In Search of Health

Health may be thought of as a graduated scale, something like the big signs we see on our public squares when welfare organizations are conducting campaigns for funds. How high are you on the scale? How near are you to the objective of perfect health?

Health is not a gift bestowed at random on this one and that one. It must be earned. The person who looks upon good health as his most important possession takes the trouble to learn how the errors and chances of unhealthiness can be avoided or reduced.

Basically, we are animals, with complex organs and machinery. Being human we have added mental processes to the physical ones. Some of these are good agents in our effort to survive; others play havoc with our physical apparatus.

The good mental processes have given us the skill to treat mechanical and organic disorders from which our forefathers died without hope. Superstition has largely dissolved under the light of science. The microscope revealed that not devils but micro-organisms caused the infectious diseases, and the electron microscope showed up the filterable virus.

Our progress in knowledge of how to be healthy started with study of the human body. There is a book of which everyone should remember the name with respect: On the Fabric of the Human Body. It was written in 1543 by Andreas Vesalius, the Flemish anatomist. Across the title-page of the copy he presented to the medical library Sir William Osler, McGill University's great medical professor, wrote this: “Modern medicine begins here.”

Because of that realistic approach to medicine many of us are kept alive and serene today who would have been lost inexorably only yesterday.

People live longer

There are several sorts of disease, but those in which carelessness, medicine and surgery offer no help are being whittled down in number every year. Some are preventable by vaccination and immunization (like smallpox, typhoid fever and diphtheria), or by aseptic precautions (like puerperal fever). Some are curable by a drug, a serum, or an organic extract (like malaria, dysentery and pernicious anemia). Some are eased, though not cured, by drugs (like diabetes, hay fever and thyroid disease). Surgery saves many lives, as in inflammation of certain organs and early cancer.

Those who take advantage of the advancement of medical science live longer and live more happily. Many people shudder at the thought of hardening of the arteries, but there is another hardening that can deprive us of health even more effectively: it is hardening of the mind against progress. When a person gets set in his ways, resigns himself to suffering, refuses to keep up with the opportunities offered him for building health, and brushes aside preventive medicine, then he is opening his arms to disease which brings needless pain and needlessly early death.

Robert Burton said in The Anatomy of Melancholy as long ago as 1621: “Some physicians hold that there is no certain period of man’s life, but it may still by temperance and physick be prolonged.”

The continuing decline in the death rate since the beginning of this century has increased markedly the chances that a bride and groom will celebrate a fiftieth wedding anniversary. In fact, the likelihood is more than twice what it was.

What has caused this improvement? First of all, the scientists who have probed nature’s secrets and discovered or devised means to combat disease and increase health. Then — and here is where individual good judgment counts — our acceptance of what science has to offer in the way of improved nutrition, preventive medical practices, sanitation, and public health measures such as milk inspection and the supply of pure water.
People sometimes wonder why women live longer than men. This fact shows up in all comparative tables. One reason is that women take better care of themselves. They pay more attention to little aches and pains that may be signs of trouble. They are more willing to consult a doctor, to have periodic examinations, and to obey the doctor’s orders before a crisis occurs.

The “killer” diseases

Mary Roberts Rinehart, world-famous novelist, told a writer one day in 1947: “Yes, I had cancer.” Then she went on: “There is nothing for the modern man or woman to fear about most cases of cancer. Nothing except delay!”

Thousands of scientists are working on the cancer problem, and it is reasonable to assume that cancer can be conquered just as other diseases formerly considered beyond medical aid are now controllable.

Cancer should be looked for, and not waited for, because early recognition and prompt treatment alone can halt its progress. A publication of the Department of National Health and Welfare in 1959, dealing with dental health, said this: “At least eight out of ten of the deaths caused by cancer of the mouth could have been prevented had the disease been discovered and treated in its early stages.”

However, self-diagnosis is not good enough. Pain is not an indication of the seriousness of a tumor. Any kind of lump should be diagnosed at once by a physician. Merely a fraction of all tumors is malignant, but only a trained medical man can tell which they are.

Although there are many shelves of books filled with information about the heart and blood, there is no organ or system in the body about which we have still so much to learn. The human heart beats nearly forty million times a year. It is a pump that is strong enough to have a rating: 1/240th of a horse-power, strong enough to pump about ten tons of blood through the body in a day. It is well to treat this delicate mechanism with respect, and learn the rules for keeping it in good condition.

Not only the pump and the conduits through which the blood flows, but the blood itself can get out of order. The most common disorders are anemia, which is a shortage of red blood cells, and leukemia, which is an over-supply of white blood cells. To rely upon gossip about these is dangerous. Let your doctor make the diagnosis and prescribe treatment.

The heart’s owner has his life in his own hands. The doctor can tell him what to do and can provide sound medical aids, but it is up to the patient whether he continues on a modified pattern of living or chooses to limit his years by pressing his heart and blood beyond their possibilities. It is much easier to correct a minor flaw than to attempt a major overhaul, hence the soundness of having an examination made of the circulatory system at least once a year.

