Mrs. Eleanor Roosevelt,
Hyde Park,
New York.

Dear Mrs. Roosevelt:- This morning's paper carries an item stating that Mr. Farley's articles grieve you. That moves me to send you this letter. I realize that you must be receiving thousands of letters from all kinds of people and that in 99 of 100 it is a burden to even read them. But I just wish to let you know that out here where the Steel Trust controls much, there are still men and women who deeply appreciated the great service rendered by your beloved husband and who are still grieving over his untimely passing. My wife reads your column and has often commented about your sound judgment and tolerant attitude and she feels that your great faith and intelligence could withstand the evil things attempted against you, directly and through your family. But Mr. Farley, of all men, should have proven himself of better timber. I served here as postmaster under your husband's appointment until August 31, 1940, when I failed of re-appointment, because Mr. Farley had been lining up Minnesota delegates for himself and found that I had actively opposed such a move. I met him several times during service and I always felt that he had the insatiable ambition to do what Al Smith did not succeed in. I have often stated to close friends who would not misconstrue my views as being intolerant, that some day, if someone could read Franklin Roosevelt's very
private nota bene that there would appear a note to the effect
that he accepted the 1940 nomination for two controlling reasons,
war was on the way for us and Mr. Farley had a chance of being
nominated, which would subject this nation to a political war
that would leave the nation weak and wide open for the foreign
foes. To me that decision was of world importance. I feel that
the men of greatest patriotism and civil foresight in Mr. Far-
ley's church must admit the same. I must also say to you that
I have never subscribed to the many claims made of Mr. Farley's
high caliber as a politician and I fail to see sound quality
for the White House. He could prove an average in the senate.
But I resent deeply his very unfair statements in his articles
against the one man who gave Mr. Farley more chance in life
than anyone else. And right there I want to say that I never
felt Farley made Mr. Roosevelt's nomination possible. His re-
elections needed no great management; his record made them
natural.

Here in Minnesota we were under the GOP banner
so long that we could hardly believe it when 1932-36-40 and 44
votes put us under the other banner. I voted for Teddy in pro-
test against Judge Parker, but have voted the old hopeless
ticket here until I finally made a hit in 1932. We are ac-
customed to the most violent political abuse; the type Pegler,
Krock and the Tribune spew. But I feel the American voter has
been fairly keen in judging it. What I despise most is one
who will do what Mr. Farley and some others who were as well
favored, are doing against a man who carried the greatest per-
sonal burdens and performed the most stupendous public service
laid on any man's shoulders in all history. You must have often
brightened his most trying moments. No woman of modern times has
done so much. His place is sure; May God give you added blessings.

Sincerely, E.L. Haagen
My good Friend Falls:****
Hyde Park, N. Y.

Dear Falls:--

The time of the year has come when we, like you and so many others of our noble and generous friends, are making what we believe will be the most liberal campaign that has yet been made for the relief of the many unfortunate children who have been afflicted by Polio because of the severe epidemic of the past year. This community is making the most the greatest effort ever before and seem determined to surpass all previous efforts.

Besides my contribution to the local drive I am enclosing here with a small donation that I will ask you to put with your dimes and put them in the Hyde Park donation which is the Fountain-head of this great and worthy philanthropy.

I am also sending herewith attached a little booklet which contains your picture taken while you were resting on the arm of the and most loyal and helpful friend that childhood of America ever had. It was my good fortune to know him well personally as well as his constant companion both of whom I met many times at the Thanksgiving banquets. He was truly great in life and is growing even greater as the years go by. He was truly a friend to man.

I am sure you were as loyal to him as were thousands of other good colored Democrats. Their hair may not have been quite as curly as yours but I am sure their loyalty was as genuine as your own.

I hope you may enjoy the picture in the booklet even though you may not be able to understand the text. With all good wishes to you and your host of admiring friends, I am, Most cordially yours,

J. B. La Rue, M.D.
A PHYSICIAN SPEAKS

A LECTURE ON

ACUTE ANTERIOR POLIOMYELITIS
(INFANTILE PARALYSIS)

BY

BYRON LARUE, M.D.
PREFACE

TO THE SECOND EDITION

WHEN THE PROBLEMS REGARDING THE CONTROL OF INFANTILE PARALYSIS ARE FINALLY SOLVED, IT MUST BE DONE LARGELY THROUGH EDUCATION. THAT WILL BE THE PRIMARY PURPOSE OF THE LECTURES AND WRITINGS THAT SHALL CONTRIBUTE TOWARD THAT END.

The author of this little book expects, yea, invites criticism! But if, after careful perusal of the following pages you doubt that a disease so terrible, so devastating or so fear-inspiring can, with comparative ease, by simple, homely remedial processes, be finally mastered and eradicated, just turn to your encyclopedia and read the history of diphtheria, smallpox, typhoid and yellow fevers and cholera, or any other disease that was epidemic in the past half century. Some of the measures by which those deadly scourges were conquered were as simple as those advocated in this treatise for the prevention and cure of Infantile Paralysis.

The fact that this treatise and revelations come out of careful investigation and long experience in general practice of an humble doctor of medicine should no more minimize its importance to medical science than should the humble source of preventive vaccines and serums that have blessed mankind in the past and shall continue to do so in the future.

The author asks only that common sense and reason be applied to study of this treatise. If it results in restoring to health but one poor little victim, or prevents the dwarfing or twisting of dancing baby-feet and legs, he will have realized his ambition and reward for his investigation and toil.

THE AUTHOR.

Acute Anterior Poliomyelitis

A TREATISE ON INFANTILE PARALYSIS

BY

DR. J. BYRON LARUE

INFANTILE PARALYSIS is an acute, specific, infectious disease occurring sporadically and often epidemically, especially in the northern portions of the United States and Europe. It usually selects for its victims the younger children, although no age is exempt. It is due to a filterable virus which enters the body by way of the olfactory nerve endings located in the roof of the nose. The infecting agency consists of a filterable virus which contains a micro-organism so infinitesimal that we have, as yet, been unable to see it through the most powerful microscope.

The clinical aspect of the malady is that of an acute febrile illness of short duration, accompanied or followed by severe nervous symptoms indicative of damage to the gray matter of the spinal cord, brain-stem, cerebrum, cerebellum or any combination of these structures. These lesions of the brain or spinal cord usually produce an atrophic paralysis of some parts of the body, most frequently the arms or legs. It affects only the motor nerve cells or the gray matter; the sensory nerve cells or white matter are not usually involved. It is, however, a systematic disease causing a pathologic discomfort, involving the entire body.

Infantile paralysis is by far the most dreaded of all children's diseases; first: because its ugly path is strewn with horribly disfigured and hopelessly crippled children who, after having reached the chronic stage of the disease, have practically no hope of ever being entirely free from its terrible blemishes, and, secondly: because our great schools of medical practice and research, with their wonderfully equipped research laboratories and highly skilled scientists, lacking neither intelligence, equipment nor treasure, have as yet, been unable to give us any very definite information regarding the method of communication, the prevention or a specific, curative treatment of the disease.

Aroused by the fourteen major epidemics of 1916 to 1944, our great philanthropists and the national government have poured
has been done. Its chief benefit is to partially correct the deformity which was caused during the acute stage of the disease, and to give hope, courage and strength to the patients and to their friends. It is a wonderful treatment, but infinitely more wonderful will be prevention and cure before permanent damage has been done. This great discovery was not made in a laboratory. It was not discovered by a physician. It was not, as many believe, discovered by President Roosevelt, although it was he who developed it and proclaimed it to the world and made it the immeasurable agency for good that it is.

