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March

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A New  
Scattergood  
Story

By Clarence  
Budington  
Kelland

•  
Mary B. Mullett

Ross Santee



By William  
Dudley

My Seven Minutes  
in Etc.



Vol. CVII

Contents for March 1929

No. 3

LET your eyes drift over to the table of contents. An alluring menu! But it contains two titles which seem to clash.

"I Haven't Cluttered My Head with Things Not in My Line," announces Andrew Maloney, president of a great coal company. And, a little farther down, "Miller Has Always Minded the Other Fellow's Business." Henry Miller, by the way, is a master of railroading.

How come? . . . One man achieved fame and fortune by sticking strictly to his own affairs; the other paid a lot of attention to the jobs held by his fellow workers. From which example can we profit?

From both of them. The inconsistency is only apparent.

Andrew Maloney made up his mind to know all there was to be known about coal. He read, thought, and lived coal, eventually becoming a titan in his field.

And what was Henry Miller doing all this time? Dodging from pillar to post? Not at all! He studied railroading, thought railroading, lived railroading. But in that vastly complex field of commerce he set out to master every branch. Today, without ever having been a machinist, he could build a locomotive; he can fire or drive an engine; he can keep books, though he has never been a bookkeeper; and he can trace a waybill without ever having been a freight clerk. Miller followed many roads—but they all led to Rome. Had he been blessed with less curiosity, courage, and common sense he might never have risen from a rut.

Speaking of ruts, the stories of these two men prove one point: A rut is not a job. It's a state of mind.

THE EDITOR.

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# Lost Your Pep?

## You May Be Anemic

By

WILLIAM S. SADLER

M. D.

**P**ALE, peepless, easily tired, capricious appetite, under weight, headaches, poor elimination?—Well, that sounds as if you might be suffering from anemia. It is a pretty common complaint, especially among people who do not get sufficient outdoor life and exercise. But, fortunately, it is a complaint which, halted in time, can be readily cured by very simple methods.

However, before going into the subject of anemia, its prevention, and its cure, it might be well to say a few words about the physiology of the blood, for in the blood, if it becomes impoverished, will be found the cause of anemia.

The blood, in addition to the chemicals and the digested foodstuffs which it may carry—not to mention waste material in the process of elimination—contains red and white cells, or corpuscles.

The white cells constitute our standing army (or swimming army) of the interior. They are important factors in defending the body against microbial invaders. But as the white cells are not concerned to any considerable extent with anemia, we shall have to leave them out of the picture. It is the red blood cells with which we have to deal.

These microscopic living creatures which in a normal person should be found in the ratio of 666 to every white cell, are saturated with an iron compound called hemoglobin. It is the presence of this compound that gives them their bright red color in contradistinction to their pale, white cousins.

Now, hemoglobin is mighty useful stuff to have around in the blood stream. It has the power, when blood is circulating through the lungs, to grab oxygen and carry it off to remote parts of the body. It then very kindly liberates this oxygen, thus enabling millions and millions of living cells to carry on their life work efficiently. But, not content with this vital function, it undertakes another: Immediately upon liberating the oxygen, the saturated red cells gather up the carbon dioxide gas—a product of our bodily combustion which needs to be promptly eliminated—and find their way back to the lungs, where, in the process of respiration, the gas is breathed out of the body.

Seeing what an important part the red cells play in keeping us fit, it is certainly up to us to look after them properly—give them the right kind of nourishment so that they can keep their hemoglobin content up near the hundred per cent mark.

Still, being what we are, frail human beings, we all allow ourselves to get into an anemic state at some time or other.

And, human like, knowing that ordinary

or secondary anemia isn't, in itself, a condition to cause alarm, we neglect it. And that's where the first big mistake is made. Anemia isn't a condition to be neglected, unless you want to feel peepless and ailing for the rest of your life.

There are two classes of anemia, primary and secondary. Primary anemia signifies that there is something radically wrong with the blood-making mechanism of the body, and it is a very dangerous condition. A common example of this is pernicious anemia, which I shall discuss briefly toward the end of this article.

