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Zane Grey's thrilling new
Western romance—"Nevada"

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How's Your Appetite?

By William S. Sadler, M. D.

WHEN you are ravenously hungry, it does not necessarily mean that you are in immediate need of food. It is probably around the regular hour when you habitually put food into your stomach; consequently, that organ, being more or less a creature of habit, indulges in setting-up exercises in the form of vigorous contractions.

When the stomach contracts, we feel hungry, no matter whether we need food or not; and our craving for food is in proportion to the vigor and strength of our stomach muscular contractions. Owners of phlegmatic stomachs, for instance, never experience ravenous hunger, although they have a fairly normal relish for their food. But they are little inconvenienced if they chance to miss a meal. On the other hand, people who have highly nervous stomachs that are constantly indulging in muscular gymnastics are always hungry. If their meals are delayed fifteen or twenty minutes they begin to feel faint for want of food. If they are kept waiting an hour they are simply "starving to death."

Hunger, therefore, is a nervous reaction—a conscious desire or urge to partake of food—which projects itself into our minds as a result of certain muscular contractions indulged in by the empty stomach. If the contractions are feeble, an individual can be in real and immediate need of nourishment, and yet experience but a faint hunger.

Fortunately, in the average normal individual these matters of hunger, food needs, and stomach contractions are fairly well synchronized, so that the whole thing works out advantageously as regards our digestion, health and strength.

There are disorders galore which can interfere with the appetite, ranging from infections in the mouth, nose, and throat, to stomach disorders, chronic constipation, auto-intoxication, and bad breath. We also have the fastidious, finicky type of individual of the neurasthenic order whose digestion is upset when the least thing goes wrong.

ABAD taste in the mouth, which so many people experience in the morning, may be due to a variety of causes, such as decayed teeth, pyorrhea, diseased tonsils, adenoids and other abnormalities about the nose and throat, including inflamed sinuses. Mouth breathers, too, nearly always wake up with a coated tongue and a bad taste.

Now and then we find a case where coated tongue and bad breath actually come from disordered digestion and chronic constipation; but, in general, coated tongue, bad taste, and foul breath are produced by local conditions in the mouth, nose, and throat.

Several years ago I ran across a woman who suffered from a poor appetite and numerous digestive disturbances. Diet

and other treatment did not seem to help her. Her tongue was coated and she complained of a disagreeable taste in her mouth. The only thing we could find out of the way with this woman was the fact that she slept with her mouth open. We had to strap up her lower jaw in order to cure her of this habit, but we finally succeeded. As a result, her tongue quickly cleared up, the bad taste vanished, and in a few weeks her appetite was normal.

Adults, as well as children who are victims of a finicky and fickle appetite, are often cured by the removal of diseased tonsils and adenoids.

I remember the case of a woman who completely lost her appetite, for no apparent reason. Food, no matter how daintily served, nauseated her. I put that woman on an orange-juice diet. She had the juice of one dozen oranges daily, and nothing else. By the end of the fifth day she was begging for food, and by the tenth day she was cured of her fastidious and finicky appetite.

ANOTHER factor that enters into the control of the appetite is the thyroid gland. This is a ductless gland situated in the neck, astride the windpipe. It is this gland, when it enlarges, that causes goiter. The secretions of the thyroid gland determine the rate at which we burn up our food. When the thyroid is under-active, we burn our food slowly and there is a tendency to obesity, yet our appetite is often under normal. On the other hand, when the thyroid gland is over-active, we may have thin, underweight individuals with voracious appetites. Many of these over-active thyroid cases have been through all sorts of rest cures, subsisting upon a high caloric fattening diet, in order to gain weight—but to no effect.

I want to say at this point that no doubt there is some danger from habitually overloading the stomach. In some cases this brings about an overstretching and weakening of that organ, which in turn produces more or less permanent digestive trouble. I think the habitually over-stretched and abused stomachs are more likely to cause indigestion than those stomachs that are tumbled down and displaced a little.