Strange as it may seem, this discovery was made by a little hopelessly crippled boy who had not stood on his feet for more than three years; verily "A little child shall lead them." This discovery was entirely accidental, and the boy, at the time, was blissfully unconscious of the fact that he had brought more joy and satisfactory comment to the civilized world than had been brought by any other therapeutic discovery in this generation. I wish I had time to tell the story to you as it was told me by Mr. Roosevelt himself, and also by Dr. Leroy Hubbard, Surgeon-in-Chief for so many years at Georgia Warm Springs Foundation.

After hearing this story I said to President Roosevelt that it seemed strange that with so large a number of skillful physicians and research workers in the world that it should be left to a lawyer and a crippled child to discover and develop a successful method to alleviate the helpless conditions resulting from the after effects of Polio. He replied, "Probably if you physicians had been afflicted as we were, you might have made a greater effort." I then and there resolved that, if need be, I would devote the remainder of my life to a search for a specific cure for Polio in its acute stage before permanent damage has been done. I believe a preventive may soon be discovered, since the research laboratories are directing untiring efforts to that end.

I have been treating Polio very successfully for thirty years, but as no one physician gets a sufficient number of cases to establish a record it is difficult to impress either the public or the profession. As a rule I find the profession poorly informed regarding a treatment for acute Polio, the majority seeming to be of the opinion that it is best to delay treatment until the acute stage has passed. I cannot understand why they are satisfied with this procedure unless it is due to the fact that most physicians have not had experi-
ence with it in the acute stage or that they are willing to follow the teachings of the medical books which offer no specific treatment for it. Polio is, in fact, the only infectious disease I know of that the majority of physicians refuse to treat in the acute stage. This, I feel sure, is unfortunate, as it is the one disease in which the major damage is done during the fever stage. I have been advising early and frequent treatment in its earliest stage, and have practiced it since the dreadful epidemic of 1916. I shall continue broadcasting this advice, however. I realize that "He that won't be counseled can't be helped." I shall demonstrate my treatment wherever opportunity affords.

My thirty years experience in the treatment of infantile paralysis, and several years of study and laboratory experience at the Georgia Warm Spring Foundation, observing their water laboratory method of treating the chronic form of polio, and having carefully weighed the practical experience of President Roosevelt as he told it to me, of his determined, persistent, and practical common-sense measures which he used in his fight for recovery have convinced me that these simple and homely methods of dealing with this disease have, so far, proven much more efficacious than have any methods or suggestions that have come from our research laboratories. This does not mean that our laboratory specialists are discouraged, or that they are relaxing their efforts. They are, in fact, redoubbling their research activities, hoping to halt the rapid progress being made by the disease from year to year.

With this simple practical method of treatment which I have been using since the terrible epidemic of 1916 for the treatment of Polio in the acute stage, which treatment I shall explain below, I have had most satisfactory results. Of the several cases I have gotten when in the early fever stage I have had no failures. The only disappointments have been in cases where I have not reached them in the early fever stage but after it had approached the chronic stage when permanent damage had already been done.

Mechanical assistance skillfully and gently applied by a physician is by far the most helpful, effective and curative treatment for infantile paralysis. This treatment should be applied directly to the congested areas which are invariably in the posterior region of the thorax and the abdomen and in the back of the neck. Really the most vulnerable portion affected is in the direct region of the spinal cord extending from the occiput to the sacrum wherein lie the gray motor nerve cells which are the nerve cells that are always most severely affected. These gray nerve cells supply all of the respiratory muscles of the chest, the abdomen and the diaphragm, without which muscles we cannot breathe. This condition is what makes the Iron Lung necessary in many severe cases. The action of the Iron Lung has no curative effect whatsoever; it only supplies mechanical energy to the weakened muscles of respiration until the body is sufficiently recuperated that it can breathe by its own energy. It is highly important that gentle mechanical energy should be skillfully applied by a physician while the patient is in the Iron Lung, as such treatment is very specific if given in the very earliest stage of the disease. Besides the specific mechanical manipulative treatment, skillfully given with the hands, there are some very important accessory measures that are very helpful indeed. The most important of these is the Antiphlogistine jacket which I have described in this treatise. The diet is also very important, and there are some simple drugs that have their use if properly administered. These, too, have already been explained above. Only analgesic drugs have proven of value so far.

I do not understand why so many of our capable physicians hesitate to treat Polio in the acute stage. Can it be that they have not given it the thought it deserves, or that probably they have not had an opportunity to see it in the acute stage? These two reasons seem to be the ones most frequently given me when I inquire of various physicians regarding their disposition to let the disease take its course. Another reason, especially among the younger doctors, is that there is nothing given in our medical text books regarding a specific treatment, nor is there anything definitely taught in the class-rooms of our medical colleges that is at all reliable regarding a specific, curative treatment of polio.

What other dangerous infectious disease can you name of which our progressive doctors in this progressive age would advise such procedure? Even the late beloved Dr. Charles Mayo said in a great lecture on Polio, "We are all waiting, doctors and laity alike, some clear and undisputed knowledge of the cause of this dreadful disease, so that we may set ourselves to the task of fighting it. We have been standing weaponless, indeed, scarcely knowing whether to use sword or shield. It is not that the usual methods of investigation have not been tried again and again, and it is not that investigators have been too conservative to get out of a rut."
usually agree with Dr. Mayo all the way, but I refuse to follow him in this. Instead, I would say, use both sword and shield, and use them early and frequently. My experience with the Polio germ is, that it is incapable of producing a very high fever as compared with other infections, and as further proof I would say, it is incapable of causing paralysis in only about half the cases definitely diagnosed, and that it is even incapable of producing sufficient symptoms in many suspected cases to make a definite diagnosis even in the midst of an epidemic. We also know by multiple laboratory tests that monkeys, and white-rabbits cannot be infected by feeding them liberal doses of the virus by mouth, or by injecting it directly into the bloodstream, but if this same virus is thoroughly swabbed directly on the inner roof of the nose where it will come into direct contact with the delicate olfactory nerves, the only completely exposed nerves in the entire body, ninety per cent of those animals so treated will develop symptoms of paralysis. The Polio germ is not capable of withstanding the action of pure blood. This is sufficiently convincing to prove to me that if a free, liberal circulation of pure arterial blood and lymph is hurredly brought to these congested areas in the early stage of the disease, before the nerve cells have been outraged, that there would be no permanent paralysis in most cases, and that it would be only temporary in all cases except a few of the most highly malignant. Pneumonia and influenza are much more dangerous and fatal to life than Polio, and we have no specific medical cure for either of these two diseases; but where is the doctor who would advise that we assume an attitude of watchful waiting? If we are to use both sword and shield in treating these two dangerous diseases, why not use them also in treating Polio?

Hundreds of cases of Polio are cured every year, though we are told by leading physicians that there is, as yet, no specific medical or serum treatment that will either prevent or cure it, and we are further advised not to treat it in its acute stage. How then do we know that hundreds of cases are being cured every year? The evidence is not difficult to find, and it is most convincing! While we know that hundreds of cases occur yearly, we also know that comparatively few prove fatal. We also know that a very large per cent of those who do not die are completely cured so far as their general health is concerned.

