undergoes. His business is to guard and take proper care of the exterior of the body, furnish a little ‘bread and water’ as it may be called for, secure a quiet equable state of mind, and leave nature full scope and freedom in the discharge of her own appropriate duties. If death should peer forth in pale and ghastly visage, and show its icy hand as if to clutch away the remnant of humanity, it would be out of order for our Orthopathist to attempt to repel it by the employment of any of the troops of Admiral Mercury, King Alcohol, General Diffusive Stimuli, Subordinate or Local Irritants
or any other contraband force. He should fall back submissively upon the extreme resources of nature, as his
dernier resort, and if these fall, the final catastrophe is sealed.” - Philosophy of Human Life, p 267.

The principle of Orthopathy recognizes no therapeutics of acute “disease.” It only recognizes the hygiene of
acute “disease.” Seeing in the acute process the process of cure it does not seek to cure “disease,” cure the cure,
but seeks merely to supply the body with the best hygienic conditions to the end that it may carry forward its
curative work with the least possible hinderance. Knowing no power of cure except that inherent in living
matter, hygiene does not seek for curative agencies and influences outside the body. Knowing that every action
of the living body, in “disease” as in health, must be in harmony with the laws of life, true to the highest
interests of the body, and, therefore, right, it does not seek to suppress or control symptoms.

Only a wise letting alone and not a pretty-near letting alone will avail. There are all kinds of cures, and the most
successful are those that do the least. Dr. Jennings replied to a physician who had asked him in what respect he
(Jennings) differed from many physicians of that day who employed but few drugs in these words: -

“We differ in two fundamental particulars:
✓ “First, the general principles on which we form our indications of treatment are directly opposite to each
other. You hold disease is wrong action; I maintain that it is right action.
✓ “Second, to be consistent, the general rule for practices based on your general principle must be break
up diseased action. On my general principle, let diseased action alone. - Medical Reform, p. 306.

Again: - “‘That is all very well-,’ said a good friend, ‘in mild disease, but when disease becomes violent, if
there is nothing done to check it, it will overcome the powers of life.’ This friend admitted that disease was not
a some thing, emphasizing the word thing. It must be a some-thing or a no-thing; and Orthopathists are content
to let nothing take care of itself. But just here is the tug of war; the pivot on which the question of medicine or
no medicine hinges. Admitting that mild diseases do not of themselves afford a basis for a system of
medication, the question arises, ‘does the extension or aggravation of symptoms change the nature of disease’”?

Let there be no overlooking of the main point - the essential nature of “disease.” Is the tendency of vitality -
for there is no other agency concerned - in the aggregate of movements called “disease,” right or wrong? This is
fundamental: either orthopathy is right, or else, heteropathy is right. If the right action theory is correct, then the
let-alone plan is right, and the name attached to the group of symptoms present is of no consequence. The let-
alone plan may be adopted from the outset. There need be no waiting for developments, no anxiety, lest we are
treating for typhoid fever and the patient is developing meningitis. We may safely carry out the following
advice of Jennings : -

“Don’t stop to inquire what disease is about to be developed, whether pneumonia or measles. In Old School
times - and I suppose those times are not quite ‘already past’ - physicians were sometimes puzzled to
distinguish between these diseases, for often in their incipiency they are easily confounded, and when they were
bleeding, blistering, and dosing to break up and keep back a pneumonia, and at length discovered it was a case
of measles, they would immediately desist from the break-up efforts, and let the measles come out and develop
themselves. Orthopathy has no trouble or perplexity of this kind. All diseases are ‘self-limited’ and may be
permitted to make a full display of themselves. Whether the symptoms run high or low, let them run till they
have had their run out. ‘The harder the battle, the sooner over’ and the less it is interfered with, the less there
will be of it, and the more likely it will be to end well. There can be no wrong action, for whatever action there
is, is controlled by an immutable righteous law, which insures its tendency toward recovery, whether it reaches
that point or not.” - The Tree of Life, p. 186.
We merely place the sick person under those physical and mental conditions which are best adapted to the spontaneous outworking of the organism’s own conservation of energy, repair of structure and restoration of function. This is not a system of cure. Health and efficiency are attainable only by Nature’s processes and their own vigilance, and are not to be bought anywhere. All recoveries occur by virtue of the vital recuperative efforts of the system. None of the schools of healing can cure anything; for they know nothing of cause. All of them are chasing cures and imitating the “regulars” who have a never-ending line of new cures.

Under this plan of care, there need be no waiting for developments, as it can be instituted from the very beginning of any case. The physician is called to see a patient presenting symptoms like these: rapid pulse, high temperature, loss of appetite, prostration, etc. What is the “disease”? It may be the beginning of pneumonia, typhoid fever, measles, spinal meningitis or any other acute febrile condition. He must await developments. The symptoms are not far enough advanced to enable him to make a differential diagnosis. His theory and practice call for a specific treatment for each separate symptom-complex. But he can’t tell what the symptom-complex is going to be. He can only give “expectant” treatment and await developments. Under Hygienic care, this is not necessary. It is not even necessary for the “disease” to ever reach a stage where a special name can be given it. While the Allopath or Homeopath waits for such developments, the Hygienist is doing his best work.

Not attempting to treat disease by name; indeed not essaying to treat disease at all, and not treating individual organs as if they are isolated and independent isonomies, we are not compelled to delay our work and deceive the patient with placebos, while awaiting the development of sufficient pathognomic signs to enable us to determine, with. doubtful accuracy, the particular malady. We do not have to waste three or four days in hesitant waiting, but may inaugurate hygienic care at the outset.

All so-called acute “diseases” - pneumonia, measles, typhoid fever, smallpox, appendicitis, meningesis, whooping cough, etc., etc., should be cared for alike. In Tilden’s words, “only nature cures, and all a physician can do is to palliate, and all he should do is to be quite sure that his palliatives do not add to the disease, rather than it ameliorate suffering and shorten it.”

Acute “diseases” are self-limiting. Their tendency is towards recovery and the patient will recover without treatment. In fact they are always better off without treatment than when they are subjected to the meddlesome interference that is usually given and which passes under the name of therapeutics.

In treating an acute “disease,” the first rule to learn is: **Don’t do it.** The “disease,” it must be remembered, is a vital process in self-defense. It is not to be treated, but permitted to run its natural course.

An acute “disease” is a more or less violent reaction against toxemia. It is usually sudden in its onset and does not last long. Pain and increased temperature are usually present, with a loss of appetite, a sense of weakness or exhaustion, etc. Except in mild cases, the person so affected is forced to go to bed and cease all other activities. This is a wise provision of nature to conserve energy. It is not to be supposed that the sick person has any less vitality or nerve energy when the acute symptoms set in than he had ten minutes or half-hour previous when he may have been ploughing, cutting wood, digging ditches, or some similar work that requires strength and energy. But there is every reason to think that the energy that is used under ordinary conditions for the performance of such work has been withdrawn from these channels and is now being used in the effort to throw off the pathoferic matter. Were this not true, how could an organism already greatly enervated, marshal enough energy to accomplish the extra work it is undertaking in acute “disease”?

If the work of house cleaning is to be successful, it is essential that the undivided attention of the organism be devoted to the curing process. For this reason, all activities that can be dispensed with temporarily, and that
have no direct bearing on the task of purification are stopped. The digestive process is temporarily suspended, little or no digestive juices are secreted, the appetite is cut off, the patient is forced to rest.

"Only a wise letting alone and not a pretty-near letting alone will avail"

WHAT RULES TO FOLLOW

This brings us, then, to our first rule of practice in acute “disease”: The primary requirement is rest:

- Physical rest;
- Mental rest;
- Sensory rest;
- Physiological rest.

Physical rest - is secured by putting the patient to bed and making him comfortable. A comfortable bed should be arranged and kept clean. All bedding should be as hard, and all bed-clothing should be as light, as a due regard for comfort will allow. Soft beds that permit the patient to sink down into them are exceedingly debilitating and uncomfortable, and prevent rest. And, as Jennings truly declares, “in passing through a grave renovating process, rest, rest, rest, is the remedy.”

No organ, however small and comparatively insignificant, is ever permitted to utter a note of protest or complaint until all the resources of power are low and the present stock of power consistently available to that organ is nearly exhausted. If an essential organ has been impaired, or injured by any means whatsoever, it is proportionately the more important that early and careful heed be given to the saving of power at the first evidence of impairment, and it is especially urgent that the body should be carefully guarded against further injury in any and all of its parts, until its present damaged condition is thoroughly repaired and recovered from.

Where much, and perhaps everything, depends on the economical and undisturbed expenditure of a few feeble vital forces, no disturbing causes should be admitted, and as the hygienic care of the sick is founded on the fact that the tendency of the movements of life, in “disease,” all and singular, is to save life as far as this may be threatened; and especially to avert threatened danger to any of its organs, the first object to be aimed at in the conduct of any case is to shut down all unnecessary waste-gates, that is, to place the body as far as this may be possible, under those conditions in which there shall be no unnecessary expenditure of its powers, in order that the organs that are called upon to accomplish the essential work of cure, but may otherwise be deficient in power, may receive added force.

Give the Law of Distribution full scope in apportioning power to the various organs, and dispensing the powers of life as necessity demands. Let it withhold power from one organ or set of organs, and appropriate it to others, as the ultimate and highest good of the whole organism may require.

Vital strength is reduced by the continued presence within the system of toxins, and by the intensity of the struggle against these. It is, therefore, necessary to conserve its powers and resources in every way possible. Exhausting the body through over-excitation (stimulation and inhibition) is a killing practice: If a part is excited too severely or too long or both, its action is impaired and finally, it loses the power to act. Rest conserves nerve energy and prevents septic development.

When it becomes plainly evident that the vital forces are to be severely tasked and tested in a curative, renovating, and defensive process, there should be no unnecessary delay in placing the body and mind under conditions and circumstances in which the forces of life can carry forward their work with the least possible interruption or loss of power. The mind should be set at ease, the body made comfortable, the conditions of recovery supplied, and no means employed to control the operations of the body, or the symptoms of the
renovating process. As fast as the Law of Limitation is enforced, and activity becomes tedious or wearisome, the body should be yielded up, and not the slightest obstacle placed in the way of the operation of any of the laws and forces of the vital economy. No fallacious theories about food or exercise adding to your powers and helping you “throw off” the “disease” should be permitted to cause you to continue active and to continue eating. Mental, physical and physiological rest are needed and the quicker these are secured, the more rapid will be your recovery, and the less will be your suffering.

The evidences of a developing biogony are indications that vitality is low, and its expenditure should be cautiously guarded. Nature never permits a single fibre of the body to deviate in its action from the normal state, or to suffer pain, so long as she can prevent it consistently with the general welfare of the body. Where there is much or continued complaining by parts of the body every waste-gate should be closed in order to conserve power.

If appetite and the desire to be about continue, it is permissible to eat lightly and to be lightly active; however, a quicker recovery will be made and a more comfortable sickness will be experienced if one ceases even these. “Keep still,” says Dr. Jennings, “rest, rest, rest, is the grand panacea.”

If your body is in a disabled condition, and you are about to undergo a renovating process, or if it is already in operation, avoid exposure to all sources of additional damage to the body, at least until you are restored to a healthy condition. Exposure to cold, extreme heat, fatigue, excitement, grief, shock, physical violence, or injury, etc., all lessen the chances of recovery. Many of the fatal cases of “disease” that are daily reported, are rendered so by the additional burdens upon the powers of life, which a little prudent foresight might easily have prevented. Vital strength is reduced by the continued presence within the system of pathogenic agents and by the intensity of the struggle against these. It is therefore, necessary that the body conserve its powers and resources in every way possible.

In many cases, the vital operations are kept so incessantly harassed by drugs, serums, operations, and treatments of various kinds, that they are kept so busy defending the body against these, they are not able to repair the original damage, or eliminate the cause of the original trouble.

Nothing should be permitted to interfere with a full and free operation of the laws of life, and the full development of biogony. How extensive these developments may need to be, we have no means of knowing, accurately, until the process is completed. Therefore, the appropriation and distribution of the vital forces that may be made in the particular circumstances, should be freely submitted to. “If this carries a man,” says Jennings, “into a pleurisy, let him have a pleurisy; if it brings on typhus fever, billious fever, or yellow fever, let him have that fever if it plunges him into a deep lung affection, threatening confirmed consumption, let it have free course, and push him as far in that direction as it will, for safety lies only in that direction; if it throws him into a fit, let him remain in the fit, until he is released from it ‘by law.’ Remember the words of Napoleon: ‘We are a machine made to live. We are organized for that purpose; such is our nature. Do not counteract the living principle. Let it alone; leave it the liberty of defending itself - it will do better than your drugs.’” - Medical Reform, p. 326-27

Sleep is the highest form of rest. During sleep, all the reparative and recuperative processes go on most efficiently. The sick should be permitted to sleep, as much as possible and should not be awakened for any reason whatsoever, except, of course, where cleanliness demands it. But sleep should not be confounded with the stupor that follows the use of narcotic and hypnotic drugs.