There is a type of nervous individual, usually somewhat emaciated and more or less under-nourished, whose stomach starts tantrums directly it gets empty. These are the individuals who are constantly nibbling between meals. They have distressing, all-gone feelings.

These people have a poor appetite because they are nibbling all the while. They eat largely to escape a certain distressful feeling in the region of the stomach; they do not eat because they are actually hungry. If they would make up their minds to overcome this unpleasant feeling in the stomach, and drink hot or cold water instead of nibbling, and give

the stomach a regular rest between meals sooner or later they could work up a healthy appetite and begin to enjoy the food.

The enjoyment of food and a good appetite are directly proportionate to the elaboration and secretion of gastric juice in the stomach. Or, in other words, a good appetite equals good gastric juice, and good gastric juice ordinarily means good digestion. In just about five minutes from the time your mouth begins to water when you see or smell appetizing food, the gastric secretions commence to flow into the stomach.

We have but four well-defined basic tastes: they are the sour, bitter, sweet, and salty.

Most of the enjoyable flavors of our foods are recognized and appreciated by means of the sense of smell. When we have a very bad cold practically nothing tastes good. The cold has transiently all but obliterated our sense of smell, and so, being dependent for the time upon taste for the recognition of flavors, we are able to discern only the four basic ones.

Almost anything which tends to improve the appetite operates favorably on the digestion. Some folks who are habitually under-eating could work up a mighty fine appetite if they would go for a few meals, or even a few days, without solid food, taking merely a little milk or orange juice.

There are thousands of sedentary folks with precarious appetites who would have the keenest craving for the most hearty foods if they would but do a little real physical work. Muscular exertion would quickly cure the majority of our nervous dyspeptics. At least, physical work, plus mental cheerfulness, would serve to drive away many of our functional digestive disturbances.

IAM often asked if drinking at meal times is not a harmful practice and likely to interfere with good digestion. Now, the question of drinking at meal time is a difficult problem to settle by any precise rule. Persons with rapid digestion, good, strong stomach muscles, seem to thrive on drinking with their meals; that is, if they drink moderately and don't gulp down their beverages ice cold and a glassful at a time. On the other hand, persons with slow digestion and overstretched stomachs seem to be bothered with indigestion if they habitually take much liquid with their meals.

I believe the tendency to drink water, fruit juices, milk, or buttermilk with the meal, as well as the practice of beginning the main meal with soup, helps to prevent overeating, in that these liquids distend and fill the stomach, and thus contribute to a feeling of satiety much earlier in the course of the meal than would be the case if only solid, highly nutritious foods had been swallowed. Moreover, these liquids are quickly out of the stomach and thus

that organ is left only moderately distended; in this way good and rapid digestion is favored.

Generally speaking, I favor soups and liquids with meals, but I think we go in too much for desserts. The average individual has usually had just about enough to eat before the dessert is brought on. In the case of semi-invalids or those who are under-nourished, I can see a reason for having these specially tempting, highly nutritious, over-sweet viands. They coax the appetite along, and encourage folks to eat a little more. In fact, doctors often prescribe knickknacks and dainties in an effort to tempt under-nourished patients to partake of a little more food.

But the average family fills up on the regular part of the meal, and then proceeds to store away ice cream, pie, or cake—almost enough in itself to make up a full meal as far as calories go—on top of it.

If you feel you must have dessert habitually, put them on the table and eat them along with your other courses. But personally I strongly recommend a much more frequent use of such natural food as fruits, nuts, raisins, figs, and dates, in place of rich desserts high in calories.

ANOTHER question I am frequently asked in regard to appetite is why sick people suddenly develop a craving for a particular article of food. Sometimes this craving may underlie a real need on the part of the body; but I doubt if this is true in the majority of cases. It more often develops that the article the invalid craves is one that he was fond of when he was well. On the whole it is a good plan to let sick folks have what they strongly crave. If there is

no clear contra-indication, I think it is best to humor their appetites. The better the appetite, the better the digestion, and since the digestion is notoriously bad in times of sickness, we welcome this food-craving on the part of the patient because we believe it is a guarantee that the food, when eaten, will be reasonably well digested.