Since this is true, and since the majority of doctors advise no treatment during the acute illness, with the exception of careful nursing and watchful waiting. I would conclude that the patient recovered spontaneously. We have many outstanding examples of this, that of Franklin D. Roosevelt being the most notable. All of us know of many complete recoveries even without treatment, or in spite of poor treatment. But this does not satisfy. Why should these people be left hopelessly crippled to be thus handicapped for the rest of their lives? This is what Mr. Roosevelt had in mind when he established that wonderful institution at Warm Springs.

If, then, we can accept the above evidence as being true, and that nature alone, or spontaneity if you please, is alone responsible for so nearly a complete recovery, and since her chief curative process in this disease is chiefly mechanical, might it not be possible and really very helpful to lend to nature some skillful gentle energy, mechanically applied to the inflamed and congested parts as has been so wisely indicated by Doctors Lovett and Jones, of Boston; Talbot and Frost, of Children's Hospital at Washington; the late Dr. Leroy Hubbard, of The Georgia Warm Springs Foundation, and the late Dr. Charles Mayo, of Rochester, Minn. I acted on the advice of these great men many years ago and I have developed a simple method of mechanical treatment which, with some simple accessory measures have proven most satisfactory.

If we are to accept a specific cure for Infantile Paralysis it will be well to learn just how these many hundreds of cases were cured and how they were treated. Since most physicians agree that no specific drug or serum treatments have proven valuable in treating Polio, and since they recommend that no treatment be given during the acute stage, we must conclude that the cure in these hundreds of cases was due to what is termed "SPONTANEOUS" or "Natural" cure. But to say that nature cures is hardly sufficient. Let us endeavor to understand how NATURE accomplishes her miracles of healing.

Let us remember that during the acute stage of Polio there is marked congestion and inflammation in the gray nerve cells in the spinal cord and also in the motor nerve cells in the anterior horns of the lateral nerve trunks. There also exists an edematous or droprsal swelling and minute extravasation of blood engulping and pressing on the motor neurones.

There is also a cellular infiltration of the pia-arachnoid tissues and also of the brain stem. This pressure of stagnant, toxic fluid
against these delicate nerve tissues, paralyzes them for the time being, and if the condition is not relieved within a few days the paralysis will become permanent. Hence the necessity for speedy treatment. According to our best authorities Polio is a GENERAL infection the result of which is most marked in the gray matter of the spinal cord. The motor cells are greatly swollen with highly toxic fluids which are extremely destructive to the motor nerve cells. If the nerve cells are to be saved this pressure of toxic fluids overcome,—neutralized, so to speak,—fresh arterial blood and pure lymph and other toxic-free fluids must be supplied to purify and rebuild the nerve cells which have been outraged.

It is highly important that this should be done as early as possible before the motor nerve cells are irreparably damaged or entirely destroyed. How, then, does nature accomplish this? This is the all-important question. The one thing of which we are sure is that it is done by some force WITHIN AND NOT FROM WITHOUT THE BODY ITSELF. The explanation of the entire process may be stated in two words, viz: ABSORPTION and DRAINAGE! These two words explain the healing process.

Before any fresh purifying fluids can be carried to the congested areas, the stagnant, toxic waste fluids must be carried away. Nature has provided for this function in a purely mechanical way, that is, by the very active movements of the strong thoracic and abdominal muscles and the action of the diaphragm during the natural process of breathing. By the mechanical movements of the respiratory act, both positive and negative pressures are created alternately between the thorax and the abdomen. It is by this force, thus created, that the stale lymph and venous blood is carried back to the heart, lungs, liver, kidneys, pancreas and the other excretory organs for purification or elimination, thus draining the toxic fluids from the congested areas. Arterial blood and fresh nourishing lymph then flow freely into the diseased tissues with their healing and nourishing processes.

The toxic materials from the diseased cells of the cord and the anterior horn contain the specific toxins which constitute the toxic complex. This toxic complex is then drawn into the general circulation and is disposed of by way of the eliminative glands and organs. In this process there occurs what might well be termed an auto-vaccination of the patient’s blood, which toxins were in the diseased areas.

This complex is then carried by the blood to other parts of the body, (to the spleen, liver and bone marrow), where the cells of those organs have a special affinity for them. These cells are then aroused to specific reaction and produce the specific, curative antibodies and antitoxins. The antibodies and antitoxins are then drained into the bloodstream by the same respiratory movements as are toxins. The toxins and antitoxins are then brought together in the bloodstems and a defensive reaction takes place. Reactions which occur in the bloodstream are to be desired and are therapeutic in function, while reactions which occur in the nerve cells may be very destructive to those cells. The results of the therapeutic reactions in the blood bring about a neutralization of the toxins and the destruction of the invading bacteria. This, then, constitutes the SPONTANEOUS or NATURAL cure. The fatal cases are those in which the toxins overwhelmed the patient’s resistance before sufficient time has elapsed for the necessary reactions to bring about relief.

The reason that so many cases prove fatal or result in permanent crippling or deformity is that the diseased and weakened respiratory muscles are unable to furnish sufficient force to drive the congested, thickened body fluids from the diseased areas so that fresh life-giving fluids may flow in freely to nourish and purify the weakened nerve cells. What is needed most is additional mechanical force skillfully and gently applied, giving aid to these tired weakened muscles to relieve the delicate nerve tissues before they are permanently impaired. I have used this method of treatment for the past thirty years, since that awful epidemic of 1916, and I have not had a failure when I got the patient while in the fever stage of the disease. It is a pity that all cases of infantile paralysis do not have such treatment in the very earliest stage of the disease, as practically all could be cured if treated in time, with the possible exception of the few that are so violently malignant that not even the iron lung can save them.

Before discussing the specific treatment of Poliomyelitis it is necessary to first speak of the peculiar nature of the disease and explain how the action of the strong muscles of respiration, those of the chest, the abdomen, and the diaphragm play the most im-
important part in the cure of this disease, and how these forces contribute so materially to the mechanical method of treatment to which I shall refer later. I shall show how the mechanical and thermal treatment, intelligently applied, with trained hands, is complementary to the mechanical and chemical body forces which are already doing their best to destroy the offending bacteria and their toxins, but are unable, in to many instances, to do this without mechanical, thermal and chemical assistance. I shall first mention some of the peculiarities of this strange disease.

a.—It is caused by a filterable virus which contains a bacteria so small that we cannot see it under the microscope.

b.—Although it is a hot weather disease it is most common in the northern sections of the various countries.

c.—It does not seem to be very contagious from person to person as two cases rarely occur in the same family the same year. But strict quarantine should be observed.

d.—The sensory nerve cells are rarely affected even though they lie in the same area as the motor cells which are so severely paralyzed or even destroyed.

e.—The lower limbs are more frequently involved than the arms. The muscles of the head and face are rarely involved.

f.—Boys are more frequently affected than girls.

g.—Polio is responsible for about one-fourth of all crippled children in the northern states.

h.—Polio rarely attacks negro children, nor the yellow race.

i.—It occurs as frequently in the better homes as in the poorer.

j.—I find it to be the easiest of all vicious germs to destroy.

k.—It is the only infectious disease now on the increase.