**Physiological rest:** This is secured partly by physical and mental rest but largely by stopping the food intake. A certain amount of functional activity is essential to the continuance of life. Suspended animation, is no doubt, a
fact in Nature, but it cannot continue for very long without ending in death. Aside from this essential activity of
our physiological economy is largely determined by our food intake. To stop the food intake takes a heavy load
off the internal economy. The work of digesting and assimilating food and of discarding the waste and refuse
portions all ceases. The heart and lung have less work to perform. The liver and kidneys are given a rest. In fact,
the whole physiology is given a rest. The energy usually employed in digesting and assimilating food is now
used for eliminating or neutralizing the toxic matter that is forcing the reaction.

All food should be withheld from the patient who is suffering from a biogony until all acute symptoms subside.
So long as there is any pain, fever or inflammation or other troubles, to give food is to add to the trouble. This
is, then, rule two: In all dynamic biogenies don’t feed.

Tilden sagely observes: “Given any one of these so-called diseases, from a cold to smallpox, the only logical
treatment is to stop food, wash out the bowels with enemas, and rest. A physic irritates, enervates and further
checks elimination; to feed adds to the decomposition in the stomach and bowels. Such treatment builds
disease; and if the patient is old or very young, the remaining resistance may be overcome by a continuation of
the same treatment, and death result. Nothing but rest, rest from everything, restores nerve energy and
establishes secretion and elimination. Forcing remedies act the opposite. Every illness is an effort at house-
cleaning, and all the aid that nature needs is to be left alone.

“This is hard, to believe for a profession spooked on the idea of cure. Toxemia is the only disease. Enervation
checks the elimination of toxin. At every opportunity vicarious elimination takes place. An indigestion creates
irritation of the stomach, and elimination of toxin takes place through the mucous membrane of the stomach.
This is called catarrh of the stomach. Cold air irritates the sensitized mucous membrane of the throat and nose,
catarrh follows. Every toxemic crisis is brought about in the same way. Rest cures; food and drugs add to the
so-called disease.” - Philosophy of Health, Aug. 1924.

Again he says: “Rest, with all that the word implies, cannot be preached too strongly. It does not mean to stay in
bed and eat and take drugs. Food and drugs stimulate, which is opposed to rest. Mental poise is restful, and must
go with physical rest. So strong is the ingrained belief in food, that there will be readers who will insist that
patients in the state in which young Coolidge is, should be fed. (This was written while young Calvin Coolidge
was ill and his spectacular physicians were making their spectacular efforts to save him. Author). No; if feeding
is all that is necessary, such invalidism would not evolve. Such patients are taxed to death by food. A limited
amount of properly selected food at the right period of such lives, would forestall such catastrophies; but when
profound enervation and toxemia are once evolved, there is but one way out of the trouble - but one treatment
- namely, a wise, scientific letting-alone. This must be started before an insignificant accident like a friction
blister starts an infection conflagration. A half-extinguished match has fallen in the wrong place many times, as
history has recorded.” - Philosophy of Health, Aug. 1929.

Page says, “there is neither pleasure nor nourishment in forced feeding - only pain, poisoning and starving. The
fasting cure universally and rationally applied, would save thousands of lives every year. For example there
would be practically no ‘typhoid fever’ as all fevers would be aborted in a few days of stomach rest; and never a
death or prolonged illness from whooping-cough, which is always a stomach cough from inflammation of that
organ. In my busy practice of forty years, no fever has developed into ‘typhoid’ nor has there been any
whooping beyond a few days, and never a death.”

Fasting does not cure any disease. It is a means to an end and that end to unload toxemia. “Little driblet meals,”
says Page, “are not fasting. There should not be a mouthful or a sip of anything but water, a few swallows of
which should be taken from time to time, according to desire.”
Mental Rest - It is of first importance that the mind be at rest. The sick man or woman should have perfect confidence in the power of nature to accomplish the work begun. The alarm and anxious concern of relatives, friends, and neighbors, must be met as resolutely as possible. It would be well if every individual could give the whole subject of “disease” a careful and thorough examination while he or she is yet well and make up the mind then what course shall be pursued when ill. Sickness is not the time to examine the merits of the clashing and conflicting theories and practices now in vogue. Strive to get and habitually maintain a correct idea of “biogony” so that when you become sick, if you are foolish enough to do so, your mind may be allowed to rest at ease in the perfect confidence that all that can be done to good purpose will be done by due course of law.

Where this has not been done, those who have the care of the sick in their hands should take heed of every word, act, or appearance, that may tend to shake the confidence of the sick person. Anxious faces, forlorn looks, and manifest fear are quickly discerned by the sick. Try to be cheerful and optimistic in the sick room. Your own confidence will help to buoy up the confidence of the sick person.

Mental rest is best secured by assuring the patient that he is in no danger and removing from his environment any mentally distractive object or sound. Especially should visitors be excluded from the room. The sick room is too often a visiting rendezvous where friends and relations congregate and talk. They recite all the ugly details of how Mr. or Mrs. So-and-so had this or that “disease,” how he or she suffered, how long he remained sick and how he or she died. Such talk is not calculated to create a peaceful, restful state of mind in the patient. Besides, the noise itself is distracting to a sick man.

In his Hygienic Handbook, Trall roundly condemned the habit of making the sick room a visiting rendezvous where friends, neighbors and relatives congregate and talk, often, far into the night. In his Water-Cure for the Million, (p. 31-2), he says: “The usual custom and manner of watching with the sick is very reprehensible. If any persons in the world need quiet and undisturbed repose, it is those who are laboring under fevers and other acute disease. But with a light burning in the room, and one or more persons sitting by, and reading talking, or whispering, this is impossible. The room should be darkened, and the attendant should quietly sit or lie in the same or in an adjoining room, so as to be within call if anything is wanted. In an extreme case, the attendant can frequently step lightly to the bed-side, to see if the patient is doing well; but all noise, and all light should be excluded except on emergencies. It is a common practice with watchers to awaken the patient whenever he inclines to sleep too soundly. But this is unnecessary, because when the respiration becomes too laborious, the patient will awaken, spontaneously. Under the drug-medical dispensation, the custom is to stuff the patient, night and day, with victuals, drink or medicines, every hour or oftener, so that any considerable repose is out of the question. But, fortunately for mankind, the Hygienic System regards sleep as more valuable than the whole of them.”

Stuffing the patient with food, drink and medicine, at all hours, or half-hours of the day and night, not only disturbs rest and sleep by frequently awakening them to take these things, but these things keep the system in a state of excitement, add to the discomfort and suffering of the sick person, and make rest and sleep almost impossible. Most of the sufferings of the acutely sick are due to the treatment and care they receive.

Sensory Rest: This means rest of sight, feeling, hearing, etc. Brilliant light disturbs rest. The sick room should be both light and airy but not brilliantly lighted. The habit of keeping a light burning all night in the sick room is a bad practice and one to be avoided. It is sun-light alone that is of value to the sick. They should not be denied this, but , at night, the dark room is conducive to sleep. The blinds need not be drawn during the day. I have always insisted that the sun-light be permitted free access to the sick room. Even in measles where light is commonly regarded as very injurious to the eyes; I have insisted on open windows and raised shades and I have yet to see a single case in which any damage was done to the eyes. Indeed, I am convinced that the opposite and prevailing course will, and frequently does, injure the eyes.
Noise disturbs rest and sleep. It is irritating to the sick person, much more so than to the well. All noise should be eliminated as far as possible and the sick person should make every effort to relax his or her mind, acquire poise, and be disturbed as little as possible by the remaining noise. Absolute quiet is essential in low stages of “disease.” Even the little noise caused by walking across the floor is irritating and should be avoided as much as possible. No one should be allowed in the room save the nurse, and no talking to the patient should be permitted.

**Sleeplessness:** Sleeplessness and restlessness are due to toxic-irritation, to drugs, food and outside influences. Patients that are not fed and drugged will usually sleep. Who has not seen parents walk the floor with their sick child in their arms? Parents and child are exhausted from lack of sleep. These children will sleep if not fed and drugged. Indeed, if not fed, they will sleep almost continuously. Most of the supposed need of employing drugs to allay restlessness and pain, and to compel sleep in the severely sick, arises from enforced feeding and stimulation.

Hypnotic drugs enervate and increase toxemia, thus adding to the patient’s, suffering and danger. As soon as the people learn the terrible price they pay for a short respite from pain and the restless, questionable sleep (really stupor) brought on by hypnotic drugs, they will certainly cease to employ them.

**Warmth:** People who are sick must be kept warm or recovery is hindered or made impossible. These suffering with “rheumatism” in any of its forms, must be kept especially warm.

Bodily warmth is essential to physical comfort and rest. If the sick person becomes chilled, and unless in high fever, he chills easier than a normal person, he is made uncomfortable, and elimination is checked. “Keep the feet warm, the whole surface is correspondingly warmed, and the circle of circulation enlarged, and the labor of the heart correspondingly reduced.”

Whatever its saving to the heart, if the body is kept warm, its energies are conserved and the processes of elimination are not interfered with. By keeping warm, however, is not meant to roast in an electric cabinet, or stew and boil in a hot bath. A comfortable warmth of the body maintained by a moderate amount of clothing and supplemented by a hot water bottle, or a jug of hot water, or an electric pad to the feet, is sufficient.

The patient should be made comfortable at all times. All his needs should be attended to carefully and gently. He should not be pampered or petted. Petting and pampering patients build the sick habit. It produces self-pity and causes the patient to magnify his troubles. Firmness is essential, while care should be confined to the essentials.

**Air:** A plentiful supply of oxygen is one of the prime necessities of life at all times. Deprive a man of all oxygen and death results in a few minutes. The need of oxygen is more urgent in biogony than at other times, except, of course, under violent exertion. The sick person cannot breathe without air. The sick-room should be well ventilated both day and night with the purest air obtainable, coming directly from the outside, and not from an adjoining room or hall or from a foul courtyard.

**Water:** All the water may be given that thirst demands. One may rely implicitly upon instinct in this regard. Those who doubt the competency of man’s natural instincts often insist on copious water drinking, even in the absence of any natural demand for such. This practice is not only not necessary, but is decidedly harmful.
Drinking large quantities of water does not increase the elimination of toxins. Water should be as pure as can be obtained and may be given warm or cool, as relished most by the patient.

**Cleanliness:** It is difficult to over-estimate the importance of cleanliness. Not merely the patient, but his clothing, bed, room, the air he breathes, and his surroundings should be kept clean.

Cellars, yards, cess-pools, out-houses, garbage cans, slop-jars, dead and decomposing animal and vegetable matters, pools of stagnant water, hog-pens, cow-pens, and stables near the houses, are prolific sources of disease. An environment reeking with the emanations from these is not fit for well or sick.

The sick person should be gently sponged with warm water once daily, or more often, if cleanliness demands it. The eyes, nose, mouth, throat, anus, opening of the vagina, and under the prepuce, should all receive particular care. Plain water will do to cleanse these, but if the need for something else is felt, dilute lemon juice is preferable to soap or antiseptics. This may be used as an eye wash, a mouth wash, or as gargle for the throat, and for cleansing the surface of open sores.

**UNDERSTANDING SYMPTOMS**

"The “relief” system kills many (often in twenty-four hours) who would otherwise recover."

**The Bowels:** The bowels are usually points of great concern to doctors, nurses, patients, relatives and friends. Pills, powders, enemas, and suppositories are frequently resorted to, to force these to act. Indeed, it is no uncommon thing to see the bowels goaded with cathartics or flushed with water, even when they are already moving freely and frequently. So deeply ingrained is the belief that we, must **do something**, anything, so long as something is done, the physician and patient and all concerned, are not satisfied unless the body is being excited and stimulated.

A sound, vigorous body, with pure sensibilities, neither needs nor courts any kind or degree of unnatural excitation, but disdains and resists it in toto; and an impaired body and sensibilities, needs it no more, disdains it no less, and is less able to bear its devastating effect. “Stimulants,” says Jennings, “act on the principle of the spur, increase action, but diminish the power of that action, always leave less of power in any part on which they expend their action than there was in that part before they acted upon it.” - *Tree of Life*, p. 198. Shall we, then, exhaust the power of the bowels, and consequently, of the whole system, by forced labor, or shall we allow them to rest and recuperate?

Says Dr. Tilden: “There is a continual tendency in the minds of those who give thought to medical subjects (professional and lay) to think of bowel evacuation and elimination as identical. Consequently, when enervation has brought elimination to almost nil, doctors and patients use eliminating remedies (?); and, when the bowels are forced to move, the bladder to empty, the skin to act, etc., etc. they think elimination has been established. Not so - only voiding what has already been excreted. This is an old medical error of confusing excretion or elimination with evacuation or voiding, and much suffering and many deaths have been caused by the practice of forcing the bowels to move. Irritating drugs act in the opposite way from what is desired. They may force voiding, but always check excretion or elimination and build toxemia.” - *Philosophy of Health*, Aug. 1924.