On the other hand, when patients are very sick and the digestion is greatly impaired, a craving for dill pickles, corned beef and cabbage, and other ultra-heavy foods should be denied.

There is a long list of foods which produce serious symptoms with many people: Pork, veal, shellfish, oysters, buckwheat, honey, and even raspberries and strawberries are on this list. Now, what is the trouble in these cases?

These folks are, in principle, not different from the hay-fever and asthmatic patients. Certain individuals are hypersensitive to certain chemical elements, particularly certain protein compounds, and whenever they are exposed to the presence of these chemicals, they im-

mediately over-react. In the case of hay fever we have the well-known symptoms connected with the nose and throat. In asthma, the lungs are involved. In most of our food idiosyncrasies, the individual is affected with skin disturbances, notably hives, and other forms of irritation.

Individuals who react unfavorably to specific foods will probably continue to suffer from this reaction throughout their lives, unless they are vaccinated against the susceptibility. The substance causing the irritation is sought for, and, being discovered, this objectionable substance is then progressively and increasingly injected by vaccination into the individual's system, so that in this graduated manner a tolerance is slowly built up. After being thus vaccinated people can eat these formerly taboo substances with impunity.

Use More Imagination in Arranging Your Menus

ONE thing I think city folks and country folks agree on is the bacon-and-egg breakfast," says Doctor Sadler. "I don't know of any reason why this should be rated an ideal combination. While there is no specific criticism that can be leveled against this dish, I think it indicates a lack of imagination and initiative on the part of the American people. We just naturally fall into dietetic ruts of this sort, which is unfortunate. The modern housewife ought to have in her kitchen a set of cards—one for fruits, one for vegetables, another for cereals, meats, and nuts. By compiling a list of the articles of food in season from these cards, her memory would be jogged, and she would discover some things on these lists that had not been on her bills of fare for months. It is of importance to good digestion to have a reasonable variety of foods from season to season in our diet, but not any great variety at any one meal."

While taste is in some measure hereditary—that is, we easily acquire a liking for those articles of food which our ancestors have used freely for generations, such as bread and butter, meat and potatoes, ordinary fruits and vegetables and dairy products—it is also a matter of education.

THE reason why some individuals acquire a liking for so many queer things and dislike one specific article of diet—olives, for instance—is something I am not able fully to explain. There is probably a physiologic basis for it, but I am inclined to think there is a larger psychologic twist.

Not long ago I had a hard tussle with a woman who simply would not eat whole-wheat bread. But she finally made up her mind to try to like it. In less than one month the battle was over. Now she enjoys it.

It took an eight-year-old lad just twelve days to overcome his distaste for bananas. On the other hand, we spent six months getting a middle-aged woman

to enjoy tomatoes. I recently treated a boy five years old who simply refused to drink milk. He seemed to detest it. After trying various subterfuges and coaxing for weeks and weeks, we ordered one glass at each meal, and refused all other food until the milk was down. In two weeks he was going fine.

Children take dislikes for some certain vegetable or other article of diet. I think it is a good practice early to train them out of these peculiar tendencies. If you take right hold of these problems, you can settle them within a few days—a few weeks at most.

Appetite is a creature of training, and we can train ourselves and our children really to relish practically any and every food we may choose.

Queer appetites arise from two sorts of causes: In the first place, the human system is sometimes greatly in need of a particular element, as, for example, lime, and so certain individuals, particularly children, develop a peculiar craving for things which supply this much-needed chemical. We frequently meet with cases of growing children who will take the plaster right off the wall and eat it. At other times we run across children who eat chalk, egg shells, and nibble at slate pencils.

IDON'T know that we are going to be able to prove that freak appetites of this sort are formed in response to the system's need for some particular element. It is more likely that many of our queer appetites are accidentally initiated, and then are firmly fixed by repeated indulgence.