THE LA RUE CURATIVE TREATMENT FOR ACUTE POLIOMYELITIS

A large number of physicians advise that no treatment be given in the early acute stage of Poliomyelitis which may last two or three weeks. I am sure this is a great mistake as it is in the very early stage of the disease that the permanent damage to the nerve cells is done. I urge that the following treatments be diligently and immediately applied as soon as a positive diagnosis is made or suspicious symptoms appear. This is the only infectious disease that the doctors refuse to treat in the acute febrile stage. The fact that we have, as yet, found no specific serum, vaccine nor drug treatment is no valid excuse for delay. We have no specific serum, vaccine nor drug treatment for influenza, pneumonia, scarlet fever, nor measles, but doctors do not hesitate to treat these diseases quite successfully. Why then should we hesitate to treat this disease in the acute stage? I have been treating it successfully since our first epidemic in 1916, and I shall now outline my method, hoping that others may find it as effective as it has been in my practice. So far I've had no failures when I got the case early.

I shall now advise how and in what order the various features of this treatment should be given and shall also mention some of the reactions that may be expected:

PHYSICAL, THERMAL AND CHEMICAL

DIRECTIONS:—As soon as a positive diagnosis has been made and the patient has had an enema and a warm sponge bath and clothed in woolen pajamas or gown, the physical treatment should begin, followed by the thermal and chemical features. As heat is one of the most important curative factors in the treatment of most all diseases of children, especially is this true in the treatment of acute infantile paralysis, acute articular arthritis, and pneumonia.

FIRST:—The most important physical treatment is given with the hands, as follows: With the patient lying flat on his back, operator sitting facing the side of the bed, as if seated at a piano, both hands are slipped under his spine at the level of the ninth thoracic to the third lumber vertebrae. Instead of using the ends of the fingers, flex the fingers just enough so that the area of the
pads next to the first joints are pressed gently into the tissues as near the mid-line of the back as the spinous processes will permit. Now, the spinal muscle mass is pulled latterly and gently without allowing the finger pads to slip on the skin. It is not necessary that the gown or pajamas be removed during the manipulative treatment, but the operator must not allow the garment to slip on the skin. Hold the tissue pulled away from the spine while you count five slowly. Gradually release your pull, wait while you count five. Repeat this process five times or until you are satisfied you have improved the texture of the muscle tissue. Two or three minutes work of this nature in any one area should be sufficient. Now move the hand higher up the spine on level with the area from the eighth to the first thoracic vertebra and treat as indicated above. These manipulations are very agreeable to the patient. If the patient says "Ouch, that feels good", you know you are all right. If the patient says "Ouch, that hurts", you know you are treating too hard, so treat easier. Now change to the other side of the bed and treat the other side of the patient in same manner.

OR IF YOU PREFER:—Have patient lie flat on his stomach. Operator sits facing side of bed. Place both hands on spine at level of ninth thoracic to the third lumbar vertebra. Using the soft pads of your fingers, press gently into the tissues as near the mid-line of the back as the spinous processes will permit. Now the spinal mass is pulled latterly and gently toward you. Hold the tissue pulled away from the spine while you count five slowly. Gradually release your pull and wait while you count five. Repeat this process five times. Now move hands higher up the spine and treat in like manner, the entire length of the spine. Now change to other side of the bed and treat the other side in like manner.

The above treatment for the entire length of the spine treated on both sides of the spinous processes will give immediate relief and the patient will become drowsy and will likely go to sleep. Now finish the spinal manipulation by treating the neck muscles. Sitting as indicated above, the occiput is cradled in the palm of the hand while the other hand rests on the forehead. Firm traction in line of the spine should be made for a few seconds. Release slowly and repeat several times. Now place one hand under the neck with thumb on side of neck next to you and the pads of the fingers on opposite side of the neck, massage the muscles gently for about a minute. This entire manipulative treatment should require about fifteen minutes. He will now likely be drowsy and will probably go to sleep and will rest several hours.

After patient has rested an hour or two, wait till he awakens as sleep is the best tonic. The next feature of the treatment should be applied, the action of which is PHYSICAL, THERMAL and CHEMICAL. The chief objects of this feature of the treatment is to control the fever, make patient comfortable as possible, induce sleep, control muscle spasms, and prevent paralysis. To accomplish this it is absolutely necessary that constant, uniform, moist heat should be applied. This can best be done by the application of the Antiphlogistine jacket which not only keeps the body moist, warm and comfortable, but it also relieves pain and restlessness, stimulates the circulation, reduces fever, soothes the irritated nerves, encourages elimination and induces sleep. I first used this jacket poultice more than thirty years ago in the treatment of pneumonia in children and it proved so valuable I later applied it to the treatment of infantile paralysis and acute articular arthritis with most excellent results. I have used it for these three diseases for over thirty years, most satisfactorily.

I will first explain how to build up and apply the Antiphlogistine jacket, after which I shall explain its therapeutic actions. Directions for its application must be carefully followed if best results are obtained.

DIRECTIONS:—Place a large can of Antiphlogistine in a nail of hot water and when warm remove lid and stir it until it is lively and pliable and a little above body temperature.

1. Have attendant support patient in sitting position in the bed in warm room. Allow no draft on him while exposed.

2. Strip patient from neck to hips and moisten the body with warm alcohol.

3. With spatula apply Antiphlogistine from occiput to waist, covering chest, abdomen, sides and back, spreading it one-third of an inch thick on the body as if plastering a wall.

4. With two or three-inch woolen rolled bandage, beginning at lower waist line wrap roller bandage round and round the body, advancing upward till you reach the arms, then over one shoulder and under other arm, vice-versa, under and over several times and continue down to waist line and up again until...
two or three thicknesses of bandages, being careful to keep surface smooth so that you have a neat, smooth fitting jacket poultice. Now cover this with a neat fitting woolen sweater.

5. Now lay the child on the back or abdomen, whichever he desires and he will rest easy and will likely sleep most of the time, as this poultice is very soothing and the heat of the body keeps the poultice warm. There will be no need for hot compresses as the poultice remains warm and moist for about thirty hours, when the poultice becomes dry it will come off easily, leaving the skin clean and glowing. The child should then be treated with the hands as first indicated above. The child should lie on the abdomen much of the time as the chief inflammation is in the region of the spinal cord, therefore, lying in the prone position, gravity aids nature by draining the toxic fluids from the inflammatory areas, carrying it toward the excretory glands where it will be eliminated from the body.

This Antiphlogistin poultice achieves its therapeutic success by excluding the air from the surface of the body. By the process of exosmosis the toxic fluids near the surface of the body, especially in the region of the spinal cord, are drawn out through the pores of the skin. The skin being one of the most important excretory avenues of elimination, its function is greatly increased by the process of exosmosis, thus relieving the delicate nerve cells of the destructive toxic fluids.

Another most important action of the poultice is, that within an hour or two after it is applied the child becomes comfortable and is soon practically free of pain and will likely sleep most of the time due to its soothing and somniferous effect.

Another important action is that the poultice largely prevents or controls muscle spasms of the body muscles and largely influences the spasms of the arms and legs. If, however, muscle spasms occur in an extremity you should immediately apply the ANTI-PHLOGISTINE AND ROLLER BANDAGE POUltICE like the one already described, except that it should have three or four thicknesses of roller bandage, giving the limb a much-needed artificial support. I never use metal braces in treating Polio. They harm instead of help. The limb should be free to move according to the comfort of the child. In a severe case the nurse should move the body to new positions as indicated by the child, so that the child would be saved the effort. If he is made comfortable he will not wish to change position frequently.

This method of controlling muscle spasm is very superior to the hot-water-wet-pack which I formerly used years ago.

1. It needs to be applied only once in about 30 hours, whereas the hot water pack must be reapplied frequently, thus distracting the patient when he should be resting.