I know of no more reason for forcing bowel action than for forcing heart action, or lung action. Bowel action is automatic and, except in cases of obstruction, may be confidently expected to do all the work that is really essential and to conserve all the energy possible by failure to act, when there is no urgent necessity for them to act. Even in obstruction, they usually succeed in sending the feces back the way it came and get rid of it.
Purgatives, laxatives, and enemas, are sources of excruciating pain in cases of appendicitis, inflammation of the colon, etc., and are frequent causes of a break in nature’s defense, resulting in a rupture of the bowel wall or a rupture of the appendix into the abdominal cavity instead of into the colon.

“Doctor,” once said an anxious captain to Dr. Jennings, “my wife can’t breathe much longer unless you do something for her.” “Captain,” replied the doctor, “your wife can’t stop breathing, if she tries.” Then he proceeded to administer some colored water and some “powders” composed of corn starch. After a short time, the lady's difficulty in breathing was relieved and she recovered, thanks to the potent “medicines” which she had received.

A fact, unknown to physicians and laymen alike, is that all the functions of the body are performed with as much promptness, regularity, and efficiency, as, under existing circumstances, is compatible with the safety and highest welfare of the body. In “disease” and in “health,” that is, so long as life lasts, every organ and tissue of the body is at its post, ready and disposed to perform its particular functions, to the full extent of its abilities. They do good work when they have the power to do so, and when lacking in power to produce perfect work, must do the best they can.

There are many ways of forcing increased action in debilitated organs for a brief period, providing there is enough power in reserve to produce the action, but these things always and necessarily diminish the power of that action and do so in precisely the degree to which they accelerate the action. The increase of action is occasioned by the extra expenditure of power called out, not supplied, by the compulsory process, and therefore the quantity of power is diminished by this amount. The power is wanted for other purposes and will be used more judiciously and advantageously by the undisturbed law of appropriation and distribution of the living system. These facts apply equally to the bowel as to the heart or lungs or liver. We may depend on the body to regulate its own internal conduct to its own best interests.

**Pain:** The relief of pain is an unmitigated evil. Most of the work of physicians consist in relieving pain and discomfort and almost invariably they “relieve” these with agents and by means that themselves produce more pain and discomfort than they “relieve.” So true is it, that all drugs produce, as their secondary effects, the exact opposite to their primary effects, that Dr. Jennings suggested that drugs should be classified according to their secondary effects. Tonics should be called debilitators, pain-killers (anodynes) should be pain-producers (odynes), etc.

Pain is merely a symptom. Symptoms are such only and not cause. The office of pain is beneficial, protective. It may serve as a diagnostic guide, if it is not suppressed. Its suppression does not remove cause, but does retard or actually prevent recovery. “Grin and bear it,” is the best advice ever given a patient in relation to pain or discomfort.

Trall says: “pain denotes the presence of some morbific agent, or some abnormal condition. - The practice of ‘curing’ pain by means of opiates, narcotics, bleeding, etc., is founded on an erroneous theory of the nature of disease. Opium is more extensively employed in medicine than any other drug because it is the most convenient agent to allay pain. But it does this by silencing the outcry of Nature. The vital instincts of Nature proclaim that there is an enemy within the vital domain, and in the language of pain they call for help - for such materials and influences as they can use in expelling the morbific cause and in repairing the damages. The doctor poisons them with the drug, which is resisted with such intensity in another direction as to suppress the original effort - and this he calls a cure! The whole process is resolved into curing the disease by killing the patient. Hygienic agencies relieve pain by supplying the conditions which Nature requires to expel its cause.” - **Hygienic Hand Book.**
Dr. Tilden records a case of rheumatic fever, treated by him early in his practice, in which the sufferer and her husband demanded that she be given relief from pain. This he refused to give, and they discharged him. Unfortunately, the next physician gave her “what she wanted,” and in twenty-four hours there was a sudden death. He adds: “That early in my professional career I had it demonstrated to me that it was very dangerous to use local applications, rub inflamed joints, or tamper with palliatives of any kind, and from that day to this I have never treated rheumatic fever patients in that way.”

“To palliate is questionable relief, to squash symptoms (cure) is an insult to The Power Behind Law and Order.”

Drugs that relieve pain interfere with the functioning of the different organs of the body. There is no hypnotic, narcotic, antalgic or soporific drug that can be used to “relieve” pain or to induce “sleep” that does not interfere with elimination, and when elimination is checked we are pushed further downward along the road to premature aging and death.

How long does the “relief” last? Certainly deadening sensation is not curing “disease.” It does not remove cause. It adds to cause. The nervous system is enervated more or less by every dose of drugs to ease pain, and increased enervation means increased “disease.” It means increased failure of the organs of the body to carry on their functions, due to lack of energy. As a result of lost function there is greater retention of excretory products adding to toxemia.

The “relief” system kills many (often in twenty-four hours) who would otherwise recover. No matter what the character of the “disease,” the patient is injured by every artificial relief given him.

Much of the suffering that patients undergo are not essential parts of their biogony, but are the results of the bad hygiene with which they are surrounded. They are wearied by too much conversation around them; fatigued by too much bustle and light in their own and in the adjoining room; made nervous by too much bed-clothing being heaped on to keep them from “catching cold”; or over-come by being lifted and handled too much; or exhausted’ with profuse sweating maintained by over-heated rooms and too much diaphoretic medication.

Not until these unhygienic conditions have been withdrawn and the patient is allowed to rest in peace, comfort and quiet, can we tell which of the patient’s sufferings are due to the crisis proper and which are due to these conditions. Hygienic influences are at all times the very first thing to be provided.

**Fever**: Nothing better than a high fever can come to the sick person. The higher the fever, the quicker the recovery. No effort should be made to suppress, reduce or control fever. There is no reason to bear fever. The idea that two, three, four or more degrees of fever destroys the tissues of the body is arrant nonsense. A temperature of a hundred and four or a hundred and six certainly is not the fierce burning process some would have us believe it to be. Says Jennings: “Let the manner of its (animal heat) production be what it may. *** it must be under control of vitality, *** it never rises more than seven, eight, or nine degrees above the healthy standard *** this may be uncomfortable, but can do no serious mischief. *** There is no wrong action.” - Medical Reform, p. 132-3-4.

Acute fever means acute poisoning; a sudden absorption of unaccustomed poison, or a sudden absorption of an unusual quantity of an accustomed poison. High fever marks the vigor of the nervous reaction; low fever in apyretic cases means profound shock.

The temperature will subside as soon as the poisoning is overcome. Temperature will often run up two or three to five and six degrees following indigestion caused by overeating. If the indiscretion is not repeated the fever may subside in twelve to twenty-four hours. Infection from a wound or injury, or pent-up decomposition in the
bowels, will cause increased temperature. When the intestines have emptied themselves, or the wound is cleaned out, the temperature will automatically run down. In fact the temperature of the body and the pulse may be lowered almost instantly by opening a pent-up pus cavity, or by cleaning a septic wound or uterus. The temperature of a convalescent can be run up from normal to 103 or more degrees and the pulse go up from 80 to 120 in an hour after eating one imprudent meal.

So long as there is pain there should be fever. “Pain prevents the physiological manufacture of heat, and if it did not stop radiation, the patient would probably die from refrigeration - loss of bodily heat. Hence, fever may be looked upon as one of the most remarkably and uniquely conservative acts in all the world of sub-conscious protection.”

**Delirium and Convulsions:** These are symptoms, right actions, and should not be suppressed. Their causes or occasions may kill, but these never do. So long as the occasion for these is present, they should be present. Their suppression by depressing the nervous system is injurious in the extreme. The delirium and convulsions of fever is the same as that of acute alcoholism; it is, due to poisoning and requires only the elimination of toxins to cease.

**Prostration:** or extreme weakness is the result of poisoning and the patient’s strength cannot return until the poison has been neutralized or expelled. The very fact that the patient is weak makes it all the more imperative that nothing be done to further weaken him. Rest, not stimulation, is the remedy for extreme weakness or prostration. The folly of giving strychnine or other stimulants in cases of extreme weakness or prostration becomes apparent when we understand that a subsequent depression, proportionate to the degree of primary exhilaration, follows the immediate excitement that is mistaken for increased strength.

**Collapse:** This is a frequent phenomenon under the sustaining plan of treatment. It is an exceedingly rare thing under Hygienic care and is confined almost to old people. Collapse, under the methods in vogue, usually means death. This is so because the method of treating collapse is simply an increase of the methods that produce it. If these methods are abandoned, recoveries are frequent.

If relatives, friends, nurses and physicians upon whom the responsibilities for care of the case rest, can exercise the needed patience and not become panicky, recovery is reasonably certain in most cases. If the air of the room is kept pure, the temperature of the patient warm and equable, absolute quiet maintained, and the patient left alone, with only a little water touched to the lips and mouth at frequent intervals, and some permitted to be swallowed when there is power of deglutition, resuscitation will occur.

However, if the usual mad-cap endeavors to save life are resorted to, if heart stimulants, respiratory stimulants, and various other perturbing measures are employed, there will be a sudden flaring up of the powers of life, as though the patient is improving and these powers will be exhausted in this final flare, and death will end the scene.

**Septic Processes:** These should always be given a free outlet. We say this with full knowledge of the fact that sepsis is in the first place, preventable. But we are dealing with an established result of toxemia, which is present, and therefore too late to prevent.

"Drugging and feeding build complications."
Complications: In his The Natural Cure, Page applies the term “rear guard” to the professional subterfuge: “I shall bring him out of this alright if no new complication arises.” Then, says Page, “he prescribes a drug, or a compound of drugs, which tend to provoke the complication.” For, as Page observes, his methods are “aimed at the removal of symptoms and not at the removal of their causes.”

If decomposing food in the intestine calls for a diarrhea to clean it out, how are the “over-active” bowels to be whipped back into a semblance of normal movement except by method’s that paralyze their action? Their action will become normal again as soon as they have completed the house cleaning, but this is not the theory upon which the Heteropaths work. To them the diarrhea is “wrong action” and must be suppressed. But the suppression of the diarrhea, ‘holds the decomposing food in the intestine and colon and adds the poisonous drug or drugs employed to the toxins which result from the decomposition. More food is sent into the cess-pool to “keep up the patient’s strength.”

“Do you know,” asks Trall, “how many drug medicines or poisons, you are liable to take into your system, for example, during an ordinary course of fever? Two or three kinds of medicines are usually administered several times a day, each probably compounded of several ingredients, so that a dozen drugs, on the average, may be swallowed daily. These are changed for new ones, to a greater or less extent, nearly every day, and in a month’s sickness fifty to one hundred poisons - rebels, if you please - are sent into the domain of organic life.

“No wonder there are nowadays all sorts of ‘complications,’ and ‘collapses,’ and ‘relapses,’ and ‘sinking spells,’ and ‘running down,’ and ‘changing into typhoid,’ etc. No wonder that new diseases seem to hover around the patient and infest the very atmosphere, like a brood of malignant imps or voracious goblins, ready to ‘set it,’ or ‘supervene,’ or ‘attack,’ whenever the medication has brought the patient to the vulnerable point, or within range of their influence. Under Hygienic treatment these occurrences are wholly unknown, ***

“Commodore Perry died very suddenly and unexpectedly in New York, two years ago. The Colchium relieved, the gout, but the patient died.

“How strange, that no sooner had the doctor subdued the rheumatism, than the typhoid ‘set in,’ and carried off the patient! Queries. - Where was the typhoid while the patient was being doctored for the rheumatism? How did it exist before Senator Douglas had it, or before it had him? Where did it come from? and where did it go? and what was it? I answer, it was the prostration of the patient caused by the treatment. Maltreat any form of febrile inflammatory disease; reduce the patient sufficiently by bleeding, blistering, or drugging, and the typhoid will be sure to make its appearance.” - True Healing Art.

Feeding and drugging convert simple acute biogonies, that should be well in two or three days to a week, into serious difficulties, that last for weeks or months, and end in death or chronic “disease.” Drugging and feeding build complications. It takes typical text-book treatment to convert a simple fever into a typical text-book case of typhoid fever for instance.

No “disease” can present all the symptoms attributed to it in standard text-books, unless treated as outlined in these same textbooks. Doctors build most of the pathology they spend years in studying. Feeding and drugging are the greatest sources of suffering and death in “disease.” An acute “disease” should be a comfortable illness. It would, be, if the patient were given warmth, quiet, rest, air and water, and all feeding and drugging omitted. Death, except in old age, would be extremely rare, and the length of human life would go upward with a bound.

If these suggestions are followed faithfully, and no drugs or serums are given, the patient will be out of bed in a few days. Cases of typhoid, fever, pneumonia, etc., which usually run three to four weeks, or even longer, need not last more than seven or eight days to two weeks, provided these suggestions are followed from the very beginning of the crisis. In fact, these biogonies will never develop into typical cases wider this plan of care.
Fear and apprehension created by the suffering, or by the family, but more often by the doctor and nurse, enervate the patient, check elimination, and build complications. Hope and courage are great curative agents.

Cure: Acute so-called “diseases” are never cured until the physical and mental habits which enervate and break down resistance are entirely given up. Pew know that the first cold is seldom if ever cured. Subsidence of discomfort is called cure. The disagreeable symptoms pass away, either before or after drugs or other “cures” are given; if after the “cure” is applied, the so-called “disease” gets well in spite of the “cure.” Thousands of people are made invalids by too much curing. The real cure takes place after the doctor leaves off.