In the secondary anemias there is nothing radically wrong with the blood-making processes. The indication is that either blood has been lost, as in hemorrhage, or that the red cells are being eaten up in the liver, spleen, and other internal organs by, as some authorities on the subject suspect, certain cannibalistic white cell cousins. But the most common form of secondary anemia, and the one with which we are mostly concerned, has to do with the iron content of the red blood cells, and not the cell itself. In fact, it is possible to have the normal number of good, healthy red cells and to have insufficient hemoglobin.

If the hemoglobin in the red cells is around ninety-five, there is nothing to worry about, especially if the individual is above thirty years of age. But when it gets down to eighty-five, that's a warning. And when it falls to seventy-five—well, that is more than a warning. It is then that we begin to make a thorough search for the cause.

When the iron in the blood is low, you are bound to feel run-down and peepless. Your appetite will possibly be capricious and your elimination poor. In short, as the old ladies used to say when I was a lad, you will be "enjoying poor health."

**S**OME time ago a mother brought her daughter to me—a sickly girl of nineteen, who had been ailing for two or three years. I had only to look at her to see that she was suffering from chlorosis, or "green sickness."

Fifteen or twenty years ago we used to see a great many more cases of this form of anemia than we do today. It comes soon after adolescence, particularly among young girls who work indoors. This girl—let's call her Mary—was listless and had a capricious appetite; she also had peculiar and abnormal cravings. She would eat a dozen sour pickles at a time and she craved chalk and magnesia. (I have heard of

young people suffering from this form of anemia who will resort to the eating of clay and ordinary plaster.)

Mary's facial appearance was of that peculiar greenish or lemon tint which gives this disorder its common name of green sickness. She had poor circulation and a heart murmur. She was also nauseated at times and suffered from severe headaches.

Fortunately, Mary came to me in the midsummer, so that there were several months ahead favorable for an outdoor life. Outside of giving her a little iron temporarily, nothing was done for her in the medical way. But by planning her diet so that she ate generously of iron-containing foods, and seeing that she exercised moderately and was outdoors nearly all day long, taking in the air and sunshine, Mary was cured by Thanksgiving.

I am recounting this brief history of Mary so that you can see for yourselves how simple a matter it is to cure secondary anemia if you will only resort to natural methods.

**P**OOOR nutrition, failure to eat sufficient iron-containing food, chronic appendicitis, infectious diseases with their associated toxins, and hemorrhage are some of the common causes of anemia. But the commonest cause of all is the lack of sunshine and too much indoor living.

Naturally, I cannot diagnose the cause of your anemic condition. That is something for your own physician to do. I can only describe in a general way what my experience with anemia has taught me.

Outdoor life is the sheet anchor when it comes to curing anemia. Except in very cold weather, anemic people would do well to sleep out of doors, or on a modern sleeping porch. And, by the way, don't let anyone tell you that sitting in the sun, behind a window, is going to do you any good, unless the glass in the window is the type that allows the ultra-violet rays of the sun to come through.

Get out and get the real rays. Let them soak into you.

That's all right, you say, but what am I to do in the winter if I live in the city?

It is generally conceded by health departments of big cities that the health-giving ultra-violet rays are filtered out of the atmosphere to a great extent by smoke and fog. This, I admit, is a great handicap.

If you can afford it, I should advise you to resort to exposure to some form of the modern quartz light. If you cannot do this, then get out of doors all you can, and try to make occasional trips to the outskirts of your city—on Saturday afternoons and Sundays, for instance, and go in search of the sun. (Continued on page 158)



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in what was going on. It really seemed a shame to have such an elaborate dinner when Mr. Edison drank only a glass of milk.

"I believe that he talks the least of any big man in America. Everyone waited expectantly for him to speak over the radio at a meeting of the National Electric Light Association. He finally consented, arose, and said, 'I thank you.'"

"Several years ago on National Defense Day we were employed to make a test of the telephone system of the country for the American Telephone and Telegraph Company. We heard conversations from San Francisco, Chicago, and other points. They were conveyed to a loud speaker so that we could take them. General Pershing was one of the many speakers who took part.

"Then we have reported auction sales, burlesque shows, and amateur theatricals to record how the jokes actually sounded and how they got over. One rather unusual meeting we regularly report is that of the John Moore Association, which is composed of the descendants of John Moore, who settled in this country during Revolutionary times.

"We have taken speeches direct at broadcasting stations as well as those transmitted over the radio itself. If there is any form of convention or meeting we haven't covered, I'd like to know what it is.