2. The heat from the poultice is constant and uniform, as it receives its heat from the heat of the body, thus producing the desired thermal effect. The poultice and woolen sweater heats the body and the body provides constant heat to the poultice.

3. Antiphlogistin is composed of Kaolin 54% in volume, saturated with pure Glycerine 45% in which is incorporated oil of wintergreen, oil of peppermint, oil of eucalyptus, iodine, and boric acid and salicylic acids, all of which are commonly used for the relief and removal of pain and congestion.

4. Antiphlogistin is as smooth as butter and contains no irritating substances and it is comforting and healing in action. The chemicals are the most commonly-used analgesics known.

If muscle spasms are severe or if pain develops in an arm or leg, wrap it immediately with an Antiphlogistin poultice. Apply it to the extremity as follows: Cover the entire extremity with Antiphlogistin a quarter of an inch thick all round the arm or leg, including hand or foot, and with two or three inch woolen bandage wrap the entire extremity, round and round until you have three thicknesses, being careful to make a nice smooth poultice. Now wrap this with strips of woolen cloth made from old blankets or other discarded woolen materials, these can be used over and over as it is easy to launder them between treatments.

This poultice will produce all the heat and moisture that will be needed and the poultice will last thirty or forty hours when it will become dry and will peel off leaving the limb clean. This poultice will give quick relief and be very soothing to the tissues. All of the chemicals in the poultice are the very ones we doctors use to allay pain, and blended as they are, their analgesic effect is speedy and pleasing.
I never use steel or aluminum braces in treating poliomyelitis. They should never be used except in chronic cases of long standing, where braces are necessary to support weakened joints and muscles that must have support. The best treatment for such chronic conditions is at such institutions as The Georgia Warm Springs Foundation. I treat Polio only in the acute or sub-acute stages.

Now that the poultice is on I shall give direct instructions how to treat the patient with the poultice in place. It will not be in our way:

With the patient lying prone (on the abdomen) use soft heel of one hand, placing it on the opposite side of the body from where you are standing and as near the spinous process as convenient. Now make gentle, rhythmic, pressure on the muscle mass directly under the heel of your hand, gently pushing the muscle literally, from you. Hold this pressure while counting five. Release and count five. Repeat this three times, then move the hand to a higher level. I prefer to begin this treatment at the second lumbar vertebrae and gradually move upward toward the neck. Then move to the other side of the bed and treat opposite side. As the poultice is soft the treatment will be very effective and pleasing to the patient. To finish the treatment, place pad of your thumb on side of neck next to you and pads of fingers on opposite side. Treat the muscles of the neck with gentle massage for three or four minutes, tempering the treatment to suit the patient. If you do it correctly it will be very pleasing and very effective. This treatment should be given twice daily while the poultice is on.

I shall next speak of MASSAGE, which is also a valuable system of PHYSICAL medicine mechanically applied. The history of massage is as old as mankind. It was a popular system of medical treatment 500 years before Christ. It is still used extensively by both the Medical and Surgical Schools of Medicine. It is very valuable in the treatment of Polio, especially for the relief of muscle spasms and contractions of extremities and the neck. This is highly important as that character of pain is very distressing and should be relieved as quickly as possible. When muscle spasms occur in extremities, relieve it quickly which massage and hot wet compresses and then immediately apply a warm Antiphophtodine poultice as described above after which massage can be effectively given with the poultice on the limb. Massage is also very effective to other areas of the body, especially to the tissues of the neck. It is also very useful in restoring normal function to atrophied muscles and other tissues. Its therapeutic effect on the circulatory and glandular systems is very valuable.

Massage stimulates the vascular and lymphatic circulation, improves local nutrition, removes toxic substances from congested areas and relieves pain. As the veins are emptied by pressure there is a rapid refilling from the capillaries of fresh arterial blood and lymph resulting in definitely improved nutrition. Massage is a procedure which is not employed frequently enough. It is very useful in many inflammatory conditions, although in these it must be gentle and not overdone. It acts by promoting the movement of tissue-fluids and encourages local nervous control.

THE DIET DURING THE ACUTE STAGE OF POLIO IS WONDERFULLY IMPORTANT

The diet should be very light during the acute stage of Polio.

a. A tablespoonful of cod liver oil in the morning.

b. A cup of strained fruit juices three times daily, orange, tomato or prune.

c. A cup of VEGEX tea (seasoned with celery salt) twice daily.

d. A tablespoonful of olive oil daily. (In the evening.)

e. A cake of yeast in the forenoon and one at night.

One of the most suitable, nourishing and convenient articles of diet for the sick child, after the fever stage, is Campbell's (strained), mixed vegetable soup. For safety and convenience, it is put up in small individual cans.

Also: The (unstrained), Chicken, lamb, liver, tomato and vegetable soups are among the best health foods for the older growing children in health.

No additional food should be necessary during the febrile stage of the disease, but should more nourishment be required, butter-milk, jello or strained vegetable broth are indicated and recom-
mended. Never give meat broths nor chicken broths during the acute, febrile stage.

The diet should be very light even after the fever stage has passed. To the above, as required, may be added later, such foods as boiled egg, crushed very ripe banana, enriched farina with cream, or custard.

During the febrile stage daily enemas should be given, and the child should be encouraged to lie on the stomach a considerable portion of the time, as gravity assists drainage of the toxic fluids from the spinal area which is the chief area of congestion and inflammation. By this means the toxic fluids are carried by the circulation to the eliminating glandular organs and it is thus expelled from the body.

When the child is restless he can best be soothed and put to sleep by soft music. There is no better tonic than restful sleep. The crooning voice of the mother or the nurse is sweetest harmony to the restless child.

THE TWO MOST IMPORTANT FACTORS IN THE PREVENTION OF POLIOMYELITIS, RHEUMATIC FEVER, ACIDOSIS, ANEMIA, PELLAGRA, RICKETS AND MALNUTRITION IS CORRECT WHOLESOME DIET AND PROPER ELIMINATION.

HOW TO PREVENT INFANTILE PARALYSIS

In speaking of the prevention of poliomyelitis I shall first mention a group of common diseases of children that are not due to bacterial infection, but are entirely due to the destructive influence of denatured foods on the body organism. In many instances the symptoms of these diseases are not sufficiently obvious to be correctly diagnosed, but are sufficiently severe to so reduce the body resistance that the body is not able to fortify itself against vicious bacterial infection. The following is a list of common diseases which are caused by the consumption of denatured foods and which can neither be prevented nor cured by any method of medical treatment but can be both prevented and cured by a diet of milk, fresh fruits and vegetables, fruit juices, dairy products, eggs, oatmeal, whole wheat bread and butter, grapes, raisins, dates and figs.

Such diseases are: Acidosis, Beri-beri, Scorbatus (Scurvy), Rickets, Pellagra Anemia and malnutrition. These diseases, so common among children, though often in too mild a form to be recognized in time, are almost invariably THE PREDISPOSING CAUSE of most bacterial diseases, especially Poliomyelitis, Chorea and Acute Articular Arthritis.