Acute so-called “diseases” are never cured until the physical and mental habits which enervate and break down resistance are entirely given up.

Crises pass away with or without treatment, but this is not cure. How can a headache be said to be cured when the doctor knows nothing of its cause? The pain has ceased, of course, but how can a cause be removed when it is not known? The truth is that the toxemia, enervation, digestive derangement and the enervating mode of living remain and soon another crisis is precipitated. According to conventional standards, the individual is well until another crisis develops; that is, he is healthy between “attacks,” and each “crisis” is “another disease” so that he has to be “cured” again.

“All kinds of doctors meet with success in treating these crises,” says Tilden. “So absurd are many of the remedies used, and so stupidly ignorant are many of the doctors, that, in lieu of a better understanding, it is quite generally conceded that diseases are self-limited and get well in spite of the treatment; also that the personality of the doctor restores hope and removes fear - and along with it pain. The doctor need not be wise, but his physical rhythm must be in keeping with that of the patient.”

All biogonies must be properly cared for from start to finish, if ideal results are to be attained. Those who follow instructions, yet give a little milk or a little broth - not enough to amount to anything - need not be disappointed if they fail to secure the happy results described here.

Convalescence: This is a period in which care must be exercised if the patient is to fare well. The body has just emerged from a severe fight. It is weak from the expenditure of much energy. There has been more or less destruction of tissue. The patient is in no condition to return to normal activities until he has thoroughly recuperated from his illness. A premature return to duties may easily prove disastrous.

The destroyed tissues must be repaired. The used up nerve energy must be recuperated. This requires time, although it takes place under proper conditions very rapidly. It is possible to hasten or to retard the recuperation and reparation.

Over exertion, a return to the old destructive habits, over-eating, exposure to extremes of temperature, some unusual strain, etc, may not only hinder recovery, but may actually work injury. On the other hand recuperation may be hastened somewhat by proper attention being given to rest, sleep, exercise, diet, the air supply and sunshine.

Rest is essential to recuperation of vital force. This we have already learned. Now consider the condition of the convalescing patient. He was already greatly enervated, else he would not have been toxemic and would not
have become sick. He has just gone through a hard, trying struggle which has left him much weaker than before. Rest must be enforced, now, in order to recuperate.

Sleep, we have already learned, is the highest form of rest. If the patient can sleep much, this will hasten the recuperation. He should lie down at intervals during the day and attempt to sleep. No sitting up until late hours at night should ever be permitted. He should retire early.

By the foregoing, is not meant that the patient should lie in bed or sit in an invalid’s chair and rest and sleep twenty-four hours out of every day. On the contrary, we insist that a small amount of mild exercise be taken daily and that the amount taken be gradually increased.

Life and health demand a certain amount of exercise. There are times when exercise would be highly injurious, but outside of these, a certain amount of exercise is essential to good health and strength. So in convalescence, the patient who exercises judiciously will recover faster than the one who does not. His exercise should be moderate, and of short duration. He should not exercise until tired or exhausted. As he grows stronger, he can exercise more strenuously, and exercise longer.

Feeding in convalescence is a very important item. The digestive organs are still weak, their secretions are not normal, so that they are by no means fitted to handle a “square” meal. Great care must be exercised in breaking the fast, which the patient has been on.

If the biogony has, been of such a nature that there is likely to be any ulcerations or open sores in the intestinal tract, time should be given for these to heal before food is given, and this applies especially to the feeding of solid foods. A small piece of solid food may easily become lodged in the ulcer, and produce irritation, set up fermentation, and cause infection.

Again, if food is given before the stomach, intestine, or bowel is thoroughly healed, the movements of these organs as they convey the food along, is likely to produce mechanical injury to the un-healed parts. A safe plan is not to be in too much of a hurry to feed.

To resume feeding, fruit juices or vegetable juices may be used. Here again should moderation be the watchword. Don’t try to rush matters. Nature does her work slowly but well. After a day or two, small amounts of other foods may be added. The amount eaten should be gradually increased. Don’t hurry.

(Comment: in today’s thinking, it is best to avoid fruit juices for most people, due to the sugar & to keep the body's insulin mechanism healthy.)

Let the food be of a simple wholesome nature. It should consist chiefly of fresh fruits and green vegetables. Starch foods, protein foods and fatty foods, should be used very sparingly. Some proteins are needed for repairs, but one does not have to eat these in large quantities.

Air and sunshine are as essential during convalescence as at other times. It would be well to spend as much time outdoors as possible. A hammock or chair under a tree makes an ideal resting place. Don’t stay in the sun too much at first. Sleep with windows open so that fresh air can be yours at all times. The body needs plenty of oxygen in its work of reparation.

Don’t allow yourself to become angry and excited. Don’t indulge in card games or other games that may excite and tire you. Keep out of exciting or distracting arguments. Keep away from exciting shows. Your system will then be all the better for the house cleaning. The habit of the “mental healer” of spending from a half hour to hours at the bedside of a patient chattering to him a lot of mummery which he neither understands nor appreciates, should never be permitted. It tires the patient and leaves him much weakened.
Chapter V

"The Hygienist permits nature to administer her own cures."

The Hygienist does not give “Nature Cures,” does not know how. He permits nature to administer her own cures. When we say nature cures, what nature do we mean? Some nature afar off or outside of man? No. We mean the nature within each organism. We mean the processes of life and the laws that govern these. Cures come from within, never from without. Cures are the same yesterday, today and forever. The “curing” systems all add up to a stupendous plan of palliation. A natural cure or “nature cure” is this: Learn the causes of pathology, then stop the cause and nature does the rest.

The Hygienist is bound to “preserve, with the utmost care, the vital powers of his patient; to provide every condition favorable to recovery, and to avoid every measure in practice which has proven to be deleterious or dangerous to the organism. For under no circumstance and at no stage of any so-called “disease,” is there need to make use of means which tend to injure, either immediately or remotely, the permanent health of the sick person. The future integrity of the organism must not be sacrificed upon the altar of the therapeutic god - “Immediate Transient Respite from Discomfort.”

Natural methods are those agents and influences that bear some vital and nutritive relation to the living body. Artificial methods are those agents and influences that bear an anti-vital and poisonous relation to the living organism. The first either supplies nutriment or promotes nutrition (in its broad sense); the second excites and destroys. Natural methods rebuild and renew; artificial methods excite and tear down. We should not find it difficult to make our choice between these two groups of methods.

Any real and permanent cure of an abnormal condition of the body must be the result of a constitutional reconstruction within the body itself and this can be brought about only by the natural forces and processes that are concerned in growth, development, repair and maintenance of the animal and vegetable worlds. The power of production is the power of reproduction. The power of creation is the power of recreation. The power that produces the body is also the power that renews it. The power of generation is the power of regeneration. The processes which are constantly active in renewing, repairing and maintaining the body are identical with those processes, which have been used in building the body. The powers of life, of renewal, of healing, are within.

Cure does not come from without and there is no power outside the living organism that has the power to heal or cure. Cure, let us repeat, is an evolution under favorable conditions. The forces of life can make use, in their curative work, only of those same agents and forces that nature has always used to build up and maintain both the vegetable and the animal kingdoms - namely: sunlight, air, water, food, warmth, rest, exercise.

So long as “diseases” were anthropomorphic shadows, no rational care of the sick was at all possible. Treatment, ostensibly aimed at the destruction of the fictional entity, tended to injure and destroy the patient. The Hygienic practice seeks not to cure “disease”; but, rather, to remove the causes of pathology. These may be removed without any pathology-producing therapeutics.

There is a cause; and to dodge the self-evident duty of the physician to find the cause, instead of giving a palliative, is, to say the least, abuse of the patient’s confidence that may end in evolving a fatal pathology - any
“chronic disease” that has been permitted to evolve to an incurable stage, or that has been driven to an incurable stage, by “scientific” treatment directed to curing effects, like giving morphine to stop pain. Tuberculosis, cancer, paresis and Bright’s “disease” were once simple and benign, the results of a stupid manner of living, which should have been corrected, but were allowed to grow, because of ignorance of cause, while the doctor puttered with palliatives.

The doctor should learn the cause of pathology, and then teach his patient what it is, so that he can remove it. Nature will then, do the curing, and relieve the doctor of the responsibility. If he will cease puttering with palliatives, cease trying to remove effects with the stupid idea of curing, if he will learn that there is but one way to get rid of pathology, and that is to stop building it, he may be of real service to the sick.

If the patient is wise he will carefully study all the enervating influences in his life and environment and adjust his life so that he lives within his limitations. He will obey more and pray less for better health. He cannot break God’s laws and pray away, nor dose away, the consequences.

It should be the duty of every one to understand the natural resources of a healthy life and abundant vitality and to make use of the most effective means of restoring and renewing health, strength and youth. He who desires to renew and rebuild his body, when the old frame has for years past, been accumulating toxins, rather than attempt to patch up the body, will prefer the natural to the artificial “remedies.”

Study your doctor also. Does he know cause? Does he remove cause; or, does he palliate effects? Does he smoke, drink, eat bread and meat at the same meal? If he does these things he cannot teach you. He is ignorant.

A doctor must first of all be a teacher; but, before he can teach he must possess knowledge. He may be ever so well grounded in the superstitions of the various “schools of healing” and he may be ever so skilled in the application of their so-called remedies, but if he lacks a knowledge of cause, he is a menace to the sick.

The history of those who come to us shows that their weak spot is nervous depletion with functional weakness of the digestive organs and the emunctories. Prior treatment received by these people has all been of a character to extend and perpetuate the weakness and depletion.

These conditions have no natural tendency to disappear, but, on the contrary, become worse and worse, unless their causes are removed. If we wish to prevent the development of incurable organic conditions, these functional disturbances must be prevented or remedied and not allowed to continue while we content ourselves with everlasting palliatives.

In the preceding volume we explained how the many different forms of pathology grow out of the same cause. It is necessary to emphasize here that these different forms do not necessarily call for a corresponding difference in remedial care.

Only the processes of nature (working with natural agents and forces) can resupply lost or diminished nervous energy and rebuild damaged nervous structure. Only those agents and substances, the innate qualities of which supply the current demands of the organism are to be used in caring for the sick.

“Men try everything,” says Dr. Walter, “and fail to get well. Let them stop trying for a while and they will get better results. ‘Not try but trust’ is often as important to health as to religion. What most people want is more rest and less worry. Drowning men catch at straws but it is the catching at straws that drowns them. The drowning of people is almost invariably due to their struggles to save themselves. If they would lie quietly on the water, with nose elevated, they could float and breathe for hours; Instead of which they plunge and roll and struggle, until exhausted, they give up the contest and sink to rise no more. In the matter of health in our day, it
were folly to be wise. Nearly all thought, all doctrine and all practice is opposed to good health. About all theories of disease are exactly wrong.” - Vital Science, p. 177.

Thousands are yearly killed by the forcing measures that are in vogue. These measures are all enervating and are, therefore, pathology building.

Aiding nature: Assistance to the body’s eliminative and circulatory processes must be of a nature that makes no appreciable drafts upon the reserve vitality, as is invariably the case with established routine medical and drugless interference. Tilden epitomizes the basic principle of Hygienic etiology thus: “Any influence, physical or mental, that uses up nerve energy leads to toxemia.” Could there be worse practice as a routine, than calling for an additional expenditure of nerve force - i.e., the latent reserves of the body - by forcing measures when its already existing depletion is the original start toward ill health? Here conservation, not the expenditure of vitality, should be the rule.

The practices of the schools take the form of whipping up an already depleted organism to violent excretory effort, the stimulation or narcotization of the circulatory system, or the obtunding of the nervous system in relieving pain; all of which inevitably adds more to the previously existing toxemia which needed to be eliminated; for, depletion of vitality is the first step toward “disease.”

Instead of such abuse of the sick organism, every measure should be employed with a view to keeping the organism passive, demanding no exhausting effort from it because all such is a new enervation. We can “help nature” best by ceasing all interferences with her processes and by supplying her with current needs of normal agents and influences of life. Below we shall briefly discuss these.

A Correct Mode of Life. Man destroys his morale and shortens his life by being too free in the gratification of sensual desire. The Line of indulgence is the line of least resistance. Discipline is essential and this must be based on correct knowledge.

Tobacco, coffee, tea, chocolate, alcoholics, too much food and wrong food, condiments, anger, envy, hate, passion, lack of poise, all these nerve excitants and irritants break man’s vital or nervous energy. They cripple and kill. All stimulants consume nervous energy.

It is not possible to determine how many die every day satisfying an impulse to gratify an appetite or a passion. They say indeed, if not in words, “Hang the consequences! I’ll take a chance and suffer the handicap of life.”

There can be no return to health so long as enervating habits are indulged. Because the sick get out of bed and back into the routine duties of life and resume their responsibilities, is no evidence that the cause of their suffering has been removed. It means only that they have passed through the crisis - the biogony - and will enjoy a tolerable degree of comfort until the next crisis develops. No pathological condition is ever ended so long as a single enervating practice is indulged. Education in right living is the only real curative measure.