Sir William Osler, whose ability to say meaningful things in a striking way was unsurpassed in medical circles, once remarked that the life of many a man had been saved by a heart attack. What he meant was that the man who had thus been warned of a weak heart might live for twenty or more years if he took care of his health and confined his activities within range of his capacity.

Tuberculosis, called by John Bunyon “captain of the men of death,” has been pushed down during the past fifty years from first to seventh place as a cause of death, but it still remains a major health problem.

The task today is to locate tuberculosis so that it can be treated before it becomes serious. No one can examine and diagnose himself.

The free mass chest X-ray by the Canadian Tuberculosis Association discovered both primary infection and cases of re-infection among countless numbers of people who did not realize that they had this silent illness.

It is tragic that so many people fail to take advantage of the service offered them, and continue through the years weakened and dispirited and only half alive.

Poliomyelitis, although an important cause of crippling, is a minor cause of death year after year.

Medical knowledge about polio is advancing on all fronts. Recent discoveries in laboratory techniques may well give clues to the cause, just as medicine has found better ways to treat the effects.

A major task remaining in the control of polio is to extend vaccination to the entire population. It cost nearly $25 million in March of Dimes and seventeen years of research to bring knowledge of polio to the point where Salk vaccine could be prepared. The epidemic which swept Canada and the United States in 1959 was due in large part to our failure to avail ourselves of the vaccine offered free by health authorities.

A cause of untimely death which can be mentioned only briefly is accident. Accidents are the leading cause of death in childhood, and the only known preventive is to teach children to protect themselves. There are few everyday accidents (excluding catastrophies such as transportation crashes, floods and cyclones) in which the victim is not, to some degree, in the wrong through carelessness or ignorance.

When a popular magazine headed an article “How to Take a Bath and Live” it was not being unduly facetious. Unsafe acts and unsafe practices in the most
simple and common occupations are among the chief causes of death by accident, and more accidents occur in the home than anywhere else except on the highway.

**The non-killing diseases**

Most hours of suffering are not caused by the great killing diseases, but by such things as rheumatism, allergies, headaches, and colds.

Although the rheumatic diseases are a minor cause of death, they far outrank every other chronic disease in frequency, and they are second only to nervous and mental disorders in the amount of disability they cause. They add up to an enormous burden of misery.

Rheumatism is the broad term commonly applied to a group of diseases that are characterized by pain, stiffness of joints, muscles and related structures. Arthritis comes under this general head. Rheumatoid arthritis, which is twice as common in women as in men, affects many organs and systems of the body.

Once again, the best advice is to go to the doctor early. If he is allowed to start treatment while the affliction is young he can put the patient on a programme which can relieve pain and arrest the progress of the disease.

Diabetes, caused by lack of an essential hormone which makes it possible for the body to burn food, has been brought under control in the past forty years through the research of Dr. F. C. Banting and his assistant C. H. Best, a medical student.

There are several reasons why diabetes should not be neglected. The disease itself can be the direct cause of death and the diabetic is prone to infections and to abnormal hardening of the arteries. The only known way of treating diabetes is by insulin and diet. The earlier the disease is detected the better, since diabetes caught in good time and properly treated can in most cases become nothing more than a slight inconvenience.

Allergies are so widespread, and can be so disabling, that scientists have diligently sought for a common underlying cause so that they might attack it, but there is still much to learn.

The best treatment starts by avoiding contact with the irritating agent. It may mean a change in diet, climate or clothing, or even moving from a house which contains trouble-making dust. Medical science, despite the great strides it has made in the past generation, cannot help a person who is allergic to cat fur if he persists in fondling kittens.

Asthma is commonly related to the allergies. If one is allergic to pollen, for example, any contact with it brings on the allergic reaction known as asthma. So many people suffer every year from asthma and hay fever that it is to the general interest that every community should make and enforce laws to clear all weeds out of gardens, vacant lots and roadside ditches.

Our most common complaint is a headache. This is not an ailment in itself with its own cause, but a warning signal of trouble somewhere in the body. Most headaches may be traced to infection, fatigue, allergy, injury, or emotion. By far the greater number of headaches are caused by unsuccessful living, whether physical, mental or temperamental.

People who drive themselves through their work week at high tension often suffer headaches on their days of rest. This may be due to the circulatory and glandular changes that come with the letdown, or because of the absence of the stimulation such people get from their work.

Casual headaches may come and go, subject only to a pain-relieving pill, but when one is the victim of recurrent headaches he should tell his doctor.

Among the remaining mysteries in medicine none are more baffling than the common cold and the ailments that we call "flu". All that science has been able to do for colds is to make them more bearable.