The diseases listed above are not of bacterial origin, but are caused by lack of mineral elements such as iron, calcium, iodine, sulfur, phosphorus, potassium, magnesium, manganese, sodium, silicon, and the vitamins A, B, C, and G. These mineral salts and vitamins are absolutely necessary to normal health and growth, but they are not found in sufficient quantity in denatured foods such as white flour products, white sugar, polished rice, pearled barley nor any of the highly refined foods. They are found in abundance in whole grain cereals, dairy products, eggs, fresh fruits and vegetables, fruit juices, honey, grapes, brown sugar, potatoes, bananas, raisins, dates, figs, and various other natural foods. Children accustomed to a diet of such natural unrefined foods need have no fear of such diseases as rheumatic fever, infantile paralysis, pellagra, beri-beri, scorbutus (scurvy), rickets nor any of those other common diseases that threaten child life and growth. Such a diet will build up such strong resistance against disease that colds, influenza, pneumonia and tonsillitis would be a rare occurrence.

A most illuminating illustration of the effect of denatured foods on health is found in the experiments conducted in laboratories, using rats and pigeons. It was found, time and again, that rats fed an exclusive diet of whole wheat bread and water will live healthy and active lives and die of old age at about three years. But if fed an exclusive diet of white bread and water they will become very ill within four weeks and will die within seven weeks. And it has been shown that pigeons fed exclusively on brown rice and water will be healthy and vigorous, living active lives; but if fed exclusively on white polished rice and water they will develop paralysis and be unable to stand on their feet in three weeks and will die within six weeks. If, however, these animals, after they have become ill are changed to the whole grains and milk diet they will recover their health within a few days. There is no known medical remedy for these disorders, and they are as applicable to children's diseases as to rats and pigeons!
RECAPITULATION

The most successful method of preventing infantile paralysis, as well as most other infections and constitutional diseases of childhood, is a diet consisting of those substantial foods best suited to the growth and development of the child.

For children under one year old, there is no other food so reliable, substantial and healthful as oatmeal gruel with whole milk sweetened with honey or Karo syrup, together with Cod liver oil, orange juice and Graham crackers.

For children past one year old, there is no better health diet than well cooked oatmeal with whole milk sweetened with honey or Karo syrup, together with Cod liver oil, soft boiled eggs, stewed fruits and vegetables and soups and whole-grain bread and butter. And as children advance in age they should have an abundance of raw fruits, the most suitable being well ripened oranges, apples, bananas and berries, which are most suitable for health, growth and the prevention of disease.

Such foods will prevent both infectious and constitutional diseases in childhood and, at the same time, are most efficacious in the development and the substantial growth of the child. With such a diet, commercial vitamins are hardly necessary as the above mentioned foods contain an abundance of the necessary vitamins.

Foods Children Should Avoid

All denatured foods should be avoided.
All fried food should be avoided.
All white flour products except cake made with milk and eggs.
All white sugar and all but a limited amount of candy.
Excessive amounts of coffee and tea, better use none at all,
Too much food and bad combinations are dangerous for, you know:

Mary had a little lamb, lobster and some prunes,
A piece of pie, a glass of milk, and then some macaroons:
It made the naughty waiters grin to see her order so,
And when they carried Mary out her face was white as snow.
This little lamb that Mary had, it followed where she went
Along with nuts and cheese, ah, sad to say on mischief bent.

It made poor Mary groan and jump and twist and squirm and shout,
They had to get a stomach pump to bail poor Mary out.
What makes the lamb treat Mary so? the eager nurses cry!
Why, Mary mixed her lamb, you know, with lobster and mince pie
And other things too numerous to mention in a poem.
Take my advice when mixing eats as thru this world you roam!
Though Mary loved her lamb, you bet, a solemn oath she swore,
I'll never mix lamb with spagett nor lobster any more.
And always as the years passed by and she was asked to state
What else she'd have, she'd reply, I'll take my lambkin straignt!

THE TWIN DISEASES

Of all disabling and most dreaded diseases common to childhood and American youth there are two which are more frightful to parents and more disturbing to the medical profession than any others. Not because they are more fatal to life than are many other diseases, but because they are so likely to attack our children in early youth and render them permanently crippled or even deformed. As these two diseases have so much in common it is both interesting and edifying to think of them as pathologic twins and common destroyers of human life and activity.

a. ACUTE RHEUMATIC FEVER (Acute articular arthritis), a crippler and deformer of body, limbs, muscles, tendons, bones, joints, heart and glands.

b. ACUTE ANTERIOR POLIOMYELITIS (Acute infantile paralysis), a crippler and deformer of body, limbs, muscles, tendons, bones and joints.

The former is more than 3,000 years old and is apparently growing more powerful and independent with age.

The latter is a comparatively young disease, probably about 150 years of age, as far as America is concerned, but it is growing by leaps and bounds and is gaining in prominence.

The latter disease has been discussed at considerable length earlier in this booklet, and in discussing the former disease we shall do so in close relationship with the latter.

Rheumatic fever is gradually winning the attention it merits as a medical and public health problem. Interest in this disease
has been greatly stimulated in these war years because rheumatic heart disease has proved to be one of the more important causes of rejections for military service, and because many acute cases have been encountered in the ranks often in more or less epidemic form. These events have given force and emphasis to the efforts, begun before our involvement in the war, to obtain some degree of control over rheumatic fever, the most important chronic disease having its onset in childhood.

Rheumatic fever is a baffling disease in many respects. Its cause is still clouded with uncertainty. Yet enough is known about the disease, its onset and manifestations, to aid in reducing its ravages. Essential to such efforts is a program of education among health workers and the lay public as to its care and management.

The similarity of the twin killers is significant:
1. They each select their largest number of victims between the ages of 3 and 15.
2. They each choose the summer and autumn for their busiest seasons.
3. The purpose of each is to cripple, maim and kill.
4. Neither very commonly occurs south of the Mason and Dixon Line.
5. Each is caused by an infinitesimal filterable virus, not very well understood.
6. They are equally puzzling to the medical profession.
7. They are vying with each other for first place in medical consideration.
8. The medical profession is in agreement that there is, as yet, no specific medical cure for either of these killers.

As these twin diseases have so much in common regarding origin, nature and effect, it would seem that they should be controlled by similar procedure. Hence, a vital need for energetic, preventive therapeutic measures in the first manifestations of the febrile and inflammatory symptoms and conditions. It occurs to me that the most rational treatment for these twin diseases should be:

PHYSICAL, THERMAL AND CHEMICAL

Each of these two diseases is caused by a filterable virus. The rheumatic virus is much more resistant than the Polio virus, as is evidenced by the fact in most cases of Polio, the virus is overcome spontaneously if properly nursed and scientifically pituated and massaged, and will leave no bad injury to muscle, nerve nor glands. The rheumatic virus is not so considerate. In a majority of cases there is likely to remain permanent crippling of heart, muscles and joints and a constant reminder in the form of pain. It is our worst heart crippler.

At one time doctors were rather skeptical of the utility of physical medicine such as manipulative massage and structural adjustment, but today it is accepted as probably the most valuable of all methods of treatment applied to these and several other diseases. The method of treatment is usually referred to as Physical Medicine.

Correctly applied massage is not slow in showing evidence of improvement in inflammatory conditions, and the results are such as to render the practice decidedly worth while. It is absolutely essential to go slow with massage. Any attempt at spectacular rapid cures may do harm and cause complications. In the beginning it is advisable that only gentle treatment be given, using the soft pads of the fingers. Joint movements should be carried out with care and in such manner as not to cause pain.

An important recent development of massage is the so-called “nerve-point” massage. The principle of this method is a careful examination of the patient to discover the most painful spots, and then manipulate by massage. “Nerve Point” massage has a special technique of its own and its application needs careful medical supervision.