Those already under the thraldom of one or more enervating habits, must rise above their enervated state, which builds the chronic toxemia in which all pathology has its beginning. “All diseases have a common cause.” says Tilden, “and that cause has infinite causes.” Unless the causes of enervation and toxemia are corrected or removed, more enervation and more toxemia follow and these build more pathology and necessitate frequent biogonies. Enervating practices and influences must be given up or removed.

It is necessary to caution against any alarm that may arise from the immediate and apparently depressing effects which are unavoidable when one suddenly discontinues any long practiced violation of physical law. There is
not the slightest danger to health and life in the total, final and sudden abandonment of all wrong doing, of whatever kind, complexity or degree, and no danger in leaving the system to pass through the subsequent renovation and recover itself from the effects of any cause or causes, however depressing, painful, or difficult the renovating process may prove.

It is futile to look for gradual emancipation from confirmed habits and transgressions. Tobacco, coffee, tea, alcohol, opium, etc., keep alive the “craving” for their use. Those who attempt to “taper off” usually end in failure to break their bondage and free themselves. The morbid desire for these substances is kept alive by the least indulgence in them. There is no safety for the user until the morbid irritability of the nervous system is overcome and normal sensibility is restored. The least quantity that the organic instincts can appreciate is sufficient to forever prolong the morbid condition of the nervous system; and, until the nervous system is restored, to normal condition, the user is not safe for a minute. Until then, the smell, sight, or even thought of tobacco, for instance, may revive the morbid “craving” with an almost irresistible force. The habit will be overcome with greater ease and much less suffering if broken off at once.

The blood is poisoned even by small amounts of these substances. Take alcohol as an example: if one attempts to “taper off” on its use, and while continuing its use, daily uses a little less, he is still daily taking into his system the poison and is being injured even by these amounts. Absolute abstinence from the start will lessen the suffering incident to overcoming the practice.

Sexual excitation and gratification behave in a similar manner to drug habits. The more the sex function is stimulated and gratified, the more it demands of these. If the confirmed masturbator, for instance, attempts to abandon this enervating practice, he will be restless, sleepless, tortured by desire, and will experience frequent nocturnal emissions. “The artificial and varied repetition of sexual excitation,” says Forel, “by means of’ objects which provoke it, increases the sexual appetite.” A morbid (an anti-symbiotic) desire for gratification is intensified with each repetition and persists even after repeated gratification has produced impotency. When habitual mental and mechanical excitation of the sexual organs has produced in them a morbid condition, which demands frequent “gratification,” every repetition of the excitation serves to perpetuate the condition. No “tapering off” process is possible.

Make up your mind to abandon once and for all - not one at a time, not by some miscalled transition program, but abruptly, and all at once - salt, pepper, spices, and other irritating condiments, tobacco, alcohol, tea, coffee, cocoa, chocolate, soda fountain slops, cathartics, opium, mechanical irritants, headache remedies, and all other poison habits, morbid sex practices, or other enervating practices. Go through the pain, discomfort, irritability, depression - pay the last farthing of reaction - all at once, and be sure that you will suffer less than by the “tapering off” method. You will be more likely to succeed, your recovery will be more rapid, more certain and more satisfactory.

“What would be the result,” asks Jennings, “of a sudden and universal cessation of hostilities against the vital economy, throughout the length and breadth of the land? Imagination would fail to draw a picture equal to the reality.

“Nature would hold a jubilee.”

The Law of Limitation would immediately withdraw all forces from the former points of attack and waste and begin the work of renovating the system. A depressed, irritable and languid people, with frequent cases of delirium tremens, many aching heads, and shaking limbs would be the immediate result. But the ultimate outcome would be a happy issue. Improved health and strength, clearer minds and more cheerful dispositions would inevitably result.
As soon as the sources of irritation and waste of organic power are removed, so that there is no longer any need of power to combat the irritation, and the power usually wasted in various dissipations is conserved, there follows a reduced determination of nervous energies to these points and an increased amount of energy is devoted to the more important work of cleansing and repairing the damaged organism. The organs of elimination are reinforced to enable them to excrete what Jennings called “the arrears of expurgation (toxemia) that have accumulated in consequence of their having been overtaxed.”

Dr. Walter says: “We have found it to be invariable that what makes the man sick is the thing which he never wants to relinquish. Evil habits make for themselves such a place in the organism that it is almost impossible to live without them, and so the patient is willing to do almost anything in order to recover, except the thing which he must do. This would seem to be the chief reason why we have had the greatest success with the most desperate cases. Such a patient is willing at length to submit, and do what is necessary, but the rule is with patients who are only playing sick, to follow your prescriptions as long as they are agreeable, and for the rest evade all requirements.” - Exact Science of Health, p. 237.

People will not abandon their pet vices and cherished indulgences until they have reached that point of desperation where they are willing to do anything, even torture themselves, if only they may return to comfort. Those who are not very sick, those who still have hope of cure by methods that do not require correction of cause, are unwilling to forego the injurious habits to which they are enslaved. The world is so fed up on cures that are effective without removing cause (palliatives) that it has no ability to comprehend cause and effects. Graham truly declared:

“In chronic diseases, all practice which is not based upon a careful and thorough investigation of the causes, as well as the symptoms of the case, is in fact nothing but downright quackery, and far more frequently does harm than good. For in such practice, the causes of the disease, existing in the dietetic and other voluntary habits of the patient, are suffered to remain and constantly exert their morbific influence by which the disease was originally induced and continues to be perpetuated. (Mine. Author). Nay indeed, those very causes are frequently employed as remedial agents to remove the diseases, which they have originated and are perpetuating. Thus I have in multitudes of instances seen people who have been severely afflicted for years, by diseases which were principally induced by the habitual use of alcoholic and narcotic substances, and which had been kept alive by the continued use of those substances as medicine; and all that was necessary to remove the diseases and restore the sufferers to health, was to take away their medicine. Again, I have seen instances in which individuals had suffered under the most cruel affections of the heart and head and other parts, and submitted to medical treatment for years without the least relief. Yet on taking away their tea and coffee, which were the principle originating and perpetuating causes of their sufferings, they were soon restored to perfect health. But the practitioner had wholly overlooked or entirely disregarded these causes, and suffered them to keep alive the symptoms which they were combatting with their medicine, and by their medicine rendering their patients only the more morbidly susceptible to the effects of these morbific causes. And I have seen hundreds of miserable dyspeptics who had suffered almost everything for years; scores of those whose symptoms strongly indicated pulmonary consumption, and sometimes apparently in its advanced stage; many who had been for years afflicted with epileptic and other kinds of fits and spasmodic affections, or with cruel asthma, or sick headache; in short, I have seen nearly every form of chronic disease with which the human body is afflicted in civilized life, after resisting almost every kind of medical treatment for years, yield in a very short time to a correct diet and well regulated general regimen. And why was all this? Because, in almost every case, the disease had been originated and perpetuated by dietetic errors; and the practitioners had been unsuccessful, because with all their administrations of medicine, they had suffered those dietetic errors to remain, undisturbed, unquestioned, - nay, even recommended.” - Science of Human Life, p. 437.
So long as man believes in cures and immunizers he will continue to search for these things and ignore the real causes, of his trouble. How do men expect to cure the effects of coffee drinking while they continue drinking coffee? How do they expect to cure the effects of coffee drinking by drinking more coffee? Such expectations are not worthy of reasoning beings, whether it is coffee, alcohol, sexual abuses, gluttony or other evil habits. The whole fabric of cause and cure advocated and practiced by the medical professions is grotesque and false.

It is surprising how many people live under the delusive belief in absolution. Their thinking is so warped and distorted that they think themselves immune from natural laws. If they, Coue-like, mumble something to their God daily, their debts to law and order are paid. Those who do not go to God, go to the drug store, the serum needle, the vaccine point, the electric current, the bath cabinet, to a diet cure, or to a different climate.

Trall says: “A more pernicious doctrine was never taught than that of absolution from the penalties of our misdeeds. Causes and consequences are unalterably related in the organic as in the inorganic world. Nature punishes always, and pardons never, when her laws are violated or disregarded. In the vital domain, as in the moral, ‘no good deed is ever lost,’ nor any wrong act performed without evil effects. When this great primary truth is recognized in practice; when it is taught in our schools and exemplified in our lives, we shall have the true basis on which to prosecute our physiological redemption. ‘Cease to do evil’ is the first and greatest lesson to be learned.” - The Hygienic System.

In our blind pursuit of palliatives and false pleasures we go so far as to propose and provide at public expense, agents by which we hope to enable self-indulgent people to gratify their desires and passions without fear of consequences. Such efforts are doomed to certain failure, for no provision for prophylactic packet can obviate the effects of gluttony and licentiousness. Directing our efforts towards mitigating the punishments of nature so that we may sin in comfort; instead of complying with the conditions of integrity, wholeness, causes us to neglect self-discipline and to slavishly depend on the physician and surgeon.

“Cease to do evil and learn to do good” is excellent hygiene as well as good religion. Health by healthful living, and cure by the same means, has been the Hygienic plan from the beginning. Not a mode of treatment, but a plan of living is the way to health. The real Hygienist has inscribed on his banner: Integrity, versus Patchwork. He knows that, broadly speaking, impaired health grows out of errors of comportment, of excess, of failure to resist temptations, and weaknesses of various kinds. He does not expect to patch up his patients and let them go on in the same mode of living that is responsible for their ill health.

He knows that health is a positive creation and recognizes the urgent necessity to cultivate health. He knows, as well, that the cultivation of health depends upon the cultivation of right habits of eating and living - that all good actions have good reactions and all bad actions have bad reactions. “We serve neither health nor heaven by remaining slaves to bad habits.”

The age-long quest for cures has been carried on from the point of view of “disease”, not of health. What will “cure” disease; not upon what does health depend, has been the question uppermost in the minds of the searchers and researchers. We have never adequately realized the significance of the statement that “the whole needeth no physician.” This places the emphasis where it belongs - on integrity and the basis of integrity.’ So long as we are content with “pink pills and patchwork” and do not aim at wholeness, at integrity, we will continue our present efforts to patch-up “diseased” bodies and not work for health. We will go on, as now, easy prey for the treatment peddlers and cure mongers, and these miracle boys will continue to give us the impossible and promise us that which no man can deliver. There are no greater promisers than those who have nothing to give.

“Be not overcome of evil, but overcome evil with good,” is a hygienic as well as a religious principle. Yet man fights “disease,” which he conceives to be evil, with methods that are unmistakably evil, while, at the same
time, continuing the evils that are responsible for his weakness and suffering. Not until he can see in wrong living the cause of the ills of the body will he be ready for a rational program of health building to take the place of the present false systems of “curing” the sick.

When we have learned to see human ills from the single and simple viewpoint of enervation-toxemia causation, we see that no plan of care is effective or complete that does not have for its primary objective the eradication of toxic waste from the body, the restoration of normal nerve energy, and the correction of enervating habits that lead to toxemia. In almost all so-called “diseases,” which man in a toxic state has a tendency to develop, this plan will result in a return to normal. Those who fail to recover under this plan of care alone are such cases as have advanced to the stage where surgical interference or manipulative procedures or necessary, or who have neglected to reform until organic structure has been so greatly impaired that rehabilitation is impossible.

WHAT TO DO

"a prolonged period in bed, say from three to six weeks, constitutes the speediest means of recovery"

Physical Rest: “Rest and replenishment of power,” says Jennings, “is the first step in the ascending pathological transit; removal of useless matter by the decomposing function, with its activity and force increased by resting, constitutes the second step, and the third consists in a repair of breaches. These three steps form the first grand division in the ascending pathological transition, the removal of structural derangement, or cure of organic disease. The next grand step in the ascending pathological work consists in the re-establishment of regular or natural functional action.” - Philosophy of Human Life, p. 102.

Neither functional nor structural derangement can be remedied except by the reinforcement of appropriate power and this can only come when all the waste-gates are closed and recuperation through rest is secured.

The path of professional duty is plain: point out the importance of strict regard to economy in the expenditure of organic funds, that they may be brought so far within the income and accumulate, that nature may be able to liquidate her debts, and get above board again, before she is thrown into other and more embarrassing straits.

In most cases of chronic disease, a prolonged period in bed, say from three to six weeks, and longer in many cases, constitutes the speediest means of recovery. The individual should go to bed, reconcile himself to it and remain there as long as is necessary for full recuperation. Dr. Weger says: “Proper relaxation cannot be obtained except in the prone position. Bed is the best place. Some people are so tense they feel as if the bed would collapse if they did not hold it up. If the bed is permitted to do the supporting, rejuvenation of the nervous system is well started.”

Complete relaxation is not possible if there is pain, worry, noise, unpleasant surroundings, an overactive imagination, a craving for stimulation or excitement, and stimulating treatment. Some mild exercise, unless this is contraindicated, should be taken each day or twice each day during the period in bed.

Where it is not possible to get away from one’s work and rest, as above described, one should cut down his daily mental, physical and physiological activities, so far as this is possible, and secure as much rest and sleep each day as circumstances will permit. Go to bed at the earliest possible hour. Remain in bed as late in the morning as possible. Rest during the day if this can be arranged. Where this can be done it is well to lie down for a half hour to two hours and rest and sleep, if possible, in the afternoon.
Amusement, excitement, stimulation, late hours, etc., should all be avoided in every possible way. The conservation of energy in every way this can be done is desirable. The more one can rest the more rapid and more satisfactory will be his recovery.