"HOW did I happen to organize a reporting company? It didn't just 'happen.' It developed in a gradual sort of way. In the fall of 1914, after winning the gold medal of the National Shorthand Reporters' Association, I decided to try my wings at reporting lectures and sermons, and in that way capitalize the speed and accuracy I had acquired. The next step was to tackle a convention; the next, to hire assistants; finally, to incorporate in order to handle the financial end more efficiently.

"You see, I had been a stenographer for two years prior to studying machine shorthand, holding several rather mediocre positions here in New York. At seventeen I was earning twelve dollars a week as a secretary, and that twelve dollars

represented a substantial percentage of the family income.

"Then, one day, the head of the business school I attended asked me to witness the demonstration of a new shorthand machine which made notes in a code of letters instead of hooks, dots, and curves. Here was a way to increase my speed, I thought. Hypnotized by the newness of the idea, and by the glowing speech of the salesman, I came out of a daze to find myself bound by contract to purchase one of the little machines. I had signed on the dotted line.

"Ten dollars every month for ten whole months!" I thought. "Shall I ever live long enough to get it paid for?" Fanny Sweeney did live long enough, as we know.

**B**UT before the ten months were up, a good many things had happened. In the first place, as soon as her new machine arrived, she began practicing desperately to get speed. At the end of three or four months, she had attained such high speed that the manufacturers of her machine employed her to demonstrate it in public. So well did she acquire herself as a demonstrator that her employers proceeded to give her ten months' intensive training under an expert teacher of shorthand and typewriting. The result was that she won international honors and established several world records for accuracy in a contest held by the National Shorthand Writers' Association.

Fortified by the laurels she had won and by a growing faith in herself, the young woman lost no time in launching an enterprise which would enable her to capitalize her reputation and her skill. She had a few hundred dollars saved up. With this she rented desk space in the heart of New York's office district and hung out her shingle, or what amounted to that.

As her assignments increased, she gradually built up a hand-picked staff which she trained in her methods. When her New York organization justified the move, she opened a branch in Cleveland and later one in Chicago. Her company has grown, under Mrs. Sweeney's energetic direction, from a struggling individual enterprise to a thriving corporation.

## Lost Your Pep?

(Continued from page 39)

Anemic people can indulge in almost all forms of moderate exercise (note that I say moderate, not strenuous), provided they go about it gradually and rest frequently between periods of physical activity.

However, when a person is much emaciated and under-weight, and the hemoglobin is below seventy-five, I think it is best to begin the cure of anemia by taking a complete fast. Such people should, as a general rule, go to bed for from four to six weeks while they fatten up on a rich milk and orange juice diet, taken, of course, in connection with such other treatment as their physician might suggest. They are then in better physical condition to start an active outdoor life. But there is no earthly reason why the rest cure shouldn't be taken out of doors. Beds are movable objects.

I should like to tell you how Miss C. got cured of her anemia.

She was thirty-five, highly nervous, depressed, and extremely anemic. In fact, her hemoglobin was down to sixty. But her cure was effected in three weeks, in the middle of the winter, and right in the city of Chicago.

Twice a week she had intravenous injections of iron, and she was exposed to ultra-violet rays, by means of the quartz light, three times a week. Her diet included one pound of pecan kernels and two pounds of dates or figs weekly. She drank daily one quart of milk, to which was added one pint of cream. These were the extra fattening foods that she required because of her emaciated condition, and they were given in addition to her regular meals. However, these extra foods were eaten



either at mealtimes or immediately after—nothing was taken between meals. In addition, she drank an abundance of water. In three weeks she had gained ten pounds and went about her work with zest and enthusiasm.

Outside of the exposure to the quartz light and iron injections, you will notice that Miss C. was cured by very simple, natural methods.

DIET, of course, is almost as important a matter in the treatment of anemia as outdoor life and sunshine.

As the anemic person is usually under weight, the drinking of a glass of half milk and half cream at the close of each meal and at bedtime is recommended.

The foods which are rich in fat, and are therefore good for anemia accompanied by under-weight, are: butter, ripe olives, olive oil, fat meats, Brazil nuts, pecans, corn products, cream, ice cream, and yolks of eggs. The sugars and starches are also fattening, particularly the sugars contained in honey, beets, sweet fruits, figs, and dates. Starchy fattening foods are: potatoes, rice, arrowroot, and cornstarch.