Passive exercise is closely allied with scientific massage. Careful movements of the joints and muscles greatly benefit the general and local circulation of the blood, and prevent stiffening of the joints and wasting of muscles. As with massage, exercise should always be carried out gently and systematically, especially in acute cases.

We shall now consider air and sunshine which are as necessary to the health of childhood as to plant life. Too often it is the lack
of a sufficiency of these elements that is the predisposing cause of many serious diseases. I am sure they are most important factors in the relief of either of the diseases we are considering. I am of the opinion that properly directed sun baths are even more efficacious in this instance than water baths, especially in the treatment of children.

Lastly, we come to hydrotherapy, or the art of applying water—either as such—or medicated—in the treatment of disease. For no other disease has this method been used more extensively from earliest times than for the cure of the several rheumatic disorders.

The essence of hydrotherapy, is a thermal stimulus combined with the mechanical stimulus of the pressure of the water and a medicinal stimulus from the various chemicals either naturally present in the water or deliberately added.

By this means the circulation of the blood is enhanced, pain is relieved and muscular spasm reduced. There is also an increase in the rate of the vital processes, resulting in improved elimination of waste through the kidneys, skin, and bowels and other eliminative organs.

There are innumerable variations of hydrotherapy, from an ordinary hot bath to foam and sulphur baths. At spas and health resorts, elaborate rituals are arranged for patients, and these usually include, apart from hydrotherapy, dieting and massage. Is it not reasonable to suspect that much of the benefit derived from these baths is largely due to the effect of the diet, the massage and rest?

However, hydrotherapy can be carried out in the home, and considerable benefit achieved. It must be borne in mind, however, that high temperature baths, impose some strain upon the heart, and should only be taken if the general health is fairly good.

The sulphur bath is one of the simplest and most convenient for the home. They are valuable in early and mild cases of most infectious diseases. The temperature of such baths should be 98 to 101 F. and they may be taken three times weekly.

Physical therapy has an honored place in the prevention of these two diseases and is the most effective means of the cure, but we must always bear in mind that it represents but one aspect of the treatment of these diseases which require all of the resources of the curative sciences for its conquest.

By this I mean that physical measures such as massage, application of heat and adjutant measures given by skilful hands have been used for centuries to great advantage, while today these measures are still regarded as paramount.

Of course, the technique of application has been greatly improved in recent years, yet the fundamental curative principle remains the same. It is the main purpose of all physical methods of treatment to improve the local circulation of blood and to facilitate the removal of accumulated waste material and thus promote health of the local tissues, whether they be muscles, joints or nerves. At one time doctors were rather skeptical of the utility of this measure, but today it is accepted as probably the most valuable method of treatment for local inflammatory conditions as it augments the flow of blood and lymph to and from the diseased areas and prevents destruction of delicate tissue.

No real benefit is obtained by too strenuous massage, however we now have schools of physical medicine in which their graduates are highly skillful and are perfected in a system of manipulative treatments that are much more therapeutic than regular massage.

Let us now consider air and sun baths as remedial measures. Air and sun are natural skin stimulants, and moreover, are tonic to the circulatory and endocrine gland systems. In mild cases of chronic rheumatism, air and sun baths are among the most valuable measures of equipment. They educate the skin to resist changes of temperature, and this is of obvious importance in the treatment of these maladies. However, care must be exercised in the use of this method, for haphazard treatment may have most detrimental effects.

In recent years we have all written voluminously about Infantile Paralysis and many harsh things have been said about it. In fact I do not recall any very charitable expressions regarding either its character or its disposition. It is only by comparison that I would say a word to its credit.

In 1943 there were 2,924 deaths caused by ARTICULAR ARTHRITIS. In the same year 721 deaths were caused by Infantile Paralysis and Poliomyelitis.
Rheumatic fever is the highest cause of death from disease of all children aged 5 to 14 in the United States and second highest aged 15 to 19. The Children's Bureau estimates that there are at least half a million children under 21 suffering from rheumatic heart today.

The more significant measures by which we may fortify our bodies against these various vicious invading bacteria and viruses are two in number, viz., unrefined foods and elimination. When Infantile Paralysis and Rheumatic Fever are controlled, it will be through education.

Whole grain cereals and milk contain all of the elements that are found in the animal body; therefore, if we would keep our bodies strong and highly resistant against disease and infection, we must have an abundance of fruits and vegetables in our diet. Meat is an excellent food but most Americans eat twice as much as they should.

If you'd have bright eyes and elastic step,
And a mind that's quick to think;
If you'd have a lot of push and pep,
You should know how to eat and drink.

You can't gormandize three times a day
With foods that don't combine;
That's a thing with which you can't get away
And keep on feeling fine.

If you want the motor that runs your head
And quickens your hands and feet
To work, you'll have to be careful instead
Of careless of what you eat.

If you want to take the world by the tail
And swing it 'round and 'round;
If you would succeed instead of fail,
Make sure that your stomach is sound!

To sum up: The following formula, religiously observed, will surely prevent Infantile Paralysis and many other common diseases.

As said before, it has been proven that polio is not very contagious from person to person, therefore we conclude that the chief predisposing causes of the disease are first: the hot summer weather of the northern states where it is most prevalent beginning in June and ending in October, and second, the lack of natural foods, which contain the mineral elements and vitamins so necessary to the production of pure red blood and the building of strong glandular tissue, all of which is so necessary to a strong body resistance against all disease.

THE KENNY TREATMENT

Within very recent years a new technique for the treatment of infantile paralysis has been introduced into the United States which I believe has considerable merit. In fact I think it is the best technique for the treatment for the after-effects of Polio since Mr. Roosevelt developed that wonderful institution at Warm Springs, Georgia.

Although the fundamentals of this system are not new, the technique has been presented in such a manner that it really appears in a new light. I refer to Miss Elizabeth Kenny of Australia, a registered nurse who has come forward with this new concept of the treatment of Polio in the sub-acute stage and especially for those cases approaching the chronic stage of disability. The public seems to be most favorably impressed and I feel that much greater benefit would come of her efforts if the leading medical authorities and organizations would give her the cooperation that I believe she deserves. I do not understand nor appreciate the attitude of some of our leading physicians and organizations and leaders in medical practice who seem to be hypercritical of sponsors of new methods of therapeutics without first giving respectful audience to the sponsors. However, there are a few leaders in scientific medicine who are sufficiently liberal in thought and practice to give ear to a worthy endeavor that seems sound and effective without being forced to do so.

I am especially impressed with the earnestness, enthusiasm and determination with which she presents her method of application and technique, and I am of the opinion the influence of her practice and teaching may change and stimulate the course of scientific thought regarding the value and efficiency of physical medicine.

Now that we have dealt with the Cause, Prevention and Cure of Polio, it remains only to offer some advice and encouragement to
those who have the care of the slowly convalescent or definitely chronic cases which are apt to result from the "no treatment" theory, or from the almost inexcusable practice of delay during which the fever develops, and the ravages of Polio reach the crippling period.

The advice here given is the result of much first-hand observation and study of methods used and results achieved at Warm Springs, where the number of cases enables one to form definite conclusions. I feel that it is most fortunate that I have been able to go there so frequently, and have free access to all data accumulated there by the Warm Springs Foundation. To this must be added the information given to me by President Roosevelt, whose own recovery from Polio astounded the world and gave to frightened humanity a new hope in the Georgia Warm Springs Foundation.

Most crippled children are hopeful, industrious, and of good disposition if not spoiled by coddling and indulgences by the family.