But there is a certain residue that undoubtedly represents the clamor of the system for the satisfaction of some actual

chemical need. If we go without a particular and essential element of our daily food for a number of weeks, we shall develop a steady and ravenous craving for that very thing. Suppose, for example, we eat little protein for a week or ten days. The majority of individuals under such circumstances will develop a ravenous appetite for a beefsteak, a piece of cheese, or a plate of baked beans—a clear-cut craving for those elements which the system needed.

Now, on the other hand, and in contrast with this, we know that most of the cases of so-called "sweet-tooth" are acquired. Sugar represents one of our greatest sources of fuel and energy, and it is not strange that growing children moderately crave sweets. Their intense bodily activities demand starches and sugar, as well as fats, to supply energy, and while there is a physiologic basis for the craving for sweets on the part of the young child, nevertheless, much of this appetite is developed by inordinate indulgence in concentrated sugar products.

It is a mystery. (Continued on page 165)

How's Your Appetite?

(Continued from page 43)

to me how some folks can eat the mixtures and combinations they do, such as Thousand Island dressing on corned beef hash, or raw oysters dipped in chocolate sauce. This latter struck me as more freakish than molasses over cold roast beef. I don't pretend to be able to offer any scientific explanation for such peculiar tastes.

The craving for salty foods grows out of the fact that salt is a chemical indispensable to life itself. Sodium chloride is a constituent of the blood. But there can be no question but that modern civilized people have developed a perverted taste for salt. Formerly, salt was difficult to obtain, but now we have it on the table in shakers and can have all we want. If you do not watch yourself, the older you grow the more salt you tend to put on your food. If you reside in the gopher belt of this country, you should see that your table salt is properly iodized. Iodine, taken in time, is a gopher preventive.

The craving for sour things is a little more difficult to analyze. I am inclined to believe that in the case of our modern civilized races there is a tendency toward the accumulation of acids in the blood stream, and this over-acidification, or, as one might put it, this lessening of the alkaline reserve of the blood, is deleterious to the efficient working of mind and body.

Now, it is a fact that practically all of our sour fruits—lemons, oranges, tomatoes, grapefruit, and the like—are efficient neutralizers of this acid tendency. I know that just the opposite of this is what one would naturally expect. Grapefruit tends to decrease the acidity of the blood, and so I think that the craving for acids and sour fruits is a manifestation, after all, of intelligent effort on the part of old Mother Nature to lead us into eating those things which we really need. This acid fruit craze is a good thing. It is like the butter-milk craze of a few years back. I hope they both continue. The use of vinegar and other artificial acids does not supply this need as do the natural acids of the fruits and vegetables, so that if this craving for sour things is satisfied by vinegar and other acids of that sort, Nature's purpose in producing the craving is defeated.

I MENTIONED earlier in this article that appetite is largely a matter of education, and I think the difference between the dietetic practices of rural and urban people is enough to prove that statement. In the city, we usually have grapefruit every morning, or a glass of orange juice. This practice is not nearly so common in the country districts. What is the explanation? There are probably two: In the first place, city people have been more definitely educated as to the value of the citrus fruits from a general health standpoint, and as a means of counteracting the tendency to over-accumulation of acid in the blood. In the second, oranges and grapefruit are more accessible to them.



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I see no reason why we should not indulge in and enjoy individuality in our dietetic practices. If you really like to eat in a certain fashion, why should you be compelled to conform to some purely conventional mode of behavior? If you crave pie or soup for breakfast, and long to eat breakfast foods for supper—why not do it? Why try to make your appetite behave just like your neighbor's? Why not be a bit independent and original?

Not long ago I met a middle-aged woman whose chief complaint was, "Doctor, you will have to do something for my appetite. It is just clean gone. I can't relish a thing." She really believed I could give her something to take that would make her ravenously hungry.

It is true, we do have certain bitter tonics and various remedies which help to stimulate an appetite, just as we prod our hunger by means of relishes and other tasty morsels. But that is the wrong way to earn a good appetite. As a general proposition, drugs do not cure disease, though there are exceptions to this statement, for we know that quinine will cure malaria.