We should pay attention to a cold so as to nip in the bud any secondary complications like pneumonia or other respiratory infections. The complication pneumonia has been treated successfully by the antibiotics, but none of the wonder drugs is effective against the cold from which the pneumonia started.

Influenza is an acute respiratory infection that occurs in epidemics, and it affects millions of us every year. We can be protected against some sorts of influenza by inoculation, and to take this precaution is just using common sense.

**Why is not everyone protected?**

Why is not everyone protected against all diseases for which medical scientists have provided protection?

Over the entrance to a scientific exposition a banner was hung bearing these words of Robert Koch, discoverer of the tuberculosis microbe: "It is possible for man to banish all infectious diseases from the earth." It seems incredible that diphtheria, diarrhea, enteritis, and typhoid fever were among the leading causes of death fifty years ago, and now are down near the bottom of the "killer" list. But we have no room for complacency. There are still too many deaths which might have been prevented by immunization.

The history of antibiotics goes back a long way, but its big day was in 1928 when Dr. Alexander Fleming isolated penicillin. This life-saving substance is now numbered among our "wonder drugs." Like other antibiotics, it should be used only under guidance of a physician because he understands the possibilities and
limitations of antibiotics. Some of these drugs can be deadly dangerous when taken casually as one would take a headache remedy.

Ignorance of the laws of health and ignorance of the advances made by medical science can no longer be pleaded as an excuse for being ill. Literate people, and even people who pride themselves on their sophistication, may choose to ignore hygiene and science, but they cannot longer pardon their transgressions on the grounds of lack of knowledge. As Montaigne wrote in one of his essays: "The sick man is not to be pitied who has his cure up his sleeve."

We are no longer ignorant in another area of health: the effect of the mind upon the body, and the effect of the body upon the mind. Any organic sickness has an effect on the emotions and the mind, just as an emotional disturbance affects the body. Anger, hatred, grief, worry and fear are among the influences most destructive of vitality.

**About seeking competent advice**

We need to copy the spider about which Oliver Goldsmith tells in his *History of Animated Nature*: when it found a wasp in its web it "instantly broke all the bands that held it fast, and contributed all that lay in its power to disengage so formidable an antagonist."

This is not said to glamorize fear, but merely to repeat that our search for health requires that we take all possible precautions. We must heed danger signals, take periodical inventory, accept the preventive measures offered to us by science, cut loose from the habits and dietary indiscretions that harm us, and use our reason.

In seeking health it is important to admit our lack of exact knowledge. Personal theories about our illnesses and personal plans for curing our illnesses are likely to have melancholy endings. An orgy of self-treatment may on occasion do no lasting harm, but it is at best a risky way of seeking health.

It is infinitely better to take competent advice, and in these days we have a great galaxy of persons and institutions and equipment at our service.

**Big things to be done**

Important evidence of the goodness of a community is to be found in the low mortality and morbidity rates of its people. The death and sickness rates tell us how successfully the community is performing its health functions — in sanitation, child care, health education, cleanliness of milk, purity of water, and protection against the spread of infectious diseases. But in the last analysis health is the responsibility of individuals, who need to see to it that the best that can be done is really being done.

Perhaps there are truly big things we can do to promote health by carrying our individual responsibility into co-operative action with our neighbours.

Why should there not be an earnest, active committee on health in every Home and School Association, in every Chamber of Commerce, in every branch of the National Council of Women, and in every business men's service club? These committees should be of the "keep well" sort, working ardently to bring the best possible health to children, members, and people in the community.

In planning television programmes with Canadian content, the Canadian Broadcasting Corporation and private stations, in co-operation with the Health League of Canada, might build something significant around this prime interest of the Canadian people: the search for health.

The Canadian Medical Association and the hospitals with university affiliation could readily prepare weekly programmes planned to inform people about how to live more happily because they were living in better health.

For ideas and guidance the broadcasters might look to the Cleveland Health Museum and the Academy of Medicine of Cleveland, which broadcast highly attractive weekly television programmes for several years, and published them under the title *Prescription for Living*. For an effective form of production the model might well be *Web of Life*, the half hour weekly programme so felicitously presented by Dr. Ian McTaggart Cowan, Head of the Department of Zoology at the University of British Columbia.

Help could be given in both the community and television fields by the many societies dedicated to propagation of health, like the Canadian Arthritis and Rheumatism Society, the Canadian Association for Health, Physical Education and Recreation, the Canadian Association of Optometrists, the Canadian Cancer Society, the Canadian Dietetic Association, the Canadian Heart Association, the Canadian Mental Health Association, the Canadian Nurses' Association, the Canadian Tuberculosis Association, the Health League of Canada, the Canadian Hospital Association, the Multiple Sclerosis Society of Canada, the National Cancer Institute of Canada, and the Canadian Pharmaceutical Association.

What a wealth of talent is available here! All of these associations and societies, with their provincial branches and affiliates, working dynamically with community organizations and with broadcasters, can guide us to new happy experiences in our search for health.