But in our efforts to have a well-balanced diet in anemia we must also think of vitamins. Fortunately, most of the foods which contain iron also contain the helpful vitamins. In high repute are oranges and tomatoes. These two fruits (I insist that the tomato is a fruit) should be eaten every day. If you cannot get a raw tomato, eat the canned variety.

And, in order to guard against constipation, see that sufficient roughage is eaten so that elimination is normal.

Now let's mention the necessary iron-containing foods which do so much to keep the red cells up to standard.

The more common foods rich in iron, named in the order of their iron content, are: egg yolks, lentils, wheat bran, molasses, dried beans and peas, liver, whole wheat bread, oysters, entire barley, almonds, oatmeal, spinach, figs, dates, Boston brown bread, prunes, beef, olives, dandelion greens, milk, walnuts, pecan nuts, raisins, fresh Lima beans and peas, apricots, potatoes, cabbage, Brussels sprouts, and asparagus.

One or two of these foods should find a place on the menu of every meal.

It is only fairly recently that doctors have come to employ liver in the treatment of anemia, more particularly in cases of primary or pernicious anemia; it is of no special value in secondary anemia. It has now become the custom in pernicious anemia to prescribe liver at least once a day—or the liver extract, which seems to be just as beneficial.

When it comes to the administration of iron as a remedy for anemia, we have two schools of thought among medical men.

There are those physicians who doubt the value of iron given therapeutically for anemia. They grant that we should use all the foods rich in iron in the diet, but they are inclined to believe that iron administered as a medicine does not influence the course of the disease.

Well, I am on the other side. I am firmly convinced that iron is helpful. The hemoglobin gain under the administration of iron is oftentimes very definite and marked, and I believe it influences the favorable outcome of anemia.

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forms. It is very dangerous to take an iron solution, as it injures the enamel of the teeth. But it can be taken in pill form, and, generally speaking, I have found this form very helpful in cases of chlorosis. But it has been my observation that iron is valuable when given directly into the vein (intravenous injection).

In the first part of this article I mentioned pernicious anemia. Little is known about this disorder, which is an anemia of middle life. It is generally believed to be the result of chronic infection of some sort.

While this form of anemia is rare, and is supposed to be incurable, I have seen cases get well.

In pernicious anemia there is seldom loss of weight, but the face has a peculiar pallor, a waxy, stuffy appearance. And the curious part of it is that the weight may remain good even when the disease advances to the point where there is great weakness and considerable prostration.

In pernicious anemia the color of the red blood cells may appear to be normal. The trouble is in the diminished number of the cells and in their abnormality.

Our attention in recent years has been called to the fact that people who suffer from pernicious anemia later in life are known to have had deficient hydrochloric acid in the stomach in their earlier years. I am beginning to incline to the view that the absence of this acid in the stomach has something to do with producing pernicious anemia. Hydrochloric acid is a great disinfectant, helping to keep the intestinal microbes away from the region of the stomach. Its absence allows infection gradually to ascend higher and higher in the digestive canal, and the resultant poisons, circulating in the blood over a long period of years, gradually produce a demoralization of the blood-making mechanism of the body.

If repeated examination of the stomach proves that hydrochloric acid is absent or deficient, dilute hydrochloric acid should be given in connection with each meal.

IT SEEMS to me that the thing for everyone to bear in mind is the prevention of anemia by careful selection of diet and by living as much as possible out of doors. Just because you think anemia of the secondary type is nothing much to worry about, do not let it get a grip on you. Look out for the early earmarks.

The object of this article is merely to make you more intelligent on the subject. As I have already said, I cannot prescribe for you individually, or tell you the particular cause of your anemia (if you happen to be in an anemic condition). That's up to your doctor. After all, prevention is better than cure, and who wants to "enjoy poor health"?

WHAT'S THE GREATEST MIRACLE of modern times? According to W. O. Saunders, it's the rejuvenation of the middle-aged woman. Time was when a woman of forty was settled down; nowadays she is just beginning to step out. In "Boob Husbands" Saunders discourses most amusingly on the peppiness of middle-aged wives and the hardships endured by husbands who try to keep pace with them.

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