**Mental Rest:** Dr. Weger says: “Food is tremendously important but the control of the emotions is even more necessary. Vital energies must be kept high in order that toxins may be kept low in the blood and tissues. Therefore, it is important that man have mental rest, that he accept philosophically whatever life may bring and thus preserve mental peace and equanimity and save his physical body from the destructive effects or emotional upsets.”

It is well to detach oneself from society and friends, from responsibilities and the affairs of the world, even from the radio and daily newspapers “that stir the imagination with exaggerated reports, garbled political dramas, comedies, and tragedies that try men’s patience and their souls.”

A radical prescription of this nature will seem to the casual observer as scientific asceticism carried to too great an extreme. Few people, however, seriously sick (chronically) are willing to go the whole way in this particular. Dr. Weger says: “Complete isolation does not appeal to those who want to keep on doing all the things that made them ill. Most people, however, are willing to compromise by giving up a few selected enervating habits even though they want to hold on to the rest. The individual with the philosophical mind that knows the value of self-control is of all persons the most willing to accept restrictions. Persons of this type realize the value of discipline and will try for a short time at least to enjoy their own company, and play fair for once at least with their own bodies, their own circulation and digestion.”

**Physiological Rest:** When the general nervous system is fatigued the digestive, assimilative and eliminative functions are below par and require rest if they are to be restored to their healthy standards. No program of care that involves an effort to whip up the functions of the body will permit recuperation and repair. Prolongation of healthful function, rather than dazzling overactivity in a given direction for a moment, followed by reaction causing complete cessation of function, should be our primary aim.

Fasting, which represents the ultimate in physiological rest, is not always essential in adynamic biogony, but in practically all cases the fast will prove to be the surest, quickest and most satisfactory means of eliminating toxemia, restoring secretion, rejuvenating tissue and restoring lost functions. Some cases simply do not get well without the aid of one or more fasts.

In many cases satisfactory results may be achieved by merely correcting the diet and holding the food intake down to a very small quantity. Limiting the food intake in this way provides physiological rest in proportion to the limitation.

Fasting, or a greatly reduced food intake, permits rest of all the organs of the body, not merely of the digestive system; however, the importance of the following words of Dr. Weger will be apparent to every intelligent reader. “Above all, we must consider the fatigue of the digestive system. This is the department of the interior that has been abused by overwork; by eating too much, by eating wrong as to time and frequency, by innumerable strains and stresses from the very first crowding of the stomach in infancy. Even in exhaustion and old age, the common injunction is ‘You must eat plenty of good nourishing food to keep up your strength.’ Could any advice be more harmful when the patient is suffering from extreme fatigue? Yet this is the almost universal prescription. Crowding the body to the limit with food is bad enough when there is an abundance of vitality. It is far worse when there is little or no power to digest food because the digestive system is oh, so tired.”
Sleep: Invalids and chronic sufferers generally do not get enough sleep. The importance of sound, quiet and sufficient sleep cannot be overestimated. It is during sleep, chiefly, that structures are repaired. Recuperation reaches its maximum of efficiency during sleep.

The rule for invalids and chronic sufferers is: **retire early and remain in bed as long as you can sleep quietly.**

The bedding should be as hard and the bed-clothing as light as a due regard for comfort will permit. A hot jug to the feet will assure warmth if the weather is cold. If one is chilled he does not sleep.

Have the bed room well ventilated. Flood it with sunshine during the day. Whenever possible, sleep out doors.

We do not have actually to sleep to repair and build up lost nerve energy. We need only to rest; to remain relaxed and, passive in mind and body. Therefore, do not make a fetish of sleep. Don’t fix a certain number of hours that you must have, and then worry yourself sick if you do not get this amount. If you cannot sleep, do not worry. Much of your difficulty in going to sleep is due to your fear that you will not sleep and most of the effects of a sleepless night are due, ‘not’ to loss of sleep, but to worry over it.

"**It is a mistake to try to get well by diet and ignore all the enervating factors of life.**"

Diet: Dr. Weger says: “The appetite must be disciplined in both health and disease. Through the medium of food and rest we reach the crux of the health problem. Dietetic discipline as to amount and combination of food is a practical as well as an effective way to control and prevent disease.”

Feeding should not only be of natural foods, but these should be fed within the appropriating power of the enfeebled organism and they should be fed in combinations and under conditions that offer least hindrance to the processes of digestion and assimilation.

While many people do gain and maintain a fair degree of health on a diet composed largely of denatured foods, they do so at great expense to the physiological forces. An individual of full nerve force can extract the needed nourishment from the conventional diet; but he can do so only by eating the denatured foods in great quantities in order to receive adequate amounts of the deficient elements. These deficiencies lead to overeating and overeating causes digestive and eliminative strain. Only natural foods impose no undue strain upon the body.

The enervated individual will also overeat in order to supply the necessary food elements, but, due to enervation, he will not be able to appropriate them. Eating denatured foods, because this places a heavy tax upon the digestive system, is one of the most potent causes of enervation and, due to the overeating the practice forces, it is the chief cause of poisoning from the digestive tract.” Less foods are required to meet the demands of life if natural foods are consumed.

It is difficult enough for the body with full nerve energy to extract adequate nourishment from the preponderantly denatured diet we consume in civilized life; it is impossible for the enervated body to do so. Indeed, the enervated body will often fail to ‘extract adequate nourishment from a, thoroughly natural diet. The diet is adequate, but the body lacks power to take out what it needs. This is the reason so many improve their diet without improving their health.

The failure of the nutritive functions - digestion, absorption, secretion, assimilation - resulting from enervation, means that the body will fail to extract the nourishment from the food eaten, so that, in spite of habitual overeating, the body slowly starves. So long as there is enervation there will be impaired digestion and
assimilation. A crippled nutrition may be restored to normal only by removing all causes of enervation. The best diets do but little good when fed to the person whose nutritive functions are badly impaired from any cause whatsoever.

It is mistakenly thought that all one needs to do is to eat abundantly of foods or food preparations carrying certain elements and these will be used in spite of the absence of the necessary appropriating capacity. It should be realized that eating lots of calories and lots of vitamins and minerals, when the system is already overcrowded with food and toxin, is a sure way to produce “disease.”

It is a mistake to try to get well by diet and ignore all the enervating factors of life. It is a mistake to attempt to restore health by overeating on the elements the body is supposed to lack. Food concentrates, potassium broths, juice diets, etc., to glut the body with element thought to be lacking do not constitute an effective means of restoring health, as the thousands who have employed them and failed to recover, amply testify.

We must discard the idea that a certain food, or certain diets, even, can restore health. It will be well to know and remember that when man eats normal food, such as raw fruits and raw vegetables, these will supply his body with all the minerals and vitamins and all the acids and alkalies that his body requires, and that if his digestion and assimilation are normal, his body will take all the alkali that he needs to keep the blood in the required state of alkalinity.

If he fails to take the needed elements from these foods the fault lies with him, not with the foods. A disturbance of the alkalinity of the blood is caused by enervation and enervation is caused by everything that lowers nerve energy.

When you are in normal health you will find all the vitamins you need in your daily diet of natural foods. If you are a physical and mental drunkard, if you are suffering from a surfeit of food, if you are greatly enervated from any cause, you will fail to derive all the elements you need in every-day natural foods.

The layman and the drugless practitioner, as well as the medical man, have the drug therapeutetic idea so implanted and ingrained that they feel they must supply through food the drug they think the sick person needs. They seek to medicate with food; think that all they have to do is to furnish food that contains certain elements in greater abundance than the foods they have been eating.

In the good old days of the drugged past, calomel was good for the liver, quinine for the spleen, digitalis for the heart, strychnine for the nerves, iron for the blood, phosphorus for the brain, and calcium for the bones. Today this drugging practice is carried over into the field of eating and we have celery for rheumatism, lettuce for insomnia, watercress for scurvy, onions for the nerves, spinach for gravel, watermellon for erysipelas, garlic as an intestinal antiseptic, raisins for the blood, alkaline foods for acidosis and, to cap the climax, dog fat for tuberculosis.

There are patent foods on the market that are rich in lime. They are recommended for the prevention and cure of rickets, for the pregnant woman, and many other troubles. Of course one can get lime from these preparations, but who is going to see to it that he assimilates it. It is one thing to swallow an abundance of calcium, it is quite another to appropriate it.

There are other preparations rich in iron and copper. They are highly recommended for anemia and for pregnant and nursing mothers. But anemia is more often due to a failure to assimilate iron and copper than to lack of it in the diet. It is not so much that the patient needs iron as that he needs power to assimilate the iron in his food.
Iodine-rich food preparations are recommended to prevent and cure goitre and to build brains. Need I remind my readers that the wide-spread use of such foods has had no effect on goitre, and has not perceptibly raised the I. Q. of the users.

No patent material, no matter who gets it up, will improve a broken-down body. It is necessary to care for the body so it can use its own material.

There is more malnutrition due to overfeeding with an embargo on assimilation than to underfeeding. More often there is a loss of power, to assimilate special elements than an absence of these in the diet. Overcrowding the nutrition of such individuals has the opposite effect to that sought.

When the nutritive powers have been so weakened that the individual has lost the power of appropriating certain elements in the food eaten, the more of such foods are forced into the system the less will be appropriated, until the body is bankrupt of that particular element. But the over-stimulating effect of an over-supply of these foods will add to the enervation and intensify the development of the “disease” it is sought to cure. Thus, we may become prostrate by eating foods rich in phosphorus, iron, iodine, calcium, etc. Feeding, with relapses galore, until death ends the various tragedies, is one of the commonest experiences of everyday life. When surfeited we can starve to death despite the heavy load of “good nourishing food” - the very elements for the lack of which we are dying - that our body is carrying.

At present popular fad in the diet field is that of drinking large quantities of fruit and vegetable juices to supply the body with necessary minerals and vitamins. Our super-salesmen sell special, high-priced machines to extract the juices from our foods or to liquify them and extol the almost magic virtues of these wonderful healing substances.

They give us instructions in compounding these juices in order that we may obtain best results. The manufacturers have come to our aid and now supply us with bottled and canned juices. If we can believe all we hear and read about juices, the millenium is almost here. It will come riding in on the next tide of juice.

People have come to the author who had purchased juice extractors and set about getting well this new, easy, pleasant way, and they complained that they spent their whole day in the kitchen making and drinking juice. Often they grew worse rather than better. Juices are popular with some because they are so lazy they do not even want to make the effort to eat the fruits and vegetables. They even buy the juices after some one else has extracted them.

It is very easy to become water-logged through the use of juices rather than the whole foods themselves. Juice gluttony overworks the kidneys and adds to enervation. It does not enable the body to appropriate the excess of minerals or vitamins it introduces into the body. It is the practice to see how much juice one can imbibe on the theory that this will, alkalinize the body quickly and will speedily supply the deficiencies. They get best results, however, who take least juices. In other words, the nearer they approach a fast the faster they recover health.

(Comment: in today's thinking, fresh vegetable juices will speed-up healing, compared to whole foods, if eaten as mono-meals, in small amounts, and sipped slowly.)

It is easy to be misled by the results of animal experimentation. It is one thing to feed a healthy animal a deficient diet and quite another to feed a healthy human being a varied diet. Likewise, it is one thing to feed the sickened experimental animal an adequate diet and quite another to feed a sick human whose deficiency is due, not to deficient diet, but to deficient appropriating power.

Without nerve energy the best and most appropriate foods will not be appropriated. The nervous system presides over nutrition and elimination. If there is enervation from any cause, digestion, assimilation, and elimination will lag. Food is only partially digested, decomposition supplants digestion, and the very best foods will fail to nourish the body. We cannot derive minerals, vitamins, and calories from such decomposition.
Under such conditions, the less food eaten the less poisoning the body derives from the diet. Until nerve energy is restored, nutrition cannot be normal, no matter what the diet.

Everything equal, the person who has no nerve-energy-destroying habits will derive all the nourishment out of the foods he gets at the fruit and vegetable store on the corner. The individual who regularly dissipates his nerve energy will not derive adequate nourishment from any source.

"Without nerve energy the best and most appropriate foods will not be appropriated."

**Exercise**: Many cases of chronic “disease” are largely due to a lack of physical exercise. Thousands have regained their health by doing little more than taking up systematic physical exercise.

In all cases of chronic “disease” where no condition, of the joints, muscles, heart, arteries, lungs, kidneys, or elsewhere, contraindicate it, daily physical exercise should be indulged. This should be mild at first and should be increased both in amount and vigor as returning strength permits.

In “diseases” of the heart, hardening of the arteries, advanced “diseases” of the lungs, inflammation and tuberculosis of the joints, and similar conditions, exercise must be indulged in very cautiously and moderately.

In dropsical conditions, advanced Bright’s “disease,” etc., it is usually advisable to take no exercise at all, until the condition is greatly improved. Inflamed and tuberculous joints should not, be exercised. They should be given perfect rest.

For full information about exercise see Volume IV of this series.