When we take digestive tonics or consume, on our own responsibility, alcoholic beverages or patent medicines, with the object of improving our digestion and stimulating the appetite, we are only fooling ourselves. We get certain immediate results, but they are not lasting.

We must look elsewhere than to drugs. In the hands of the experienced physician, and in the case of certain diseases, it is oftentimes advisable temporarily to resort to bitter tonics and other medicinal expedients for trying to improve the appetite; but I urge the average individual to go about the matter in a natural and normal way so as to earn a permanently good appetite. There is always a reason for a poor appetite, and a good, healthy appetite will return only when the cause of the poor one is removed.

In discussing appetite, a word should be said about drinking too much tea and coffee.

Tea, coffee, tobacco, and even alcohol, seem to affect the appetite differently in different individuals. In some cases, a small amount of these substances serves temporarily to stimulate the appetite and encourage digestion, while larger quantities depress and delay it. However, I advise my patients to earn a good appetite by obedience to the laws of life—by exercise, fresh air, and biologic living.

I SHOULD like to say a few words about condiments. A great deal of the tendency to overeat is due, I think, to over-seasoning. When foods are "hot when they are cold," when they are so pungent that they burn the tender lining of the mouth, throat, and stomach, they lay the foundation for subsequent digestive disturbances. Like everything else in the matter of appetite, the more we season the food, the more seasoning we want. This whole business has a tendency to grow on us. It is astounding to see the amount of salt, pepper, mustard, horseradish, that some persons will put on a piece of steak or on an ordinary vegetable before it tastes good to them. Such individuals are victims of a dangerous artificial taste.

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have to season our foods so highly is the unfortunate way in which we cook them, particularly our vegetables. These we boil, so that the valuable salts, pleasant flavors, and many of the vitamins are washed out, whereas all of these desirable factors would have been saved if cooked by steam or double boiler. It is a great mistake to lose the natural flavors of so many foods through poor cooking.

Foods should be tastily seasoned and daintily served. Good and moderate seasoning undoubtedly makes our meals more appetizing, and hence serves to aid digestion. But avoid excessive seasoning.

I am often asked whether I believe the natural human appetite would be a safe guide in the selection of suitable foods, as to both quality and quantity. I believe that primitive man, surrounded by natural food products, had an appetite that was in the main a safe guide to those foods which he needed, and which were most suited to his proper nourishment.

But civilized man has gone a long way from nature. The more we develop our brains, the less our instinct serves us. Man has become largely a creature of reason and judgment, and I think that his instinct with reference to foods is to some extent obliterated. Besides, a great deal of the food we eat now is manufactured, and so I have come to believe that man's taste at the present time is not a very safe guide.

NOT long ago, in discussing with a mother the advisability of having the child eat between meals, the father said: "Doctor, what harm is there in eating between meals? The animals eat between meals, and they are healthy; they don't have stomach trouble."

And so I had to explain that animals have nothing but a physical life to maintain—eating is their main business. They require no energy for intellectual, social, and economic activities. A horse or cow grazing in the pasture can devote all of its energy to digesting food; but civilized man has other activities, other performances in the arena of society and commerce. If we put man out into the forest, let him hunt and follow the chase, eat here and there as he finds the food, without any thought for things intellectual or economic—why then, I dare say, he could eat at any time without the danger of having much trouble with his digestion.

Nor do I think that the average individual, who eats highly concentrated foods and who leads a sedentary life, can trust his appetite as to the amount of food required. The natural tendency is to eat until we feel full. And if we eat highly nourishing, over-concentrated foods, some time before we get that full feeling in the equatorial region we have eaten too much.

People who live artificial or unnatural lives, with little or no physical exercise, should know something about calories, in order to eat properly, otherwise the tendency is to eat more than the body can burn up.

It is right that we should enjoy our food. Good cooking, artistic service, are legitimate pleasures, health-promoting practices, and if we do not allow them to lead us into habitual over-eating, they are in every way to be desired.

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