It is really pleasing to observe in the many groups I have seen at Warm Springs the cheerful outlook on life in the smiling faces of the little patients, with never a scowl or frown sweetly facing the rising sun of life handicapped, but not beaten. Please conceal your pity! The victim of Polio needs smiling reassurance, not gloomy sympathy!

From six months after the attack general health should be normal and the patient should use every effort to regain use of the crippled parts. The first six months should be spent in bed even though the child seems well. Nerve tissue recovers slowly, and the outcome is greatly dependent on inactivity during this period. Throughout this time the crippled limbs should be held in normal position by steel braces, not plaster casts, which are used only in case of body deformity. The braces should be removed three times a day for light exercise of limbs, and the affected parts should be often but gently massaged. The arm should be at right angles to the body, the leg in extension, and with braces fastened together, even if only one leg is affected, as the double brace is necessary to hold the crippled limb in normal position, and also hinders trying to walk, which he is inclined to do. This will largely prevent awkward limping as a habit which often results from walk-

ing too soon on weakened limbs. That is why it is so much better to spend that time in an institution where other children are treated in like manner instead of at home where other children are running and playing. After six months real exercise should begin and be carried on regularly and systematically. Among the best exercises are swimming, skating, dancing, ball games, walking between horizontal bars and climbing steps to a stile block with 3 inch risers on one side, 4 inch on another, 5 and 6 inches respectively on the other side; rolling and summer-saulting are all fine, while bicycle and tricycle hold their lead as the most pleasureable exercise for children. Encourage them to look for new and novel games and contests for exercising, in magazines such as "Physical Culture." Piano and other musical instruments provide both exercise and valuable accomplishments. Twenty years ago I was called to treat a girl aged ten who had been paralyzed six years before. As treatments could do but little for such long standing condition, I advised steel braces and musical education. Now, at thirty, she is a prominent concert pianist and instructor, a charming and successful woman. I am reminded of a similar case I had about that time who would not do her part as instructed. Today she has little more than her affliction to attract the world's attention. "THERE IS NO EXCELLENCE WITHOUT GREAT LABOR." How very true!

If only arms or legs are affected many vocations are open to those of even the seriously crippled who have ambition, determination, and the right encouragement and help at home. Why, there is a world of opportunity in art, music, literature, architecture, medical research, law, the social sciences and many other fields of usefulness where honest effort with unswerving determination are sure to bring success. Listen! Do you know that Franklin D. Roosevelt, paralyzed and terribly crippled at the age of forty cried out, "I am a man; surely I can whip a child's disease. I am determined to do it and I think I shall!" That he was afterward twice elected Governor of New York and four times President of the United States. Does that not prove our point?

Let me urgently advise you again. NEVER pour out your sympathy on the afflicted! If you can't radiate smiles and sunshine
they are better without you. A good big dose of personal religion will make you a much desired friend and source of good cheer.

We who have consecrated our time and talents to the cause of the afflicted are at your service. If I can help you further it will be my pleasure. Please command me.

Yours very cordially,

Dr. J. Byron LaRue,
Lancaster, Ohio,

and

Owensboro, Kentucky.

Thanks for valuable suggestions
To Dr. Perkin T. Wilson, Boston,
Dr. Arbuthnot Lane, London, Eng.
Cases of Infantile Paralysis Reported in the United States, 1915 - 1944

No. of Cases
-25,000
-20,000
-15,000
-10,000
-5,000

Year '15 '16 '17 '18 '19 '20 '21 '22 '23 '24 '25 '26 '27 '28 '29 '30 '31 '32 '33 '34 '35 '36 '37 '38 '39 '40 '41 '42 '43 '44 '45

Data from United States Public Health Service.
REMINISCENCES

The occasion of my first visit to The Georgia Warm Springs Foundation in October 1929 was in response to an invitation from Governor Franklin Roosevelt. I had written an article for a medical journal on the cause, prevention and treatment of infantile paralysis. When I had the article about completed I read in the Atlanta Journal of a new treatment being developed at Warm Springs, sponsored by Governor Roosevelt, for the correction of crippled conditions of children who were suffering the after-effects of poliomyelitis. I immediately wrote Governor Roosevelt and asked if he would place in my hands whatever matter he had on the subject and allow me to use portions of it in my article.

I had a letter from him at once advising me he was leaving Albany next day for a vacation at Warm Springs, and that he would be pleased if I would come and spend a few days with him so he could demonstrate their methods of treatment in the pools much better than I could get it from the literature.

I was pleased to have such an opportunity and instead of remaining a few days I was there three weeks studying their system and assisting with the treatments in the pools. He was remarkably kind to me and spent several hours assisting me with my article. He advised me to see Dr. Leroy Hubbard, surgeon-in-chief of the foundation, who would give me valuable help as he had many years in charge of the polio situation for the State of New York. They were both most kind and helpful to me and kindly approved my article.

When I called at his cottage to say good-bye and thank him for his courtesy and kindness, he advised me that they have a Thanksgiving banquet each year and that he would be pleased if I would come and enjoy it with them. I readily accepted with pleasure and enjoyed it immensely. Both he and Mrs. Roosevelt invited me to return each year and be with them at the Thanksgiving festivities. This has been both very pleasing and edifying and I rarely fail to attend.

DR. J. BYRON LARUE,
Lancaster, Ohio, and
Owensboro, Kentucky.

PRESIDENT FRANKLIN DELANO ROOSEVELT
Statesman, Philanthropist, Benefactor
and
Founder of the Georgia Warm Springs Foundation
DR. J. BYRON LARUE

A Child's Friend
A Child's Physician
A Child's Entertainer
It's the Scotch in him

Owensboro, Kentucky
Lancaster, Ohio
El M. R. Gran Maestro de la Gran Logia de Cuba de A. L. y A. M. y el Presidente del Comité Ejecutivo Gestor del Homenaje Nacional Masónico a la Memoria del Ven. Hon.:

Franklyn Delano Roosevelt Gr. 32

tienen el honor de invitar a Vd. y a su distinguida familia, al acto que habrá de celebrarse en el exterior de la Gran Logia de Cuba de A. L. y A. M., el día 4 de Julio del presente y a las 5 p. m.

Venancio Méndez Lasarte

y

Jorge A. de Castroverde y Cabrera

le ofrecen el testimonio de su más distinguida consideración.

La Habana, 15 de Junio de 1947.

Lugar: Gran Logia de Cuba de A. L. y A. M.
Carlos III y Belascoain

Horas: 5 p. m.
Día: Viernes 4 de Julio.
   Himno de los E.E. U.U.

2. Apertura y ofrecimiento del acto por el V. H. Dr. Jorge A. de Castroverde, Presidente del Comité Ejecutivo.

3. a) Acto de develar la Tarja de Bronce en Memoria de F. D. Roosevelt, por la Sra. Eleanor Roosevelt o su Delegado.

   b) Acto de encender la Lámpara Votiva por el M. R. Gran Mtro. V. Hno. Venancio Méndez Lasarte.


5. Discurso sobre la personalidad mundial del V. Hno. Franklin Delano Roosevelt, por el Dr. Fernando Ortiz.

6. Palabras en nombre de las Delegaciones americanas.

7. Resumen por el M. R. Gran Maestro V. Hno. Venancio Méndez.

8. Himno Masónico.
Manhattan Skyline as seen from Governor's Island, New York City

Christmas Greetings

A. Mainzer
New York

Dec 1947
Christmas Greetings
and Best Wishes
for the
New Year

Mary Lash