"Many cases of chronic “disease” are largely due to a lack of physical exercise."
Sunlight: A well lighted room is essential to the comfort and most rapid progress of the sick. Nothing more effectively purifies and “sweetens” the atmosphere of a room than sunlight. It also has a comforting, cheering effect upon the mind of the patient. It does not harm the eyes, not even in measles.

The Sun Bath: Sunlight is an indispensable factor in plant and animal nutrition. Some “diseases,” like anemia, rickets, tuberculosis, leukemia, scrofula, psoriasis, etc., do not get well without sunlight. It is of distinct value in all chronic conditions. A daily sun bath should be had whenever possible. See the section on sun bathing in Volume III of this series.

The Air Bath: Just what effect the air has on the skin, and nerves in the skin is not well known but it is known to benefit these. A daily air bath should be had. This may be had at the same time the sun bath is taken. The friction bath may also accompany these. See the chapter on the air bath in Volume III of this series.

Warmth: Chilling checks elimination and adds to the discomfort. The extremities especially, and the feet in particular, must be prevented from chilling. In low states of “disease” the whole body must be safeguarded. If fever is present there is little danger of chilling, except in the coldest weather. On the contrary, a cool draught of air playing over the body is comforting and restful. Hot bricks or bottles to the feet are usually sufficient to prevent chilling.

Climate: Faith in the magic power of climate is very old. This faith shows no signs of weakening. People in the South are sent North; those of the North are sent South; those of the East are sent West, those of the West are sent East. Lowlanders are sent to the highlands and highlanders are sent to the lowlands. Often patients are advised to change climates merely because the doctor wants to get them off his hands. Michelet declared that “Renewal of youth will be found to consist in the science of emigration and the art of acclimatisation,” while Michel Levy said a change of climate is “a rebirth to renewal of life.” Tilden was more accurate when he said: “A change of climate will not cure bad habits.”

Mental Influences: Nothing can so effectively illustrate the self-reliant vitality and inherent truthfulness of the hygienic practice than the manner in which it daily and hourly triumphs over great obstacles. We are forced to meet and overcome the ingrown prejudices, blind adherence to age-long traditions, morbid feelings and artificial appetences, not alone of our patients, but also of their relatives, friends and former physicians. The impertinent intermeddlings of the patient’s friends, the insolent machinations, of their have-been and would-be physicians, the dogged and persistent opposition of members of their families, render the problem of caring for the sick person by the hygienic method a delicate and trying one. The ignorant opposition and malicious meddling on the part of relatives, friends and physicians is more effective when the patients are in their home than when they are in a hygienic institution. Sometimes it is a drugged-to-death wife, at others times a drugged-to-death husband who is anxious to try the hygienic system, but who finds it impossible to do so at home because of unreasoning interferences and determined meddling. I have seen patients who were so harrassed and annoyed by members of their families, because such patients dared attempt to get well through hygiene, after drugs had failed, that they were made worse and, often, such patients do not get better until they get away from home and the hurtful psychology of friends and relatives.
The technically professional part of our practice is the easiest part. Our most difficult work is that of overcoming and counteracting the traditions and habits of society, the ignorance and prejudices of the patient, the feelings and opinions of friends and relatives and insolent machinations of physicians. It often seems that every one around the patient is doing all in his or her power to prevent recovery. So true is this that I often think that the first thing a sick man or woman should do who is going to attempt to get well, hygienically, at home, is to get a ‘good club’ and empty the house of everyone except himself or herself.

“Fasting will kill you.” “You are too thin, now.” “You are not strong enough to fast.” “You will never come out of it alive.” “I should be afraid to risk it.” “Fasting is good in some cases, but - but, very dangerous in others.” “Your stomach will get so it cannot take food.” These and similar encouraging exclamations and dogmatic statements are offered by relatives, friends and physicians, to cheer up those sick men and women, who despairing of help from poisonous pills, plasters, powders and potions and from knives and saws, are about to embark on a hygienic ship for a voyage to the land of health. Well-meaning, but misguided and unthinking members of one’s own family are frequently guilty of such discouraging and disheartening suggestions. I have heard them fall repeatedly from the lips of those who pretend a knowledge of psychology and who should know the evil wrought by such suggestions.

“Your doctor is starving you to death.” “You are looking terribly bad.” “There is no color in your cheeks and you are losing weight.” “This diet may be all right for some cases, but you need plenty of good nourishing food.” “You need to be built up.”

If you were sick and on an eliminating diet and your system was being cleaned out, and due to lack of its accustomed stimulation, your body did look bad, and some one hurled a barrage like the above at you, wouldn’t it depress you and actually make you worse? And if it came from your whole family and all your friends, day in and day out, would you expect to get well? If you knew you were on the right track and felt your relatives and friends were either ignorant or stubborn or both and you became irritated or angry at their opposition to what you were doing, and fought back, would you expect to be able to digest your food?

If you quarreled with them and then cried and finally became hysterical, would you not expect to have headaches, pains and gas in the abdomen, weakness and other troubles? Just these things, I have seen in many cases. Only those of strong wills and strong convictions can pass through such a barrage of evil influences as frequently come from family, friends and physicians, and recover in spite of the efforts of these to prevent recovery. A man’s enemies are of his own household. His best friends are often his worst foes.

"simple bathing in plain water at a moderate temperature is sufficient"

**Cleanliness:** This is essential both locally and generally. To effect this, simple bathing in plain water at a moderate temperature is sufficient. Hot and cold baths should never be resorted to. The nearer the temperature of the water approaches that of the body the less of an excitant it is, the less it shocks the body and the less energy is wasted in resisting it. Luke warm or slightly cool baths, as often as needed, may be employed. One does not always require a daily bath.

Stay in the water only, so long as is required to cleanse the body. Do not soak yourself. Get out as quickly as possible and dry off with a coarse towel. Vigorously rub the body with this.

Years ago the author fell victim to the cold bathing fad. Each morning he had his cold bath, even breaking the ice and going in on more than one occasion. Such a bath is a powerful stimulant, if one does not remain in the water too long and has sufficient reactive power. But by so much as it stimulates at first it also depresses later. It is an enervating practice with not the shadow, of an excuse for existence. I would strongly caution everyone against such foolish practices. See the chapter on bathing in Volume I of this series.
SYMPTOMS WHILE RECOVERING

"Acute symptoms may develop. Welcome them and rejoice in the improved health, which follows them."

Crises: Even the staunchest Heteropath will usually concede that when the symptoms of a “disease” are obviously improving, the action is right action - but when the symptoms appear to be growing worse, he will insist that the action, is wrong action. He conceives “disease” as a “pulling down” process. A woman who was under Dr. Jennings’ care for a chronic affection of the lungs developed several crises - “there would be a gradual improvement in the general symptoms for two or three months, and then a sudden falling back of them, attended by spitting of blood, pain and soreness about the chest, with diminution of appetite and strength, and depression of spirits” - said to him on one occasion: “I am satisfied that on the whole, I am gaining and were it not for these running down turns, I should feel very much encouraged.”

The doctor replied: “You greatly misconceive of these things to which you give the appellation of running down. They are running up turns. A feeble team in ascending a long hill finds it necessary to stop and rest a little occasionally to recruit its strength. You gain more in those days when you feel the worse, so far as acquisition or treasuring up of your vital energy is concerned than you do in three weeks when you feel the best. The machine exhausts its power, runs down its weight and these are the winding up spells.

“It costs comparatively little to sustain the vital operations when you feel the worst, and it is simply because there is but little energy expended on the complaining parts that they do thus complain. The income of power continues the same now that it was under the free distribution of it, and while the law of limitation is in force, and you have, consequently, no muscular power to exercise with, be contented to keep still.” - Medical Reform, p. 341.

Do not expect nature to go forward in a steady, uniform and undeviating course. In difficult cases, and cases of low vitality, she must have her resting spells. During these periods the symptoms will appear, from the Heteropathic view, unfavorable. Appetite will fag. The pulse will grow weak. The patient will feel weak, tired, depressed. Sores will look bad, the breath will become foul. There will be an increase in all or most of the symptoms. Acute symptoms may develop. The invalid that previously seemed to be improving now seems to be growing worse.

These crises are to be handled just as all acute conditions are handled. Above all, the invalid should avoid becoming discouraged or frightened when these appear. Welcome them and rejoice in the improved health, which follows them.

Recurring crises (recurring “attacks” of any acute “disease”) tend to become and are on their way to becoming chronic. Recurring “sick” headache, “billiousness,” bronchitis, broncho-pneumonia, indigestion, rheumatism, cold, etc., represent a chronic condition which manifests itself at times in these, acute outbreaks. Chronic illnesses although always present, are not always equally present or are not always present in equal extent or degree. They have their periods of recession and exacerbation - are better at one time and worse at another.

Recurring “sick” headaches, or recurring “attacks” of minor illnesses, can be prevented by preventing the minor difficulties. If the individual who so suffers can be induced to reform his mode of living and particularly his mode of eating, he will gradually overcome his troubles. By adopting a correct mode of living and continuing it, he can not only get rid of his present troubles, but he can also prevent future troubles.
We ought to cure recurring affections in the intervals between and not during the “attacks.” For, whatever is done to alleviate the pain and discomfort of the “attack” is largely only palliative and almost always evil in its effects.

The important thing for us to get firmly fixed in our minds is that pathology is an evolution, beginning in small, imperceptible stages and advancing, step by step, to cancer, or tuberculosis, or Bright’s “disease.” We will then realize the extreme, importance of preventing the development of the early stages of pathology both proper care of infants and children.

The practice of “letting well enough alone” until the child becomes sick and, then, treating the sickness is one of the greatest evils of child-life.” “Diseases” do not require treatment, but they should be prevented.

Treatment presupposes the prior commission of a wrong, which requires correction. It should be obvious to the least discerning that this is not the ideal. Education goes far deeper than treatment. It anticipates an effect resulting from a given cause and points the way to prevention.

**Fever:** It was shown in the preceding volume that the temperature of the body is dependent upon the relation between the amount of heat produced and the amount of heat eliminated. It was also shown that infants and young children show relatively higher temperatures than adults when reacting to identical causes. It was shown, too, that fever is not an indication of the generation of surplus heat; indeed, quite the contrary is often the case. The body is often not generating so much heat as when normal and never as much as when vigorously active.

Acute fever indicates that there has been a sudden absorption of an unaccustomed poison or a sudden absorption of an unusual amount of an accustomed poison, enough to impair nerve energy and suspend skin radiation. High fever marks the degree of nervous shock; low fever (as in diphtheria, pneumonia in the aged, etc.) marks the profoundness of the nervous depression. Shock of this kind prevents the generation of heat.

The source of poisoning may be infection from an injury, a pent-up wound, for instance, pent-up decomposition in the intestine, indigestion, etc. It is not uncommon to see an increase in temperature of from three to five and six degrees Fahrenheit following indigestion resulting from over eating. If the offense is not repeated the fever may subside in twelve to twenty-four hours. If a stuff-to-kill doctor is on the case, and the patient is urged to “eat to, keep up strength,” serious illness is likely to result.

Pain, like poisoning, prevents the physiological manufacture of heat. If pain and poisoning did not stop heat radiation there would be danger of death from refrigeration - loss of all bodily heat. Fever, from this, as from several other viewpoints, may be correctly regarded as one of the most remarkable and uniquely conservative processes in all the world of sub-conscious protection.

Re-establish drainage in the wound, remove the cause of pain, withhold food from the putrescence-filled digestive tract, and the temperature will subside. Ignore these conditions and forcibly reduce the temperature and it will rise again.

**Pain:** The practice of medicine, from first to last, is a system of palliating symptoms. The many methods medical men have devised to palliate pain and discomfort constitute eloquent testimony to their ingenuity even if it casts doubts on the quality of their intelligence. Palliating or squashing symptoms (cure) is an insult to the Power behind Law and Order.
So soon as people learn the terrible price they pay for a short respite from pain, and the restless, questionable sleep (really, stupor) brought on by hypnotic drugs, they will certainly cease to use them.

Pain and discomfort speedily disappear without any injury being inflicted upon the body, if their causes are corrected and removed. The avidity with which the public grabs up every proffered mode of postponing and arresting pain, these methods usually consisting of lethean dosing, evinces the fear of pain that civilized man, particularly the more effete portions of civilized people, have developed. This practice of never-ending palliation is all based on the assumption that pain is actually lessened or obliterated by such procedures. This assumption is not only false, but it is true, on the other hand, that such methods prolong and intensify the pain and retard, or even prevent, recovery. Everything that interferes with the natural processes and functions of the body hinders them in their curative work.

Medical practice, including that of all schools of medicine, is a fruitless routine of palliatives and methods of meddling with the senses and the functions of the body, all of which methods leave an aftermath of complications and sequelae, which are worse than the “disease” for which the palliatives were given, and all of which are far more difficult to overcome and eradicate than the original malady.

Pain is not the “disease” nor its cause. It is a symptom. Palliatives that “relieve” pain do so by depressing and paralyzing the nerves of feeling, and not by controlling the antecedents of the “disease.” However much skill may be employed in removing consequences, nothing permanent, except harm, is secured unless the antecedents are corrected or removed. So long as the producing factors and influences are permitted to continue, these will keep up the “diseased” state and reproduce the pain as rapidly as the “relief” wears off. To conceal your condition by sand-bagging your senses is utter nonsense and positively harmful. Every method or measure that is directed at the removal of symptoms and not at the removal of causes is an evil. No matter what the character of the “disease,” the patient is injured by every artificial relief given him.

Delirium and Convulsions: These are symptoms, right actions, and should not be suppressed. Their causes or occasions may kill, but these never do. So long as the occasion for these is present, they should be present. Their suppression by depressing the nervous system is injurious in the extreme.

Fit: “Instead of fits tending to the destruction of life, they tend to its preservation; and indeed, are as absolutely necessary, in some cases, for the eking out of life, as the repairs of a ship, every day thumped against the rocks, are for its salvation. No man ever died by a fit; and when a man dies in a fit his life is prolonged somewhat by it.” - Medical Reform, p. 145.

The Bowels: In Volume I of this series we have discussed the care of the colon. Elsewhere in the present volume we have discussed constipation and diarrhea. Here it is necessary to add but little to the subject.

Bowel action is automatic like the pulsations of the heart and the rhythmic motions of the chest in breathing. If the power of motion is present and there is need of a movement, a movement there will be. If there is need of rest due to deficiency of power, the bowels will rest. They may be goaded to action by drugs, enemas, rectal dilators, spinal stimulation, etc., but this only makes their condition worse. The best plan is to let them alone and permit, them to attend to their own business.

The following exceptions to, this plan may be noted:
1. Cases of bowel impaction.
2. Cases of hemorrhoids. In these to allow the bowels to go for long periods without movement, fasting or eating, invites aggravation of the hemorrhoids.

3. Rare cases in which the feces become dry and hard during a fast and pass with great difficulty, sometimes with much pain and some bleeding.

4. An occasional case that has learned to so live in the colon that the worry caused by waiting for a movement causes more hurt than an enema.

There is no harm in waiting days, even weeks, upon the bowels to move and no alarm need be felt if they do not move at once or regularly.

AFTER THE RECOVERY

**Living After Recovery:** “God did not make man disease-proof and I cannot be expected to beat Him,” replies Tilden to the question: “Will I stay well after I get well?” The drunk man who sobers up will get drunk again if he returns to drink. The glutton who fasts until well, will develop his troubles all over again if he returns to gluttony. Whatever causes ill health once will do so again and again, conditions being equal. Be not as the foolish virgin Dr. Weger tells about, who, convalescing from illness, asked her doctor on his final visit: “Doctor, how soon do you think I may begin to eat the foods and do the things that disagree with me?”

The idea that man can be made “disease” proof (can be immunized) is a medical delusion. It is based on the foolish belief that the law of cause and effect can be annulled and that man may then abuse his body with impunity. This delusion will be outgrown as soon as the giving up of the germ delusion allows the return of sanity in thinking.

Good health is built on good conduct and any return to a wrong mode of life will build anew the prior illnesses. Every sowing is followed by a harvest that must be reaped. Be careful, then, what kinds of seed you sow. Man should live in a manner to maintain his physical, mental and functional efficiency until his organs reach the limit of physiological rather than pathological endurance.

**Compensation:** In certain chronic “diseases” we are brought face to face with the paradoxical proposition that "there is but little that can be done and there is much which can be done” to restore health.

In liver abscess, fatty degeneration of liver, in cirrhosis (hardening) of the liver, in waxy liver, in cancer of the liver, in cyst of the liver, in ascites, what is there to be done? In chronic Bright’s “disease,” in degeneration of the kidneys, waxy kidneys, advanced pyelitis, hydronephrosis (water on the kidneys), cystic kidneys, tumors and cancers of the kidneys, what can be done? In diabetes, hardening of the arteries, atrophy of the spinal segments, organic heart “disease,” advanced tuberculosis, etc., what is there that we can do? In arthritis, where the joints are deformed and ankylosed what can be done for such conditions? Other such conditions as these, or rather, the same conditions in other organs, might be named, but, always with the same question mark after them.

The destroyed parenchyma of the various organs cannot he replaced. The hepatic cells of the liver, renal cells of the kidneys, the destroyed tubules of the kidneys, the islands of Langerhans of the pancreas, the neurons of the spinal cord - these cannot be replaced. The degeneration has reached a stage where regeneration is no longer possible. The hardening cannot be overcome. The over-growth of connective tissue cannot be removed. The tumor or cancer cannot be cured, except, perhaps, in its earlier stages and its existence is seldom known in such stages. In most cases of ascites, what can be done beyond draining off the accumulated fluid at frequent intervals as it continues to accumulate, until the patient dies.
In such cases we deal with seemingly hopeless conditions; conditions which have developed gradually, insidiously, and perhaps with little or no direct warning. This should emphasize the necessity for right living at all times. The mere fact that an individual feels well, looks well, and is able to work and eat is not sufficient proof that his mode of living is not harming him. Indeed he may be on the brink of the grave and imagine himself to be in good health.

As hopeless as such cases appear, and as little as it may appear can be done for them, there is much, very much indeed that we can do and should do. “Cure,” will depend on the amount of functioning tissue left. If enough remains to perform the necessary functions of life, and the sufferer will learn to live within the functioning powers of these tissues, he may enjoy good health for many years and the progress of the degenerative condition be stayed.

The reader will recall, what we learned, in the chapter on Physiological Compensation (see volume I) about the reserve powers of all the organs of man’s body. Much of the liver, or kidney, or pancreas may be destroyed and yet the remaining cells be equal to the work entailed upon them by a normal life or by a life carefully lived. One whole kidney may be removed and, if the other is sound, life and health may continue.

Although the irreparable damages to the organs of the body cannot be undone, if these conditions are discovered early enough, there is much that may be done to stay the further progress of degeneration and decay and to make it possible to live in comfort and a fair degree of health.

The hardening process will be stopped if its causes are corrected. If the causes of degeneration are corrected and removed the process will end. The blood pressure may be lowered to a safe standard and maintained there. The growth of the tumor may be stayed and, in some cases, materially reduced in size. In liver abscess, the fistula through which it discharges, may be caused, to heal more rapidly. Comfort may be established and maintained. Life and usefulness may be prolonged. The mode of living may be so ordered and regulated that no undue strain, is placed upon the remaining tissues of the impaired organs. If this is done and the invalid will continue to live carefully, that is, within his physiological abilities, he may live many years in fair health.

There are post-operative cases where one kidney has been removed, or one or more gastroenterostomies have been performed with subsequent operations for adhesions, and not infrequently gall bladder drainage or removal, with perhaps early removal of the appendix. “The disillusionment that accompanies the return of symptoms, often in aggravated form,” says Dr. Weger, “leaves bitterness and disappointment that shatters faith in medicine and surgery.” Yet, in these apparently hopeless cases, with loss of continuity of structure or loss of important organs or parts of organs, comfort may be restored and compensatory adaptation established if toxemia is eliminated, nerve energy restored to normal and the patient will learn to live within his compensating abilities.

Dr. Tilden says: “Nature tolerates a certain degree of incurable pathology and permits us to live out our life expectancy - provided we lighten her burden. She cannot carry the double load of impaired function and at the same time hold a depleted nervous system at par and take care of three times as much food as is needed for ordinary wear and tear and efficient metabolic activity.”

But the true lesson to be derived from the above facts is one of prevention, not one of restoration. These conditions are all preventable by a correct mode of life. “Remember the laws of thy being from thy youth up” and you will develop no such conditions. You will have no such problems to meet.

"Be not overcome of evil, but overcome evil with good" is a hygienic as well as a religious principle."
Special Biogonies

Chapter VI

"When we understand that toxemia is "a parent with many offspring", much of the mystery with which "disease" has been surrounded disappears"

No classification of “disease”, as Trall pointed out, is of any value. Medical men are dissatisfied with their efforts at classification. All of this need not trouble us, for we understand the essential unity of pathology and the unity of its cause and do not seek to cure so-called “specific diseases”. Rather we care for the body so that it may carry on its own curative work under the most favorable conditions and with the best possible means - Hygiene.

So-called “disease,” from one end of the medical nomenclature to the other, is a compilation of symptom-complexes, differing from each other as organs differ, as tissues differ. At first “diseases” were classified symptomatologically. Then came the study of the pathology of the organs stressed and a subsequent effort to classify “diseases” anatomically (organically). As pathological research was extended to the tissues, an effort to classify them histologically followed.

The fact that each organ may undergo a number of different changes in function and structure has given rise to hundreds of known and regularly classified entitative “diseases”. For instance, there are at least nine different headaches, named according to their supposed cause (uremic, bilious, neuralgic, ocular, reflex, etc.,) nine eruptive fevers (smallpox, measles, chickenpox, etc.,) eleven forms of coma (septic, uremic, diabetic, etc.), seven “distinct causes of chills,” not including those due to septic states, and several general causes of dropsy (Bright’s disease, cardiac impairment, malnutrition, etc.). In all of these “diseases”, their causes are secondary to toxemia.

Dr. Weger says: “No physician, be he ever so learned, can hope to know all there is to know about all diseases. Therefore, the practice of medicine has been split up into specialties. The subject has become too massive, too intricate, too unwieldy. And it is becoming more complicated every day. In this day of specialization and feverish desire on the part of each man to find something new as his contribution to an over-filled art, it is impossible for anyone person to have a perfectly clear comprehension of all diseases.

Each of a half dozen specialists may find a different pathology in one and the same individual; as for instance, in a man of sixty may be found at one and the same time, the following functional or organic derangements; endocarditis, arteriosclerosis, gastric ulcer, mucous colitis, high blood pressure, asthma, constipation, hemorrhoids, enlarged prostate gland, and anemia. Sounds formidable - and it is. But this complication is by no means uncommon. In order to determine which of these conditions is most serious and the degree of each, several specialists are consulted. It is more to the point perhaps to state that one doctor sends the patient to another doctor, usually in the same clinical group. Does the resultant advice or treatment become more simple through final summary and condensation? Not often. It becomes more complex because each specialist may assign to the condition he finds a separate cause and consider it to be the most important and the first to need correction.

“The doctrine of Toxemia does away with much conjecture. Does it not seem reasonable that whatever caused the arteriosclerosis or the hemorrhoids might be a potent factor if not the only factor in causing the entire complication? Treated in the proper manner from this standpoint each and every separate pathology will become modified or entirely over-come, provided enervation and structural change are not too far advanced. Toxemia covers the ground so well, that it seems to us ridiculous to prescribe a separate treatment for
endocarditis, for arterio-sclerosis, ulcer, colitis, constipation - each as a distinct entity, each entity having a separate cause or no discernable cause. None of the conditions mentioned in this hypothetical case are considered to be due to germs. Therefore, the cause may remain unknown, unwept, unsung, and treatment perforce only palliative.” - The Genesis and Control of Disease, P. 113.

When we understand that toxemia is “a parent with many offspring”, much of the mystery with which “disease” has been surrounded disappears and much of the officious technicality that has been built up becomes useless. We ask the reader in studying the classification of “disease” in the following pages not to consider “each disease”, even though separately catalogued, as a separate entity, having no relationship whatever to “other diseases,” or to pathology in other organs less directly involved. As Dr. Weger says: “Every disease has many possible relatives. They do not have family reunions except in late complications.” We have followed, none-too-closely, the latest and most approved “scientific” classification of “disease.” We need only caution the reader against accepting this classification as having more than a mere taxonomic value.

In listing the symptoms of the various so-called “diseases,” in the pages that follow, we have, for the most part, refrained from listing those symptoms and diagnostic signs that the layman, without knowledge of pathology and diagnostic methods and without the necessary diagnostic instruments, will not be able to recognize. We realize that this is a limitation, but feel that the information can be of no value to the layman and is not necessary to our professional readers, who are presumed to be already in possession of such knowledge.

"Study your doctor also. Does he know cause? Does he remove cause; or, does he palliate effects? Does he smoke, drink, eat bread and meat at the same meal? If he does these things he cannot teach you. He is ignorant."

DEFINITIONS: Biogony

[The word disease is a generic term and covers a multitude of phenomena, some of these being of opposite character to others. It is quite obvious that blindness, deafness, paralysis, emphysema, cancer and other degenerative diseases are not remedial activities. This does not invalidate our theory of the essential nature of disease but it does emphasize the need for a new terminology, one that more precisely classifies the different phenomena that are now confusingly jumbled together under the rubric disease. I have suggested the term, which I coined, biogony, for those elements of disease as now understood that are remedial in character. Biogony is a combination of two Greek roots-bios meaning life and agony meaning struggle. Although I coined this word and gave it to the world nearly forty years ago, it has not been accepted, perhaps because our theory of the essential nature of disease has not been accepted. (Disease Is Remedial Activity - HM Shelton Hygienic Review 1978)]

[Disease is a vital struggle (biogony) to remove offending substances (toxins) and repair damages. (Man's Pristine Way Of Life)]

"Good health is built on good conduct and any return to a wrong mode of life will build anew the prior illnesses."

You can read the rest of the book here:  http://drbass.com/orthopathy/

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